



Guarantee Trust Life
(GTL)
 PO Box 1148
 Glenview, IL 60025
 (800) 622-1993

Summary of Health Coverage
Policy Number: 246-018-001 T

Accidental Death & Dismemberment Principal Sum	\$100,000
Accident Medical Maximum	\$50,000.00 per occurrence
Sickness Medical Maximum	\$12,500.00 per occurrence
Deductible	\$50.00 per occurrence
Coinsurance	100% after deductible
Accident Permanent Total Disability Benefit	\$100,000.00
Sickness Permanent Total Disability Benefit	\$12,000.00
Evacuation Maximum MEDEX Group Number: 7082 For Emergency Assistance Call 1-866-261-1370 Toll Free in the US and Canada for all other locations call collect 1-410-453-6330	\$75,000.00
Repatriation Maximum	\$10,000.00
Assistance Services	Included at no charge
Premium	\$2.40 per person per day

- ❖ Please remember to take your insurance information with you including policy booklet, policy numbers, claim form and MEDEX evacuation information. If you are a team leader please make copies of this information to hand out to your team members.
- ❖ Pre-existing conditions limitations: Any injury or illness which was contracted or which manifested itself or for which treatment or medication was prescribed 2 years prior to the effective date is not covered.
- ❖ (AGGREGATE LIMIT OF LIABILITY \$10,000,000 PER OCCURRENCE)
- ❖ In the event that an injury or illness for which treatment or medication was sought or prescribed while out of the United States, this policy shall become Primary and benefits will be paid as the insured's primary insurance policy until such time as the insured can return to the United States.
- ❖ Treatment of an injury or illness must begin within 60 days of injury or onset of sickness.
- ❖ Covered Expenses are regular and customary charges for services and supplies incurred as the result of and within 52 weeks from the date of the accident causing the injury or the onset of the sickness.
- ❖ Claims must be filed within 90 days of onset of sickness or injury.

Updated 04/25/06 lob