



Help keep your bank account healthy while you heal.

Accident Insurance



Gladewater Independent School District

Accident Insurance, which we call Accidental Injury Benefits put money in your pocket in the event of a covered accident, helping alleviate financial stress so you can focus on getting better. Covered incidents include things like broken bones, lacerations, emergency transportation needs and more.



If you have any questions about your benefit options, visit https://gladewaterisd.pasito.ai/r/benefits_package_page

What are Accidental Injury Benefits?

To support your financial well-being, Gladewater Independent School District is offering Accidental Injury Benefits for all eligible employees. This coverage is paid by you and is available for yourself and your eligible dependents. It offers cash payments for a range of accidental injuries and the services incurred as a result. Cash benefits put you in control. You must be actively at work with your employer on the day your coverage takes effect. Use it for things like:

- Childcare
- Utilities
- Groceries
- Medical Expenses

Our Accidental Injury Benefits cover over 200 types of injuries. Here are some commonly covered benefits.

Benefit	Amount	
	Plan 1	Plan 2
X-ray	\$100	\$200
Follow-up Care	\$100	\$150
Diagnostic Exam	\$300	\$400
Initial Physician Visit	\$150	\$200
Therapy	\$75	\$100
Urgent Care	\$150	\$200
Ground Ambulance	\$750	\$1,000
Hospital Observation/ Short Stay	\$300	\$400
Outpatient Facility Fee	\$150	\$200

Stay proactive about your health and get rewarded.

Health Screening Benefit: When you or a covered family member complete an eligible preventive screening like an annual physical, mammogram, colonoscopy or biometric blood test, you'll receive \$50 per person, per calendar year directly to you. It's a simple way to offset the cost of routine check-ups while maximizing your benefits.

Accident Prevention Benefit: An accident prevention benefit provides cash to cover exams, tests, screenings, and preventative care programs. These services, ranging from eye exams to driver's safety and training programs, help maintain your health and prevent serious illnesses or injuries. Each covered individual under your plan can claim their own benefits.

How Accidental Injury Benefits work:

Jayden's Story¹

Jayden played basketball all through high school and still played as often as he could. One Saturday during a pickup game he tripped and went down hard. When his wrist swelled up and he couldn't stand without feeling dizzy, his friends called an ambulance to transport him to the ER.

He went home with an arm in a cast and instructions on healing from a concussion. It took him some time to recover, but Jayden was able to rest easy. He'd checked the box for Accident insurance, which we call Accidental Injury Benefits, during open enrollment at work. It paid him a cash benefit he used to help cover medical expenses, food and rent while he was recovering.

The plan pays a benefit amount for each covered service as a result of Jayden's accident.

Service	Accident Plan Pays
Ground Ambulance	\$1,000
ER	\$300
X-ray	\$200
CT Scan (Diagnostic exam)	\$400
Wrist Fracture	\$1,500
Accident Follow-up	\$450 (\$150/visit x3)
Chiropractor	\$750 (\$75/visit x10)
Physical Therapy	\$1,000 (\$100/visit x10)
Total	\$5,600



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THE ACCIDENT POLICY IS A LIMITED ACCIDENT ONLY BENEFIT POLICY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY. This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

Accident Form Series includes GBD-3300, GBD 3500, GBD-2000, GBD-2300, or state equivalent.

Not available in all states.

In New York: This Accident policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. IMPORTANT NOTICE—THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

¹This case illustration is fictitious and for illustrative purposes only.

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Gladewater Independent School District Accident Benefits

