

**2021-22 Athletic Accident Insurance Plan Summary  
for the Student Athletes of:  
Kents Hill School**



This is a brief summary of the benefits provided through your institution for eligible full-time student athletes participating in interscholastic sports. This plan will cover a student athlete from the first to the last date a student athlete is required to be on campus for participation in a **Covered Event**. Please refer to the full plan document for a complete description of the plan Benefits, Limitations and Exclusions. Additional information regarding this plan can be found at [www.eiia.org](http://www.eiia.org). Click on "For Students" and search for your institution.

**FULL EXCESS MEDICAL:** This plan will pay Eligible Expenses up to the limits of this plan that are in excess of any other **health care plan**, regardless of any coordination of benefits provision contained in such health care plan.

**IMPORTANT:** All injuries must be reported to the Athletic Trainer immediately. Unreported injuries are not covered.

**CLAIM FILING INSTRUCTIONS:** Please contact your Athletic Trainer.

**QUESTIONS:** For questions please contact NAHGA Claim Services at 877.497.4980 or e-mail them at [eiia@nahga.com](mailto:eiia@nahga.com)

**POLICY #:** US1244298

**COVERAGE PERIOD:** 9/1/2021-6/4/2022

**ACCIDENT LIMIT:** \$25,000

**PLAN TYPE:** Full Excess Medical

**DEDUCTIBLE:** \$0

**BENEFIT PERIOD:** 24 Months from date of Accident

**COINSURANCE:** 0%

**Report your injury to the Athletic Trainer immediately!**

**ELIGIBLE EXPENSES:**

**Hospital** Room & Board (semi-private rate); **Hospital** Miscellaneous; Outpatient Pre-Admission Testing; Outpatient **Hospital** Emergency Room Benefit; Surgeon; Assistant Surgeon (30% of surgeon's allowable fee); Anesthesiologist; **Doctor**; Surgical Facility; X-ray and laboratory; ambulance; prescription drugs and **physiotherapy** (\$300 maximum without a **Doctor's** prescription). This benefit includes coverage for treatment of **injury** to **Natural Teeth**.



- **Initial medical treatment must be received by a doctor within 90 days from the date of the accident.**
- **Proof of loss must be submitted within 6 months from the date of injury.**
- **Medical bills must be submitted within 12 months of the date of service.**

*There is no guarantee of benefits. All injuries are validated and reported by the Athletics Department.*

*Terms that are defined in the Policy are capitalized in this Summary.*



*This summary is not intended to take the place of the benefits described in the Policy. Please refer to the Full Plan Document for a complete description of Benefits, Limitations and Exclusions.*

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