# HERE ARE REASONS WHY YOUR PRESENT MEDICAL INSURANCE MAY FAIL TO FULLY COVER INJURIES TO YOUR CHILDREN.

- and coinsurance percentages which frequently result in out of pocket Most individual and group insurance plans have annual deductibles
- Dental injuries are excluded under some policies. Our policy provides a dental allowance of up to the Usual and Customary Charge for covered accidental injuries to sound and natural teeth.
  - performs surgery of some sort. This policy covers doctor visits even Doctor visits are excluded under some policies, unless the doctor when there is no surgery.
- coverage for X-rays, both in and out of hospital for covered accidental Under some policies X-Ray coverage is limited. Our policy provides
- There is no deductible under this policy as there are under many medical plans.
- For covered accidental injuries, our policy will reimburse your financial loss up to the policy limits, regardless of any other insurance you may
- active children do suffer injuries. For a competitive price, you can buy Children DO HAVE ACCIDENTS. Despite close care and supervision, the coverage necessary for your child.

### Plan Administered by:

Accident Plan Underwritten by:



Bollinger Specialty Group BOLLINGER, INC., A SUBSIDIARY OF ARTHUR J. GALLAGHER & CO.

101 JFK Parkway, Short Hills, NJ 07078 www.BollingerSchools.com Telephone 800-526-1379

a Transamerica company **NSURANCE COMPANY MONUMENTAL LIFE** Cedar Rapids, Iowa

## **Preferred Provider Network**



26394547

Parents: lew Jersey



urchased Student Accident **Insurance For All Students** Your Child's School Has

# Read Inside to learn how you can expand this protection in



mportant

See Inside for more details...



purchase coverage online, log onto our website at www.BollingerSchools.com For more program information or to

Personal Administration and Claims Service by the People of



Bollinger Specialty Group BOLLINGER, INC., A SUBSIDIARY OF

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ARTHUR J. GALLAGHER & CO.

FIRST

on an

you can obtain a claim form from the school.) (973) 467-0444 or print a claim form directly from our website www.BollingerSchools.com. (Note: claims occurring during school hours fall under the school policy. For such claims

application below, you may purchase coverage directly online using your credit card!

#### In the event of a claim, occurring other than during school hours, notify Bollinger by calling **CLAIM PROCEDURE** to apply for your child's coverage. Instead of mailing the For your convenience, visit our website WWW.BOLLINGERSCHOOLS.COM

Cedar Rapids, IA  *** C H N - C o m  Rollinger Specialty Croup  Annual April April Applications of Solutions  P.O. Box 727, Short Hills, NJ 07078  1-866-267-0092	Underwritten by: Preferred Provider Network: Administered by:	N District:	Name: Street Address: City: State: Zip:	STUDENT ACCIDENT INSURANCE
alty Group	Ÿ.	s.com		

Please store your card in a safe location for future reference

DO NOT RETURN THE ENROLLMENT FORM TO THE SCHOOL. Bollinger, Inc., PO Box 398, Short Hills, NJ 07078 Mail the form and the appropriate premium to:

Your cancelled check is your receipt.

New Jersey: Application for Student Insurance	tudent Insurance
Monumental Life Insurance Company, Cedar Rapids, Iowa, a Transamerica company	CHECK THE PLAN(S) DESIRED.
New Jersey Residents: Any person who includes dry laise of inisteading information on an application for an insurance policy is subject to criminal and civil penalties.	24 HOUR STUDENT
NAME    _ _ _ _	\$92.00 Total Cost Per Year
FIRST	DENTAL ACCIDENT INSURANCE
□ MALE □ FEMALE  DATE OF BIRTH                 (Month/Day/Year)	\$20.00 TOTAL COST PER YEAR
STREET ADDRESS	I enclose \$Total Premium
STATE	
STAT	through our website www.BollingerSchools.com. You may purchase coverage online for a cost of \$30 per year.
SCHOOL GRADE SCHOOL DISTRICT	
EMAIL ADDRESS	
NAME OF PARENT OR GUARDIAN (BENEFICIARY)	
PARENT'S SIGNATURE TODAY'S DATE	



#### 24-Hour Coverage **Dental Accident Insurance**

Underwritten by Monumental Life Insurance Company, Cedar Rapids, IA

## \$5,000.00 Maximum Benefit

routine dental work such as check-ups or teeth cleaning, nor does it cover dental disease, gum This plan provides benefits of up to \$5,000 per accident for expenses of a dentist's Usual and disease, or orthodontia to sound natural teeth. This plan does not cover begun within 26 weeks of an accidental injury Customary Charges for treatment and services

#### **Definition of Injury**

"Injury", means bodily trauma resulting directly and independently of all other causes from a specific accident

#### The Exclusions

This plan does not provide benefits for:

