

****** IMPORTANT NOTICE TO PARENTS ******
2022-2023 SARASOTA COUNTY HIGH SCHOOLS
FOOTBALL ACCIDENT INSURANCE
(For students participating in 9th, 10th, 11th and 12th grade level)

EXCESS INSURANCE

Applications must be received by September 5, 2022, to effect coverage.

Dear Parent: The school district requires that a student be covered with medical insurance before being allowed to practice or compete in interscholastic tackle football for the school. The following information describes a plan that is available through Reliance Standard Life Insurance Company. **You are not required to purchase this plan;** however, you must have an insurance policy in effect before your child is eligible to practice or compete in interscholastic football. This plan can also be used to supplement coverage that is already in effect through an employer, group, or other insurance policy. **The policy has limitations and exclusions and will not pay 100% of billed charges.** The School District is not responsible for payment of any bills not covered by this Policy or your personal insurance plan. **Please read the following outline of coverage carefully.** To enroll in the plan, return the completed application below and your premium check directly to School Insurance of Florida, PO Box 784268, Winter Garden, FL. 34778. **Or enroll online www.schoolinsuranceonline.com**

2022-2023 Sarasota County Public School Tackle Football Insurance
For grades 9th, 10th, 11th, and 12th

COST \$80.00 The plan provides coverage for public school tackle football practices and games during the regular 2022 football season and the 2023 spring practices and jamboree game as sanctioned by the FHSA. **These plans include the (\$15) School Time coverage for Sarasota County Public School sponsored, scheduled, funded, and supervised activities for the regular 2022-2023 school term.** This plan will expire on the last day of school. No coverage is provided while at home or during the summer months. Coverage effective and termination dates are outlined on the back of this form. **Additional coverage options are available at www.schoolinsuranceonline.com for extended coverage at home and on weekends. Enhanced Plan Benefit Cost is \$110.00.**

Maximum Policy Benefit is \$25,000.00 per covered accident subject to the policy benefit schedule

If injury due to an accident covered by the policy requires treatment within *sixty (60) days* after the date of accident by a legally qualified licensed Doctor of Medicine, Osteopathy, Chiropractic, Dentistry, or hospital services, the Company will pay the usual and customary charge for eligible expenses incurred for necessary medical, dental or hospital care incurred within one year from the date of accident up to the specified Policy maximum benefits listed below. **(Benefits are paid for loss directly due to an identifiable accident-causing bodily injury independent of all other causes incurred while your insurance under the Policy is in force. No benefits are payable for treatment of pre-existing conditions or treatment expenses incurred after one year from the original date of a covered accident.)**

SUMMARY OF BASIC POLICY BENEFITS

<u>Policy Benefits Listing</u>	<u>Plan A Basic Plan Benefits \$80</u>	<u>Plan B Enhanced Plan Benefits \$110</u>
Maximum Medical Benefit payable per Covered Accident	\$25,000	\$25,000
Accidental Death Benefit	\$1,500	\$2,500
Initial Physician's Visit (Non-Surgical)	\$45	\$60
Physician's Follow-Up Visits (Non-Surgical)	\$35	\$45
Outpatient Therapy or Similar Treatment Visits	Up to 10 visits @ \$40 per day Not to exceed Workers Comp. maximum benefit	Up 10 visits @ \$50 per day Not to exceed Workers Comp. maximum benefit
Surgeon Fee Schedule (Based on Florida 2008 Work Comp Fee Schedule, Part A)	20% of the surgeon's allowable benefit	20% of the surgeon's allowable benefit
Assistant surgeon and anesthesiologist fees	Up to \$250	Up to \$450
X-Rays, EEG, CAT Scans (Includes Reading Fees)	Up to \$600	Up to \$750
MRI (Includes Reading Fees)	Up to \$1,000 per day Intensive Care	Up to \$1,250 per day Intensive Care
Inpatient Hospital Room Charges per Day of Confinement: Including all miscellaneous Charges per Diem, supplies, operating room, implants, etc..	\$1,200/day	\$1,500 per day
Hospital Outpatient, Surgi-Care Center or "Same Day" Surgery Facility Charges when Major Surgery is performed requiring general anesthesia	Up to \$1,000 for all charges, services supplies	Up to \$2,250 for all charges, services supplies
Emergency Room Charges: (applies to injuries requiring emergency treatment within 72 hours of a covered accident)	Up to \$225	Up to \$475
Orthopedic Devices, Braces, Implants or Appliances	Up to \$250	Up to \$350
Dental Treatment, (for accidentally injured sound, natural teeth)	Up to \$250\injured tooth Up to \$350	Up to \$400\injured tooth Up to \$400
Emergency Ambulance Service (initial air or ground trip)	\$250 initial air or ground	\$400 initial air or ground
Lab Testing	Up to \$100	Up to \$150

