A Necessity for Lifetime Health Insurance for Collegiate and Professional Athletes

Proposed legislation to require athletic organizations to cover athletes’ health insurance policies for life.

Tag Words: Health Insurance; Policy; Athletes; Lifetime Insurance; NFL; N.C.A.A.; Legislation

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Summary

Currently there are few insurance policies designed for NCAA and NFL athletes, none of which include the option of lifetime insurance. Injuries sustained during play can lead to complications long after an athlete’s career has ended. We discuss the currently enacted health insurance policies, why they are insufficient, and propose an alternative policy. We have proposed legislation that would require lifetime health insurance for collegiate and professional athletics and have sent it to Congress.

Video Link

Lifetime Insurance for Collegiate and Professional Athletes:
http://www.youtube.com/watch?v=ZY6UgosOqaI&list=UUts4_1WyqXMmVDfu9ZffstA&index=14&feature=plcp

Zach’s story

(RW) Concussions have been a part of sports since the first snap, pitch, or slap shot. Head injuries were an afterthought in many coaches, players, and parents mind. However that is starting to change due to recent studies and publicized head injuries to some of the sports all stars. These injuries occur not at the professional level, but most commonly at youth and collegiate sport levels of competition. A major difference is the medical policies from the professionals down to the 4th grade youth games. With the concerns over the safety of our players change, so must the medical policies that cover our athletes as they compete. This change has come unfortunately through the injuries of many youth and professional players. A freshman football player named Zachary Frith is unfortunately suffering from one of those examples. During a freshman football game Zach sustained what was later identified as a concussion. The school later recognized and documented Zach’s head injury but never alerted his parents to his injury. Zach was unaware of the dangers of this serious head injury and was allowed to continue contact drills in practice. It wasn’t until Zach’s parents noticed a change in his behavior did they schedule an appointment with a local doctor to evaluate Zach that they
realized they had a serious concussion. It was however another week that Zach was finally
pulled out of contact drills when his mother observed him practicing with the rest of the team
and confronted the coach. By then it was too late, Zach had developed what is known as post-
 concussion syndrome resulting from the initial concussion. Zach is not alone in this situation,
and is lucky that he is still alive. Reports from the New York Times have found that since “1997
at least 50 football players in high school and younger in more than 20 states have been killed or
sustained serious head injuries on the football field”. Through these deaths an emphasis has
come down to the trainers, coaches, and administrators to try and catch the early signs of a
concussion and take the necessary action. After Zach’s parents Lafayette County School District
adopted filed a lawsuit a recommendation plan offered by the CDC (Center of Disease Control)
which outlines the steps needed to correctly address head injuries and concussions. Zach’s
lawsuit ended with his family Receiving 3 million dollars of insurance that will be put towards
Zach’s needs and his ongoing physical therapy.

   (Johnson)

NCAA Story

(KTB) Each year, thousands of athletes in the NCAA sustain devastating injuries that
may impact the rest of their lives. Not only do these injuries affect their bodies, but rack up
costly medical expenses, leaving these young athletes dishing out tons of money on top of their
already large sum of loans. Derek Owens, an average NCAA football player at the University of
Central Arkansas, (UCA) was doing what he loved best: playing football. One night while
playing for UCA, he was hit hard during a punt return, and ever since his life has not been the
same. During his high school career, Owens suffered from two concussions, and another two
during his stint with UCA. But it was the last, and final, hard hit he suffered that truly made a
mark on his life. He was not pulled off the field, nor was he properly examined after sustaining
this intense hit. Instead, he played in the next 11 games, never receiving follow up care for the
massive concussion he received earlier that season. After this final massive blow, Owens felt
sick, couldn’t concentrate in his classes and began to fail his courses. He lost his academic
scholarship and began to become depressed. Before beginning his NCAA career, he was a
straight A student, excelled in three sports, and played trumpet in his high school band. It
wasn’t until his mother took action and ordered expensive neurological testing to be done on her
son to see if there was any brain damage he was suffering from. The doctor diagnosed him with
post-concussion syndrome and ordered him to never play contact sports again. This diagnosis
explains why Owens has been suffering from lack of concentration and having cognitive
impairments. Describing Owen’s new state, Vescey states that, “he is a man in the shadows,
dealing with the migraines and dark impulses that sometimes cause him to lock the door and stay
in bed”. Compared to other athletes his age, Owens can be seen as one of the lucky ones. He is
still able to perform daily activities, whereas some athletes are bound to wheelchairs now. This
situation could have avoided or treated earlier had Owens been taken off the sidelines and had
medical treatments and assessments.

