



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY, FL

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Contact:

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Action By:
Information Only

TO: High School Principals and Athletic Directors
FROM: Michael J. Burke, Chief Operating Officer 
SUBJECT: **STUDENT ATHLETIC ACCIDENT INSURANCE - CHANGES**

Effective August 1, 2013, the School District of Palm Beach County's Student Athletic Insurance Policy is being provided by a new carrier, **Reliance Standard**. This insurance provides excess coverage to students for injuries sustained while participating in Florida High School Athletic Association (FHSA) sanctioned athletic activities.

The good news is that there will be no increase in fees for student athletes for FY14. The benefits and claims filing procedures will change. Attached is an explanation of the new insurance plan which includes directions on how to file student athletic accident claims for injuries sustained on or after the August 1, 2013 effective date.

In order to assist in a smooth transition to this new policy and claims process change, this bulletin and supporting documentation must be shared with all school coaches, athletic staff, and trainers. Should you have any questions, please feel free to contact Julie Sessa at PX 48634, or email julie.sessa@palmbeachschools.org.

Please destroy any Bollinger claim forms that remain at your respective schools as these will not be used for injuries sustained on or after August 1, 2013. New claim forms will be mailed to each high school for use by the athletic directors, coaches, and trainers.

EWG/MJB/DLH/LK/JS:lb/jb

Attachment

Approved: 

E. Wayne Gent, Superintendent

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2013-2014 School Term
SCHOOL DISTRICT OF PALM BEACH COUNTY, FLORIDA
SPORTS ACCIDENT INSURANCE SUMMARY

IMPORTANT NOTICE TO PARENTS OF STUDENT ATHLETES

The School District of Palm Beach County strives to provide a safe learning environment for all students. However, accidental injuries do occasionally occur during school activities and sports. As a service to the County's students, the School District purchases a sports accident insurance policy to assist families with some of the medical expenses that may result from a high school sports related injury. **The school sports policy has limits and may not provide 100% coverage for all medical fees and charges. The following information summarizes the sports policy provisions. This policy is not intended to replace your primary insurance. This policy will supplement your primary insurance plan.**

The policy insures High School student athletes, cheerleaders, band members and color guard while they are participating in school supervised interscholastic sports practice sessions and games during the regular school term, as sanctioned or recognized by the Florida High School Athletic Association (FHSAA). Interscholastic sports team participants would be eligible for policy benefits for covered accidents while they are participating in off-season 'conditioning programs' at school while directly supervised by a school coach. The policy defines covered 'conditioning' activities as: 1) the use of free weights, stationary exercise apparatus, plyometrics, stretching exercises; 2) cardiovascular distance and interval training.

Injuries that may occur while a school coach is teaching sport specific skills and drills, pick-up games/open gym activities, or during the use of sport specific equipment such as starting blocks, blocking dummies, hurdles, rebounders, ball machines, bats, balls, rackets, etc., would not be covered by the school policy during the offseason or summer months. Student athletes and cheerleaders, are also protected during group team travel in a school bus or van to and from the school and a covered FHSAA sanctioned interscholastic athletic event site. *Injuries during individual travel or travel in vehicles not owned or operated by the school are not covered by the school policy.*

The School Sports policy is EXCESS INSURANCE. The policy will not allow anyone to profit by collecting duplicate benefits from several insurance sources. Any benefits that could be collected from any other insurance, PPO, HMO or other available source of coverage must pay first before parents are able to collect benefits from the school sports policy. If primary HMO or PPO coverage is available through your employer-sponsored plan, you should use the HMO or PPO approved doctors, hospitals and other providers for treatment of your child's injuries. **A parent must file a claim with any primary insurance coverage available.** If you do not follow the guidelines of your HMO or PPO primary insurance networks, you will be solely responsible for paying any unpaid medical bills, or additional costs you may incur, that are not covered by the school sports policy. If you do not have any other insurance, you should review the Preferred Provider Network and ask the Doctor or facility what 'out of pocket' expenses you may be responsible for paying.

