



**2011-2012 RATES - NATION  
LOW & HIGH OPTIONS  
VOLUNTARY PLAN for NEW ACCOUNTS  
(not available in AR, TX, FL, KY or NY)**

<b>OPTION A: <u>24-HOUR COVERAGE</u></b>		
Provides coverage for injuries incurred 24-Hours a day, 365 days a year (except injuries incurred while participating in High School Football events/activities).		
	LOW OPTION	HIGH OPTION
With Extended Dental	\$90.00 Per Student	\$133.00 Per Student
Without Extended Dental	\$81.00 Per Student	\$124.00 Per Student
24-Hour Summer Only with Extended Dental	\$30.00 Per Student	\$42.00 Per Student
24-Hour Summer Only without Extended Dental	\$21.00 Per Student	\$33.00 Per Student
<b>OPTION B: <u>AT SCHOOL COVERAGE</u> <u>INCLUDING INTERSCHOLASTIC ATHLETICS AND ACTIVITIES</u></b>		
Provides coverage for injuries incurred at school, during school sponsored and supervised activities (excluding injuries incurred while participating in High School Football events/activities).		
	LOW OPTION	HIGH OPTION
With Extended Dental	\$29.00 Per Student	\$38.00 Per Student
Without Extended Dental	\$20.00 Per Student	\$29.00 Per Student
<b>OPTION C: <u>INTERSCHOLASTIC FOOTBALL COVERAGE (GRADES 10-12)</u></b>		
Provides coverage for injuries incurred while participating in sponsored and supervised practice or play for Football events		
Note: Any 9 <sup>th</sup> grade student that plays with the High School Football Team (grades 10-12) must purchase Football coverage at the High School rate.		
	LOW OPTION	HIGH OPTION
With Extended Dental	\$147.00 Per Athlete	\$224.00 Per Athlete
Without Extended Dental	\$138.00 Per Athlete	\$215.00 Per Athlete
Spring Football With Extended Dental	\$64.00 Per Athlete	\$95.00 Per Athlete
Spring Football Without Extended Dental	\$55.00 Per Athlete	\$86.00 Per Athlete

**Extended Dental Coverage:** This is supplemental coverage for expenses resulting from covered accidental dental injuries. The dental benefits provided are: (a) 100% of U&C Charges for examinations, X-Rays, endodontics and oral surgery to a maximum of \$10,000; or (b) dental expenses toward the cost of bridges, dentures or replacement of previous dental repairs to a maximum of \$250. No coverage is provided for orthodontics (braces) for any reason or damage or loss thereof.

Extended Dental Coverage must be purchased in conjunction with a 24-Hour, At School or Football program, it cannot be purchased as a stand alone coverage.

In the state of Florida there must be at least 51 eligible insureds at the school.

**Coverage Underwritten by: Mutual of Omaha Insurance Company  
Home Office: Omaha, Nebraska**

*Health Special Risk, Inc.*

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