



**GAA INJURY BENEFIT FUND  
SUMMARY DOCUMENT**

**Effective from 1<sup>st</sup> January 2018**

**Interfirm Edition**



## What is the GAA Injury Benefit Fund?

The GAA has operated an Injury fund in one way or another since 1929. Through a process of constant review, the Association continues to exercise concern for the welfare of registered members involved in our national games in various capacities. The **mandatory** benefit fund provides benefits to registered members playing the national games of Hurling and Gaelic Football whose clubs are registered with the fund.

The GAA Injury Benefit Fund is a Self-funded benefit fund funded entirely from GAA funds with no outside involvement. **In effect it is a benefit fund funded by members for the members.** The Injury Fund is not an Insurance Scheme and is therefore, not regulated by the Central Bank of Ireland. As payments from the fund come directly from GAA funds, there is no Insurer involved with the fund. There is no legal obligation on the GAA to provide such a fund. 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 therefore, there is strictly no legal expenses cover amongst the benefits provided. Each player needs to ensure that they have adequate cover in place to meet their own individual needs and personal circumstances. The GAA Injury Benefit Fund is only in place to cover benefits which cannot be claimed elsewhere and is a benefit cover only.

The GAA Injury Benefit Fund does not seek to compensate fully for Injuries sustained but to supplement other Schemes such as Personal Accident or Health Insurance. **The playing of Gaelic Football, Hurling, Handball and Rounders' involves the risk of Injury and it is each individual registered player's responsibility to familiarise themselves with the terms and benefits of the GAA Injury Benefit Fund.** The Injury Benefit Fund only provides cover for unrecoverable losses up to the limits specified.

In summary, **the GAA Injury Benefit Fund is in place to cover benefits which cannot be claimed elsewhere.** Therefore, if a claimant is seeking to claim benefit from the fund, they must exhaust all other avenues before making a claim under the GAA Injury Benefit Fund. Furthermore, the Injury Benefit Fund should not be used as a guarantee for the payment of expenses. Ultimately, the responsibility to ensure that adequate cover is in place lies with the individual member, commensurate with his \ her specific needs and members should not use the fund as their only recourse or be dependent on the fund to compensate them fully for any losses associated with the injury sustained.



## Who is covered under the GAA Injury Benefit Fund?

The GAA Injury Benefit Fund covers Adult\* and Youth\* members of the GAA.

For the purpose of the Benefit Fund, the following applies:

An Adult\* is a registered and paid member of the GAA as per the Official Guide who is 18 years of age or over on the 1<sup>st</sup> January of the calendar year.

A Youth\* is a registered and paid member of the GAA as per the Official Guide who is under 18 years of age on the 1<sup>st</sup> January of the calendar year.

As Interfirms, the Benefit Fund will cover teams who have registered with the Inter Firm Council to play in Inter Firm competitions

**Social Members, non-playing and non-coaching members are not covered under the GAA Injury Benefit Fund for injuries sustained during GAA activities.**

\* Please see Glossary for definition



## Funding & Subscriptions

The GAA Injury Benefit Fund is funded in its entirety by annual team subscriptions together with six per cent of Gross Gate Receipts from Championships and National Leagues alongside a significant Central Council contribution. **The amount of team subscriptions shall be €200 per team** for Interfirms.

Please be advised that refunds of subscriptions will not be considered

Team subscriptions maybe altered from time to time at the discretion of Cumann Lúthchleas Gael.

**There is no cover under the GAA Injury Benefit Fund for injuries sustained at unauthorised \ unofficial competitions, charity events, recreational activities and fundraisers. If your club is in doubt as to whether cover is in place for a specific competition, you must contact your Interfirm Council for confirmation of same – details for each of the 4 Provincial Councils are as follows:**

Munster	- Oliver Fitzpatrick
Leinster	- Liam Dwyer
Connacht	- John Gray
Ulster	- Martin Kennedy

**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.**

## Registering for the Fund – what to do and how much?

Each company must complete the registration Form and send directly to the Injury Fund Section, Croke Park, Jones's Road, Dublin 3 together with a cheque for **EUR200.00 per team they are entering made payable to Cumann Luthchleas Gael**

