TEXAS KIDS FIRST
Providing affordable insurance to Texas Schools and school-age children

Student Athletics & Activities Insurance Guide

Plans Endorsed By:

[Logos of various organizations]

[Images of children in a classroom and children playing sports]
Table of Contents

General Information ........................................ 2

Student Accident Insurance Tips.................... 3

Texas Kids First Provider Network ..................6

Dear Parent Letter ..........................................10

Parent Letter with Claim Form.........................11
General Information

Your school district has purchased a supplemental accident insurance policy. The policy does not provide or replace individual, family, or group healthcare insurance coverage. The district policy is accident only, not sickness and illness. All policies have limits of how much they will and will not pay. This policy is no different. The limited accident only policy may not cover all medical payments. Any bills not paid by the policy will be the parent and/or guardian’s responsibility.

The supplemental accident policy pays after the student’s personal insurance policy. If the student does not have personal insurance, then this policy pays as primary insurance. The district policy always pays primary to CHIP, Medicaid, and CHAMPUS.

Check your policy to determine whether it covers all students participating in all school-sponsored non-athletic and athletic activities or only those students participating in or playing UIL-sponsored athletics and activities. For a complete list of UIL-sponsored athletics and activities, please visit: [http://www.uil.utexas.edu/policy/constitution/index.html](http://www.uil.utexas.edu/policy/constitution/index.html) (Section 380).

The underwriting companies for Texas Kids First are: Fidelity Security Life Insurance Company (FSLIC), Unified Life Insurance Company (ULIC), and Universal Fidelity Life Insurance Company (UFLIC). Universal Fidelity Life Insurance Company administers the Texas Kids First student accident program. UFLIC is the claim administrator and premium processor.

All completed and signed claim forms should be sent to the following address:

[Name of Insurance Company (FSLIC or ULIC or UFLIC)]
c/o Universal Fidelity Life Insurance Company
P.O. Box 304
Duncan, OK  73534-0304
Fax: 580-252-3449
Please call 1-800-366-8354 for all claim inquiries.

Texas Kids First has the largest referral network of providers in the State of Texas. Providers that are members of the TKF Network have agreed to accept the limited benefits amounts for covered services outlined in the plans offered by Texas Kids First as payment in full or if a benefit has been depleted, the provider agrees not to charge the parent/guardian any more than the amount that the student benefit plan would have paid.

We encourage the district to direct students with no insurance (personal, Medicaid, or other medical insurance) to providers on our network (parents/district must notify provider or facility that child has Medicaid). Students who have insurance (personal or any other medical insurance) should be directed to providers on each respective insurance plan’s network. See Page 6 for more information about the Texas Kids First Network and how to access the Provider Directory on our website: [www.texaskidsfirst.com](http://www.texaskidsfirst.com)

Texas Kids First offers an individual accident policy for parents wanting to purchase additional accident coverage for their children. There are several options available to choose from and each option is explained and outlined on our website. The individual accident policy is a limited benefit policy and has a one-year renewable term. The parent has a 30-day right to review the policy and if the parent is unsatisfied for any reason, the policy may be returned to our office and any premium paid will be refunded.
Student Accident Insurance Tips

1. The District insurance is accident only, not sickness and illness. Infections and illnesses are not accidents or injuries, and therefore, they are not covered.

2. **Never** tell a parent or guardian that the District insurance will pay for everything. The District policy has limited benefits and it may not pay for all medical services. It is imperative that parents understand this fact about the district policy.

3. Regardless of whether the student has insurance or not, treatment by a licensed doctor must occur within 90 days from the date of the injury.

4. Regardless of whether the student has insurance or not, filing of a fully completed and signed claim form by the district and parent/guardian must occur within 90 days from the date of the injury by the parent/guardian.

5. Regardless of whether the student has insurance or not, filing of all bills for provider services must occur within 90 days from the date of service. It is the parent/guardian’s responsibility to follow-up with each provider to make certain bills are submitted on time.

6. The District, as the policyholder, must control the distribution of claim forms and start the processing of the claim for each injury.