   NCAA-negligent-in-response-to-concussion-prevention?instance=top_news (Sweeney)
National Football League Players

There are numerous NCAA athletes out there that have suffered hard hits like Owens that weren’t football players, for example baseball players. While baseball is known as “America’s Pastime”, there is little doubt that football has truly become “America’s Game” over the last fifty years. America’s obsession with this game is due in part to the foundations for how this game is played and the action that occurs at every game. Football is a tough, physical game with hitting, excitement and alpha male qualities that Americans thoroughly enjoy. While the sport has gained more popularity, it has also spearheaded the evolution of its athletes. Football players have truly become larger than life figures. These players have become bigger, faster and stronger in order to compete at the professional level. A defensive lineman in the 1960’s was typically 6 foot or shorter and weighed around 220 pounds. In the game today, a defensive lineman is typically taller than 6 foot, weighing at least 270 pounds and can run faster than the wide receivers of the 1960s. Since these athletes have transformed into genetic freaks, the forces they can exert on a football field are remarkable. Imagine the prototypical defensive linemen described earlier, now imagine the force that player could deliver on a defenseless player. The result of the collision could be a concussion or another type of serious injury that could occur to the hitter or recipient. “The National Football League season has begun and, like many other fans, I watched these gladiators in battle. And what I saw reaffirmed my belief that football is detrimental to the players’ health”. While revenues have continued to climb for the National Football League and its owners, the toll the game has taken on its players and the rise of concussions has become alarming.

The National Football League has come a long way from leather helmets and rubber padding but these changes still cannot stop the problem with concussions. “There is better equipment and new rules to try to prevent head and orthopedic injuries. But because of the way the game is played today, these changes are not enough”. The dangers of concussions occurring in football have only recently become public news. It was assumed that concussions occurred in the sport due to its nature but our society had no idea the post-concussion symptoms that these athletes would carry with them for the rest of their lives. “The seriousness of concussions has finally been recognized. Studies have shown that as football players age, and as a result of chronic concussions, they have significant brain damage”. Significant research has been done to combat this problem by former Harvard University football player and former professional wrestler, Christopher Nowinski. Mr. Nowinski published the controversial book “Head Games: Football’s Concussion Crisis from the NFL to Youth Leagues” which challenged the policies the National Football League had in place and told the gruesome truth about retired NFL players and the toll the game had taken on their brains. During Nowinski’s research, he conducted studies of the brains of former NFL players who passed away and donated their brains to science. During this investigation, Nowinski came across the brain of Andre Waters. Waters was a hard-hitting safety for the Philadelphia Eagles from 1984-93, who committed suicide in 2007 due to
depression. Nowinski and other doctors found that Waters’ brain tissue had deteriorated so much from his days in the NFL that he actually had the brain tissue similar to an 85-year-old man.

Lawsuits

Mr. Nowinski’s research along with former players voicing their concerns have started a tidal wave of bad publicity and lawsuits directed towards the National Football League. Throughout the years there has been numerous lawsuits filed against the National Football League by players citing they sustained concussions during their career and are now experiencing the effects of concussion related injuries and cognitive disorders. To date, twenty-one suits have been recorded with the NFL being named as the defendant, and Riddell Inc., the maker of helmets that are used in the NFL, as the defendant in each of the lawsuits. The lawsuits have been filed in a number of different states, including New York, Miami, and Pennsylvania. Attorneys representing a number of current and retired football players say that more lawsuits could be filed in the near future. The defense that the NFL is likely to argue is that “football players who suffered concussions should be covered solely by provisions of the league's collective bargaining agreement”. Player attorneys argue that injuries sustained during a player’s career extend past the typical workplace hazards, and are in result of the leagues negligence. Mr. McGlamry, an attorney whose firm represents more than 50 players, was quoted saying “I think this is something that you're going to see more and more players become a part of...and I think the general public will be amazed at the numbers of guys that are suffering from these kinds of injuries”. No statement from the NFL in reaction to these lawsuits has yet been filed; only a brief statement about how the league has only had the player’s safety as one of its primary focuses has been recorded.

The national Football League isn’t the only major sports organization to come under fire by its players. The NCAA (National Collegiate Athletic Association) is also being seen as neglecting the safety of its collegiate athletes and is involved in a lawsuit as well. Derek Owens a former football player at the University of Central Arkansas is involved in a multi person suit filed against the NCAA for being negligent regarding awareness and treatment of brain injuries to athletes. This lawsuit is one of the first of its kind filed against the NCAA, something of a five-year process beginning with NFL players filing lawsuits against the NFL. “The issue has moved from science labs to Congress and now to courtrooms, where the financial exposure of the sport’s governing bodies may be tested”. However, most cognitive injuries do not begin in the NFL, but they stem from a long history of collisions beginning in youth and continuing through college, until it is finally acknowledged in a player’s last few years as a professional in the NFL. Habits of old out of date football techniques, such as “spearing,” when a player uses their helmet as a weapon trying to injure the other player, have been taught in youth programs for generations. Players were not made aware of the danger they brought upon themselves by using this technique. The issue is further complicated by the fact that collegiate athletes receive no
salaries when playing for their respective schools. However, money did not matter to Owens; he was an “A” student leading up to his head injury.