**Alternatively, an Inter Firm can pay EUR200.00 per team they are entering by bank transfer using the following details**

Bank: AIB Drumcondra  
Acct Name: Cumann Lúthchleas Gael  
BIC: AIBKIE2D  
IBAN: IE85 AIBK 9321 0803 6080 44

If paying by bank transfer, please can you clearly mark your record 2018 PIF with the name of the Interfirm and confirm on your registration form that payment has been issued by bank transfer and the date on which payment was transferred so that that we can confirm with our finance department that payment has been issued and mark payment off the Inter Firm record

A copy of the registration Form is at the back of this Summary Document. Please contact your provincial council should you require further details regarding registration.

## Important Notes

No claim will be processed for the current playing year until renewal is fully completed, payment has been received in full and a receipt issued. GAA Injury Benefit Fund claims received by Willis Towers Watson will be declined for assessment if payment in full has not been received. All claims will be returned and no appeals considered.



## **Benefits - Benefits \ Conditions may be altered from time to time at the discretion of CLG**

- 1) **Medical** – Otherwise unrecoverable inpatient\* and outpatient\* medical expenses are covered up to a maximum of €4,500.00 (This benefit includes cover for MRI scans up to a limit of €300.00 per scan and post-operative physiotherapy \ treatments up to a limit of €320.00)

For the purposes of assessing claims under the GAA Injury Benefit fund, medical expenses\* are defined as doctors' fees, consultation fees, surgery fees, prescription charges, injection fees, MRI scans and post-operative treatments. **The first €100.00 of each and every claim is excluded**

**Please note that unrecoverable medical expenses will only be covered up to two years after the Injury date. For example, if the injury date is the 01/02/2018, unrecoverable medical expenses associated with the injury sustained on that date will only be covered up to the 31/01/2020**

**Only medical treatment undertaken in the Island of Ireland will be eligible for reimbursement under the terms of the Fund.**

There is no cover for pre-operative physiotherapy \ treatments or treatments of a pre-injury prevention \ post injury prevention nature. The only physiotherapy \ treatments that may be claimed are for treatments that are post-operative i.e. physiotherapy \ treatment that takes place after a surgical procedure. In the absence of surgery, there is no cover for physiotherapy \ associated treatments.

For the purposes of the fund, surgery\* is defined as treatment administered by a surgeon by the act of incision on an anaesthetised patient (whether conscious or unconscious) to investigate and \ or treat a condition to help improve bodily function that has been damaged or injured as a result of GAA playing activity. This does not include treatments using a local anaesthetic for injections or manipulation used in treating dislocations. Pre-injury prevention \ Post injury prevention treatments are specifically excluded from cover.

If you have cover under the Public Health System \ National Health Service, you must avail of cover under the appropriate system before seeking to submit a claim under the GAA Injury Benefit Fund.

If you have private medical insurance e.g. VHI, Laya Health Care, Irish Life Health etc. or cover under any Personal Accident policy, a claim must be made with your private medical \ personal accident provider for both inpatient\* and outpatient medical expenses\*. Therefore, you must submit all of your original medical receipts to your private medical insurer \ personal accident provider. Once you submit your original medical receipts, your private third party medical insurer will assess your claim and provide you with an inpatient\* \ outpatient\* statement of account\* clearly stating the benefits that they have covered or not covered. A copy of this statement of account\* must be submitted under the GAA Injury Benefit fund.



- 2) **Dental Benefit** – otherwise unrecoverable dental expenses up to a maximum of €4,500.00. **The first €100.00 of each and every claim is excluded.**

**Please note that unrecoverable dental expenses will only covered up to two years after the Injury date. For example, if the injury date is the 01/02/2018, unrecoverable dental expenses associated with the injury sustained on that date will only be covered up to the 31/01/2020**

**Only dental treatment undertaken in the Island of Ireland will be eligible for reimbursement under the terms of the Fund.**

- 3) **Supplementary Hospital Benefit** – A claimant can claim for a stay in hospital\* provided they are an in-patient for a minimum of 10 consecutive days and they can claim for a maximum of 15 days. €400.00 per day is claimable.

