



Excess Accident Medical Coverage Summary

Policyholder: The Metropolitan D.C. – Virginia Soccer Association
Insurance Carrier: Nationwide Life Insurance Company
Term of Coverage: January 1, 2021 – January 1, 2022
Eligibility: Participants, including volunteers and staff, performing their normal duties at a covered activity
Covered Activities: Participation in scheduled soccer games, team practices sessions, sanctioned local or national tournaments as a member of a contestant team.

Policy Benefits:

Excess Accident Medical Benefit Maximum	\$10,000 per Injury
Accident Medical Deductible	\$500 per injury
Accident Medical Deductible (No Other Insurance Available) *	\$2,500 per injury
Benefit Percentage	70% of Usual, Customary, and Reasonable Charge
Benefit Period	52 weeks from the date of the accident
Loss Period	Initial treatment received within 60 days from date of accident
Dental Expense Max Benefit	\$1,000 per Injury**
Orthopedic Appliances Max Benefit	\$500 per Injury**
Outpatient Physical Therapy Max Benefit	\$500 per Injury**
Prescription Drug Expense Max Benefit	\$500 per Injury**
Accidental Death & Specific Loss	\$10,000

The Accident Medical Benefit is full excess / secondary coverage. Benefits for Accident Medical Expense will be paid only for such expense(s) which are not recoverable from any other insurance policy, service contract or workers' compensation.

*The \$2,500 deductible applies only to claimants where the MDCVSA accident policy is primary (no other insurance available to injured claimant).

**Subject to Accident Medical Expense Deductible and Benefit Maximum.

THIS IS ONLY A VERY GENERAL REFERENCE TO WHAT COVERAGE(S) THE INSURANCE POLICY PROVIDES AND IS NOT INTENDED TO DESCRIBE ALL OF THE VARIOUS DETAILS PERTAINING TO THE INSURANCE. ACTUAL COVERAGES ARE DETAILED IN THE POLICY OF INSURANCE AND ARE ALWAYS SUBJECT TO TERMS, PROVISIONS, CONDITIONS, AND EXCLUSIONS AS CONTAINED THEREIN. YOU SHOULD NOT RELY UPON THIS GENERALIZED SUMMARY, BUT SHOULD CONSULT THE ACTUAL POLICY FOR A COMPLETE DESCRIPTION AND DETAILS REGARDING COVERAGE

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