

NCAA CATASTROPHIC INJURY INSURANCE PROGRAM FREQUENTLY ASKED QUESTIONS

APPLICABLE TO 8/1/17 TO 7/31/2021 POLICY PERIOD

This document is a summary of the NCAA Catastrophic Injury Insurance Program. The insurance policy on file with the NCAA contains all the provisions, exclusions and limitations, and qualifications of the insurance benefits. If any discrepancy exists between this piece and the Policy, the Policy will govern and control the payment of benefits.

If you have questions regarding the coverage, please contact the NCAA's insurance program administrator, American Specialty, at 800/245-2744 and ask for Jina Doyel (jdoyle@americanspecialty.com) or Nikki Hammond (nhammond@americanspecialty.com).

Q: Does the NCAA Catastrophic Injury Insurance Program provide coverage for any disease or illness, including COVID-19 and other communicable diseases?

A: The NCAA catastrophic policy is designed to provide benefits for covered accidents, not specifically disease or illness, unless such disease or illness is a direct result of a "Covered Accident" as defined by the policy. The primary source of coverage for COVID-19 related medical expenses would likely be an individual's primary health insurance (as it is with other illness-related claims) and, because the NCAA catastrophic insurance policy was designed to address specific types of accidents, it is not expected that the details of most COVID-19 scenarios would align with applicable coverage eligibility considerations unless such is a direct result of a "Covered Accident" as defined by the policy. Please also note that coverage under the NCAA catastrophic policy is excess coverage, subject to a \$90,000 deductible eroded by payments from other NCAA-legislatively required insurance.

Q: Does a Participating Institution have to complete any form or pay a premium in order to be covered under the NCAA catastrophic injury insurance program?

A: No, the NCAA pays the full premium for the catastrophic program. All active member NCAA institutions are automatically provided this coverage.

Q: Who is the insurer for the NCAA catastrophic program?

A: Mutual of Omaha Insurance Company.

Q: How do I know if an injury is catastrophic and should be reported?

A: There are two circumstances in which an institution should report a claim under the NCAA Catastrophic policy. The first is if a serious injury has occurred that has resulted in or may result in disability. True catastrophic injuries, while relatively rare, require immediate response and coordination. Severe head or spinal cord injuries should be reported no later than the first business day following the injury. The other time to report a claim is when an injury occurs that you believe is likely to exceed the NCAA catastrophic policy deductible of \$90,000. You may not know this immediately following the injury, but when you get to the point that there is potential of the expenses to reach this level, it is prudent to report it so the insurer can set up a claim file and advise you of the type of documentation necessary to maintain in the event the NCAA catastrophic policy does become involved.

Q: *What is the policy deductible?*

A: The policy deductible is the total amount of eligible medical expenses that must be incurred as a result of an injury sustained during a Covered Event before the benefits under the NCAA catastrophic policy will be available. The deductible must be met within two years following the date of injury. The deductible is currently \$90,000 and is eroded by payments from other NCAA-legislatively required insurance

Q: *Who pays the deductible amount?*

A: NCAA regulations require that all institutions certify that student-athletes have insurance for medical expenses within the deductible of the NCAA Catastrophic policy. Assuming all institutions are in compliance with the regulation, the Catastrophic program deductible will be covered by the student-athlete's or parents' personal insurance coverage or through a basic accident medical policy carried by the institution (or through an institution's formal self-insurance plan). The intent of the legislation is to avoid a situation where a student-athlete is faced with paying the amount under the NCAA catastrophic policy deductible out-of-pocket.

Q: *Is anyone who meets the deductible entitled to ALL policy benefits?*

A: No, because there are several types of coverages included in the policy. Anyone who meets the deductible and has not triggered the date of recovery is eligible for Medical, Dental, Rehabilitation, and Custodial Care benefits. There are other policy benefits that are available only to individuals who are Totally or Partially Disabled as a result of a covered injury. Benefits available only to individuals who are Totally or Partially Disabled include, but are not limited to disability benefits, a special expense benefit, a college and vocational education benefit, and a family adjustment expense benefit.

Q: *Does the NCAA catastrophic policy begin to pay benefits immediately after the deductible has been met?*

A: The policy is designed to pay after all other sources of insurance and benefits have been exhausted. Therefore, if a student-athlete has health insurance through his or her parents plus the institution buys an excess accident medical policy, it is possible the NCAA Catastrophic policy will not become involved in a claim even if the policy's deductible has been met (if all the expenses are covered through other avenues, the NCAA policy does not come into play). If a student-athlete is uninsured, the institution's excess accident medical policy will likely pay the amount within the NCAA Catastrophic policy deductible, and the NCAA Catastrophic policy will begin paying immediately after that. Of course, there are many scenarios that fall somewhere in between. Non-medical benefits can become available to a Totally or Partially Disabled individual once the medical deductible has been met.

Q: *Generally, what benefits are provided under the NCAA catastrophic program?*

A: There are three (3) types of benefits available under the NCAA catastrophic program. These are: medical benefits, true catastrophic injury benefits, and a death benefit. Medical benefits are available to those Insured Persons who meet the deductible within the required timeframe, incur medical expenses in excess of the deductible as a result of an injury sustained during a Covered Event, and has not triggered the date of recovery clause. True catastrophic injury benefits are available to individuals who are Totally or Partially Disabled as defined in the policy. These benefits cover things such as special benefits for home and vehicle modifications, family counseling, rehabilitation, and college/vocational education. The death benefit of \$25,000 is payable for death resulting from an accident or injury during a Covered Event.

Q: *What events does the catastrophic policy cover?*

A: For players on an athletics team, covered events include competitions scheduled by his or her institution, official team activities, conditioning, and practice sessions that are authorized by, organized by, or directly supervised by an official representative of the institution. Some activities that are **not** covered for student-athletes are activities that are not directly a part of the varsity sport program such as camps, clinics, or other events that are hosted by outside organizations.

Because conditioning can mean different things to different people, the policy specifically defines the type of conditioning that is covered. To be covered, conditioning must meet three criteria. 1) It must be authorized by, organized by, or directly supervised by an official representative of the institution. 2) It must contribute directly toward the student-athlete's ability to participate as a player in his or her particular sport. 3) And, finally, it must take place at the institution's athletic facilities or a facility authorized by the institution.

Q: *How is "Total Disability" defined?*

A: The definition of Total Disability or Totally Disabled means the Insured Person, within two years of the date of a Covered Accident and as a result of a Covered Accident has suffered an irrecoverable loss of use of both arms, use of both legs, or use of one arm and one leg and is unable to perform at least three ADL(s); OR has suffered an irrecoverable loss of speech, hearing of both ears, or sight in both eyes and is unable to perform at least three ADL(s) or at least three IADL(s); OR has suffered severely diminished mental capacity due to brain stem or other neurological damage and is unable to perform at least three ADL(s) or at least four IADL(s).

Q: *How is "Partial Disability" defined?*

A: The definition of Total Disability or Totally Disabled means the Insured Person, within two years of the date of a Covered Accident and as a result of a Covered Accident has suffered an irrecoverable loss of use of both arms, use of both legs, or use of one arm and one leg and is unable to perform at least one ADL(s); OR has suffered an irrecoverable loss of speech, hearing of both ears, or sight in both eyes and is unable to perform at least one ADL(s) or at least one IADL(s); OR has suffered severely diminished mental capacity due to brain stem or other neurological damage and is unable to perform at least one ADL(s) or at least two IADL(s).

Q: *How is “Date of Recovery” defined?*

A: The definition of Date of Recovery means a: for an Insured Person who suffered the complete and irreparable severance of an arm or leg at or above the wrist or ankle joint, but who was not Totally Disabled, the date immediately following a period of twenty-four (24) consecutive months during which the Insured Person received no medically Necessary treatment or service as a result of the Covered Accident for which benefits had been received under this Policy; b. for an Insured Person not Totally Disabled and who has not suffered the complete and irreparable severance of an arm or leg at or above the wrist or ankle joint, the earlier of: 1) the date the Insured Person receives medical clearance to participate in Qualifying Intercollegiate Sports; or 2) the date immediately following a period of “twenty-four” (24) consecutive months during which the Insured Person received no medically Necessary treatment or service as a result of the Covered Accident for which benefits had been received under this Policy; or c: For an insured Person who was Totally Disabled, the date such Insured Person no longer qualifies as Totally Disabled as defined herein, subject to 10.b.above.

Q: *What is a Qualifying Intercollegiate Sport?*

A: Qualifying Intercollegiate Sport means a sport: a.) which has been accorded varsity status by the Participating Institution as an NCAA sport; and b.) which is administered by such Institution's department of intercollegiate athletics; and c) for which the eligibility of the participating student-athlete is reviewed and certified in accordance with NCAA legislation, rules, or regulations; and d.) which entitles qualified participants to receive the Participating Institution's official awards.

Three of these criteria (a, b, and d) are specific to the institution. With respect to criteria c., there are three categories of sports that apply. These are championship sports, emerging sports, and sports for which the NCAA has granted a specific waiver for an individual institution because the institution needs to use the sport to meet the sports sponsorship requirement for membership. The NCAA has a list of these sports. In the event of a claim, the insurance company confirms with the institution and the NCAA that all criteria are met.

Q: *Who determines what a varsity sport is?*

A: Each Participating Institution determines what NCAA sports meet its standards and are considered to have varsity status.

Q: *Would my Institution still be covered as a varsity sport if there is no NCAA championship for that sport?*

A: Yes, this is possible if the sport is an emerging sport for women or if it is a sport for which the NCAA has granted a specific waiver for your individual institution. To qualify, the sport must also have varsity status at your institution, be administered by your athletics department, and entitle participants to receive your institution’s official awards. See the definition of Qualifying Intercollegiate Sport above.

Q: Is my Institution covered for competitions and practices outside of the United States?

A: Yes, if the competition or practice meets the definition of Covered Event. The definition of Covered Event requires that the scheduled competition and practice sessions be "authorized, organized, or directly supervised by an official representative of the Insured Person's Participating Institution." If the international competition or practice in which your Institution participates meets this definition, the team is covered. It would not meet the definition if the event were not directly a part of the Qualifying Intercollegiate Sport, such as camps, clinics, or other events not conducted by the Participating Institution.

Q: Does the catastrophic policy cover out-of-season practices?

A: Subject to any NCAA restrictions, the practice must be authorized by, organized by, or directly supervised by an official representative of the Insured Person's Participating Institution to be an eligible Covered Event under the policy. Conditioning that is authorized, organized, or directly supervised is also covered. Please note that the policy defines conditioning as exercise, performed outside of practice sessions, that directly contributes towards the Insured Person's ability to participate as a player on an athletic team in a Qualifying Intercollegiate Sport. The exercise must take place at the Participating Institution's athletic facilities or another facility specifically authorized by the Participating Institution.

Q: Are competitions against NAIA Institutions covered?

A: It depends on the specific circumstances. As long as the sport meets the definition of Qualifying Intercollegiate Sport (see below) and the scheduled competition is authorized by, organized by, or directly supervised by an official representative of the institution, it will be covered. One potential exception is the policy does not cover activities that are not directly a part of the varsity sport program such as camps, clinics, or other events that are hosted by outside organizations. Therefore, an activity such as competing in an NAIA tournament that is not part of your institution's schedule of events for the season would not be covered.

Q: Are cheerleaders, mascots, and student coaches, managers, and trainers covered?

A: Student coaches, student managers, and student trainers are covered for those activities directly associated with the covered activities of a Qualifying Intercollegiate Sports team as long as the activities are under the direct supervision of an official representative of the Participating Institution.

Cheerleaders and mascots are covered for activities performed as part of the cheer unit for a Qualifying Intercollegiate Sport team competition scheduled by the Participating Institution. They are also covered for practice sessions in preparation for cheering at games and pep rallies. Cheerleaders are not covered while practicing for or participating in camps, clinics, or cheerleading competitions. Cheerleading activities must be authorized by, organized by, and directly supervised by a safety-certified official coach or advisor (who is not an undergraduate student). Please refer to the NCAA website for more detailed information regarding cheerleading coverage under the catastrophic policy.

Q: *Are cheerleader camp activities considered practices under the policy?*

A: No, the NCAA policy does not cover any activities for cheerleaders that are not directly associated with the activities of a Qualifying Intercollegiate Sport team, such as camps, clinics, national competitions, fund-raisers, and alumni events. We recommend you check with your camp organizer to find out if they provide accident medical or catastrophic coverage for camp participants.

Q: *Is a student-athlete covered if it is determined that the student-athlete suffers from a serious heart or other medical condition?*

A: The NCAA Catastrophic policy is designed to provide benefits for Covered Accidents, not disease or illness, unless such is a direct result of a Covered Accident. With respect to cardiovascular issues specifically, the policy is extended to cover a cardiovascular accident or stroke, or other similar traumatic event caused by exertion while participating in a Covered Event.

The NCAA policy also includes a provision that eliminates coverage if an institution requires a student-athlete to sign a waiver relieving the institution of liability based on a medical condition. The best rule of thumb to keep in mind is that if your institution is going to require someone to sign a waiver because you know the individual is at increased risk of catastrophic injury based on a doctor's warning, your institution, in effect, is also requiring the student-athlete to give up coverage under the catastrophic policy. If a completely unrelated injury were to occur, this provision would not come into play. But if the injury is related to the condition for which you had the individual sign a waiver, it is likely the catastrophic coverage will not apply.

Q: *Please explain coverage for Home Health Care, Private Duty Nursing, and Custodial Care.*

A: The policy provides up to \$100,000 per calendar year for Custodial Care, Home Health Care, or the combination of the two. It also provides up to \$250,000 per calendar year for Private Duty Nursing. The maximum per calendar year payable for all three of these benefits is \$250,000. While Home Health Care and Private Duty Nursing services must be provided by health-care professionals, Custodial Care is a service that can be provided safely by a person without medical skills in order to help the injured person with daily living activities that he or she cannot do without assistance following the injury. In all cases, the services must be deemed Medically Necessary by a physician.

Q: *How do recovery provisions and/or subrogation apply under the terms of the Catastrophic policy?*

A: The right to recover all or part of a payment made under the terms of the policy is transferred to the insurer. The Insured Person is to do nothing to impair those rights. At the insurer's request, the Insured Person will bring legal action or assist the insurer in enforcing those rights.

Any amount recovered by the Insured Person as a result of a Covered Accident and for benefits also payable under the NCAA catastrophic policy will be used to reduce payments otherwise due the Insured Person. This provision is designed to prevent an injured person from recovering twice for the same expense. The insurer agrees not to seek subrogation against the NCAA or a Participating Institution.

Q: *What information do I need to report a claim?*

A: To begin the process, you need only provide the basics: 1) the name of your institution and contact person there, 2) the name of the injured person, 3) the sport he or she was playing at the time of injury, 4) the type of injury, and 5) the date of injury. Other information will be requested in the course of managing the claim, but only basic information is needed in order to set up the claim file to begin working with the institution. Institutions will work directly with Mutual of Omaha throughout the claims process.

Q: *Must an Insured Person use a doctor provided by the insurer?*

A: No. Insured Persons are free to utilize the services of a doctor of their choice for Medically Necessary care and treatment. The doctor must be duly licensed and provide services or treatment within the scope of that license.

Q: *What is meant by Medically Necessary?*

A: Medically Necessary is a defined term in the policy. To summarize, medically necessary means a service or supply that is ordered, prescribed, or rendered by a doctor or hospital that is provided for diagnosis or treatment, appropriate and consistent with the symptoms, provided in accordance with generally accepted professional standards, and the most appropriate supply or level that can be provided on a cost effective basis.

In the case of Hospital or Extended Care Facility confinement, Home Health Care treatment, Private Duty Nursing, or Custodial Care, the length of confinement or treatment and the services or supplies furnished by the Hospital or Extended Care Facility, Home Health Care, Private Duty Nursing, or Custodial Care plan will be Medically Necessary only if it is reasonably determined by the insurance company (Mutual of Omaha) that they are related to the care or treatment of the patient's condition. The services or supplies must not be experimental or investigational in nature. The fact that a doctor prescribes it or recommends it, does not, of itself, make the service or supply Medically Necessary.

Q: Are male practice players on a female varsity team eligible for coverage under the NCAA Catastrophic Injury Insurance Program?

A: NCAA rules and regulations allow for male athletes to be included on the squad list for a female varsity team. As such, it is possible that they meet the requirements of "player" as used in the NCAA catastrophic injury insurance program. These practice "players" must (a) meet the same Institution requirements as all other members of the varsity team (b) meet all NCAA requirements, and (c) have their names on file and be included on the squad list submitted by their respective Institution. Thus, male practice players whose names are recorded/submitted as part of the squad list for a women's varsity team prior to the date of any accident or injury would be subject to coverage under the NCAA catastrophic injury insurance program. Anyone who did not meet those requirements and was not on file prior to the date of the accident or injury, would not be considered for coverage under the catastrophic injury program."

Q: If I have a general question about the policy or wish to report a claim, where do I direct it?

A: All questions concerning the policy may be directed to the program administrator, American Specialty Insurance & Risk Services, Inc. Please contact Jina Doyel or Nikki Hammond via email at jdoyel@americanspecialty.com and nhammond@americanspecialty.com, or by phone at 800/245-2744.

You should also contact American Specialty to report claims during regular business hours. The only exception to this is if there is an emergency situation in which you need to speak to a Mutual of Omaha representative immediately and it cannot wait for the next business day. In this case, you can utilize American Specialty's after-hours emergency system (dial 800/245-2744 and follow the "emergency" instructions) or utilize Mutual of Omaha's emergency pager (dial 402/231-5208 and follow the instructions).