- 4) **Loss of wages (applicable (a) to adults and (b) to youths who are in full time employment at the 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, commission, allowances etc.) payable up to 26 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:

Weeks 1	- No Benefit
Weeks 2 – 26	- Up to €300.00 per week

As part of the assessment of the loss of wages claim, a claimant will be requested to go for an Independent Medical Examination once the claimant has received 8 weeks loss of wages benefit. Details of the appointment for the Independent Medical Examination will be communicated in writing by Willis Towers Watson to the club Injury Fund contact to give to the claimant. No further loss of wages payments will be considered beyond 8 weeks until Willis Towers Watson receive the report from the Independent Medical Examiner.

From time to time Croke Park / Willis Towers Watson may use their discretion in not sending a claimant for an Independent Medical Examination depending on the nature of the injury sustained. A request for a medical report from the claimant's GP \ consultant may also be requested as part of the assessment of the loss of wages claim.

- 5) **Capital Benefits**

Cover is available under the GAA Injury Benefit Fund for Capital benefits. Claims will only be considered for such cases when any of the benefits listed above from 1 – 4 have been claimed for and paid out by Willis Towers Watson as per the terms of the Fund. Applications for Capital Benefits can be made by writing directly to GAA Injury Fund Manager, Páirc an Chrócaigh, Baile Atha Cliath 3.



## What is the Preferred Medical Provider Initiative?

Through the operation of the GAA Injury Benefit Fund which costs Cumann Lúthchleas Gael €9,000,000 to fund per year, medical expenses make up over 70% of the claims payments issued. Given this significant cost, Cumann Lúthchleas Gael approached hospitals and clinics countrywide with a view to agreeing preferred prices for our registered members who present at these hospitals \ clinics following an accidental bodily injury sustained while playing in an official competitive fixture \ sanctioned challenge match or taking part in an official supervised training session on a team registered under the Fund and for which full payment of registration fees has been received in Croke Park. Furthermore, Cumann Lúthchleas Gael have also obtained service commitments from the Preferred Medical Providers which will help in delivering quality healthcare to our registered members and enhance our commitment to Player Medical Welfare.

### Who are the Preferred Medical Providers?

The following are the list of Preferred Medical Providers who have agreed to work with us on this initiative. It is our intention to build working relationships with the listed providers in the long-term which we hope will provide further benefits to our registered members.

Preferred Medical Provider	Telephone Number	Website
Aut Even Hospital	056 7775275	<a href="http://www.autevenhospital.ie">www.autevenhospital.ie</a>
Beacon Hospital	01 2936600	<a href="http://www.beaconhospital.ie">www.beaconhospital.ie</a>
Blackrock Clinic	01 2832222	<a href="http://www.blackrock-clinic.ie">www.blackrock-clinic.ie</a>
Bon Secours Hospital Group	021 4542807	<a href="http://www.bonsecours.ie">www.bonsecours.ie</a>
Cappagh National Orthopaedic Hospital	01 8140400	<a href="http://www.cappagh.ie">www.cappagh.ie</a>
Hermitage Medical Clinic	01 645 9000	<a href="http://www.hermitageclinic.ie">www.hermitageclinic.ie</a>
Kingsbridge Private Hospital	0845 60 06 352	<a href="http://www.3fivetwo.com">www.3fivetwo.com</a>
Mater Private Group	01 8858888	<a href="http://www.materprivate.ie">www.materprivate.ie</a>
North West Independent Hospital	028 777 63090	<a href="http://www.nwih.co.uk">www.nwih.co.uk</a>
Sports Surgery Clinic	01 5262000	<a href="http://www.sportssurgeryclinic.com">www.sportssurgeryclinic.com</a>
St. Francis Private Hospital	044 9385300	<a href="http://www.stfrancisprivatehospital.com">www.stfrancisprivatehospital.com</a>
Ulster Independent Clinic	028 9066 1212	<a href="http://www.ulsterindependentclinic.com">www.ulsterindependentclinic.com</a>
Whitfield Clinic	051 337400	<a href="http://www.whitfieldclinic.ie">www.whitfieldclinic.ie</a>

### How will an Injured player avail of the Preferred Pricing?

Once a player presents at one of the above named medical facilities, the player will be requested to confirm their Club or County Panel together with their membership number which the hospital will record. Checks will be made with Croke Park to confirm that the Players' seeking to avail of the Preferred Pricing arrangements are registered members of the Association.