Owens was experiencing what other professional athletes already knew all too well. A few retired NFL players who suffered from dementia suffered, such as John Mackey and Dave Duerson, recently committed suicide by shooting himself in the chest and willed his intact brain for an autopsy (which showed trauma-induced disease). Thankfully Derek Owens has not taken his life and is recovering from his post-concussion syndrome on a dude ranch in Colorado. This is what attorneys argue is at the heart of the lawsuits. That the NCAA neglected to inform players and coaches about the real life hazards a concussion can have on a young man’s life, while profiting off other their hard work and commitment through television deals and bowl games. However, since 2009 Donald Remy, the NCAA general counsel and vice president for legal affairs has been quoted as saying “to date, none of these cases have been proven to have merit”. Attorneys representing other NCAA student athletes have said that the NCAA is similar to a cartel that takes care of its own. As one of the acting attorneys in the Lawsuit against the NCAA, Steve Berman hopes that there will be future funding for programs that will continually check athletes for post-concussion syndrome, and pursue follow up care for those who exhibit symptoms. Berman has also stated that “the goal of the lawsuit is to force the NCAA to take this seriously, so that they are really policing and making the effort that is required to prevent these injuries.” The suit alleges that the NCAA makes an annual profit of $750 million, and that top schools make fortunes from television contracts. Berman proposed that the profit could help pay for improved medical care: “it could be that when they are hurt economically, that’s what it will take to take these injuries seriously.”

Berman feels for the student athletes that have received concussions doing something they love and have not received any aid from the NCAA. The NCAA is taking at least a few baby steps in the right direction. In the 2011-2012 NCAA Sports Medicine Handbook, four pages are dedicated to concussions and the severe cognitive damage an athlete can sustain if not properly treated. Derek Owens considers himself lucky, as he’s not drooling, and can perform daily tasks. He does plan on attending classes in the fall and furthering his education as best he can.


Sustained Injuries and Long-term Effects

(JD) It is no surprise that injuries in football are quite common. Unfortunately, some occur more frequently, and are more serious than others. Three of the most common injuries that football players sustain include hip injuries, knee injuries, and concussions. Although there are varying degrees of each, ranging from minor to major, if severe enough, these injuries can have devastating long term effects. With respect to hip injuries, football players most often experience hip pointers or hip subluxations. A hip pointer is caused by a direct hit to the iliac crest, and results in bruising to the overlying muscles and bone. In more severe cases, an iliac crest fracture may occur. Although there are no specific long term effects related to a hip pointer injury, it can be extremely painful, and healing time can be as long as several weeks. A more serious hip injury
that collegiate and NFL athletes may experience is a hip subluxation, which is the partial dislocation of the hip joint. In a hip subluxation, blood and fluid buildup within the joint capsule and “put pressure on the surrounding blood vessels, potentially cutting off or limiting the supply of blood”. In severe cases, hip subluxation can “lead to a condition known as avascular necrosis (AVN). AVN is caused when the ball of the hip joint no longer receives an adequate supply of blood”. The lack of blood supply to the area causes bone death, which results in the collapse of the joint. In such cases, hip surgery becomes necessary. These patients will either need an artificial hip joint or a vascularized bone transplant. Up to 25 percent of those who experience hip subluxations will develop AVN. Former NFL player, Bo Jackson, developed AVN resulting from a hip injury that he incurred during a playoff game in 1991. Consequently, this injury ended Bo Jackson’s NFL career and required surgery to have his deteriorating hip replaced with an artificial one.

Knee injuries are also extremely common among athletes who play football, specifically, anterior cruciate ligament (ACL) and meniscal tears. In many cases, meniscal tears are associated ACL with tears; “more than 60 percent of all patients diagnosed with ACL tears also have a meniscal tear”. The incidence of such injuries is usually contact related, and require surgery accompanied by a lengthy recovery process. However, the long term effects of such injuries are of great concern. Studies have shown that there is a distinct link between ALC and meniscal injuries and the early development of osteoarthritis. Osteoarthritis in the knee occurs when the cartilage deteriorates and the bones of the knee rub together. It causes pain, swelling, and stiffness, and extra bone may form around the joint. Furthermore, early-onset of osteoarthritis is “associated with pain, functional limitations, and decreased quality of life between the ages of 30 and 50 years”. Collegiate and professional football athletes who incur ACL and meniscal injuries are at an increased risk of developing osteoarthritis early on; “they are young patients with old knees”. In severe cases of osteoarthritis, the patient may need total or partial replacement of the damaged joint. For example, Joe Namath, a former NFL player, had knee replacement surgery on both knees due to repetitive knee injuries and the early development of osteoarthritis.

Another, and possibly the most damaging type of injury that football players are likely to encounter at some point are head injuries, concussions being the most common one. Concussions can vary in severity, ranging from grades one to three. The specifics of each grade can vary slightly, depending on which guidelines are used. In general, grade one involves confusion, symptoms lasting less than 15 minutes, and no loss of consciousness. The only
difference between grade one and grade two is that concussion symptoms last longer than 15
minutes; confusion is present and there is no loss of consciousness. What classifies a concussion
as grade three is the marked loss of consciousness for any time period, ranging from a few
seconds up to five minutes (Clinical Psychology Associates of North Central Florida, P.A.). The
long term effects that multiple concussions can have on football players at every level of play are
extremely devastating to the brain. In many cases, multiple concussions can lead to the
development of a degenerative brain disease called chronic traumatic encephalopathy (CTE),
which is “the only preventable form of dementia”.

