

Sentry Accident Plan

Sentry Accident Plans are available to Med-Sense Guaranteed Association members. These can help members manage:

- Out-of-pocket costs
- Medical bills
- Drug costs
- Co-pays and deductibles



Association Membership



Underwritten by



Billing and Customer Service



Plan Details

Application Age	No age restriction
Termination Age	No age restriction
Coverage Type	Individual or Family Child coverage is not available in Idaho
Waiting Period	None
State Availability	Accident Medical Expense, Accident Dental Expense, and Accidental Death and Dismemberment: AL, AZ, CA, CT, DC, DE, GA, HI, IA, ID, IL, IN, KY, LA, MA, MS, ND, NE, NJ, NV, OH, PA, SC, TN, VA, WI, WV, WY. Accident Medical Expense and Accidental Death and Dismemberment benefits only: CO, KS, NM, and RI.
Claims Submission	Mail claims to: P.O. Box 1148 Glenview, Illinois 60025 Fax claims to: (847) 803-1835 Email Claims to: AMEClaims@gtlic.com

	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5	Plan 6	Plan 7	Plan 8	Plan 9
Accident Medical Expense Benefits	\$500	\$1,000	\$3,000	\$5,000	\$10,000	\$15,000	\$20,000	None	None
Accident Dental Expense Benefits	None	None	None	None	None	None	None	\$1,000	\$2,000
Maximum per Accident	\$500	\$1,000	\$3,000	\$5,000	\$10,000	\$15,000	\$20,000	\$1,000	\$2,000
Deductible	\$100	\$100	\$100	\$250	\$250	\$500	\$1000	\$100	\$100
Initial Treatment Period	60 Days	60 Days	60 Days	60 Days	60 Days	60 Days	60 Days	60 Days	60 Days
Benefit Period	12 Months	12 Months	12 Months	12 Months	12 Months	12 Months	12 Months	12 Months	12 Months

Accidental Death and Dismemberment

Accidental Death and Dismemberment, Loss of Sight, Speech and Hearing Benefit	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
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What is *not* covered?

Treatment, services or supplies which:

- Are not Medically Necessary;
 - a. Are not prescribed by a Doctor as necessary to treat an Injury;
 - b. Are determined to be Experimental/Investigational in nature;
 - c. Are received without charge or legal obligation to pay;
 - d. Are received from persons employed or retained by any Family Member, unless otherwise specified; or
 - e. Are not specifically listed as Covered Charges in the Policy.
- Injury by acts of war, whether declared or not.
- Injury received while traveling or flying by air, except as a fare-paying passenger and not as a pilot or crew member, on a regularly scheduled commercial airline.
- Injury covered by Worker's Compensation, Employer Liability law or Occupational Disease Act or Law.
- Dental treatment, except as specifically stated.
- Injury sustained while committing or attempting to commit a felony.
- Suicide or attempted suicide while sane or insane.
- Intentionally self-inflicted Injury.
- Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state or jurisdiction in which the Injury occurs.
- Loss resulting from being under the influence of any drugs or narcotic unless administered on the advice of a Doctor.
- Injury sustained while participating in or practicing for any professional or intercollegiate sports activity, except as specifically provided.
- Injury which occurs while a Covered Person is on active duty service in any armed forces. Reserve or National Guard active duty for training is not excluded unless it extends beyond 31 days.
- Injury sustained flying in an ultralight, hang gliding, parachuting or bungee-cord jumping, by flight in a space craft or any craft designed for navigation above or beyond the earth's atmosphere.
- Injury sustained while driving or riding on vehicles for off-road use including but not limited to all-terrain vehicles (ATV's).
- Injury sustained where a Covered Person is the operator and does not possess a current and valid motor vehicle operator's license, except in a Driver's Education Program.
- Treatment in any Veteran's Administration or federal Hospital, except if there is a legal obligation to pay.
- Cosmetic surgery, except for re-constructive surgery on an injured part of the body.
- Covered Charges incurred outside of the United States or its possessions.

- Competing in motor sports races or competitions;
- Competing in water sports races or competitions;
- Testing cars/trucks on any racetrack or speedway;
- Handling, storing or transporting explosives;
- Scaling up cliffs or mountain walls;
- Spelunking (exploring caves);
- Handling or working with dangerous animals.
- Injury sustained while participating in a rodeo.
- Re-injury or complications of an Injury caused or contributed to by a condition that existed before the Accident.

The below exclusions are specific to the Accident Dental Expense coverage:

- Injury to teeth which is caused from biting, chewing or grinding teeth.
- Injury to teeth with gross decay or advanced periodontal disease;
- Orthodontic therapy to correct a condition that existed prior to the Accident.
- Injury to teeth not firmly attached to the maxilla and/or mandible immediately prior to the time of the Accident;
- Dental treatment and services performed or supplies used in conjunction with but not due to the covered Accident.

The below exclusions are specific to the Accident Medical Expense coverage:

- Prescription Drugs except as specifically stated.
- Injury sustained while water skiing or surfboarding;
- Injury sustained while snow skiing or snowboarding;
- Injury sustained while roller balding or skateboarding;
- Repetitive motion injuries, strains, hernia, tendinitis, bursitis and heat exhaustion not related to a specific injury.

Exclusions may vary by state.

IMPORTANT NOTICE: This is a brief description of the Accident plan available to members of the Med-Sense Guaranteed Association. The exact benefit and policy provisions are contained in the Master Policy issued to the Med-Sense Guaranteed Association. Terms and conditions may vary by state.

Disclaimer: This is Accident Insurance only. It is not major medical coverage or workers' compensation and it is not designed as a substitute or replacement of health insurance or major medical insurance. Members are responsible for all amounts not covered.



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