



Soccer Accident Insurance (SAI)-Overview

for the American Youth Soccer Organization

**This document is designed to give you an overview of the insurance coverage.*



EXCESS POLICY: Injuries occurring from JULY 1, 2012 for members registered with the AYSO National Office.

KEEP THIS POLICY OVERVIEW – download the full version from www.ayso.org.

Excess Coverage requires the following and is subject to all policy terms, conditions and exclusions:

- \$50,000 maximum per accident to a covered person(s) meeting all policy requirements;
- all claims **must** be filed within 90 days;
- each claim is subject to a \$200 deductible;
- first **medical** expense must be incurred within 90 days of covered accident;
- social security number, visa or green card **REQUIRED** on SAI claim form; and
- 52 week benefit period from date of the covered accident.
- Accident Medical Expense Benefits are only payable for usual and customary charges incurred after the deductible has been met;

FORMS: www.ayso.org - Parents tab and click on Insurance.	QUESTIONS: Email: insuranceclaims@ayso.org
---	--

COVERED PERSONS:

All AYSO **currently** registered* members [players, coaches, referees and other volunteers] are “Covered Persons” for accidental bodily injury while participating in the following covered activities:

- Team practice sessions, scheduled games, tournaments, or other AYSO sanctioned activities [meetings, banquets, fundraisers] provided they are under the direct supervision of an AYSO registered volunteer.
- Group travel of 5 or more participants directly, without interruption to or from such practice sessions, games, tournaments, or AYSO sanctioned activities, provided that players are traveling as a team and a licensed adult driver operates the vehicle.

**Registration requirements will be verified before any benefits are paid.*

MAXIMUM BENEFITS PAYABLE: <ul style="list-style-type: none"> • \$15,000 for Accidental Death & Dismemberment • \$10,000 for Dental Benefit • \$10,000 Orthopedic Benefit • \$1,000 Physical Therapy 	REMEMBER: <ul style="list-style-type: none"> • Each claim is subject to a \$200 deductible. • Claims MUST be filed within 90 days. • Each claim must contain a social security number, visa or green card for the claimant. • Subject to policy terms and conditions • If the registered member is covered by any other health care plan, all bills must be submitted to the other health plan first. • The providers should submit itemized bills (UB04 or CMS1500) directly to AYSO's insurance. 	THE CLAIMANT MUST: <ul style="list-style-type: none"> • Obtain an AYSO Soccer Accident Insurance (SAI) Claim form from: <ul style="list-style-type: none"> ○ www.ayso.org (Parent's tab) or ○ Regional Commissioner or ○ Safety Director • Secure the signatures from the AYSO Regional Commissioner and Safety Director. • It is the responsibility of the registered member to make a copy for his own records and then mail the claim form to the address included in the claim instructions. Please consider sending the packet Certified/Return Receipt though the US Postal Service.
---	---	---