

U.S. Olympic & Paralympic Committee Policy



Policy Name: U.S. Olympic & Paralympic Medical Network Services Eligibility Policy

Date of Issuance: 9/8/2023

Policy Owner: Director, Athlete Healthcare

Applies to: Team USA Athletes (as described herein)

Purpose:

To define the criteria under which Team USA athletes may access healthcare services and other benefits through the United States Olympic & Paralympic) Medical Network (MN).

Policy Statement:

I. Introduction

The USOPC's MN provides medical care to eligible Team USA athletes, including orthopedics, sports medicine, general medicine, women's health and more. Eligible athletes may receive travel assistance and a broad range of medical services at reduced or no cost. Additional services can be provided through the Contact Lens and Dental programs.

II. Eligibility for MN Services

Except as otherwise stated in this Policy, Team USA athletes meeting the following criteria are eligible for services through the MN:

- a) Athletes enrolled, or eligible to enroll, in the USOPC Elite Athlete Health Insurance ("EAHI") program;
- b) Athletes who sustain an injury at the Olympic or Paralympic Trials or any other event or competition organized, operated, sanctioned, or formally authorized by the USOPC (collectively, a "USOPC-sanctioned event"); and
- c) Athletes who sustain an injury at an event sanctioned by a national governing body ("NGB").

For the avoidance of doubt, athletes are considered eligible to enroll in EAHI when their status is set to "Offered" within the USOPC internal system, Olympia.

III. Exceptions & Limitations on Eligibility

- a) *Disciplinary Actions:* The MN, along with all other USOPC services and benefits, is subject to the Athlete Safety Eligibility Matrix (as set forth in the USOPC Athlete Safety Policy) and the Loss of Benefits Grid (as set forth in the USOPC National Anti-Doping Policy) for USOPC services and benefits. This means that in the event an athlete is under temporary suspension or sanction under the Athlete Safety Policy or under an interim action or

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sanction under the Anti-Doping Policy, then the Athlete Safety Eligibility Matrix and Loss of Benefits Grid, respectively, will govern an athlete's access to both EAHI and MN services.

- b) *Personal Injury and Workers Compensation*: MN services cannot be used in any personal injury or workers compensation cases because of the insurance requirements for payment associated with those types of injuries. Athletes experiencing a personal injury should report such injury to their health insurance provider and athletes experiencing an injury that may be eligible for workers compensation should report such injury to their employer.

- c) *Personal Conduct*: During the period the USOPC is coordinating medical services, funding or other healthcare resources, athletes are expected to: Respond to correspondence in a timely and reasonable manner.
 - Faithfully comply with all applicable policies, requirements, directives, and requests of the USOPC and any affiliated third-party; including, but not limited to, medical offices, hotels, airlines, and ground transportation services.
 - Serve as good stewards of USOPC finances and resources.
 - Avoid actions that reflect unfavorably on the reputation of the USOPC, its sponsors, donors, or other stakeholders.

IV. Extended Eligibility for those on EAHI or EAHI-Eligible

Athletes who are eligible for MN services due to their enrollment, or eligibility to enroll, in EAHI will continue to be eligible to receive MN services for up to six (6) months after their EAHI enrollment, or eligibility to enroll, ends, as outlined below:

- a) For athletes who were enrolled in EAHI and were removed from the plan by their NGB because they no longer meet current performance criteria, the six (6) month period begins as of the final date of EAHI coverage.

- b) For athletes who were enrolled in EAHI and have self-removed from the plan, the six (6) month period begins as of the final date of EAHI coverage.

- c) For athletes who were never enrolled but were offered EAHI and no longer meet NGB criteria, the six (6) month period begins on the date of the new EAHI allocation period for their respective sport.

Self-enrollment in the USOPC EAHI continuance plan will have no impact on the extended eligibility for MN services described above. As an example, an athlete whose EAHI benefits end on January 31, will remain eligible to receive MN services only through July 31 if the same year regardless of whether they enroll in the USOPC's EAHI continuance plan.

If, while obtaining care through the MN, treatment is required to extend past the six-month timeframe, clinical documentation will be reviewed by USOPC medical personnel to determine if MN care can be extended further. The additional extension period is not guaranteed, as it will be based upon availability of MN resources and will be at the sole discretion of the USOPC.

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Upon discontinuation of EAHI enrollment or eligibility, athletes will receive educational materials which will provide basic insurance literacy, recommended resources to access other insurance plans, and include best practices to independently manage their individual health and wellness. Athletes will also have access to USOPC Athlete Healthcare Navigators who can provide personalized consultation.

V. Referrals

A request for a referral to the MN may be submitted by the athlete eligible for MN services directly or by their representative (e.g., their coach, their NGB, USOPC sports medicine staff, USOPC sport performance high performance director, etc.). Such requests for referrals must be submitted to the USOPC sports medicine department online at <http://go.teamusa.org/MN-Referral> or by contacting MN@usopc.org, as soon as reasonably practicable.

Due to the limitation of available resources, MN services sought must be sport-related and/or medically necessary, as determined by the USOPC Chief Medical Officer or their designee, and will be subject to advance review and approval by USOPC medical personnel based upon available MN resources.

Upon receiving the request for a referral, the USOPC sports medicine department will review it and either make the referral to the MN or suggest an alternative means for the athlete to receive the appropriate level of care. Making the referral will depend on a number of factors, including but not limited to, the availability of MN value-in-kind ("VIK") resources, cost savings to EAHI program and/or the applicable sport accident policy, and/or the type of healthcare services needed.

VI. Covered Services & Benefit Limitations

Except as otherwise described below, once the USOPC sports medicine department approves a request for MN services and makes the referral, the USOPC National Medical Network coordinators will coordinate the logistics around the MN services, which **may** include one or more of the following:

- Medical services to the extent available under the USOPC relationship with the specific MN partner,
- Air travel to and from the city in which the MN partner is located,
- Ground transportation to and from the MN partner facility, and/or
- Lodging for **up to one (1) week** post-surgery, as approved for medical necessity.

Travel resources will be assessed and approved under the MN Travel Policy. Note that the MN Travel Policy has limitations and athletes should be prepared to cover out-of-pocket travel expenses, if necessary.

a) Limitations on MN Services & Benefits

- 1) *Athletes Not Eligible for EAHI, but Who are Eligible for MN Services Due to Injury at a USOPC- or NGB-Sanctioned Event:* Athletes who are eligible for MN benefits under Section II(b) or II(c) above will not be eligible to have any travel expenses covered (e.g., airfare, lodging) through the MN.
- 2) *Personal Insurance:* MN services and benefits are not intended to serve as an athlete's primary insurance coverage. Athletes should be enrolled in EAHI or another health

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insurance plan at all times to cover prescription medications, common ailments, preventative care, MN third-party fees, and the like.

Revision History

Publication Type	Policy Approver	Enabling Action	Publication Date	Next Scheduled Review	Revision Summary
Initial Publication	Chief Medical Officer (CMO)		8/31/2021	2022	N/A
Annual Review	Chief Medical Officer (CMO)	CMO Approval	6/6/2022	2023	Added personal conduct section
Annual Review	Chief Medical Officer (CMO)	CMO Approval	9/8/2023	2024	Eligibility revisions for clarity; updated program nomenclature