



## USA ROLLER SPORTS PARTICIPANT ACCIDENT PROGRAM

USARS will provide Participant / Accident Medical Insurance to **all members** participating in a USARS sanctioned activity as a benefit of membership or while practicing or training at a USARS charter location. The policy is written on an excess basis and is secondary to any primary medical insurance. Should the injured party not have primary medical insurance then the USARS policy becomes primary.

### **BENEFIT SCHEDULE**

Accident Medical Expense Benefit \$25,000

Accidental Death Benefit \$ 5,000

Dental Benefit (Maximum) \$ 250 per tooth

Deductible (Corridor) \$ 1,000

Benefit Period 26 weeks

- All limits apply on a per accident basis
- **The deductible is a Corridor deductible and cannot be satisfied by primary insurance**
- **Once the deductible is satisfied we can pay up to \$25,000 in medical expenses**

### **CLAIM PROCEDURES**

Should you be involved in an incident please complete the USARS accident report form (available on line [www.usarollersports.org](http://www.usarollersports.org)). After USARS receives your accident form and verifies membership, we will send you the insurance companies claim form and claim filing instructions.

**For questions regarding the USARS accident report form, please contact Brent Benson-[bbenson@usarollersports.org](mailto:bbenson@usarollersports.org).** Once you receive your claim form and claim filing instructions it will be your responsibility to file your claim.

Claim forms and Medical bills should be sent to A-G Administrators, P.O. Box 979, Valley Forge, PA 19482.

If you have any questions about your claim, you can reach A-G by phone at (610)-933-0800.