INITIAL & EMERGENCY CARE BENEFITS		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Initial Accident	Once per accident	\$150	\$200
Initial Medical Professional/Physician Visit	Once per accident	\$150	\$200
Urgent Care	Once per accident	\$150	\$200
Emergency Room	Once per accident	\$250	\$300
Hospital Observation/Short Stay	Once per accident	\$300	\$400
Ambulance - Air	Once per accident	\$1,500	\$2,000
Ambulance - Ground/Water	Once per accident	\$750	\$1,000
X-Ray	Once per accident	\$100	\$200
Diagnostic Exam	Once per accident	\$300	\$400
FOLLOW-UP CARE BENEFITS		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Follow-Up Medical Professional/Physician Visit	Up to [3] visits per accident	\$100	\$150
Therapy Services	Up to [10] visits each per accident	\$75	\$100
Acupuncture/Chiropractic Care	Up to [10] visits each per accident	Up to \$50	Up to \$75
Home Health Services	Up to [10] visits each per accident	\$75	\$100
Medical Travel	Up to [4] days per accident	\$400	\$600
Companion Lodging	Up to [15] nights per accident	\$150	\$200
Follow-Up Medical Transportation/Rideshare	Up to [3] trips per accident	\$25	\$50
Mobility Aid	Once per accident	Up to \$1,000	Up to \$1,500
Prescription Drug	Once per accident	\$25	\$50
Pain Management	Once per accident	Up to \$300	Up to \$400
Family Care	Up to [30] days per accident	\$50	\$75
Pet Care	Up to [30] days per accident while insured is confined	\$50	\$75
Health Screening Benefit or Accident Prevention Benefit	Once per year for each covered person	\$50	\$50
HOSPITAL/CONFINEMENT CARE BENEFITS		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Hospital Admission	Once per accident	\$1,000	\$1,500
Hospital Confinement	Up to [90] days per accident	\$200	\$300
Step Down Unit Confinement	Up to [30] days per accident	\$400	\$500
ICU Admission	Once per accident	\$2,000	\$3,000
ICU Confinement	Up to [15] days per accident	\$400	\$600
Continuous Care Facility Confinement	Up to [90] days per accident	\$200	\$400

SPECIFIC INJURY BENEFITS		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Concussion	Once per accident, up to [3] per year	\$200	\$400
Burn	Once per accident	Up to \$20,000	Up to \$25,000
Burn - Skin Graft	Once per accident for third degree burn(s)	50% of burn benefit	50% of burn benefit
Dental	Once per accident	Up to \$300	Up to \$600
Dislocation	Once per accident	Up to \$4,000	Up to \$5,000
Eye Injury	Once per accident	Up to \$500	Up to \$750
Fracture	Once per accident	Up to \$4,000	Up to \$5,000
Laceration	Once per accident	Up to \$500	Up to \$1,000
Ear Injury	Once per ear per lifetime	\$250	\$250
Gunshot Wound	Once per accident	\$500	\$1,000
Puncture Wound	Once per accident	\$100	\$150
Organized Amateur Sports Injury	Up to \$2,000/accident	25% increase of non-catastrophic benefits	25% increase of non-catastrophic benefits
SURGERY BENEFITS		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Exploratory or Debridement	Once per accident	\$150	\$200
Minimally Invasive Surgery (Scope Based)	Once per accident	\$500	\$750
Abdominal/Cranial/Thoracic Surgery	Once per accident	\$3,000	\$4,000
Hernia Repair	Once per accident	\$500	\$750
Herniated Disc Repair	Once per accident	\$1,000	Exactly
Joint Replacement	Once per accident	\$2,500	\$5,000
Knee Cartilage	Once per accident	Up to \$1,000	Up to \$2,000
Other Non-Specified Surgery	Once per accident	\$500	\$750
Tendon/Ligament/Rotator Cuff	Once per accident	Up to \$1,000	Up to \$1,500
Outpatient Surgery Facility Fee	Once per accident	\$150	\$200
Blood Products (Blood/ Plasma/ Platelets)	Once per accident	\$500	\$750
General Anesthesia	Once per accident	\$150	\$300
CATASTROPHIC		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Basic Death	Within [90] days; Spouse @ 50% and child @ 25%	\$50,000	\$80,000
Common Carrier Death	Within [90] days	\$150,000	\$240,000
Transportation of Remains	Once per lifetime	\$2,000	\$3,000
Dismemberment/Functional Loss	Once per accident; Spouse @ 50% and child @ 25%	Up to \$50,000	Up to \$80,000
Paralysis	Once per accident	Up to \$40,000	Up to \$60,000
Coma	Once per accident	\$10,000	\$15,000
Prosthesis	Once per accident	Up to \$2,000	Up to \$3,000
Residence/Vehicle Reasonable Modifications	Once per accident	\$5,000	\$7,500