SCHOOL POLICY NUMBER 09-0110-2023

ENROLL ONLINE at www.schoolinsuranceofflorida.com

KEEP THE TOP PART OF THIS FORM FOR YOUR RECORDS.

SARASOTA PUBLIC SCHOOL TACKLE FOOTBALL APPLICATION 2022-2023

Enroll online or mail your premium check, or money order, with this application to School Insurance of Florida. If you would like an insurance card, you must provide a stamped, self-addressed envelope with your application and allow 7-10 business days. Enroll online and receive an ID immediately.

YES, ENROLL MY CHILD IN THE TACKLE FOOTBALL ACCIDENT INSURANCE PLAN AS DESCRIBED ABOVE.

(√) Check the Option below.

Applications must be received by September 5, 2022, to effect coverage.

() **\$80.00 Basic Plan Coverage** - exclusively for the Sarasota County Public School sponsored, scheduled, funded and supervised activities during the regular school term. The plan includes public school tackle football practices and games during the regular 2022 football season and the 2023 spring practices, as sanctioned by the FHSAA. No coverage is provided during the summer months. Purchase the 24 HR plan for summer coverage.

() **\$110.00 Enhanced Plan Coverage** - exclusively for the Sarasota County Public School sponsored, scheduled, funded and supervised activities during the regular school term. The plan includes public school tackle football practices and games during the regular 2022 football season and the 2023 spring practices, as sanctioned by the FHSAA. No coverage is provided during the summer months. Purchase the 24 HR plan for summer coverage.

PRINT PLEASE:

First and Last Name of Student _____ Age ____ Grade ____

Address _____ Phone _____

City _____ State ____ Zip _____ Email _____

Full Name of High School _____ **SARASOTA COUNTY SCHOOL DISTRICT**

Signature of Parent or Guardian _____ Today's Date _____

Attach your check or money order, payable to: SCHOOL INSURANCE OF FLORIDA

No premium refunds will be made after the first day of this short-term coverage.

Amount paid: \$.00 Check # _____

RS0100FL

(Sarasota FB-2023)

EXCESS INSURANCE

If you enroll online, you do not need to submit this application. Online enrollees will receive immediate confirmation and access to an online I.D. Card. If you mail in your application, I. D. Cards will not be mailed to you unless you provide a stamped return addressed envelope with your application. Please allow 7-10 business days for ID cards to be returned to you.

Save Time Enroll online www.schoolinsuranceonline.com

Please mail your check or money order and your application to:

School Insurance of Florida
P.O. Box 784268
Winter Garden, FL. 34778-4268

**Address all claims and inquiries to the Plan Administrator:
School Insurance of Florida, P.O. Box 784268, Winter Garden, Florida 34778**

EXCESS INSURANCE

COVERAGE EFFECTIVE DATES:

Football coverage starts on the first official day of practice for the 2022 FHSAA sanctioned season, as scheduled by FHSAA or at 11:59 P.M. on the date the premium payment is received by the insurance company, whichever is the later date. Coverage for football continues through the last school football game in 2022. The 2023 spring practice coverage starts, as sanctioned by the FHSAA, and expires after the 2023 spring Jamboree game. For all other school related activities, the School Time coverage becomes effective on the first day of scheduled school classes or at 11:59 P.M. on the day following the date the premium received by the insurance company, whichever is the later date. The School Time coverage is effective during the regular school term on the days that school is in session, while attending a Sarasota school supervised and regularly scheduled school activity or class. The School Time coverage terminates on the last day of school, in May 2023. No coverage is provided at home, during the summer months or for private league sports, clubs or camps.