The most common symptoms of CTE
include memory loss, confusion, impaired judgment, impulse control problems, aggression,
depression, and progressive dementia. This progressive, degenerative brain disease is also
characterized by “behaviors similar to Alzheimer’s disease… neurological and physiological
changes in the brain, and the buildup of an abnormal protein called tau,” which is also present in
Alzheimer’s patients. Furthermore, CTE has been found in many retired NFL athletes, such as
Andre Waters, Tom McHale, Chris Henry, and Dave Duerson. Jackson, Namath, Waters, and
Duerson are just a few of the former NFL players that have sustained injuries during their careers
that have caused them to seek medical attention years after retirement. Unfortunately, they were
not assisted with the costly medical bills that come with treatment.

17. http://www.sportsmd.com/Articles/id/44.aspx (Zeigler)

Cost of Treatment

(SQ) It is estimated that 30 million children in the United States participate in organized sports
programs. As more and more children participate in sports and recreational activities, there has
been an increase in acute, chronic and overuse injuries. Emergency department visits are highest
among elementary school children to young adult population. Over one-third of school-age
children will sustain an injury severe enough to be treated by a doctor or nurse. The yearly costs
have been estimated to be as high as $1.8 billion.

Using data from the National Health Interview Survey, an annual face-to-face survey of
over 37,000 households in the United States, the authors estimate that there are 26 sports and
recreational injury episodes per 1000 persons per year. Obviously there are differences in
severity between sports and recreational injuries and transportation injuries, however, 20% of
school children are absent from school at least one day a year due to sports injuries, and 28% of
working adults lost at least one day a year from work due to sports injuries. Perhaps the most
staggering statistic is that for those persons ages 5 to 24 years, sports injuries account for one out
of every five injury episodes.

Sports related injuries in the context of spinal injuries can be compared in occurrence and
cost to serious accidents such vehicle crashes, violence, falls, etc. In 1995 dollars, first year of
spinal injury charges averaged $233,947 for vehicle crashes, $217,868 for violence, $295,643 for
sports injuries, $185,019 for falls and $208,762 for other causes. Recurring annual charges for
each cause averaged $33,439, $17,275, $27,488, $26,238 and $23,510, respectively. Using
average age at time of injury for each cause, a 2% real discount rate, and the most recent survival
data from the National Spinal Cord Injury Statistical Center, average lifetime charges for each
cause were $969,659, $613,345, $950,973, $630,453 and $673,749, respectively. Given an
estimated 10,000 new cases of spinal cord injury occurring each year of which 35.9% are caused by vehicle crashes, 29.5% are caused by violence, 20.3% are caused by falls, 7.3% are caused by sports, and 7% result from other causes, annual aggregate direct costs of traumatic spinal cord injury in the United States are $3.48 billion for vehicle crashes, $1.81 billion for violence, $1.28 billion for falls, $694 million for sports and $472 million for other causes. Total direct costs for all causes of SCI in the United States are $7.736 billion.

Recovery Time

(JD) Not only do athletes have to endure the hardship of surgery directly caused by their sport but they must start the recovery process immediately in order to rejuvenate their sports career or just their daily lives. Recovery time for hip, knee, and head injuries varies greatly within each category depending on the severity. As for the hip injuries previously discussed, a hip pointer injury generally takes two to four weeks to heal. Additionally, the athlete should abstain from play for the full duration of time recommended, and/or until fully healed. On the other end of the spectrum, the expected recovery time for those who undergo hip replacement surgery is approximately six months. This estimated recovery time includes “complete healing of surgical wounds and internal soft tissues [and] when a patient can return to work and the activities of daily living”. With respect to knee injuries, specifically ACL and meniscal tears, ample recovery time for those who go through ACL reconstructive surgery is six to nine months. For athletes, surgery is essentially required. Those who choose not to have surgery are generally inactive people who only experience partial tears. Unlike recovery times for hip and knee injuries, the time necessary for a full recovery from a concussion is not as clear cut; times range from a few days to over a year, depending on the severity (Health News Digest). Fortunately, there is a tool that can be used that helps clinicians to better predict recovery times, the ImPACT™ test. In many cases, the scores of the test can help determine which concussions will take at least a month to heal. Nonetheless, no matter the severity of the concussion, it is highly recommended that an athlete be completely symptom free of all signs and symptoms of concussion at rest and during full activity before return to play in order to avoid more serious brain trauma, such as SIS and CTE. Previously, the dangers of concussions were not widely recognized by athletes, parents, and coaches. And, unfortunately, it took a young athlete’s tragedy to bring just how dangerous concussions can be to light.

On May 14, 2009 Washington governor Christine Gregoire signed one of the toughest laws pertaining to young athletes and head injuries and concussions. The law named the Zack Lystedt law prohibits athletes from returning to a game that is suspected of sustaining a concussion without the approval of a licensed physician. Recent studies have shown that more than 3.5 million concussions occur yearly in the US alone. These concussions and head injuries are some of the most common injury sustained by young athletes in contact sports. Many of these injuries are preventable and can be avoided all together with the teaching of the proper technique and or equipment. Unfortunately Zackery Lystedt sustained one of those head injuries that would change his life forever. It was not the initial head injury that caused the most damage, rather the repeated collisions that occurred after the initial head blow. Zack’s family made a effort to write a law with the help of Nelson Langer Engle, as well as Adler Giersch, the two firms worked together and constructed a piece of legislation consisting of the following provisions,

- Youth athletes who are suspected of sustaining a concussion or head injury be removed from play. “When in doubt, sit them out.”
- School districts to work with the Washington Interscholastic Activities Association (WIAA) to develop information and policies on educating coaches, youth athletes and parents about the nature and risk of concussion, including the dangers of returning to practice or competition after a concussion or head injury.
- All student athletes and their parents/guardians sign an information sheet about concussion and head injury prior to the youth athlete’s initiating practice at the start of each season.
- Youth athletes who have been removed from play receive written medical clearance prior to returning to play from a licensed health-care provider trained in the evaluation and management of concussion.