INTERSCHOLASTIC SPORTS POLICY LIMITS

The maximum medical benefits will not exceed \$25,000.00 per covered injury, subject to the policy limits. The sports policy may not pay for all sports accident related medical expenses. Some bills may exceed the limits of the policy. The maximum policy benefits are listed below. For a claim to be considered eligible for policy benefits, an injured student must receive medical treatment by a licensed physician within *thirty (30) days* after the date of the original covered accident. The policy will pay for necessary, eligible medical treatment expenses that are rendered and billed within 52 weeks after the date of a covered accident subject to the following policy limits:

Inpatient Hospital Benefits: For daily Semi-Private Room & Board including all miscellaneous charges, supplies, services, operating room, implantable devices, etc., the policy pays up to \$1,000.00 per day; While in Intensive Care, including all miscellaneous charges, supplies, services, operating room, implantable devices, etc., the policy pays up to \$2,000.00 per day.

Outpatient Hospital, Emergency Room or Same-Day Surgi-Center Benefits: If outpatient major surgery is performed requiring general anesthesia, the policy pays up to \$10,000.00 for all hospital or Surgi-Center billed supplies, services and implantable devices; the policy will pay up to \$1,000.00 for use of the hospital's Emergency Room, *(Emergency Room benefit applies to injuries requiring emergency treatment within 72 hours of an accident).*

Physician's Non-Surgical Office or Hospital visits and Consultations: Initial non-surgical visit payable up to \$60.00; up to \$45.00 paid for necessary non-surgical follow-up consultation visits; Physician Assistant Visits: \$45.00. Only one visit per day will be paid.

Surgery Fees: Benefits for the primary surgeon are paid based upon the fee amounts stated in the 2008 Florida Work Comp Fee Schedule. **Anesthesiology Administration Benefit:** is payable up to the amounts listed in the Florida Workers Compensation Fee Schedule, 2008 edition. **Policy limits for X-Rays, MRI, CAT, other Scans and Lab (including interpretation and reading fees):** All X-Rays/EEG/EKG: \$250.00; MRI, CAT and other SCANS: \$600.00 in the aggregate; Laboratory Expense: Up to \$150.00.

Outpatient Physical Therapy Treatment Visits: Limited to 15 visits per covered injury not to exceed \$60.00 per treatment visit.

Orthopedic Appliances: (When used for rehabilitation purposes): up to \$250.00.

Emergency Ambulance Service: Up to \$1,000.00 (Air or Ground).

Dental Services: (Amount payable per injured tooth (includes x-rays): up to \$500.00 for treatment of each injured tooth.

Replacement Eyeglasses/Hearing Aids: (if broken during a covered accident requiring medical treatment): UCR up to \$150.00

Maximum Benefit for Motor Vehicle Related Injury: Up to \$2,000.00 based on the policy limits and provisions.

Accidental Death Benefit: Up to \$2,500.00.

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<Please refer to additional terms, provisions, definitions and important information on page 2>

POLICY DEFINITIONS AND COVERED ACCIDENTS: The Sports policy provides benefits for covered claims due to sports accidents. A "**Covered Accident**" is defined as a sudden, unforeseen, unexpected identifiable single event which results in accidental bodily injury to a covered athlete or cheerleader, independent of all other causes, occurring while the school policy is in force. Prolonged over-exertion or repeated injury due to non-accidental overuse is not considered a "**Covered Accident**". Policy benefits for heat exhaustion or fainting is provided if either occurs during or within one hour after participation in a school sports practice session or game. **CONDITIONING** is defined as: 'Weight Training' meaning the use of free weights and stationary apparatus. 'Cardiovascular Conditioning' meaning distance and interval training. Plyometrics meaning the use of pre-set conditioning programs. 'Conditioning' IS NOT teaching sport specific skills and drills, and does not involve the use of sport specific equipment (i.e. starting blocks, hurdles, rebounders, ball machines, bats, footballs, rackets, etc.). **SURGERY** as defined in the policy means (a) the repair of a laceration that requires sutures (b) any cutting operation, or (c) the reduction of a fracture or dislocation; (treatment of a non-displaced fracture not requiring reduction is not considered a surgical procedure).

PREFERRED PROVIDER NETWORK is a listing of medical service providers, doctors and out-patient facilities, who have agreed to accept the school sports policy benefits as payment in full for services rendered, in most cases. **It is the parent's responsibility to pay any charges that are not covered by the school insurance plan. Not all doctors and hospitals accept the school insurance policy benefits as payment in full for services rendered. Visit www.schoolinsuranceofflorida.com for a listing of providers.**

NO PROFIT CLAUSE: The policy is EXCESS INSURANCE. This means that any benefit payments that could be collected from any other insurance or similar plan must pay first. (If a person fails to follow rules of a PPO or HMO type plan and loses benefits that could have been collected, these benefits will be classified as collectible and the school insurance policy benefits will be reduced by the amount that could have been collected from the HMO or PPO). Total payment by all collectible insurance or plans shall never exceed the total reasonable medical expense incurred.

