

NEOASA PO Box 470472

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USASA Accident/Excess Medical Insurance Summary

Named Insured: United States Amateur Soccer Association

& it's affiliated member Leagues & Teams

Coverage: Accident/Excess Medical Coverage

Carrier: Hartford Insurance Company

Policy Term: 9/01/02 to 9/01/03

Benefit Period: 52 Weeks

Eligibility: All registered Participants

Benefits:

\$5,000.00 Maximum Medical Benefit per Claim

\$400.00 Deductible per Claim

Schedule Benefits:

Hospital Room & Board Expense (In-Patient) \$150.00 Maximum per Day

Hospital Miscellaneous (In-Patient) \$1,000.00 Maximum per Admission

Hospital Emergency Care \$350.00 Maximum per Injury Physician Expense (Non-Surgical) \$35.00 Maximum per Visit

\$35.00 Maximum per Visit (Limit 6 Visits per Injury)

Surgeon Expense (In or Out Patient) 50% of UCR amount Anesthesiologist 25% of Surgeon's UCR

Physiotherapy (Outpatient) \$25.00 Maximum per Visit, 20 Visits

Maximum

X-Rays (In or Outpatient including MRI, Cat

Scans, Diagnostic Imaging, or similar procedure) \$150.00 Maximum per Injury

Dental Expense (Sound, Natural Teeth Only) \$500.00 Maximum per Injury

Ambulance Expense \$100.00 Maximum per Injury

Orthopedic appliances or braces as a result of

covered injury, not for prevention of injury \$400.00 Maximum per Injury

Pre-existing Coverage Limitation

A time period of six (6) months whereby a previous condition must be treatment free is the criteria of a condition to be considered a "new" injury. Any chronic, pre-existing condition for which treatment has been recommended or received six (6) months prior to the effective date of the insured's enrollment shall be covered to a maximum of \$1000.00.