**Do I have to attend a Preferred Medical Provider to avail of benefit under the GAA Injury Benefit Fund?**

No, a player is not required to attend one of the Preferred Medical Providers listed to avail of benefit under the GAA Injury Benefit Fund. A player can continue to attend medical facilities not noted. However, as above preferred prices have been agreed with the listed Medical facilities only.

**Will Croke Park be publishing the prices agreed with the Preferred Medical Providers?**

No, due to privacy and commercial sensitivity, we are unable to publish the prices agreed with the Preferred Medical Providers. However, we can confirm that the agreed prices reflect a 5 - 10% saving against prices charged to players' prior to the introduction of this initiative. Players and club officers can contact the relevant medical providers as regards obtaining the agreed price for a surgery that a player may require.

**Is the Medical Expenses benefit available under the GAA Injury Benefit Fund changing as a result of this initiative?**

No, €4,500 is the maximum amount available for unrecoverable medical expenses as per the terms of the Fund.

## **Important Note**

We would also remind all, that the playing of Gaelic Football, Hurling, Handball and Rounders' involves the risk of Injury and it is each individual registered player's responsibility to familiarise themselves with the terms and benefits of the GAA Injury Benefit Fund. Each player needs to ensure that they have adequate cover in place to meet their own individual needs and personal circumstances. The GAA Injury Benefit Fund is only in place to cover benefits which cannot be claimed elsewhere and is a benefit cover only. Members should not use the fund as their only recourse or be dependent on the fund to compensate them fully for any losses associated with the injury sustained.





## Exclusions and Limitations

- 1) **Claims reported more than 60 days after the Injury date.**
- 2) Medical or dental treatment undertaken outside the Island of Ireland
- 3) Medical or dental expenses incurred two years after the date of injury
- 4) Claims not reported using the mandatory On-line application
- 5) If a club fails to register their teams under the GAA Benefit Fund and pay the appropriate subscriptions, no claims will be considered for that club for the corresponding year.
- 6) Benefit is not payable to a member whose injury arises from:
  - a. Assault wherein the claimant has been the aggressor
  - b. Intentional self-injury
  - c. Pre-existing physical \ medical condition or infirmity
  - d. The use of alcohol or drugs
- 7) Damage to or loss of personal effects, accommodation, travel expenses and sustenance.
- 8) Legal expenses.
- 9) Cost of completion of the medical section of the claim form.
- 10) If a claimant sustains an injury while participating in Hurling and he \ she is not wearing a helmet with a facial guard that meets the standards set out in IS355 or other replacement standard as determined by the National Safety Authority of Ireland (NSAI) as per the Official Guide, the claim will be declined.
- 11) If a claimant sustains an injury while participating in Gaelic Football and he \ she is not wearing a mouthguard as per the Official Guide, the claim will be declined.
- 12) Sick certificates \ Medical certificates are not acceptable for confirmation of period of disability.
- 13) Non-medical expense items such as gym equipment, gym memberships, orthotics, mouth guards etc.
- 14) Pre- operative physiotherapy and other associated treatments.
- 15) Pre-injury prevention and Post Injury prevention treatments are specifically excluded from cover
- 16) Post-operative physiotherapy and other associated treatments which have not been medically prescribed by a GP \ Consultant.
- 17) Post-operative physiotherapy and other associated treatments that are greater than the limit of €320.00.
- 18) Cosmetic and elective procedures.
- 19) If a claimant goes against medical advice given by a doctor \ consultant \ dentist and subsequently is involved in playing activity and sustains an injury
- 20) If a claimant sustains an injury while playing on snow, ice or a pitch that was deemed unfit to play
- 21) Loss of wages claims – overtime, commission, bonuses, unsociable working hours, allowances etc. are not covered.
- 22) If a player returns to sport, it effectively ends their existing claim. Therefore, If a player returns to play after an injury and he is reinjured a new claim must be submitted. In other words, a new claim must be submitted for each and every injury that occurs. Failure to do so may result in the non-payment of benefits.
- 23) Medical and dental expenses that are greater than the €4500.00 fund limit.
- 24) Medical and dental expenses that are less than the €100.00 excess\*
- 25) Medical and dental receipts that pre-date the date of injury.
- 26) Hospitalisation claims whereby the claimant is hospitalised for less than 10 consecutive days.



