



GROUP ACTIVITIES ACCIDENT POLICY

Policy # 4843

LOUISIANA STATE UNIVERSITY

TABLE OF BENEFITS	Maximum Benefits
For expenses incurred within 52 weeks of the date of Accident for Medical and Surgical Treatment, X-Ray Charges, Hospital Confinement, Ambulance Expense and Prescriptions up to...	\$5,000
For Dental Expenses incurred within 52 weeks of Accident, involving sound, natural teeth...	\$500
For Medical and Hospital Expense for illness which manifests itself on the day or days this policy is in force up to...	\$0
For Medical Expenses from these specified diseases: Poliomyelitis, Diphtheria, Scarlet Fever, Smallpox, Tetanus, Cerebrospinal Meningitis, Typhoid Fever, Leukemia or Primary Encephalitis...	\$0
For losses within 100 days of Accident which result in the loss of life...	\$7,500
For losses within 100 days of Accident which cause loss of both hands or both feet, or one hand and one foot, or the total and irrecoverable loss of sight of both eyes...	\$7,500
For losses within 100 days of Accident which cause the loss of one hand or one foot or the loss of sight of one eye...	\$5,000

The policy provides **PRIMARY, NO-DEDUCTIBLE** coverage as outlined above.

This policy does not cover the following:

1. Eyeglass replacement of prescriptions
1. Hernia in any form
2. Suicide, self-destruction or any attempt thereat
3. Pregnancy
4. Pre-existing conditions
5. Loss covered by Worker's Comp
6. Treatment by self, family members, or person employed by the policyholder
7. Participation in snow tubing, tobogganing, or bobsledding
8. Dental treatment other than injury to sound, natural teeth
9. Illness or accident while under the influence of alcohol, drugs or any other intoxicant

Certificate of Insurance

We hereby certify that application has been received and we have bound medical coverage as outlined above for

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Effective Date: 7/1/2023-6/30/2024

Authorized Rep. Of AIL