



Introduction to
HeadStrong Concussion Insurance Program
Indiana High School Athletic Association



For program year: 2018-2019

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The IHSAA has secured the HeadStrong Concussion Insurance Program for the 2018-2019 School Year

Premium: \$1.50 per Participant

Coverage Period: October 1, 2018—October 1, 2019

Eligible Person(s):

All athletes, grades 9-12, participating in a Covered Activity.

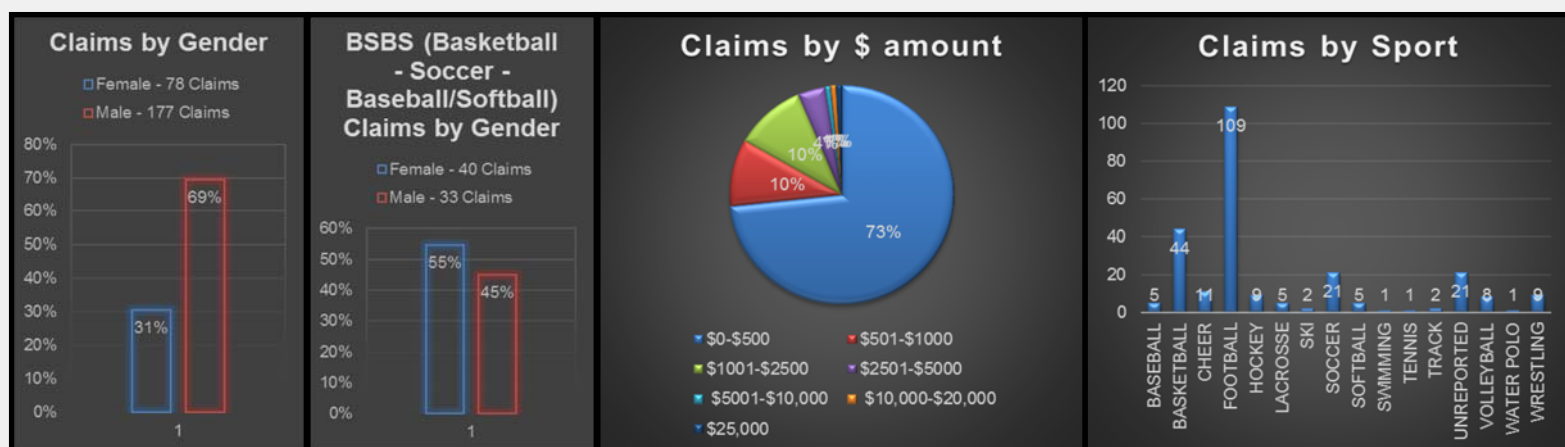
Covered Activities:

Participating in practice or play of interscholastic sports under the jurisdiction of the IHSAA.

Interscholastic Sports and Activities Include:

Baseball, Basketball, Cross Country, Football, Golf, Gymnastics, Soccer, Softball, Swimming & Diving, Tennis, Track & Field, Volleyball and Wrestling. Includes traveling directly to and from a scheduled event as a representative of the school while traveling in transportation sponsored by the school.

Summary of HeadStrong Program 2015-2016: 242,000 participants



HeadStrong 2017-2018: Projecting 590,000 participants:

6 States with 100% participation: Arizona, Michigan, Minnesota, Montana, Wisconsin and Wyoming

2 States with partial participation: California and Missouri

HeadStrong 2018-2019: Projecting 650,000 participants:

7 States with 100% participation: Arizona, Michigan, Minnesota, Montana, Iowa, Wisconsin and Wyoming.

3 States with partial participation: California, Missouri, Illinois.

Growth in HeadStrong program participants increases long-term stability and participant cost.

HeadStrong Program Resources: Important Documents

To file a claim:

1. Incident Report

- Must be signed by school administrator
 - Ideally a person present at time of accident
- When possible, submit prior to treatment from provider/specialist

2. Other Insurance Questionnaire

- Submit along with Incident Report
- Ensures prompt claims payment
- Minimizes paperwork for student/family
 - Submit **even if**:
 - No existing primary insurance
 - primary insurance denies or does not cover provider

The image shows two overlapping forms from K&K Insurance. The top form is the 'OTHER INSURANCE QUESTIONNAIRE' and the bottom form is the 'K&K INCIDENT REPORT'. Both forms are for the Wisconsin Interscholastic Athletic Association (WIAA) Concussion Coverage. The incident report form includes sections for 'NATURE OF INJURY', 'TIME & PLACE OF INCIDENT', 'HAPPENED TO', 'FUNCTION', 'APPARENT INJURY OR DAMAGE', 'OCCASION', 'INCIDENT DESCRIPTION', 'OTHER SCHOOL INSURANCE', 'INSURED', and 'INSURED REPRESENTATIVE'. It also includes a 'COMPLETE ALL SECTIONS AND FAX OR MAIL IMMEDIATELY TO:' section with contact information for K&K Insurance Group, Inc.

Accompanying information:

1. Concussion Insurance Program Guide

- Single-page
- Customized to IHSAA

2. Dear Provider Letter

- Printed/signed on School/District/IHSAA letterhead
- Advises provider's billing department
- Simplify process for all parties to ensure proper billing and payment.