- 27) Loss of wages claims whereby the claimant is unable to work for less than 14 consecutive days.
- 28) Loss of wages claims whereby the claimant is not in full time employment at the date of injury.
- 29) Loss of wages claims whereby the claimant is unemployed at the date of injury.
- 30) Loss of wages claims whereby the claimant is in receipt of sick pay for the duration of the period unfit to work.
- 31) Loss of wages claims whereby the duration of the period of unfitness to work has not been medically certified by a GP \ Consultant.
- 32) Loss of wages claims in excess of the Benefit Fund limit of 26 weeks less the 1<sup>st</sup> week excess
- 33) If a third party medical provider pays out a medical \ dental expenses claim in respect of the claimant, the third party medical provider may not seek reimbursement from the GAA Injury Benefit Fund.
- 34) Injuries sustained at unauthorised \ unofficial competitions, charity events, recreational activities and fundraisers
- 35) If it is discovered during the assessment of the claim, that the claimant \ club have sought to make a fraudulent claim under the GAA Injury Benefit Fund, the claim will be declined in its entirety.
- 36) If a social member \ non-playing or non-coaching member sustains an injury on the club premises, there is no cover for that injury within the terms of the GAA Injury Benefit Fund.
- 37) Injuries sustained to members \ non-members performing designated duties within the club

#### **Claims Information – General**

- 1) Willis Towers Watson have been retained as professional claims handlers and have responsibility for the day to day handling of the claims received under the Fund.
- 2) In accordance with instructions from Cumann Lúthchleas Gael all queries and correspondence relating to any claim must be made through the Interfirm Representative
- 3) If a player returns to play after an injury and he is reinjured a new claim must be reported. In other words, a new claim must be submitted for each and every injury that occurs. Failure to do so may result in the non-payment of benefits.
- 4) If a submitted claim is not fully documented, the necessary documents will be requested by Croke Park / Willis Towers Watson.



## Submitting a claim – what to do?

- Interfirm claims notifications can be sent to [amy.coll@gaa.ie](mailto:amy.coll@gaa.ie) within 60 days of the injury date.
- After a claims notification has been received, a claim form will be issued to the claimant along with confirmation of the documentation required to process the claim.
- This form must be completed and returned with all required documentation to:  
GAA Injury Fund Administrator,  
Páirc an Chrócaigh  
Baile Atha Cliath 3
- Once all documentation is received and completed correctly, it will be signed by the Injury Benefit Fund administrator, who will forward it to Willis Towers Watson for processing
- Cheques will be issued to the Inter Firm contact notified on the registration form submitted at registration.

