

Exclusions and Limitations

20. Benefit is not payable to a member whose injury arises from:
 - (i) Assault wherein the claimant has been the aggressor
 - (ii) Intentional self injury
 - (iii) Pre-existing physical defect or infirmity
 - (iv) The use of alcohol or drugs.
 - (v) Damage to or loss of personal effects, accommodation, travel expenses and sustenance are not covered under any section.
 - (vi) Legal expenses.
 - (vii) The GAA Injury Scheme will only provide cover in respect of Hurling claims provided the injured claimant is wearing a Helmet which conforms to the NSAI Standard IS:355. ie Mycro, Marc or Azzurri.
 - (viii) Cost of completion of the medical section of the claim form must be borne by the claimant.
21. In relation to categories as set out in 1.4 above the following additional exclusions apply:
 - (i) Driving of vehicles, including tractors other than grass cutting
 - (ii) Use of power driven woodworking machinery including chainsaws or oxy-acetylene or welding equipment
 - (iii) Work at heights exceeding 15 metres or at depths exceeding 3 metres
 - (iv) Demolition, construction or other hazardous activity of any kind.
22. **In the event of a claim being made by a Member for the purpose of obtaining a Benefit to which he or she is not entitled, CLG shall be entitled to refuse any Benefit under this Scheme and to seek repayment of any Benefit actually paid.**

Claims Procedure

23. Willis have been retained as professional claims handlers, and have responsibility for the day to day operation of the scheme.
24. **In accordance with instructions from Cumann Lúthchleas Gael all queries and correspondence relating to any claim must be made through the Club Secretary (and County Secretary/Scheme Administrator as appropriate) and not directly with Willis.**
25. Claim Form: The following is required in respect of all claims regardless of claim type:
 - A claim form should be downloaded from www.gaa.ie and the GAA Injury Scheme can be found under the heading of "Popular Links"
 - Claimants Membership Number must be supplied on claim form.
 - If a player returns to play after an injury and he is Reinjured a new claim form must be submitted.
 - A copy of the Referee's report if the injury was sustained in an official match.
 - A letter from the Club Chairman/Secretary if the injury occurred in an official Training Session or Challenge Match
 - Where a claim is being pursued under 1.4, a letter from the Club Chairman/Secretary confirming the claimant's membership and stating the circumstances surrounding the accident/injury
 - The claim form in particular sections A, E and F should be fully completed and signed by the injured member. The claim form together with all relevant supporting documentation should then be forwarded to the Club or County Secretary/Designated Scheme Officer for their signatures/validation.

All claims are required to be reported to Willis within 60 days of the injury by completing, as a minimum the 1st two pages of the claim form which should be signed and dated by the claimant.

In the event that the claimants signature and date is omitted the first two pages of the claim form will be returned for completion.

Claims reported outside the 60 days will not be processed.

26. In addition to the claim form the following supporting documentation is required depending on claim type:

Medical / Dental claims :

- Official Medical receipts (invoices are not acceptable).
- Under Section A of the claim form confirmation whether the injured member has any third party medical insurance must be completed to enable the claim to be assessed as the scheme only provides cover for non-recoverable costs up to the limits of the scheme.
- In all cases Section E must be completed and stamped by the attending Doctor or Dentist only. If no stamp is available a business card or confirmation on the doctor/dentists headed paper must be submitted.

Loss of Wages claims

- Three recent payslips dated prior to the injury or a letter from the injured member's employer on company headed paper confirming the injured member's basic nett pay (stating weekly or monthly). Ongoing Loss of Wages claims can only be considered upon receipt of Willis Continuation Claim form. Doctors Medical Certificates are not acceptable.
- If self-employed, a letter from the injured member's Accountant on company headed paper is required confirming the nett basic earnings for the three months prior to the injury. If the self employed claimant has no accountant the relevant information must be submitted by their solicitor/tax advisor. In addition, if a substitute worker has been employed a letter from the Accountant on company headed paper confirming the cost is required. If Claimant is related to employer proof of wages must be supplied by the employer's accountant.
- In all cases, Section D must be completed.