Private, nonprofit youth sports associations wanting to use publicly owned playfields comply with this law.25

Citizens and legislators alike have applauded the bill for not only its provisions, but also its simplicity. Not only is the bill simplistic but also does not cost the federal government or state government any money to implement. Representative Jay Rodne, a republican from North Bend, sponsored the law. The legislation also found support in Washington’s many hospitals, youth groups, and risk management groups. The family has expressed its sincere hope that this bill can save lives for young people all over the US.
Recently, Wells Fargo & Company has begun offering an insurance plan for youth sport teams that covers diagnostic testing, costs, and educational teaching for concussions. The plan titled “Play It Safe Concussions CareSM Program” is available for high school athletes and their teams in only 19 out of the 50 states. This insurance plan costs $350 for a team up to 117 players, along with a $2 Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT) testing for each player. ImPACT tests are neurocognitive tests that are administered to athletes before the season begins to establish a cognitive baseline. It covers an array of cognitive abilities, but mainly focuses on memory, reaction time, and processing speed. If during the season a player is suspected to have suffered a concussion, or a related head trauma, the student will take the test once again and compare results. If the player “fails,” they will be benched and advised to go receive proper medical attention. The player will be recommended to certain physicians who have become accredited with ImPACT and who can evaluate and manage the player’s concussion. In addition to these ImPACT tests, the Play it Safe Concussion CareSM Program will also pay up to an extra $25,000 per student, for a sustained injury, to cover health care costs that the students’ own health insurance plan will not cover. This is included in the package as “excess insurance coverage” and includes no deductibles or co-pays, ultrasounds, EEGs, and nerve conduction studies. Purchasing this insurance plan also provides the team, coaches, parents, and other people involved with the organization, to become better educated on concussion awareness. This information includes, but is not limited to, signs and symptoms of concussions, diagnosis, and prevention. The Play It Safe Concussion CareSM Program’s website also gives players and families other resources pertaining to concussion awareness, such as the National Athletic Trainers’ Association (NATA), ConcussionWise, and CDC Heads Up: Concussion in Youth Sports.

While the Play It Safe Concussion CareSM Program addresses the need for high school aged athletes, insurance policies for current NFL players and their alumni are in drastic need of a revision. NFL alumni and current NFL players have such differing insurance policies, that it seems current players are at a disadvantage for insurance. The alumni currently have twelve programs available to them as compared to the single program that current NFL players have access to. The way that the program is currently designed doesn’t allow for current players to have access to these wonderful alumni programs until five years after their playing days are over. Imagine being an NFL player and realizing that your playing career is finished and you have a laundry list of problems with your body. Whether these problems are pain medications, surgeries, etc. How do you expect an unemployed athlete to compensate for this current situation? Waiting five years for help isn’t the answer. This policy must be changed to accommodate the discrepancy between the number of programs each side has and the number of years required in order to be labeled as an alumnus and receive these benefits.
The National Football League has taken great steps to insure that their former players are provided for and taken care of for the rest of their lives. The NFL Player Insurance Plan only has four benefits for a current player: elimination of lifetime limit on benefits payable, coverage of treatment, medical items and supplies recommended under the Neurological Benefit and Spinal Treatment Programs, WellAware Program for chronic conditions and first four visits to a professional counselor are free of cost. The programs made available to the alumni range from prescription drug plans to doctors’ visits, joint replacement to Medicare subsidies. The first plan is called “The 88 Plan” which was named after Pro Football Hall of Famer John Mackey which provides retired players with as much as $88,000 per year for individual care, up to $55,000 for home custodial care in addition to the costs pertaining to certain physician services. The NFL Player Care Foundation is an independent organization that aims to improve the quality of life for retired players by raising money for grants in order to fund research to combat the harmful injuries that players acquire. The Neurological Care Program allows retired players to be evaluated by top medical centers around the country in the specialized field of neurological brain injuries. The NFL Alumni are always provided for by The Cardiovascular Screening Program, which allows former players to have screenings and evaluations at 10 centers across the country at no cost. If these former players are found to have cardiovascular difficulties, they receive assistance in finding medical and nutritional treatment. The Prostate Screening Program allows past players to sign up for these screenings and education at no charge. A major program that is just as beneficial as the Neurological Program when it comes to football players is the Spine Treatment Program. This treatment program makes available spine specialists at five hospitals across the country to evaluate and treat spine-related conditions among retired players. Each hospital makes available an orthopedic spine surgeon, program director, neurosurgeon, physiatrist and spine specialist. Unfortunately, the service is not free but eligible players can apply for grants to cover some of the costs associated with this treatment. These former players always have access to the Joint Replacement Program which doesn’t cover the surgery to replace knee, hip or shoulder injuries but the program will cover up to $250,000 worth of normal complications after the surgery has taken place. Also, former players are also eligible for assisted living benefits, which grants them access to more than 500 facilities across the country. Finally, the alumni have access to the Bert Belle/Pete Rozelle NFL Player Retirement Plan which provides both pension and disability benefits to former players with recent enhancements such as: dramatically increased line of duty benefits, inactive t&p benefit doubled, addition of a medical director for initial claims, widow and surviving children benefits tripled and retroactive payments.

