

Eastern Football League Personal Accident Programme – Season 2010

BRIEF SUMMARY OF BENEFITS

Death and Capital Benefits Events 1-14 as per scale: \$100,000

Event 1 (Death Cover) cover in respect of injured persons without dependents shall be limited to \$10,000

WEEKLY INJURY BENEFIT (Income Earners only)

85% of Gross Weekly Earnings (as per policy definition) up to a maximum of:

\$200 per week for weeks 3-7

\$300 per week for weeks 8-26

\$400 per week for weeks 27-52

Or 85% of the insured persons pre disability earnings whichever is the lesser.

Excess: 14 days

Benefit period: 52 weeks

Injury Assistance Benefit (For non-income earners)

We will pay 75% of the actual non-medical related expenses incurred for home help, child minding, home tutorial costs incurred for a qualified tutor.

Maximum payment \$200 per week

Excess: 7 days

Benefit period: 26 weeks

Parent inconvenience allowance

We will pay to the parent or guardian \$25 per day for each day a full time student under 18 years of age if hospitalised (Maximum payment \$1,500)

Non Medicare Medical Expenses

We will pay 50% of incurred Non Medicare medical expenses to a maximum of \$2,000 (**Excess \$100**) should an Insured person suffer Bodily Injury within twelve (12) Calendar months results in:-

- Private Hospital Accommodation
- Ambulance Transport Costs
- Chiropractic
- Dental Services (to sound whole teeth only)
- Ancillary Medical Procedures
- Theatre Fees in Private Hospital where Medicare does not apply
- Orthotics, Splints and Prosthesis where an Insured Person's Medical Practitioner considers them medically necessary for the treatment of the Bodily Injury.

Funeral Expenses

We will pay \$5,000 as a funeral benefit in addition to Capital Benefit I (one)

Physiotherapy Benefits

If during the Scope of Cover, an Insured Person suffers Bodily Injury which within twelve (12) calendar months results in physiotherapy treatment required and provided by a suitably qualified physiotherapist We will pay the following:

- Visits 1 – 5 95% (of the fee charged less rebates from other sources)
- Visits 6 -10 80% (of the fee charged less rebates from other sources)
- All other visits 75% (of the fee charged less rebates from other sources)

Provided Always:

- (i) Any payable condition claimed must occur within 12 months of the date of injury.
- (ii) The compensation we pay will be reduced by amounts paid or payable from statutory transport accident scheme, statutory workers compensation scheme or from private health insurance.
- (iii) We shall not be liable for the first 14 days of each loss of earnings and injury assistance claim.
- (iv) Our liability to pay compensation shall not exceed 50% of expenses to a maximum of \$2,000 whichever is lesser.
- (v) We will not pay for accounts covered by private health insurance whether claimed or not.
- (vi) We will not pay for expenses incurred for which a Medicare benefit is payable.

Scope of cover

The policy shall apply in respect of such activities that are officially organised by and under the control of the insured.

*** Please note that the above is only a brief summary of benefits and should be read in conjunction with the Policy Disclosure Statement and Policy Wording.**

FREQUENTLY ASKED QUESTIONS

1. Can I claim the MEDICARE gap through the EFL Insurance Program?

Unfortunately due to The Health Insurance Act 1973 the insurer's are prohibited from paying the MEDICARE gap.

As Sportscover Australia Pty Ltd is a NON MEDICARE MEDICAL INSURER, they are prevented by government legislation from covering the MEDICARE GAP. This means that in most cases, a service that is performed by a registered Medical Practitioner will not be covered by the policy. Some examples of the expenses NOT claimable through this section include:

- i) The Gap between the registered Medical Practitioner's fee and the amount you receive back from Medicare for the following medical services: Doctors, Surgeons, Anaesthetists, Pathologists & Radiologists.
- ii) Other items where a Medicare refund (in any part) is recoverable.

2. Will the Insurer pay my bills upfront?

All accounts must be paid and private health insurance claimed prior to sending them to Sportscover.

3. What are Ancillary medical procedures?

The main ancillary benefits are - Acupuncture, Osteopath, Naturopath, Massage, Hydrotherapy, Podiatry.

4. Are the fees for the Theatre covered under my Policy?

Provided that a Medicare rebate is not applicable the Theatre fee will be covered under Non-Medicare Medical expenses cover however please note that the limit the Insurer will pay any one claim is \$2,000.

5. Is it possible to receive an extension past the 12 month period of my claim for Non-Medicare Medical expenses?

The maximum time limit for benefits under our current policy is twelve months from the date of the accident.

6. What benefits are covered with the policy that my Association has arranged for me?

The policy covers many Non-Medicare Medical expenses such as Private Hospital accommodation, physiotherapy, chiropractic, dental, ambulance, some MRI'S and other ancillary expenses. The policy also extends to provide some cover for loss of earnings. Please refer to the weekly injury benefit table above.

7. Can I claim Non-Medicare medical benefits progressively similar to a private health fund?

Claims for Non-Medicare Medical expenses such as private hospital accommodation, physiotherapy, chiropractic, dental, ambulance and other ancillary expenses are settled upon completion of the treatment.

8. If I hold private health insurance can I still claim?

Certainly, where private health insurance is held, a proportion of the gap is usually refunded by Sportscover. The EFL benefit for the "GAP" is 50% of each invoice submitted (less any excess) and limited to \$2,000 any one claim.

9. When should I return the completed claim form?

As soon as possible would be the best answer but the completed claim form should be returned within **30 days** of the accident even if treatment is not yet complete. The Non-Medicare medical accounts can be forwarded at a later date once treatment is complete.

10. What sections of the claim form require completion?

In order to process your claim as quickly as possible the Insurer requires the following to be completed: Claim form, witness statement, official report, copy of teamsheet/injury report and employer's statement (if claiming loss of earnings).

11. What is the maximum period I can claim loss of earnings?

The policy provides cover for 52 weeks from the date of the accident. Please refer to your club to see if they have taken the additional top up benefit that is available over and above the standard cover the EFL provide.

12. I wish to claim loss of wages, but I have been paid some sick leave by my employer. How does this affect my claim?

You may still be able to claim, but the sick leave that you have been paid will need to be taken into account in calculating your loss of wages claim. Please refer to your club or association's policy for specific details.

13. When I lodge my claim will I receive regular updates?

Sportscover will provide you with an update every sixty (60) business days. You will also be given access to the Sportscover website. They will issue you with a password which will allow you to track and see how your claim is progressing.