

# Frequently Asked Question

As a benefit to our players MLS Next (AKA Player Development) has excess insurance coverage in place to cover remainders left unpaid by health coverage or to help cover medical costs for participants without access to a health insurance plan. We know that insurance can be confusing so below are Frequently Asked Questions (FAQs) for the Player Development excess coverage to assist you in the event of an injury.

**Q: Who is covered?**

A: Participants that are injured as a result of participating in a Player Development (MLS Next) Sanctioned activity.

**Q: What is a MLS Next Sanctioned Activity?**

A: A Player Development Sanctioned Activity is an activity where participants are registered, are fully compliant with MLS Next's regulations and participant's fees are paid.

**Q: How do I report an injury?**

A: You must complete and sign the Participant Claim Form available on the MLS Next website. Once completed, this form should be sent by email to [daclaims@fairlygroup.com](mailto:daclaims@fairlygroup.com) and [PlayerDevelopmentClaims@mlsplayerdevelopment.com](mailto:PlayerDevelopmentClaims@mlsplayerdevelopment.com). Injuries must be reported within 72 hours of the injury for coverage to be in effect. It is important that the injury can be traced back to the date of the Sanctioned Activity. If you miss the 72-hour deadline, please notify [PlayerDevelopmentClaims@mlsplayerdevelopment.com](mailto:PlayerDevelopmentClaims@mlsplayerdevelopment.com).

**Q: Who is the insurance carrier?**

A: The insurance carrier is Ace American Insurance Company.

**Q: Are there any limits for services?**

A: The policy has a \$25,000 limit, subject to 20 % coinsurance charged to the patient's family. There is a \$1,500 limit for physical therapy services.

**Q: Do I have a deductible or coinsurance/copay under the Player Development - MLS Next policy?**

A: There is a \$1,000 deductible which must be paid by the patient (or patient's family) first. Once the deductible is met a 20% patient coinsurance applies on the remaining covered amount.

**Q: My primary insurance coverage has co-insurance (patient responsibility), how does this insurance respond?**

A: This policy will supplement the unpaid remaining allowable charges/co-insurance once your deductible and this policy's deductible are met, by paying these up to the policy limit within the policy terms. You will pay 20 % coinsurance on the portion of the claim covered by this insurance.

**Q: If I have health or other insurance coverage, should I file a claim?**

A: If you have primary insurance, you MUST file a claim with that insurance as well. This policy is an excess/secondary accident medical policy and is designed as a supplement to your medical insurance or respond in the absence of such coverage.

**Q: Will filing a claim with my health insurance cause my policy premiums (the cost to buy insurance) to increase?**

A: Under the "Affordable Care Act" policy premiums are not based on the number of claims submitted but rather on your residence, age and quality of health (ex: smoker vs non-smoker).

**Q: If I do not have primary insurance, how will this insurance respond?**

A: If you do not have any other coverage this insurance will become primary and pay allowable charges up to the policy limits, subject to this policy's deductible and your co-insurance contribution of 20 %.

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**Q: How long to have to receive treatment?**

A: You must have initial treatment within 90 days of your injury for coverage to be in effect. There is a 52 week benefit period that begins at the date of your injury.

**Q: What do I need to do before I receive medical care?**

A: For non-emergent care please contact your health plan for a list of in-network providers in your area. If you do not have health insurance please contact Fairly Group at 800-530-4809 for a network provider in your area.

**Q: Do services require authorization or approval?**

A: If you do not have health insurance the following services require approval prior to service: surgeries, MRI's, CT Scans, durable medical equipment and physical therapy.

**Q: How can I avoid getting medical bills sent to me directly?**

A: If you have health insurance or any other coverage please supply all providers that treat you for a related injury with a copy of your health insurance and a copy of the "Player Development Claims Submission Form" available from your club or on the MLS Next website. If you do not have health insurance or any other coverage please supply a copy of the "Player Development Claims Submission Form" to all providers that treat you for an event related injury. This will allow the providers to bill the insurance directly and should prevent any bills/invoices from being sent to you directly.

**Q: How do I follow up on my claim status?**

A: For any questions about your claim, please contact HSR at 800-328-1114.

This FAQ document summarizes the policies and is an overview. Coverage is subject to the terms, conditions and exclusions of the policy. Should a discrepancy occur between this FAQ document and the actual terms, conditions and exclusions of the policy, the policy terms, conditions and exclusions will prevail.