Current Solutions Not Effective for All

Although there are currently multiple plans in place designed to protect football players, one for youth athletes, one for current NFL competitors, and twelve programs for retired NFL players, they do not provide sufficient coverage for athletes. A more comprehensive, uniform, and nationwide program for football participants at every level of play is needed. The
Play It Safe Concussion CareSM Program is offered to student athletes by Wells Fargo, and is currently only offered in 19 states. Because it is obtainable in only 19 states, it cannot possibly provide adequate coverage to all young athletes in the other 31 states. Either the Play It Safe program needs to be extended across the nation, or another program needs to be developed and enacted that will provide a sufficient amount of coverage to youth athletes in all 50 states. As for the programs offered by the NFL, the ones available to retirees are not obtainable until five years after retirement, and only provide a limited amount of funding towards medical treatment. The fact that retired players are required to wait five years before seeking medical attention for what is most likely an injury that was incurred during play is absurd. Serious injuries need to be evaluated and treated as soon as possible. Making retired NFL players wait five years before insurance becomes effective almosts forces athletes to put off seeing a medical professional to treat their injuries. Furthermore, letting an extended period of time to pass before seeking medical attention can cause the injury to worsen, and may even result in further complications. This being the case, new plans are needed for athletes of all ages that provide adequate coverage that is offered at the start of the player’s career and extends throughout the athlete’s lifetime. More specifically, such a plan should provide full coverage for all sports-related injuries that are sustained during games and practice; there should not be a limit on the number of medical visits or a cap on how much insurance companies will pay for medical costs. At this point, it can be said that all athletes are being well taken care of during and after their careers. To go more in-depth about the coverage and benefits that NCAA and former NFL athletes should receive, what follows is a legislation proposal that caters to these athlete’s medical needs.


27. https://www.wellsfargo.com/com/insurance/concussion-care (Play It Safe)

**Who Can Help Pass This Legislation**

(SQ/KTB) Our legislation needs to be given to our representatives so it has the ability to be moved along to the people who can make change happen and get this legislation passed. Based on the fact that we are all students at Rutgers, The State University of New Jersey, we felt that it was an obvious decision to send our new legislation to a senator and congressman representing New Jersey. We chose Senator Robert Menendez (D-NJ) and Congressman Bill Pascrell Jr. (D-NJ). Mr. Menendez is worthy of being sent this information due to the fact that he is a United States Senator and has been leading change not only in New Jersey, but across the country since the time he took office. In particular, he takes a stand on issues such as family and children’s well-being and health care. Mr. Pascrell leads the Congressional Brain Injury Task Force, which aims to further the education and awareness of brain injuries, by helping with funding for treatments and the hope of an eventual cure. In addition, this task force hopes to help pass the Traumatic Brain Injury Act, which will help Americans combat this annual $60 billion dollar problem. Based on Mr. Pascrell’s stance, we felt that he would be the perfect man to see about this problem and send him our piece of legislation. In our research, we did not find many activists lobbying for concussion awareness or lifetime health insurance for athletes. With little awareness, we feel that by sending our legislation to Congress, we can highlight an issue that has been left in the shadows. If we can shed light on insurance for athletes, hopefully we can spur a
revolution and Mr. Menendez and Mr. Pascrell can be the leading spokesmen for the “Players For a Lifetime” Health Insurance Policy.


Our Lifetime Insurance Legislation

(KTB/JD) Although there are currently insurance policies for athletes, these plans do not cover all athletes or all injuries, let alone post-career injuries. With no lifetime insurance policies, both NCAA, NFL, and other professional athletes often face outlandish medical bills due to medical conditions and prior injuries sustained in their sport. The wear and tear their bodies receive during play often has later life implications, such as torn rotator cuffs and knee and hip replacements. The time and wear of their bodies should be compensated for, which is why we have devised a lifetime insurance plan. With this coverage, athletes will be covered for medical expenses, especially medical conditions that are notorious for competitive sports. Our insurance policy, “Players For A Lifetime” Insurance, would cover both professional and collegiate athletes for life.