27. Once the injured member is satisfied that the claim form has been fully completed and all supporting documentation attached, he/she should sign it and forward it to the Club or County Secretary/Designated Scheme Officer as appropriate for their signatures/validation and onward transmission to Willis who will only then be in a position to assess the claim.
28. If a submitted claim is not fully documented, the necessary documents, which must be submitted in a timely manner, will be requested by Willis.
29. All payments in respect of claims shall be made by Willis through the appropriate County Committee.
30. **All Disputes** concerning entitlement to benefit under the Scheme must be referred to the GAA Insurance Work Group c/o Bainisteoir Riosca agus Árachais, Ascal San Séosaph, Baile Átha Cliath 3 who shall investigate the case in full and decide on the level of benefit payable if any. Should the claimant refuse the GAA Insurance Work Group's decision, then the matter must be submitted to an Independent Expert (' the Expert ') to be appointed by mutual agreement, (or in default of agreement within 7 days, by the president for the time being of the [Law Society of Ireland]). The Expert shall act as an expert and not as an arbitrator. The Independent Expert's decision shall be final and binding on the parties in the absence of fraud or manifest error. The Expert's fees shall be borne in such proportions as the Expert shall direct.
31. **All Complaints** related to the administration of the Injury Scheme must be forwarded to the appropriate County Secretary for investigation.

This leaflet is for information purposes only. It does not form any contract and does not purport to deal with all aspects of the GAA Injury Scheme.

Further details of the Scheme can be secured from:

The County Secretary
Or
Willis, Grand Mill Quay, Barrow Street Dublin 4. Fón 01 6396343
Or
CLG, Cúrsaí Riosca agus Árachais, Páirc an Chrócaigh, Báile Átha Cliath 3
Fón 01 8363222

Administered by
Willis

**Cumann Lúthchleas
Gael Scéim Timpiste**

GAA Injury Scheme

Effective Date 01 February 2010



GAA INJURY SCHEME

RÉAMHRÁ

The GAA has operated an injury scheme in one way or another since 1929. Through a process of constant review and frequent improvement the Association continues to exercise concern for the welfare of members involved in our national games in various capacities.

The mandatory scheme provides benefits to members playing the national games of Hurling, Gaelic Football, Handball and Rounders whose clubs are registered with the scheme, and also to accredited club personnel performing designated duties in connection with the activities of Clubs registered in the Scheme.

The Injury Scheme is funded entirely from Club and GAA funds with no outside (e.g. insurance) involvement. There is no legal obligation on the GAA to provide such a Scheme. Risk is an inherent factor in sport, as in life. When members voluntarily take part in Club Activities, they accept the risks that such participation may bring. Legal representation is not required and there is strictly no Legal Expenses Cover amongst the benefits provided.

The Injury Scheme does not seek to compensate fully for injury but to supplement other Schemes such as Personal Accident or Health Insurance. The Scheme only provides cover for unrecoverable losses up to the limit specified under the scheme.

Ultimately, the responsibility to ensure that adequate cover is in place lies with the individual member, commensurate with his/her specific needs.

Scope

- The scheme applies to:
 - 1.1 Players on a team registered with the Scheme who incur accidental injury while playing Hurling, Gaelic Football, Handball or Rounders only, either:
 - (a) in the course of an official competitive game or a challenge game or
 - (b) in the course of an official and supervised team training session.
 - 1.2 Match officials i.e. referees, linesmen or umpires injured whilst officiating at an official game of Hurling, Handball, Gaelic Football or Rounders as specified in 1.1 above
 - 1.3 Voluntary coaches, team managers, selectors and members of official team parties injured during games or training as specified in 1.1 above
 - 1.4 Members performing designated duties under request/instruction of a Club Officer, in a strictly voluntary capacity, on GAA property or on property under the exclusive use of the GAA.
- The scheme covers Adult and Youth members of the GAA and, also, players registered with the Scheme through Primary, Post-Primary and Third-level Schools and Colleges and Inter-Firm Units.
- For the purpose of the Scheme, an Adult is a Full Registered member of the GAA who was 18 years of age or over on registration of his team(s) with the Scheme.
- A Youth is a Youth member of the GAA who was under 18 years of age on registration of his team(s) with the Scheme.

