

**INSURANCE**

1. Youngstown State university athletic insurance coverage for your son or daughter is used in EXCESS of your present family coverage. Our insurance will be activated to initiate payments for medical bills (to the limits of the policy) which resulted during or from **supervised activities** such as weight training/conditioning, individual workouts, practices, competitions or team travel AFTER:

- Your primary insurance carrier has taken action (payment, partial payment or denial).
- You have received and forwarded a copy of your insurance carrier's Explanation of Benefits (EOB) and a copy of the medical providers bill to the Athletic Training Staff.

2. The Athletic Department does not receive bills or statements directly from physicians, hospitals or other medical providers. Charges for all medical services are made in the patients (student-athlete's) name and payment is ultimately the responsibility of the individual. Student-athletes (or parents/guardians) are responsible for providing up-to-date insurance information to each provider of medical services, and also responsible for forwarding medical bills with outstanding balances and primary insurance EOB's to the Athletic Training Staff for appropriate payment in a timely manner.

The Athletic Training Staff will not process outstanding medical claims that have not been presented to a primary insurance carrier for payment consideration. Further, the staff will not process claims that are not accompanied by the appropriate EOB's.

3. If your son or daughter is not covered by your medical insurance policy, you must immediately forward a statement to that effect to the Athletic Training Staff. This must be done within 12 months of the date of the injury.

4. At times, our insurance carrier may contact you for additional information. Your timely cooperation will assist our insurance carrier in processing of your medical claims. Because of HIPPA and other privacy rules, the Athletic Training Staff may not be permitted to intercede in this communication on your behalf.

5. Medical services, consultations or treatments that are initiated without prior approval of the Youngstown State Sports Medicine Staff will not be eligible for payment by the department's insurance carrier (except in emergency situations). Please familiarize yourself with the Athletic Departments and its insurance carrier's definitions and policies regarding medical treatment.

**THE ATHLETIC DEPARTMENT WILL NOT BE RESPONSIBLE FOR PAYMENT OF ANY CHARGES IF THESE PROCEDURES ARE NOT FOLLOWED.**

## ATHLETIC INJURIES, ILLNESSES AND MEDICAL CARE

1. PHYSICAL EXAMINATIONS: According to NCAA Bylaw 17.11.2.2, all prospective student-athletes are required to undergo a Pre-participation Medical Examination. The initial examination is required to be performed by a qualified physician. All subsequent Health Status Reviews will be conducted on an annual basis by the Sports Medicine Staff. Upon completion, the Head Athletic Trainer (or designate) will review all appropriate medical paperwork, the team physical will examine and evaluate any irregularities and will recommend appropriate participation status. Individuals who leave school or do not participate for one or more academic year or season will be required to submit a current PPE for evaluation prior to being readmitted to the athletic program.

Student-athletes who have not submitted a current PPE form, GENERAL HEALTH QUESTIONNAIRE, MEDICAL INSURANCE INFORMATION form, MEDICAL CONSENT/RELEASE OF INFORMATION FORM, and a completed PARENT ACKNOWLEDGEMENT form will not be permitted to participate in intercollegiate athletics at Youngstown State University.

2. INJURY OR ILLNESS: The student-athlete is responsible for immediately reporting to a member of the Certified Athletic Training Staff, ALL illnesses and athletic-related injuries. A member of the Certified Athletic Training Staff will make all necessary medical referrals or will schedule athletic training room treatment/rehabilitation as indicated. Student-athletes are **not permitted to seek medical treatment for an athletic-related injury or illness without the prior authorization of the team physician**, except in cases of emergency.
3. REFERRAL: If, in the opinion of the certified athletic trainer, an ill or injured student-athlete should be referred to a team physician for evaluation, the certified athletic trainer will schedule an appointment for the student-athlete.
4. REFERRAL TO MEDICAL SPECIALISTS: If, in the opinion of the team physician, a student-athlete should be referred for diagnostic testing or additional medical specialists, the team physician and/or certified athletic trainer **MUST** schedule the appointment.