To be eligible for our coverage, players must have played for at least one season, or sustained career ending injuries during their first season of play. A player who does not play at least 20 hours on the field is also not eligible, but if the player continues to play into the following season they can apply for our lifetime insurance policy. Under our insurance care, players will have all medical costs paid for relating to injuries sustained during their career or related injuries seen post-career. These include, but are not limited to, knee and hip replacements, restructuring of rotator cuff, and torn ACLs. Costs pertaining to such injuries include surgeries, doctor visits and check-ups, and equipment needed to aid in recovery or daily living. This equipment may be crutches after a surgery, braces, walkers, boots, wheelchairs, and other related equipment. For all career injury-related doctor visits and surgeries, co-pays and deductibles are covered for by the “Players For A Lifetime” Insurance plan. Doctor visits, such as dental and primary care physician, co-pays are not paid for by our policy, but by the player or player’s other insurance company, (if player had secondary plan).

A player’s spouse and family are eligible to apply for our insurance plan after their marriage is verified and they’ve been married for five years. A player’s children are covered under our policy until the age of 25. If they too have become a NCAA or professional athlete, they can apply to be reinsured. If they are not, they must find their own insurance plan. Grandchildren of players are also not eligible for coverage. Our insurance coverage also includes a prescription plan. Prescriptions from injury-related doctors, such as an orthopedic or neurologist, are covered in their entirety. Prescriptions from other non-sport related-injury doctors, such as a dentist or primary care physician for an illness, are covered up to 75% of the original cost. The player must pay the remaining 25%. This prescription plan is also available for the player’s spouse and family.

If players are found to be fraudulent, regardless of their status, they shall be denied any more coverage and dropped from our plan of care. Their spouse and family will be dropped from coverage as well. Fraudulent behavior, in terms of our insurance plan, is defined as faking an illness for the abuse of prescription drugs, faking an injury to receive equipment and distribute to another person, and faking an injury for a monetary gain. Once dropped from our plan of care, the player and family cannot reapply for our insurance coverage.
Sponsored by:
Congressman Bill Pascrell

SYNOPSIS
Requires athletic organizations to provide former athletes with medical insurance to cover the costs of injuries sustained during play.
AN ACT concerning lifetime insurance policies for athletes.

BE IT ENACTED by the State and General Assembly of the State of New Jersey:

1. This act shall be known and may be cited as the “Lifetime Insurance for Athletes Act.”

2. Sports organizations, such as the NCAA and NFL, shall provide athletes with lifetime insurance, which will cover medical costs of all injuries sustain during play.

3. Currently, there is only one enacted insurance plan designed to help retired NFL athletes pay for the high costs of medical bills of injuries that were sustained during play. However, there is no such insurance policy designed to assist NCAA athletes who have suffered serious injuries with the extremely high costs of medical services. These athletes are not provided with the support that is necessary for them to live a healthy, worry free life. Should an athlete feel the need to acquire some type of medical insurance that would cover sports-related injuries, they would have to seek a policy that is independent of the NCAA and NFL organizations. These policies can be extremely costly, potentially making them an impractical purchase. Furthermore, there have been no attempts in the past, other than the current plans, to help the athletes who have suffered serious or career ending injuries. There are no failed legislation proposals or pending documents on the issue. The only insurance plans aimed at providing assistance to NFL and NCAA athletes are those that are already in place. This being the case, it is necessary that a new piece of legislation be proposed that is designed with the intention of implementing a lifetime insurance
plan for NCAA and NFL athletes who are injured during play.

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4. Although there are currently insurance policies for athletes, these plans do not cover all athletes or all injuries, let alone post-career injuries. With no lifetime insurance policies, both NCAA and NFL athletes often face outlandish medical bills due to medical conditions and prior injuries sustained in their sport. The wear and tear their bodies receive during play often has later life implications, such as torn rotator cuffs and knee and hip replacements. The time and wear of their bodies should be compensated for, which is why we have devised a lifetime insurance plan. With this coverage, athletes will be covered for medical expenses, especially medical conditions that are notorious for competitive sports. Our insurance policy, “Players For A Lifetime” Insurance, would cover both professional and collegiate athletes for life. To be eligible for our coverage, players must have played for at least one season, or sustained career ending injuries during their first season of play. A player who does not play at least 20 hours on the field is also not eligible, but if the player continues to play into the following season they can apply for our lifetime insurance policy. Under our insurance care, players will have all medical costs paid for relating to injuries sustained during their career or related injuries seen post-career. These include, but are not limited to, knee and hip replacements, restructuring of rotator cuff, and torn ACLs. Costs pertaining to such injuries include surgeries, doctor visits and check-ups, and equipment needed to aid in recovery or daily living. This equipment may be crutches after a surgery, braces, walkers, boots, wheelchairs, and other related equipment. For all career injury-related doctor visits and surgeries, co-pays and deductibles are covered for by the “Players For A Lifetime” Insurance plan. Doctor visits, such as
dental and primary care physician, co-pays are not paid for by our policy, but by the player or player’s other insurance company, (if player had secondary plan). (KTB).

5. a. A player’s spouse and family are eligible to apply for our insurance plan after their marriage is verified and they’ve been married for five years. A player’s children are covered under our policy until the age of 25. If they too have become an NCAA or professional athlete, they can apply to be insured. If they are not, they must find their own insurance plan. Grandchildren of players are also not eligible for coverage. Our insurance coverage also includes a prescription plan. Prescriptions from injury-related doctors, such as an orthopedic or neurologist, are covered in their entirety. Prescriptions from other non-sport related-injury doctors, such as a dentist or primary care physician for an illness, are covered up to 75% of the original cost. The player must pay the remaining 25%. This prescription plan is also available for the player’s spouse and family.

b. If players are found to be fraudulent, regardless of their status, they shall be denied any more coverage and dropped from our plan of care. Their spouse and family will be dropped from coverage as well. Fraudulent behavior, in terms of our insurance plan, is defined as faking an illness for the abuse of prescription drugs, faking an injury to receive equipment and distribute to another person, and faking an injury for a monetary gain. Once dropped from our plan of care, the player and family cannot reapply for our insurance coverage. (KTB).
References

8. http://orthopedics.about.com/cs/hipsurgery/g/hippointer.htm (Cluett)
27. https://www.wellsfargo.com/com/insurance/concussion-care (Play It Safe)
Letters to the Editor

To the Editors of SI.com,

In sports, injuries are just another part of the game; a bad tackle can result in a broken leg, or worse can cause one to become paralyzed. But what happens when athletes later on in life need hip and knee replacements or need assistive devices due to ailments sustained during play? Currently, there are no lifetime insurance policies that cover both NCAA student athletes and professional athletes after they’ve been off the field and courts for 20 years or more. The policies that are implemented only cover disabilities, workers compensation, or signing coverage. There are no policies that enable athletes to receive aid for common injuries seen years after play, such as a knee replacement. With surgeries such as these, there are many medical costs that come along. There are the doctor visits, the surgery, the rehabilitation, assistive devices, and much more. The wear and tear these athletes receive from play should not just be covered during their active years. They should receive compensation for the time given to their respective sport and the impacts it has had on their bodies for life. Compensation would cover only the costs of medical services, procedures, and products that are directly related to the injury sustained during a scheduled, NCAA game or practice or common injuries that are seen with their respective sports. A policy similar to the one previously mentioned would allow athletes to receive the medical assistance they need and lessen the burden on both the player and their family. With the numerous lawsuits against the NFL and NCAA about insurance policies, I hope that others will believe in this cause and the pursuit of lifetime insurance will become a reality for these athletes.

Sincerely,
Kathleen Barrett
(Sent to Sports Illustrated)

Dear Editor,

I am writing you this letter to stress my concern about the lack of lifetime insurance for athletes and the risk of injury that all athletes have while playing a sport. The need of lifetime insurance for athletes is a subject that has been swept under the rug for years. However, with more and more cases of concussions and other serious injuries brought to the public’s attention, policymakers must do the right thing and design a program to protect athletes financially from the time their playing days start till the end of their days. Concussions are nothing to joke around about anymore; recent research has shown that these injuries can leave athletes with post-concussion symptoms or long term problems that increases a person’s chance of suicide. Contact sports expose their athletes to the most risk of such injuries and should be more active than any organization to get a policy like this in place. With so many lives on the line, the time for action is now and the time to get a lifetime insurance policy for athletes passed is now.

Sincerely,
Sean Quinn
(Sent to North County Times)
To the Editors of NCAA Magazine,

Injuries in college sports are inevitable; they are a part of the game. However, it is a little disheartening to know that if a college athlete suffers a career-ending injury while playing for their school that he or she will not receive the medical benefits that he or she deserves. Currently, there are no lifetime insurance policies that cover both NCAA student athletes and professional athletes. The policies that are implemented only cover disabilities, workers compensation, or signing coverage. But what happens when athletes later on in life need hip and knee replacements or need assistive devices due to ailments sustained during play? We feel that it is necessary that the student athletes who endure injuries severe enough that they require medical attention years after graduation be given some sort of benefits or compensation from the NCAA, or their respective schools. Compensation would cover only the costs of medical services, procedures, and products that are directly related to the injury sustained during a scheduled, NCAA game or practice or common injuries that are seen with their respective sports. Injuries may not rear their ugly head till years later, when it’s too late for an athlete to be insured through their college. The wear and tear their bodies endure should be compensated for life. A policy similar to one previously mentioned would ensure that all athletes who suffer serious injuries are provided with adequate medical attention, while taking some of the burden off of the players and their families. We believe that they deserve at least that much. With the numerous lawsuits against the NFL and NCAA about insurance policies, we hope that others will believe in our cause and the pursuit of lifetime insurance will become a reality for these athletes.

Sincerely,
Jessica Doughtie
(Sent to NCAA Magazine)

To The Daily Record Sports Section

Recently there has been a lot of coverage of professional athletes suffering from post concussion symptoms. The news has focused on these football, baseball, hockey, players with multimillion dollar contracts and the best medical care in the country. However what is being done for the men and women in collegiate competition? They expose themselves to the same risks as the professionals every time they step on the field of play, and do not get payed the millions of dollars. Most colleges offer medical care to athletes at the most, two years after their career is over. Doesn't it make sense that this coverage should be for life if the injury is major, such as post concussion syndrome. Major universities make millions of dollars through TV contracts and bowl games. Shouldn't some of that money be set aside to help the men and women playing on Saturdays? Lifetime medical insurance should be a staple of the NCAA who says they care about the athletes, but do not support them when they go pro in something other than sports.

Sincerely,
Ryan Warnick
(Sent to the Daily Record)