Registration

- All teams must be registered in the Scheme which operates from 1st January to 31st December annually.
- A separate subscription must be paid in respect of each named team specified in 12 below.
- Team Registration is effected through the submission of a completed Application Form, with the appropriate subscriptions, through the County Committee to the Provincial Council.
- Clubs and other units must register on line and subscriptions to be forwarded to the GAA Injury Scheme unit in Páirc an Chrócaigh, Baile Átha Cliath 3. Registration and subscriptions should be completed by 15th February 2010.
- Refunds of subscriptions cannot be considered.
- The Association reserves the right to decline renewal of any application or to apply special conditions or excesses or to waive the strict compliance with any of these regulations.

Funding / Subscriptions

- The Injury Scheme shall be funded by:
Subscriptions in respect of teams registered by Provincial Councils, County Committees, Divisional Boards, Clubs, Schools and Colleges, Inter-Firm and other units and six per cent of Gross Gate Receipts from Championships, National Leagues and Railway Cups
- The amount of team subscriptions shall be:
 - a) Adult (See 3 above) €1000 per team - no maximum per Club or Unit
 - b) U21 - €450 per team, no maximum per club or unit
 - c) Youth (see 4 above) - €200 per team to a maximum of €1200 per Club or Unit
 - d) Inter-Firms - €200 per team
 - e) Primary Schools - €200 per team to a maximum of €300 per school
 - f) Post Primary Schools - €200 per team to a maximum of €300 per school
 - g) Third-Level Colleges - €200 per team - to a maximum of €600 per College
 - h) Rounders - Adult €100 per team - Youth €50 per team
 - i) Handball - as per agreement.
- Participation in the Injury Scheme is not mandatory for categories e) to i) inclusive.

- All seven-a-side teams and teams playing in authorised competitions, whether Adult or Youth, are included in the categories listed.

Benefits

- Lifetime Disability Benefit €300,000
(payable in addition to any other benefit)
A single identifiable occurrence on the field of play resulting in permanent total physical paralysis such that the Insured Person is confined to a wheelchair for life.
 - Capital Benefits

* Permanent Total Disablement	€100,000
* Loss of Sight	€100,000
* Permanent Partial Loss of Sight	Up to €100,000
* Loss of Limb(s)	€100,000
* Complete and incurable paralysis	€100,000
* All above benefits Less any Loss of Wages Benefit claimed.	

Permanent Partial Disablement
A scale of benefits providing for benefits to a maximum of €50,000 for specified disabilities applies. Details available on request.
 - Death Benefit

Adult (or Married Youth)	€50,000
Youth	€25,000
- Medical**
If you have medical insurance e.g VHI, Quinn Healthcare, a claim must be made with your medical provider. Otherwise unrecoverable medical expenses are covered up to a maximum of €4,500 (This benefit includes cover for MRI Scans up to a limit of €300 per scan and post operative treatment up to a limit of €320. A maximum benefit of €40 per any one treatment applies).
The first €100 of each and every claim is excluded.
- Dental**
Otherwise unrecoverable dental expenses up to a maximum of €4,500. The first €100 of each and every claim is excluded.
- Supplementary Hospital Benefit**
€400 per day's stay in hospital. Benefit only payable if stay is a minimum of 10 consecutive days up to a maximum of 15 days.
- Loss of Wages (applicable (a) to Adults and (b) to Youths who are in full-time employment at date of injury).**
'Employment' means permanent gainful employment of not less than 16 hours a week.
Otherwise unrecoverable loss of basic nett wages (i.e. excluding overtime, bonuses, unsociable working hours, allowances etc.) payable up to 52 weeks but **excluding the first week**. Social Welfare/Income Protection and/or other entitlements will be considered as recoverable income and will be deducted from the basic nett wage figure.
Benefit is payable for full weeks only and the maximum benefit payable per week is as follows:

WEEK	1	-	Nil
WEEKS	2-4	-	up to €200
WEEKS	5-52	-	up to €400
- Benefits/Conditions and Team Subscriptions may be altered from time to time at the discretion of C.L.G.