**THE ATHLETIC DEPARTMENT WILL NOT ASSUME SECONDARY FINANCIAL RESPONSIBILITY FOR ANY CHARGES DUE TO EXAMINATION, TESTING, AND/OR TREATMENT BY ANY CONSULTANT OTHER THAN OUR TEAM PHYSICIANS IF THESE PROCEDURES ARE NOT FOLLOWED**

5. DENTAL CARE: The athletic department's insurance carrier shall assume secondary financial responsibility for injuries to the mouth and teeth when these injuries are a result of supervised participation in athletics. Further, in sports where protective equipment (mouth guards) are mandatory, the athletic department will either arrange to provide custom-fitted mouth guards, or will provide an alternative device to wear. Student-athletes participating in sports where mouth guards are not mandatory may also request custom-fitted mouth guards to wear for their protection. \*\* If a mouth or dental injury occurs to a student-

athlete who was not wearing a mouth guard as mandated by sport rules, the athletic department's insurance carrier will not assume secondary financial responsibility for payment of any medical bills.

Dental care, not specifically and directly related to an athletic injury (teeth cleaning, regular dental check-ups, filling of cavities, etc) is not provided or covered financially by the athletic department or its insurance carrier.

6. VISION CARE: Vision care, including normal check-up or routine eye examination are not covered expenses. Student-athletes who wear corrective lenses (glasses/contacts) should notify the athletic training staff of this, and should consider the feasibility of carrying an extra pair of corrective lenses to athletic participation. Also, student-athletes who wear glasses should insure that frames and lenses are safe and approved for wear during athletic activities.
7. TREATMENT/REHABILITATION/RECONDITIONING/RETURN TO PARTICIPATION: The athletic training room(s) hours will be posted at the beginning of each semester. Injury evaluation, treatment, rehabilitation and reconditioning will be available to all student-athletes; however, in-season athletes will receive first priority. Treatment/rehab times should be scheduled with the staff certified athletic trainer. These appointments should not conflict with class attendance or the regular practice schedule. On a daily basis, a member of the certified athletic training staff will communicate with the coaching staff regarding the injured student-athletes attendance, progress and participation status.
8. PARTICIPATION STATUS: Decisions concerning the availability of an injured or ill student-athlete for practice or game participation shall be the responsibility of the Sports Medicine Staff. It is expected that student-athletes communicate questions or concerns to the certified athletic training staff / team physicians in an honest, timely manner.
9. OUT-OF-SEASON INJURIES OR ILLNESSES: The athletic department or its insurance carrier will not assume financial responsibility for evaluation, diagnosis, treatment or care of injuries or illnesses that occur as a result of participation while out-of-season. Further, injuries or illnesses that occur during or from participation in activities that are not part of regularly supervised weight training/conditioning or individual workouts with a team's coaching staff will not be covered financially. The athletic department and its insurance carrier will provide secondary financial responsibility for injuries that occur during or from participation in **SUPERVISED weight training/conditioning, individual workouts, practices or competitions.**
10. DEFINITIONS AND INSURANCE POLICY EXCLUSIONS: As defined by the athletic department's insurance carrier....
  - INJURY*: bodily trauma resulting directly and independently of all other causes in loss covered by Policy and caused by an accident sustained while policy is in force as to the insured
  - ACCIDENT*: an unexpected, eternal and sudden event that is independent of any other cause. Participating in an activity does not necessarily constitute and accident.

\*Illness, diseases, degenerative injuries, conditions caused by continued stress to a particular area of the body, and existing conditions aggravated or exacerbated by an accident are not covered.

**POLICY EXCLUSIONS:** The athletic department's insurance policy does not cover...

1. Suicide or a suicide attempt while sane; or self-destruction or an attempt to self-destroy while insane.
2. Riding in a vehicle or device for aerial navigation, except as a passenger in a scheduled aircraft used for the transportation of passengers.
3. Services provided by the policyholder's infirmary, employees or salaried physician, team athletic trainer, or nurse.
4. Declared or undeclared war
5. Expenses covered by
  - a. workers compensation
  - b. any occupational disease law
6. Loss covered by other valid and collectible insurance plan(s)
7. Hernia, in any form
8. Sickness or diseasing in any form; heat exhaustion, heat prostration, fainting
9. Fighting, unless an innocent victim
10. Expenses incurred for the use of orthotics, unless used exclusively to promote healing
11. Use of electric, biomechanical devices. Examples include: continuous passive motion devices (CPM), electrical stimulation, tens units, bone stimulators
12. Non-prescription medications

Please address question regarding the "POLICY ON ATHLETIC-RELATED INSURANCE, INJURIES, ILLNESSES, AND MEDICAL CARE" to:

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