7. School Official supervising activity when student was injured or athletic trainer must complete and sign Section 1 of the Claim Form. A brief, detailed description of the accident (including time, place, and body part injured) **MUST** be provided. *(Good Example: At 3:45 pm on the football practice field, the student was tackled. He fell and landed on his left shoulder, dislocating it. Not-so-Good Example: After practice, the student complained of pain and discomfort in his left shoulder. This example will probably result in the claim being denied since there is no specific incident or point of contact that caused the pain and discomfort other than practice.)*

8. Parent/Guardian must complete and sign Section 2 of the Claim Form.

9. If the student has insurance (personal or other medical insurance), then the parent/guardian must comply with the provisions of the student’s insurance plan (use personal insurance provider network).
   - File all bills with the student’s insurance first.
   - Submit copies of all Explanation of Benefits (EOBs) to the claim administrator as they receive them. This form outlines the amounts paid by the student’s insurance and allows the claims administrator to determine how much the district policy will pay.
   - Leave a **copy** of a completed district claim form with each provider.
   - Request each provider to submit paper copies of all UB92 or HCFA 1500 forms for their services to the district’s claim administrator (address indicated on claim form). These forms contain specific codes that the insurance company needs to determine the benefits payable under the District policy.
   - Keep copies and records of everything submitted.
10. If the student has no insurance (personal or Medicaid or other medical insurance), then
   o Leave a **copy** of a completed district claim form with each provider.
   o Please notify provider or facility if child has Medicaid.
   o Request each provider to submit paper copies of all UB92 or HCFA 1500 forms for their services to the district’s claim administrator (address indicated on claim form). These forms contain specific codes that the insurance company needs to determine the benefits payable under the District policy.
   o Parent/guardian must follow-up with each provider to make certain bills are submitted on time.
   o Keep copies and records of everything submitted.

11. Be sure to indicate on all information submitted to the claim administrator: 1) the name of school district, 2) the name of the school, 3) the name of the injured student, and 4) the date of the accident.

12. A completed and signed district claim form (by the parent/guardian and District official) must be sent to:

   Fidelity Security Life Insurance Company or Unified Life Insurance Company
   c/o Universal Fidelity Life Insurance Company
   P.O. Box 304
   Duncan, OK  73534-0304

   Or

   A Claim Form may be scanned and sent electronically to SAclaims@uflic.com to expedite payment of the claim as bills are submitted. **Keep in mind that failure to submit a completed and signed claim form is the most frequent reason why claim payments are delayed. DO NOT RELY on provider or facility to submit the claim form.**

13. An injured student must obtain a medical release prior to participating in an activity after sustaining an injury. Make certain the student receives a medical release prior to returning to practice or play or a subsequent injury will NOT be covered.

14. Chronic injuries (stress fractures, lumbago, shin splints, tendonitis) are becoming more prominent with young athletes as a result of year round sports participation. We have developed a specific benefit to provide coverage for these types of injuries as well as strains. The “Expanded Medical Benefit” pays up to $350 for services to treat a chronic injury or strain that occurs during the policy period if the student athlete has been treatment free for 120 days from the date of the original injury or a chronic injury that is treatment free for 120 days prior to the effective date of the policy.

15. Communicate regularly with your agent and the claims administrator. Create a student insurance file and keep copies of all claim forms, contact names, phones numbers and fax numbers.

16. If a problem arises, contact your agent or the claims administrator as quickly as possible. Do not let a claim problem fester too long. The policy has specific requirements for submitting information and failure to meet those requirements could result in a claim being denied.
17. Parents frequently become upset because they believe the district should handle filing of the claim since it is the district policy. We have included a “Dear Parent Letter” on page 10 that outlines the claim process and explains that the parent/guardian is ultimately responsible for submitting forms and following up with providers. Send the “Dear Parent Letter” to all parents at the start of the school year or prior to the beginning of each sport. Many parents are uninsured and are not aware that they may owe a balance after the district insurance pays because the district policy has limited benefits.

