MOUNTAINEERS

West Virginia University Intercollegiate Athletics PO Box 0877 Morgantown, WV 26507-0877

MEMORANDUM

TO:	Parents/Guardians of Incoming Student-Athletes
FROM:	Randy Meador Coordinator of Athletic Training Services
SUBJ:	Athlete Insurance Information

Your son/daughter has become a participant on a varsity sports team at West Virginia University. As a part of the paperwork process, we request health insurance information. This request is made in an effort to speed up the billing and payment of athletically related sports injuries. The athletic department's athletic insurance is secondary and can only cover injuries that occur in practice or competition. The parent's personal insurance policy on your son or daughter is primary. With so many parents having managed care, and their son or daughter being out the service area, it may be helpful to let your managed health care provider know that your son or daughter is at West Virginia University and is competing in athletics. The balance not covered by this primary insurance will then be submitted to our insurance carrier.

Please complete the insurance information form labeled "Student Participation Form" and return it to us. Also, please attach a copy of the front and back of your insurance card to our insurance information form. Make sure that the address for your insurance carrier is listed on the insurance form.

If your son/daughter is not covered by a personal policy or your insurance – fill out the top portion of the student participation form <u>only</u> and sign the accompanying affidavit. (If you son/daughter is covered by your insurance, there is no need to sign the affidavit.)

As a reminder, if medical bills are received by you, we have not been billed and <u>have no knowledge of balances due</u>. So as to not adversely affect your credit rating, please forward copies of any bills and "Explanation of Benefits" (EOB) to us, so that no delays in payment occur. Thanks in advance for your cooperation.

Also, there is a description of the drug education/screening policy adopted by West Virginia University. The enclosed material is self-explanatory of the program. Please read, sign, and/or fill out the appropriate forms and return to me. If you have questions or concerns, please do not hesitate to write or call at (304) 293-2737. Thank you for your time.