- 1. Expenses resulting from accidental injury occurring while the policy is not in force.
- 2. Dental treatment necessitated by sickness. accidental injury. purposes, or by any reason other than preventive, deterioration or disease, for cosmetic, diagnostic or orthodontic
- 3. Injury caused by war or act of war or while in the armed forces.
- 4. Existing, pre-existing, or congenital dental accidental injury sustained within the policy injuries or defects which are not caused by
- Dental implants

#### Benefits for Damage to Artificia **Dental Devices**

dental devices when this treatment or repair is necessitated by an accidental injury. bridges, dentures, fillings or other artificia treatment or repair of caps, crowns, braces Benefits of up to \$500.00 are payable for the

## **Benefits for Deferred Treatment**

an accidental injury, this plan will pay benefits of up to \$100.00 for necessary treatment performed after that time. be performed during the first 52 weeks after If a dentist determines that treatment cannot

## Anytime, Anywhere Protection

This plan protects your child for accidental injury to teeth that occurs at any place - at of day or night the year-round. school, at home, at play, on vacation - anytime

# Sensible Protection for Children's Teeth

spill can inflict severe damage to children's represent one of the more vulnerable areas to accident. Even an otherwise harmless permanently. teeth, damage that could remain with them valuable natural possessions. But they also Sound teeth are one of your child's most

Today, you can provide your child with dental accident insurance at a competitive price. In that no child should ever be without. features and benefits, it is the kind of coverage

Remember, the more active your child is the greater the possibility of injury

## What Happens if You Have Other

under the 24-Hour Accident Plan. Deferred Treatment, two areas not covered provided under the 24-Hour Student Accident other insurance you may have. Please note for damage to Artificial Dental Devices and Accident Plan. This plan also provides benefits addition to those provided under the 24-Hour Accident Insurance Plan would pay benefits in that there are some dental accident benefits This policy pays its benefits regardless of any nsurance Plan offered in this flyer. This Dental

## **Competitively Priced Premium**

mail it to Bollinger. We will send you your child's Certificate of Insurance by return mail following receipt by the Company. will become effective on the 1st of the month complete the Application Form below and protection is \$20.00 per year. To apply, just Applications received after September 30 October 1 if the envelope is mailed in September within 60 days. Coverage will go into effect or The economical cost for all this valuable

#### MLG-DENT-POLICY.NJ

#### Student Life Insurance Plan: \$10,000 Life Insurance \$10,000.00 Term Coverage

# Anytime, Anywhere Protection

every day of the year, in school, at play, at This Plan covers your child 24 hours a day, home, on vacation – anywhere in the world

## Who Can Buy This Policy

indications of, or have been treated for: be issued to children who have ever had known who is in good general health. Policies will not This coverage may be purchased for any child

- Any form of cancer,
- (2) Cerebral palsy,
- Heart abnormality or disorder
- (4) Lung abnormality or disorder,
- (5) Kidney abnormality or disorder.

exception of suicide during the first two years for 2 years, there are no exceptions. of coverage. After the policy has been in force Plan covers death from any cause with the years of coverage. The Student Life Insurance of the 5 conditions listed above will result in a A misrepresentation of the existence of any rescission of life insurance during the first two

Plan is underwritten by Monumental Life This \$10,000 Student Life Insurance Insurance Company.

#### Coverage A Necessary Part of Your Child's

getting this necessary coverage. This Student Every parent knows that a child's coverage with the convenience of an online application. of the cost or because of the inconvenience obtaining this vital protection, whether because is not complete without some form of life to cover your child at a competitive price and Life Insurance Plan gives you the opportunity Today, there's no longer a reason to put of insurance. Yet, many parents quite often put of

# Competitively Priced Premium

for the low annual premium of \$30.00. You can now obtain all this valuable coverage

#### it's Easy to Apply

purchase coverage online for a cost of \$30 per website www.BollingerSchools.com. You may Student Life Insurance is available through our

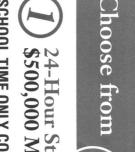
will go into effect on the 1st of the month return mail within 60 days. The policy following approval of the application and premium payment. Your child's policy will be sent to you by

# Questions?

Give us a call toll free at 800.526.1379

Monday - Friday, from 8:00 AM to 5:00 PM, Eastern Time

# Choose from 3) Optional Plans to Round Out Your Child's Protection



# \$500,000 Maximum Benefit

# **SCHOOL TIME ONLY COVERAGE**

Your child's school has purchased group student accident insurance coverage for all students providing valuable protection against accidental injuries occurring during school hours or during school sponsored and supervised activities.

# YOUR CHILD

This 24-hour option gives you the opportunity to extend your child's "school time only" coverage to a full 24 hours a day with all the same benefits and restrictions of your child's school plan. This way your child will be covered against accidents occurring anytime; evenings, weekends, holidays, — even during the active summer vacation months up to \$500,000.

### **ECONOMICAL COST**

The total premium for this valuable protection is \$92.00 a year. At such a reasonable rate, no student should be without it.