### Claims Sections Required –

- A Medical Claim – A full claim form including the medical section and declaration section
- A Loss of Wages Claim (Employed) – A full claim form including the employer's sections, social welfare \ social security section, the medical section and declaration section
- A

### General Documentation \ Information

- A Referee's Report is required and must be supplied if an Injury occurred during an Official Fixture. If an injury is not noted on the referee's report we will require a copy of the referee's report along with a letter from the County Secretary confirming the date and circumstances of the injury.
- A letter from the employer is required on official employers headed paper and must be supplied if an Injury occurred during an Official Supervised Training Session / official sanctioned challenge match. This letter must detail the date and circumstances surrounding the injury.
- Medical Section to be completed by Doctor / Dentist ONLY. If no stamp is available, please ensure that the Doctor / Dentist attach a letter on official paper confirming that the details are correct.
- Loss of wages – Employers section – must be completed by the claimant's employer only. If no company stamp is available, please ensure that the employer attaches a letter on company headed paper confirming that the details are correct.
- Loss of Wages – Social Welfare \ Social Security – must be completed by the Department of Social Protection for all Republic of Ireland claimants. For Northern Ireland claimants, this section must be completed by the claimant's employer in the case of where the claimant\* is an employee. If the claimant\* is Self-Employed, this section must be completed by the Department of Social Security.



## Additional documentation required \ information depending on claim type

### Medical \ Dental Claims

- When registering a claim, confirmation whether the injured member has any third party medical insurance must be completed to enable the claim to be assessed as the benefit fund only provides cover for non-recoverable costs up to the limits of the fund.
- **Original official medical or dental receipts** (invoices are not acceptable) must be submitted – copies of medical or dental receipts will only be acceptable whereby a claimant has made a claim with his or her third party medical insurance provider and the original receipts have been provided to the private medical insurer. If we receive in original official medical or dental receipts and a claimant has third party private medical insurance, the original medical or receipts will be returned to enable the claimant to make a claim with their third party private medical insurer.
- Unpaid Invoices, estimates, quotations or handwritten paid invoices are not acceptable.
- If you have cover under the Public Health System \ National Health Service, you must avail of cover under the appropriate system before seeking to submit a claim under the GAA Injury Benefit Fund.
- If you have private medical insurance e.g. VHI, Laya Health Care, Irish Life Health etc. or cover under any Personal Accident policy, a claim must be made with your private medical \ personal accident provider for both inpatient\* and outpatient\* medical expenses. Therefore, you must submit all of your original medical receipts to your private medical insurer \ personal accident provider. Once you submit your original medical receipts, your private third party medical insurer will assess your claim and provide you with an inpatient\* \ outpatient\* statement of account\* clearly stating the benefits that they have covered or not covered. A copy of this statement of account\* must be submitted under the GAA Injury Benefit fund.
- If the third party private medical insurer declines a claim, Willis Towers Watson must be provided with the letter detailing the reasons for the declinature. It is not acceptable for Willis Towers Watson to receive in a letter stating that no claim has been made with the third party private medical insurer.
- Post-operative treatment cover will only be considered whereby a claimant has undergone surgery which can be defined as treatment administered by a surgeon by the act of incision on an anaesthetised patient (whether conscious or unconscious) to investigate and \ or treat a condition to help improve bodily function that has been damaged or injured as a result of GAA playing activity. This does not include treatments using a local anaesthetic for injections or manipulation used in treating dislocations.
- If it is noted on the claim notification that the claimant has no third party private medical insurance and it is subsequently established that the claimant has cover, Willis Towers Watson will request in writing a full explanation as to why the incorrect details were advised and will instruct the claimant to make a claim with the third party private medical provider. Willis Towers Watson will refer such cases to Cumann Lúthchleas Gael for further investigation.



## Loss of Wages Claims

### Employee –The following must be received in addition to the claim form sections

- 3 official payslips dated prior to the date of injury or a letter from the injured member's employer on official company headed paper confirming the injured member's basic nett weekly wage.
- A letter from the employer's accountant if no company stamp available in employer section or if there appears to be a family connection (Employee/Employer).

### **General Information**

- Loss of Wages claims are only applicable to those who are in full time employment\* at the date of injury. Employment means permanent gainful employment of not less than 16 hours a week.
- The claimant must be unable to work for a minimum of 14 consecutive days.
- Items such as overtime, bonuses, unsociable working hours, allowances etc. are not covered. If the claimant is receiving full sick pay from his employer, a loss of wages claim cannot be considered as the fund only covers the loss of basic nett weekly wage\*.
- A claim for Social Welfare Benefit / Statutory Sick Pay / Social Security Agency Payment must be made in all cases for employees and self-employed claimants\*, it is not acceptable to state no claim made. The Social Welfare, Statutory Sick Pay \ Social Security Agency Section of the claim form must be completed for all loss of wages claims. Failure to have same completed will result in delays with the assessment of the claim.
- Sick Certificates/Medical Certificates are not acceptable for confirmation of the period of disability.
- Please note that loss of wages payments can only be issued up to the date that the doctor has completed and signed the medical section on the condition that there is a minimum of 14 days from the date of injury until the date on which the doctor signed the medical section.
- In the event that Willis Towers Watson issue payment for a loss of wages claim, Willis Towers Watson will issue a loss of wages continuation claim form which must be completed in full and returned to Willis Towers Watson
- If Willis Towers Watson have received a loss of wages continuation claim form, loss of wages payments will be only issued up until the date that the claimant\* has returned to work or if a claimant remains unfit to work, payments will be only issued up until the date that the doctor has signed the medical section of the continuation claim form.



- As part of the assessment of the loss of wages claim, a claimant will be requested to go for an Independent Medical Examination once the claimant has received 8 weeks loss of wages benefit. Details of the appointment for the Independent Medical Examination will be communicated in writing by Willis Towers Watson to the club Injury Fund contact to give to the claimant. No further loss of wages payments will be considered beyond 8 weeks until Willis Towers Watson receive the report from the Independent Medical Examiner.
- From time to time Willis Towers Watson may use their discretion in not sending a claimant for an Independent Medical Examination depending on the nature of the injury sustained. A request for a medical report from the claimant's GP \ consultant may also be requested as part of the assessment of the loss of wages claim.

### **Hospitalisation**

- If a claimant seeks to claim hospitalisation benefit, the on-line notification \ Section A general section of the claim form, medical section and declaration section should be submitted together with a letter from the attending doctor / consultant to confirm the date that the claimant was admitted into hospital\* and the date that the claimant was discharged from the hospital. This letter must be on official headed paper, signed and stamped accordingly. Please note that under the terms of the GAA Injury Benefit Fund, in order to claim hospitalisation benefit, a claimant must be hospitalised for a minimum of 10 consecutive days before benefit can be considered.



## Complaints Procedure

- If a Claimant\* \ Designated Interfirm Representative is dissatisfied with the handling of a claim, the claimant\* \ Designated Interfirm Representative must firstly write to Willis Towers Watson setting out in detail their complaint.

- Willis Towers Watson maybe contacted as follows:

GAA Injury Benefit Fund  
Willis Towers Watson  
Elm Park  
Merrion Road  
Dublin 4

Or by emailing [gaa.queries@willistowerswatson.com](mailto:gaa.queries@willistowerswatson.com)

- Upon receipt of the complaint, Willis Towers Watson will fully investigate same and issue a response in writing to the Designated Interfirm Representative.
- If the Claimant\* \ Designated Interfirm Officer remain dissatisfied with the response, the Claimant\* \ Designated Interfirm Officer must forward their complaint to the appropriate Inter Firm Council representative for investigation.
- The appropriate Inter Firm Council representative shall investigate the complaint in full and contact the Claimant\* \ Designated Interfirm representative with their response.
- If the appropriate Interfirm Council Representative decides that the complaint should warrant further investigation, the appropriate Interfirm Council Representative together with the Claimant\* \ Designated Interfirm Representative must refer the complaint in writing to the following:

GAA Risk & Insurance Committee  
C\O GAA Injury Fund Manager,  
Páirc an Chrócaigh  
Baile Atha Cliath 3

- The GAA Risk & Insurance Committee are appointed by Uachtarán CLG and ratified by Central Council. The GAA Risk & Insurance Committee shall investigate the case in full and make a decision accordingly. The decision of the GAA Risk & Insurance Committee is final.
- It is important to note that if a claimant\* seeks the services of a Solicitor to deal with his \ her complaint, there is strictly no legal expenses cover under the GAA Injury Benefit Fund.



## