

ATHLETIC INSURANCE

Greenville County Schools provides an “excess” insurance policy for purchase by student-athletes on high school teams. This is a requirement for all athletes. There are no exceptions. Currently this policy is a once per year **\$54.00** fee for HS athletes and **\$32.00** for middle school. Our current policy is with the *Student Resources/UnitedHealthcare*.

Please follow the below guidelines when collecting insurance fees:

1. All fees must be receipted as they are received.
2. Monies must be turned-in and receipted to the school’s bookkeeper daily.
3. An accurate record must be kept of students who pay for their insurance. You are encouraged to develop a system that will work for you.

Student Resources through *UnitedHealthcare* will bill you during the course of the school year three times. High schools will be billed according to the number of athletes you had listed on all of your eligibility forms for the previous school year. 80% of this number plus 20 (for cheerleaders) is how the billing is figured. *Middle schools are billed for each athlete in your program (non-duplicative)*. Please see to it that this bill is promptly paid by doing a local school purchase order form and giving it to your school’s bookkeeper with the copy of the *Student Resources* invoice. Invoices will be on September 1, December 1, and March 1 of the school year.

Filing a Claim (Recommendation):

When you have a student who had or will need to see a doctor or visit the emergency room, follow the below procedures:

1. You or your designee must fill out a district “**Accident/Incident Report**” form (see attached copy of Form 130-40--must be filled out in three color and sent to designated offices);
2. You or your designee must see to it that the *Student Resources* “Claim Form” is completed in full--all boxes (see attached copy from *Student Resources*). This form must have all appropriate signatures.
3. Instruct the student and parents that they must fill out the sections regarding their personal information and the section labeled, “What other insurance company/companies provide coverage that would cover this claim.” All signatures must be completed. **Please tell parents to make copies for your files and parents for later reports or filings!**
4. **Explain to student/parents that they must file on their primary family coverage first.** You should instruct doctors and hospitals that the *Student Resources* plan is a “Full Excess” plan, and all bills must be submitted to the primary carrier first, and then to *Student Resources* after an “Explanation of Benefits” has been received by the family from their primary insurance carrier.
5. Explain to the parents that they should receive an **EOB** (Explanation of Benefits) from their primary family insurance. This should then be attached, along with an **itemized bill**, to a copy of the *Student Resources* claim form and sent in. This may require you or the parents to call the doctor’s office or hospital’s billing department to request an itemized bill.
6. You are strongly urged to contact the parents personally to give these instructions. You are also urged to make more than one copy of the **completed** claim form and give extra copies to the parents.
7. Follow-up with parents after one-three months with call to make sure all bills have been received and all claims filed. **THIS IS EXTREMELY IMPORTANT as claims must be filed within 90 days of the first treatment!** Continue follow-ups with these parents/guardians until all claims have been completely processed and paid.