## ACCIDENT COVERAGE

This plan covers medical expenses incurred from accidental bodily injuries such as: (1) broken arm from falling off bicycle, (2) concussion from being hit in the head, or (3) lacerated foot from stepping on broken glass. This plan does not cover medical expenses incurred from sicknesses such as measles, mumps, or the flu.

**PLEASE NOTE:** injuries from interscholastic athletic activities are not covered under this plan if your child's school has purchased an Athletic Accident Plan.

# BENEFITS ADDITIONAL TO OTHER COVERAGE

This 24-hour plan will reimburse your financial loss stemming from covered accidental injuries, up to the policy limits, regardless of any other coverage you may have (except for injuries covered under the school's schooltime policy).

**BENEFITS:** are provided for accidental Injuries for which medical treatment by a physician, surgeon, dentist, or registered nurse, hospital services, ambulance services, or X-rays are rendered. The initial treatment must be rendered within 90 days of accident, and benefits are limited to treatment rendered within 260 weeks of the date of accident. All claims must be submitted to the company within 90 days from the date of accident.

**MAXIMUM:** The maximum benefit payable for medical expenses as a result of any one accident is \$500,000.

**SURGERY & ANESTHESIA:** Up to the Usual and Customary Charge is allowed.

**PHYSICIAN'S VISITS:** Non-surgical doctor visits will be paid up to the Usual and Customary Charge, as determined by the Company.

**NURSING SERVICES:** Covered up to the Usual and Customary Charge, if prescribed by a physician.

**X-RAYS:** Covered up to the Usual and Customary Charges.

**AMBULANCE:** Services of a licensed ambulance unit are covered up to the Usual and Customary Charge.

**HOSPITAL:** Hospital room and board, miscellaneous expenses, and outpatient services are covered up to the Usual and Customary Charges for necessary medical expenses.

**DRUGSTORE PRESCRIPTIONS:** Covered in full up to the Usual and Customary Charge.

**DRUGS & MEDICINES:** Covered in the hospital or doctor's office in full.

and braces are covered in full up to the Usual and Customary Charge.

**SECOND OPINION:** Coverage is provided for consultations and second opinions up to the Usual and Customary Charge in cases in which surgery is contemplated.

PHYSIOTHERAPY: Diathermy, heat treatment, adjustment, manipulation or massage is covered up to the Usual and Customary Charge in the hospital. Coverage is also provided for necessary treatment in the doctor's office, or by a Sports Medicine Center or similar facility up to the Usual and Customary Charge provided the treatment is rendered by a licensed physician or registered physical therapist.

**DENTAL BENEFIT:** Up to the Usual and Customary Charge is allowed (treatment must commence within 26 weeks of the date of the accident)

**ACCIDENTAL DEATH:** \$10,000 will be paid if death occurs within 100 days of the date of a covered accident.

**DISMEMBERMENT:** The following amounts are payable for dismemberment occurring within 100 days of the date of a covered accident:

PRE-EXISTING CONDITIONS: Coverage is a provided for pre-existing conditions except for those treated in the initial period of the student's participation under this voluntary coverage and for which the student has received medical advice or treatment for the condition within six H months of the date of injury.

snowmobile, all terrain vehicle, or similar form; (k) Injuries sustained as a result of skiing, or snowboarding, unless sponsored, scheduled under this program and the student has coverage (unless the injury is indivisible from an any other person employed or retained by the HELD BY THE SCHOOL. guard and equipment manager; (p) Dental Implants. (THIS IS A SUMMARY ONLY. FOR EXACT TERMS SEE THE MASTER POLICY vehicle; (o) Interscholastic athletic activities 2, 3, or 4 wheel vehicle, go-cart, dune buggy or being struck by a motorized, engine-driver riding in or on, entering into, alighting from administered on the advice of a physician; or under the influence of any narcotic unless consequence of the insureds being intoxicated available; (m) Any loss sustained or contracted in or sickness for which Worker's Compensation and supervised by the Policyholder; (I) Injury practice or participating in tackle football in any received medical advice or treatment for the condition within six months of the date of injury; (j) Injuries sustained as a result of accidental injury occurring during the coverage pre-existing voluntary cuts); (h) inflicted injuries, suicide, or attempt thereat covered medical expenses; (d) Hernia; (e) Selfprescription therefor, except for those expenses for eyeglasses or contact lenses broken or damaged in a covered accident resulting in commotions; (c) Eyeglasses, contact lenses, or Policyholder; (b) Injury sustained or caused as part of the school services by a physician or **EXCLUSIONS:** (a) Service or treatment rendered cheerleaders, twirlers, band members, color activities include tryout of final squad members (n) Injuries sustained as a result of operating if it is in the initial period of the student's coverage intections by any act of war (declared or undeclared) insurance coverage. Interscholastic athletic for which the school has bought separate other errorist Bacterial infections (except pyogenic similar Vegetation or ptomaine poisoning: act, riots, civil disorders or Congenital defect; (i) injuries are excluded from due to participation occupational accidental benefits plan Under open