THE SPORTS ACCIDENT INSURANCE POLICY DOES NOT COVER:

- 1) Any expense not due solely to an accident during participation in a covered interscholastic sport that is scheduled and sponsored by a Palm Beach Senior High School while under the direct supervision of a qualified Palm Beach School Authority.
- 2) Injury caused by or while under the influence of alcohol or drugs unless prescribed by a licensed physician.
- 3) Treatment performed by anyone retained by the schools or by any member of a covered person's immediate family.
- 4) Injury caused by participation in any type of non-school sponsored or non-school organized league or sport.
- 5) The existence or aggravation of a physical or mental infirmity, condition or disease, whether infectious, congenital, secondary or acquired in origin. Conditions or the aggravation of conditions that originated prior to the school policy Effective Date are not covered.
- 6) Any form of illness, sickness or disease including but not limited to the following: Pathological stress fractures, Perthes' Disease, Osgood-Schlatter's Disease, Osteomyelitis, Osteochondritis, Osteogenesis Imperfecta, Slipped Capital Femoral Epiphysis, Thrombophlebitis, Hysterical Reactions, Boils, Athlete's foot, impetigo or similar skin infection, rashes, poisonous vegetation reactions, warts, blisters, calluses, cramps, muscle spasms, allergies or allergic reactions, ingrown nails, appendicitis, infections occurring other than as a result of such injury, detached retina, or treatment expense for similar conditions not due to accidental bodily injury. Hernia, in any form regardless of cause, Mental illness, Psychiatric evaluation or treatment expense.
- 7) Injury occurring during individual travel between the School and the home premises of a covered person.
- 8) Expense resulting from participating in activities for which benefits would be payable, in the absence of this insurance, under any high school or association-sponsored catastrophe sports accident policy or trust fund is expressly excluded from coverage.
- 9) Motor Vehicle Injury expense is payable up to \$2,000.00 only after all other motor vehicle and other primary insurance sources have paid.
- 10) Injury as a result of non-traumatic, repetitive, overuse syndrome not to exceed \$250.00.
- 11) Any Expense for which a benefit is not listed in the policy schedule of benefits.

This description of insurance is not a contract and summarizes the Policy # 09-TBD-2014 provisions, benefits and exclusions. Additional policy provisions and exclusions apply. Any difference between the policy and this description will be settled according to the provision of the Master Policy issued to the School District.

HOW TO FILE A CLAIM

1) Obtain a claim form from the Coach or Athletic Director's Office. Instructions appear on the claim form. The Coach must completely fill in the school area, PART B, sign and date the form. **It is the parent's total responsibility to make sure that the completed claim form is submitted to School Insurance of Florida's office within 90 days after the date of the accident. Claims will not be paid if received after 90 days from the accident date. You may seek treatment from any licensed Doctor or facility. Visit our website for a listing of Doctors and facilities that may accept the student accident insurance. It is the parent responsibility to ask what out of pocket expenses you may be required to pay.**

2) The school policy will not pay for any expense that can be obtained from any other valid form of primary insurance or coverage. It is the parent's total responsibility to file the claim with any other available insurance or valid source of coverage and then provide *School Insurance of Florida* with evidence of what primary insurance has paid. School sports policy benefits cannot be paid based upon 'balance due' statements. When your claim has been processed by your primary insurance, mail a copy of the explanation of benefits (EOB) received and all originals or copies of itemized bills and the claim form to *School Insurance of Florida*.

Important Note: Please do not leave the claim form with the Hospital or Doctor's Office. It is the parent's responsibility to make certain that the student's accident is reported to *School Insurance of Florida* no later than 90 days after the date of accident to be eligible for policy benefits. **IF YOU HAVE CLAIM OR COVERAGE QUESTIONS CONTACT SCHOOL INSURANCE OF FLORIDA. Do not call the schools. The schools do not keep claim records and will not be able to answer claim questions.**

THIS CLAIM FORM MUST BE SUBMITTED WITHIN 90 DAYS FROM THE DATE OF ACCIDENT TO:

SCHOOL INSURANCE OF FLORIDA, P.O. BOX 784268 WINTER GARDEN, FL 34778

Local Phone: 407-798-0290 or 800-432-6915 FAX: 407-798-0296 WEB: www.schoolinsuranceofflorida.com