

Summary of Student & Intercollegiate Athletic Accident Insurance Plan

The following information is presented as a brief outline concerning the insurance Palomar College provides for students and athletes. A more detailed description will be given to you for you to share with your parent(s) or guardian(s).

1. This policy provides coverage (\$50.00 deductible for Students and Class II Athletes or \$100.00 deductible for Class I Athletes) for all **registered** Students/Athletes who incur a loss for bodily injuries. (**Class I Sports:** Football, Gymnastics, Skiing [snow], Surfing and Wrestling. **Class II Sports:** All other sports.
2. Coverage is in force while participating as an active member of one of the intercollegiate athletic teams, named on the roster of such team and classified as a player on such team, while participating in a practice session or game under the supervision of the team coach or while traveling as a member of a group comprised of members of the team under college.
3. This is a Preferred Provider Plan. CCN Managed Care, Inc. Is the PPO Network provider. This Network of hospitals, physicians, and other providers has agreed to limit the amount they charge for certain services **when you use a CCN Provider**. This plan will pay up to 100% when you use the CCN Managed Care Network. If non-CCN providers are used the CCN allowance may be less than the amount billed. ***If you do not use a CCN Provider, you could face a substantial balance not covered under this plan.*** A list of CCN providers is available in the Training Room.
4. The maximum Accident Medical benefit is \$50,000.00 for students and \$25,000.00 for athletes. **The Company will pay for PPO Allowances of eligible expenses actually incurred within 52 consecutive weeks following the date of injury.**
5. **ALL MEDICAL EXPENSES ARE PAYABLE IN EXCESS OF ANY OTHER VALID AND COLLECTIBLE INSURANCE.** If you or your family insurance carrier is an HMO/PPO organization, it is the Student's responsibility to contact your HMO/PMO physician at once.
6. If you are covered under a plan requiring you to obtain authorization or to use certain facilities or providers, you must attempt to utilize those facilities or providers. **Responsibility under this plan is limited to the amount payable had those facilities been utilized.**
7. All accidents must be reported within 72 hours. An accident Report is necessary to substantiate insurance claim.
8. Written notice of claim must be given within 90 days or as soon as reasonably possible after covered loss.
9. First medical treatment must be rendered within 120 days from the accident date in order for benefits to be considered.
10. Statements for which benefits are to be paid, must be submitted within 90 days from the date treatment was provided.
11. All Bills must be first be submitted to any medical plan for which the athlete may be eligible. After that, the Insurer's Explanation of Benefits paid or denied must accompany the claim form.