Important Information Regarding Athletic Insurance Coverage

Please retain this letter for future reference

Each student athlete is required to have a physical examination and proof of insurance prior to participation in any intercollegiate sport. The final decision on physical qualifications or reason for rejection is the responsibility of the team physician or certified athletic trainer. The team physician or certified athletic trainer also makes the decision on when a student-athlete may return to competition after a previous injury.

Injuries - Medical Bills - Insurance Coverage - Claim Procedure

Accidents do occur, and we attempt to provide our athletes with the very best possible care. Medical bills may be incurred when the athlete is treated for bodily injury due to an athletic accident, whether it be locally, during a road trip, or by a medical vendor in his/her own home area.

Insurance Coverage

The athletic accident insurance at Aurora University is excess coverage for accidents that occur while participating in the play or official team practice of intercollegiate sports, including sponsored and authorized team travel. All claims should first be submitted to the primary insurance for consideration and payment.

Claim Procedure

All medical bills INCURRED AS THE RESULT OF AN ACCIDENT IN THE INTERCOLLEGIATE SPORTS PROGRAM ONLY should be sent directly to the student-athlete at his/her home address, unless an authorized agent of Aurora University has instructed the medical vendor to do otherwise. Many vendors can submit claims directly to your insurance company on your behalf.

A. Submit the bills incurred to your family, employer group insurance, or plan (primary insurance and secondary insurance, if applicable). They will do one of two things:
   1. Honor the claim and pay all or a portion of the bills incurred. You will receive an Explanation of Benefits (EOB) — save the entire document.
   2. Deny the claim and pay nothing. You will receive an Explanation of Benefits (EOB) — save the entire document.
B. If there is a balance remaining AFTER the family, employer group insurance, or plan has honored the claim, send the EOB from the insurance or plan company and an itemized bill from the provider of service(s) to: Student Insurance, Aurora University, 347 S. Gladstone Ave., Aurora, IL 60506. The itemized bill must include the diagnosis and procedure codes for all treatments.

If you receive a letter of denial from your family employer group insurance or plan administrator, send the EOB stating the denial and the itemized bills to: Student Insurance, Aurora University, 347 S. Gladstone Ave., Aurora, IL 60506.

If there is no coverage for the student-athlete under a parent’s or guardian’s insurance plan, a letter from the parent’s or guardian’s employer with verification will be necessary.

PLEASE NOTE: If the primary family coverage is through an HMO (Health Maintenance Organization), PPO (Preferred Provider Organization), or POS (Point of Service), you MUST FOLLOW THE PROPER PROCEDURES required by your plan in order for the university’s excess athletic accident insurance to satisfactorily complete its portion of the claim. This is especially important if your plan requires preauthorization to have the student-athlete treated out of your plan’s service area.

Retain this document for future reference. In the event the student-athlete is injured through participation in intercollegiate athletics, you will be required to submit an additional form verifying insurance coverage; both the parent and student-athlete must sign this form. This form can be obtained from the student insurance coordinator. Your cooperation will help in minimizing delays.

**Layers of Coverage, Benefit Period, Maximum Medical for Aurora University**

A. $0 - $250

   Responsibility of Parent/Student and/or Primary Insurance Coverage.

B. Deductible $250 – Medical Maximum $15,000 per claim

   For this accident excess coverage, claims are processed by First Agency of Kalamazoo, Mich. THIS IS EXCESS COVERAGE and covers all claims up to one year from the date of the accident. The bills incurred for this layer of coverage will be in the parent’s name and must be submitted to the family employer group insurance or plan first.

C. Deductible $15,000 – Medical Maximum $75,000 per claim

   For this accident excess coverage, claims are processed through First Agency of Kalamazoo, Mich. THIS IS EXCESS COVERAGE and covers all claims up to four years from the date of accident. The bills incurred for this layer of coverage will be in the parent’s name and must be submitted to the family/employer group insurance or plan first.

D. NCAA Lifetime Catastrophic Medical Plan

   Provides coverage for catastrophic claims above $75,000.