3. Frequently Asked Questions

- Assist student/family with using the insurance
- Will update and customize to be IHSAA-specific
- Minimize school administrator disruptions

Headstrong Concussion Insurance - Frequently asked questions:

Headstrong is an excess accident plan. What does that mean?
The insurance will pay for covered charges after the primary insurance has been exhausted. The insurance will also pay for any covered charges the primary insurance will not cover (including

This document provides detailed information about the Headstrong Concussion Insurance Program. It includes the IHSAA logo, contact information for the Third Party Administrator (TPA), K&K Insurance, and a list of covered activities and benefits. It also includes a 'HOW TO SUBMIT A CLAIM UNDER THE CONCUSSION PROGRAM' section with seven steps. The document is signed by Justin Vandewynke, the Third Party Administrator, and includes a 'PRIMARY CONTACT' section with contact information for Justin Vandewynke.



Concussion Insurance Program Guide

Headstrong Concussion Insurance Policy Information

Indiana High School Athletic Association

Broker: Dissinger Reed

Third Party Administrator (TPA): K&K Insurance

Insurance Carrier: Axis Insurance Company – AM Best Rated A+XV

- **Policy #:** XXXXXXXXXXXXX
- **Coverage Period:** October 1, 2018 – October 1, 2019
- **Deductible:** \$0 per claim
- **Eligible Person:** All athletes participating in a Covered Activity
- **Covered Activities:** Participating in practice or play of sports governed and/or sponsored by the IHSAA
- \$25,000 per injury medical maximum
- 1-year benefit period (Benefits will be payable for 1 year from the injury date)
- Usual and Customary 100%
- Accidental Death & Dismemberment \$5,000
- Accidental Death and Dismemberment Aggregate \$250,000

The HeadStrong Concussion Insurance Program was specifically developed to insure student athletes from the high cost of concussion treatment and neurological follow up.

The student athlete has 'first dollar' coverage (zero deductible) for concussion assessment and treatment.

Coverage is secondary/excess to any other valid and collectable insurance but will become the primary payor, if no other insurance is available.

Program Highlights Include:

- \$0 deductible and no Co-pays
 - Tele-med Services, when needed
 - No restrictions on specific doctors
 - No referrals needed for treatment
 - No internal limits
 - No specific procedure maximums
 - Neurological follow up care
- When medically necessary and billed at U&C.

Contact for Claims:



kk.newpaclaims@kandkinsurance.com



Fax: (260) 459-5915



Phone: (800) 237-2917

K&K Insurance/Specialty Benefits
1712 Magnavox Way
Ft. Wayne, IN 46804

Please submit the completed and signed claim form along with itemized bills and EOB's from the primary insurance carrier. The more information you can provide upfront, the better. Claims payments are expedited with CLEAN submissions allowing us to pay you providers quickly.

Third Party Administrator

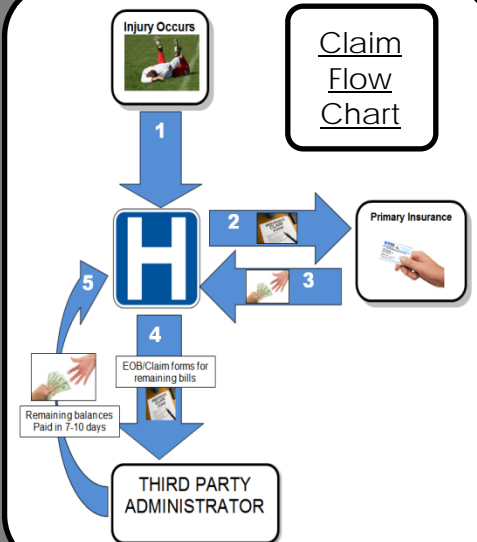


www.kandkinsurance.com

HOW TO SUBMIT A CLAIM UNDER THE CONCUSSION PROGRAM

- 1) Submit the incident report within 365 days of the injury.
- 2) Make certain that the incident report is completed in its entirety, including the policy number (XXXXXXXXXXXXXXXXXX), with accurate and detailed injury information and how the accident happened.
- 3) The incident report MUST BE SIGNED by a representative of the school. INCIDENT REPORTS WHICH ARE NOT SIGNED, WILL DELAY THE CLAIM.
- 4) Physician billings on CMS1500 forms and hospital/facility billings on UB04 forms would be preferred as these forms contain all the necessary coding required to process a claim. See bullets #5 & 6 for additional instruction regarding bills.
- 5) If the injured participant has primary insurance, each bill should be submitted with the primary insurance Explanation of Benefits or denial.
- 6) If the injured participant has primary insurance, all providers should be informed of the primary insurance information so they are billed first, and the K&K information for the concussion program insurance billed second.
- 7) When the injured participant does not have primary insurance, we have agreements through PPO networks that allow many bills to be reduced with contractual discounts. We encourage injured participants NOT to pay claims in advance of submitting them to us. so these discounts can be used.

Claim Flow Chart



PRIMARY CONTACT

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