EFFECTS OF OTHER COVERAGE: The policy contains no deductible. The policy will provide the scheduled benefits in addition to other insurance if the total treatment expense is \$250.00 or less. However, if treatment expense exceeds \$250.00, you must first file a claim with any other source of coverage. Other sources of coverage include but are not limited to, Blue Cross/Blue Shield, group insurance, self-insured trusts, Union Welfare Plans, HMO's, and PPO's. After the other source of coverage has provided benefits, the student insurance policy will consider payment of the remaining unpaid expenses up to the scheduled policy maximums. If you are also covered by an HMO, PPO, or similar plan, you must follow their rules for obtaining approved provider services and benefits. If you do not use your HMO or PPO approved provider, benefits under the student insurance plan will be reduced by the amount of benefits that could have been obtained if you would have utilized the HMO or PPO approved provider of service. If you have no other source of coverage, the student accident insurance will pay the scheduled policy benefits.

THE FOLLOWING ITEMS AND CONDITIONS ARE NOT COVERED: No payment shall be made under the Policy to cover any expense or loss not caused exclusively by an identifiable accident occurring while the Policy is in force or any expense or any loss resulting from, or for: 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, or similar conditions; hearing aids; damage to other than whole, sound, vital and natural teeth or to existing dental bridges, crowns, restorations or braces; orthodontic procedures and services; intentionally self-inflicted injury; war or any act of war; services or treatment rendered as a part of the school service by a hospital, physician, or person employed or retained by the School, or by a person related to the Covered Person by blood or marriage; the use of or while under the influence of drugs or intoxicants unless administered as prescribed by a physician; 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, hernia of any kind, however caused; infections occurring other than as a result of such injury; detached retina; or psychiatric care; riding in or on, being struck by, being towed by, boarding or alighting from, or operating any motorized or engine driven vehicle; provided, however, that eligible medical expenses not collectible from other valid coverage will be payable up to \$1,500.00 in the aggregate for a motor vehicle related injury; expense resulting from participating in activities for which benefits would be payable, in the absence of this insurance, under any other high school or association sports accident policy is expressly excluded from coverage under the Policy; 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 Policy effective date; treatment expense for plastic, cosmetic, reimplantation, transplantation or experimental surgery in excess of \$500.00 in the aggregate; Participation in any organized sports camps, league practices or competitions that are not exclusively funded, sponsored, scheduled and supervised by the Member school district Board of Education to which the Policy is issued are not covered.

MAXIMUM POLICY LIMITS: The policy will pay up to \$25,000.00 for covered medical expense for each covered accident subject to the terms of the policy. The policy also provides a \$1,500.00 accidental death benefit and a dismemberment benefit up to \$10,000.00 for double dismemberment or a \$1,000.00 benefit for a single dismemberment, subject to the terms of the policy.

HOW TO FILE A CLAIM: In case of claim covered under the Policy, obtain a claim form immediately from either the school or WWW.SCHOOLINSURANCEONLINE.COM. **Direct all questions concerning claims and mail any claims to SCHOOL INSURANCE OF FLORIDA P.O. Box 784268 Winter Garden, FL. 34778; Telephone:1-800-432-6915.** This outline will be the only description of coverage you will receive. Retain this brief description of the plan benefits and record your check number for evidence of payment. The master policy issued to the school contains the actual Policy provisions and is available for your review at the school district office. This description of coverage is not a contract. If any discrepancy exists between the description of coverage and the master policy, the master policy language will govern. This is a summary of policy number 09-0110-2023.