



**Protecting Our Future**

## **MHSAA Concussion Care Gap Insurance Covers ALL Members**

**Unparalleled Value:** Did you know, MHSAA membership is entirely free of expense to member junior high/middle schools and high schools? There are **no membership dues** and **no MHSAA postseason tournament entry fees**. Among the no-cost-to-schools benefits of MHSAA membership is the Catastrophic Accident Medical Insurance Policy which pays up to \$500,000 for medical expenses left unpaid by other insurance after a deductible of \$25,000 per claim in paid medical expenses has been met. All students enrolled in grades 6 through 12 at MHSAA member schools who are eligible under MHSAA rules and participating in practices or competition in sports under the MHSAA's jurisdiction are covered by this policy for injuries related to their athletic participation.

**The MHSAA also provides athletic participants** at each MHSAA member junior high/middle school and high school **with additional insurance that is intended to pay accident medical expense benefits resulting from a suspected concussion**. The injury must be sustained while the athlete is participating in an MHSAA covered activity. Policy limit is \$25,000 for each accident. Covered students, sports and situations follow the catastrophic accident medical insurance.

**Covering the Gap:** The Concussion Care program intends to assure that **all eligible student-athletes in MHSAA member schools** in grades 6 through 12, male and female, in all levels of all sports under the jurisdiction of the MHSAA, **receive prompt and professional attention for head injury events even if the child is uninsured or under-insured**. Accident medical deductibles and co-pays left unpaid by other policies are reimbursed under this program to the limits of the policy.

**Filing a Claim:** Forms and letters of explanation appear on the Health & Safety page of **MHSAA.com** under "**Concussion Insurance Benefits Information and Forms**." You may also scan the code at right to download the file to your mobile device. To file a claim please follow submit the following:



1. Completed and Signed "K & K Incident Report"
2. Completed and Signed "Other Insurance Questionnaire"
3. Itemized Bills
4. Explanation of Benefits from your Primary Insurance Provider

**For further information** regarding this outstanding service, please contact:

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