

Camps & Clinics Participant Accident Insurance

2025 The University of Wisconsin System Camps & Clinics Participant Accident Insurance

The University of Wisconsin System provides a Blanket Accident Insurance policy for their camps and clinics programs to provide coverage in the event that a participant is injured during a covered activity and will require outside medical treatment. An Injury Claim form must be submitted and authorized by the Policyholder before benefits are available under this insurance policy.

Please be advised that the benefits are excess to all other valid and collectable health insurance plans. An injured participant can present the Identification Card below with policy information as they receive care for a covered injury. This policy is designed to cover up to 100% of Usual and Customary charges for eligible medical bills not covered by primary insurance up to the plan maximum.

If a balance due statement is received in the mail, we would recommend calling the billing department phone number listed on the statement, and request that the facility add the Accident Insurance information below to be billed directly by submitting their HCFA1500 or UB04 (itemized medical bill) and Explanation of Benefits (EOB) from primary insurance – *if applicable*.

Camps & Clinics Participant Accident
Excess Coverage

The University of Wisconsin System

Policy Effective Date: 1/1/2025
Benefits become eligible on the Date of Injury

Accident Medical Expense Limit: \$25,000 per
injury (\$2,500 for emergency sickness)

Deductible: \$0

Policy #: BSRE897166-02

Insurance Policy is underwritten by:
Great American Insurance Company

Front of Card

Questions? Call: 1-800-634-8628 or email: claims@agadm.com

Eligibility is subject to change. This card is for
identification purposes only and does not
guarantee benefits.

This plan is excess to all other valid and collectable
insurance plans. For electronic submission use

Payor ID: 11370

Send all claim forms and billing statements to:

A-G Specialty Insurance

PO Box 21013

Eagan, MN 55121

Fax: 610-933-4122

Back of Card



Gallagher

Student Health & Special Risk

Phone: (877) 345-8928

E-mail: SpecialRisk@GallagherStudent.com