

# Comparison Chart of GSUSA Insurance Plan

The following is a high-level comparison of the coverage contained in the master policy issued to the Girl Scouts of the USA and underwritten by Mutual of Omaha Insurance Company. For further details, please refer to the plan outline in the Mutual of Omaha Girl Scout Council Insurance Guide. All information given is subject to the terms and conditions of the master policy. Any questions, call Mutual of Omaha Special Risk Services at 800-524-2324.

	CLASS 1 ACTIVITY ACCIDENT	CLASS 2 ADDED SICKNESS	CLASS 3 INTERNATIONAL TRAVEL AND INBOUND
Eligibility	<p>All member and *nonmember participants of Girl Scout sponsored and supervised daylong events and activities. (100% participation)</p> <p>*Nonmember participants are those personally invited by a registered member (adult or youth) to participate in a Girl Scout activity as a guest or visitor.</p>	<p>All member and *nonmember participants of Girl Scout sponsored and supervised overnight events, lasting one night or greater. (100% participation)</p> <p>*Nonmember participants are those personally invited by a registered member (adult or youth) to participate in a Girl Scout activity as a guest or visitor.</p>	<p>All member and *nonmember participants of Girl Scout sponsored and supervised international travel or inbound international travel. (100% participation)</p> <p>*Nonmember participants are those personally invited by a registered member (adult or youth) to participate in a Girl Scout activity as a guest or visitor.</p>
Coverage (Any Approved and Supervised Girl Scout Activity)	Day events	Overnight events	International travel
Premium Rates	No cost to Girl Scout councils or troops.	No cost to Girl Scout councils or troops.	No cost to Girl Scout councils or troops.
Benefit Amounts			
Accidental Death	\$15,000	\$15,000	\$15,000
Accidental Dismemberment	\$20,000	\$20,000	\$20,000
Paralysis	\$20,000	\$20,000	\$20,000
Heart or Circulatory Malfunction Death Benefit	\$15,000	\$15,000	\$15,000
Medical Expenses Accidents	\$20,000	\$20,000	\$20,000
Dental Treatment	Not to exceed \$5,000 per injury	Not to exceed \$5,000 per injury	Not to exceed \$5,000 per injury

	CLASS 1 ACTIVITY ACCIDENT	CLASS 2 ADDED SICKNESS	CLASS 3 INTERNATIONAL TRAVEL AND INBOUND
Benefit Amounts Continued			
Medical Expenses Sickness	NOT INCLUDED	\$10,000	\$10,000
Infectious Exposure Benefit	Not to exceed \$1,500 per injury	Not to exceed \$1,500 per injury	Not to exceed \$1,500 per injury
Surface Ambulance Service	\$3,000	\$3,000	Benefits coordinated and paid by AXA Worldwide Travel Assistance
Air Ambulance Service	\$5,000	\$5,000	Benefits coordinated and paid by AXA Worldwide Travel Assistance
For Return Transportation Expense	Benefits coordinated and paid by AXA Worldwide Travel Assistance	Benefits coordinated and paid by AXA Worldwide Travel Assistance	Benefits coordinated and paid by AXA Worldwide Travel Assistance
Repatriation Expense	Benefits coordinated and paid by AXA Worldwide Travel Assistance	Benefits coordinated and paid by AXA Worldwide Travel Assistance	Benefits coordinated and paid by AXA Worldwide Travel Assistance