18. Let parents know that Texas Kids First offers an individual accident policy that can be purchased on-line at our website: www.texaskidsfirst.com. The premium is affordable and the plan provides annual coverage for a single payment.
The Texas Kids First Provider Network is a referral network comprised of dedicated physicians and hospital administrators that desire to serve the needs of student athletes in the State of Texas. They are genuinely interested in helping parents of injured students obtain the best medical care possible while leaving the parent with little, or no, out-of-pocket medical expenses.

The Texas Kids First Provider Network is established to assist injured students find providers in their area that have agreed to accept the limited benefits payable for covered services under plans offered by Texas Kids First as payment in full. If a benefit of the plan is depleted, the provider has agreed to bill the parent or guardian for the amount the student benefit would have paid. For plans offered by Texas Kids First that have a deductible, the student’s parent or guardian will be responsible for payment of the deductible at the time of service.

Each district receives a User ID and Password with their student accident policy to access the provider directory on our website or to print a copy of a claim form. As the policyholder, the district must control the distribution of claim forms and start the processing of a claim for each injury. A district representative or athletic trainer is responsible for completing Section 1 of the claim form before providing the claim form to the parent or guardian to complete, sign, and submit.

The district needs to identify students without insurance and direct them to providers on the Texas Kids First Provider Network. Parents with students who have insurance (personal or other medical coverage) must comply with the provisions of the student’s insurance. Parents with students who have Medicaid insurance must notify provider or facility. Prior to making an appointment, please check with each provider to confirm it is currently contracted. Hospitals and physician organizations do change ownership and the new ownership may fail to notify our office of its intent to terminate the agreement. As a result, the provider could still be listed on the Provider Directory.

The Texas Kids First Provider Network has grown to be one of the largest referral networks in the State of Texas. Agents, athletic trainers, and district representatives combine their efforts to identify medical providers and facilities in each community that have an interest in helping parents reduce their medical expenses for injuries resulting directly from school or UIL activities.

If your athletic trainer is aware of any providers in your community that are interested in joining the Texas Kids First Provider Network, please contact your Texas Kids First agent or call the following:

Texas Kids First Provider Network
1-800-366-8354

We will send the provider a Texas Kids First Provider Agreement. After an agreement is signed and submitted to our office, we will include the contact information in the Provider Directory on our website.
Frequently Asked Questions

**District Accident Insurance**

Is the District required to have insurance on students participating in school-sponsored athletic and non-athletic activities?

School districts are not required to purchase insurance for students.

Does the District insurance pay for everything?

No. The District policy has limited benefits and it may not cover all medical services. The District policy pays for Covered Charges incurred within 52 weeks from the date of an Injury and filed within 90 days from the date of service. Any charges not paid by insurance are the responsibility of the parent/guardian. It is imperative that parents understand this fact about the District policy.

What does Athletics & Activities insurance cover?

It provides coverage for all UIL sanctioned athletics and academic activities including school-sponsored and supervised vocational classes, ROTC, FFA, day-only educational field trips, FHA, physical education classes and intramurals for grades 7-12, day-only summer camps organized by and held on the premises of the district, and student managers, student trainers, cheerleaders, drill teams and pep squads for UIL sanctioned athletics and activities. For a list of all UIL activities, visit the following website: [http://www.uil.utexas.edu/policy/constitution/index.html](http://www.uil.utexas.edu/policy/constitution/index.html) (Section 380).

What does All School Activities with Athletics cover?

It provides coverage for all school-sponsored and supervised activities (athletic and non-athletic) in addition to Athletics & Activities coverage mentioned above.

What grades are covered by the District insurance?

Athletics & Activities insurance covers Grades 7 to 12.

All School Activities and Athletics insurance cover all students in the district from Grades PK to 12.

Is the District insurance primary or excess?

The District insurance is excess or pays after all other valid insurance plans including ERISA or self-funded policies except CHIP, CHAMPU, Medicaid, or other government insurance plan. If a student has personal insurance, then the District insurance will pay after the primary insurance of the student. If a student has no insurance or Medicaid or CHIP or other government insurance plan, then the District insurance will pay first.

Is there a deductible for the District Insurance?

A few districts have elected to purchase insurance with deductibles. If the District has a policy with a deductible ($100, $250, $500), then the parent/guardian is responsible for paying the medical expenses to satisfy the deductible before the District policy pays its benefits.
How soon must medical treatment occur after an accident?

Medical treatment by a licensed doctor must occur within 90 days of the date of the injury.

How long after an accident will medical treatments be covered?

Covered charges incurred for services within 52 weeks of the date of the injury will be covered if submitted to the claim administrator within 90 days of the date of each service.

Who is responsible for filing the student claim form for an injury?

The parent/guardian of the injured student is responsible for filing the claim form. However, it is the District’s responsibility to start the claim filing process by completing and signing Section 1 of the claim form. The parent/guardian is responsible for completing and signing Section 2 of the claim form and submitting it to the claim administrator. We highly recommend that the District keep a copy of each claim form submitted for a student injury.

How long does the parent/guardian have to file the claim form?

The parent/guardian has 90 days from the date of injury to file a claim form with the claim administrator. Failure to file a claim form within the 90 days will result in the claim being denied.

What procedures does the District follow to file a claim when the student has insurance?

1. District completes and signs Section 1 of the district claim form.
2. District makes a copy of the claim form.
3. Parent/guardian completes and signs Section 2 of the district claim form.
4. Advise parents/guardians to file the claim form with the district claims administrator and to file a claim with the student’s insurance carrier. Parent/guardian must follow provisions of the student’s insurance (use personal insurance provider network, use Medicaid provider network, etc.).
5. Parent/guardian should leave a copy of the district claim form with each provider.
6. Parent/guardian should request each provider to submit copies of UB92 and HCFA 1500 forms to the District’s claim administrator.
7. As parents/guardians receive Explanation of Benefits forms (EOBs) from the student’s insurance plan for services, they should submit copies of the EOBs to the District’s claim administrator.

What procedures does the District follow to file a claim when the student has no insurance?

1. District completes and signs Section 1 of the District claim form.
2. District makes a copy of the claim form.
3. Parent/guardian completes and signs Section 2 of the district claim form.
4. Advise parents/guardians to file the claim form with the District’s claims administrator.
5. Direct parents/guardians of students without insurance (except Medicaid) to a provider on our Texas Kids First Network. Login to the Provider Directory on our website www.texaskidsfirst.com. Using your UserID and Password (provided with the District Policy), access the directory to find providers in your area that accept the limited benefit amounts payable for covered services as payment in full.
6. Parent/Guardian must notify provider or facility if child has Medicaid (Medicaid plans have a network).
7. Parent/guardian should leave a copy of the district claim form with each provider.
8. Parent/guardian should request each provider to submit copies of UB92 and HCFA 1500 forms to the District’s claim administrator.
9. Parent/guardian must follow-up with each provider to make certain bills are submitted to the District’s claim administrator within 90 days of the date of service.
Frequently Asked Questions (continued)

**Individual Accident Insurance**

**What does the Individual Accident Insurance cover?**

It is a limited benefit plan that covers accidents only, not sickness or illness. There are 5 plan options available for purchase on our website [www.texaskidsfirst.com](http://www.texaskidsfirst.com). There are 2 At-School options (with and without athletics), 2 24-Hour options (with and without athletics), and Varsity Football.

At-School options cover school-sponsored and supervised activities (except Varsity Football) during normal school hours. The 24-Hour options cover school-sponsored and supervised activities (except Varsity Football) as well as non school activities around the clock.

**Do the Individual Accident plans have a deductible?**

The At-School and 24-Hour plans do not have a deductible. The Varsity Football plan has a $250 deductible.

**Is there an enrollment period?**

No, the individual plans are available for purchase anytime during the school year. Coverage is renewable annually. Coverage becomes effective on the day after receipt of premium by the insurance company.

The parent/guardian has a 30-day right to review the policy. If they are not satisfied with the Policy for any reason, they may return it to us within 30 days of receipt requesting a refund. Any premium paid will be refunded. The Policy will be void from the beginning as if no Policy was issued.
Dear Parent/Guardian:

The insurance provided by the school district is supplemental and not intended to provide or replace individual, family, or group healthcare insurance coverage. The District insurance is accident only, not sickness and illness. All insurance policies have limits of how much they will and will not pay. This policy is no different.

The District has a limited accident only benefit policy and it may not cover all medical payments for your child. The District policy pays for Covered Charges incurred within 52 weeks from the date of an Injury and filed within 90 days from the date of service. Any bills not paid by insurance will be the parent and/or guardian’s responsibility.

Regardless of whether your student has insurance or not, treatment by a licensed doctor must occur within 90 days from the date of the injury. Regardless of whether your student has insurance or not, filing of a fully completed and signed claim form by the district and parent/guardian must occur within 90 days from the date of the injury by the parent/guardian. Regardless of whether your student has insurance or not, filing of all bills for provider services must occur within 90 days from the date of service. It is the parent/guardian’s responsibility to follow-up with each provider to make certain bills are submitted on time.

- If your student has insurance (personal or other medical coverage), then you must comply with the provisions of the insurance.
  - File all bills with your student’s insurance first.
  - Submit copies of all Explanation of Benefits (EOBs) to the district’s claim administrator as you receive them.
  - Leave a copy of a completed district claim form with each provider.
- If your student has no insurance (personal or Medicaid or other medical coverage), then
  - Parent/guardian must notify provider or facility if child has Medicaid.
  - Leave a copy of a completed district claim form with each provider.
  - Request each provider to submit paper copies of all UB92 or HCFA 1500 forms for their services to the district’s claim administrator (address indicated on claim form). Parent/guardian must follow-up with each provider to make certain bills are submitted on time.

Be sure to indicate on all information submitted to the claim administrator: 1) the name of school district, 2) the name of the school, 3) the name of the injured student, and 4) the date of the accident.

- A completed and signed district claim form (by the parent/guardian and District official) must be sent to:

  Universal Fidelity Life Insurance Company
  P.O. Box 304
  Duncan, OK  73534-0304

  Or

Claim Form may be scanned and sent electronically to SAdclaims@uflic.com to expedite payment of the claim as bills are submitted. Keep in mind that failure to submit a completed and signed claim form is the most frequent reason why claim payments are delayed.

We appreciate your business and if you have any questions or concerns, please call 1-800-366-8354.
CLAIM FORM INFORMATION

Name of Student/Athlete: _______________________________________________

Dear Parent/Guardian:

Please complete all of the information on the accident insurance claim form requested in Section 2 - Parent/Guardian Statement (To be completed by Parent or Guardian), sign and date the claim form, and then follow the claim filing instructions on the back of the form. Make copies of the completed claim form and file the original with the insurance company. Provide copies of the claim form to all providers and follow-up with each provider to make certain bills are submitted to the insurance company within 90 days from the date of service. The District policy pays for Covered Charges incurred within 52 weeks from the date of an Injury and filed within 90 days from the date of service.

Failure to complete and return any requested material to the insurance company can result in non-payment of any or all medical bills associated with the accident by the insurance company. Remember, you are responsible for the payment of all medical bills and the insurance company is not obligated to pay for any services rendered if you fail to meet the terms outlined in the District policy. In addition, the District is not responsible for the payment of any medical bills in connection with an accident.

Please remember you are responsible for filing your claim form and submitting all additional medical information pertaining to the accident. A school representative will only complete Section 1 – Notice of Injury (To be completed by School Official) and give the claim form to you to finish completing, signing, and submitting to the insurance company. This is noted by the “Delivery or Mailed Date” notice at the bottom of this letter. The school will make two copies of this letter. One copy is for you and the school will keep one copy for its records.

Thank you for your time and consideration in this matter.

Delivery or Mailed Date: _____________________________________________

Parent/Guardian Signature: ___________________________________________

PLEASE KEEP A COPY FOR YOUR RECORDS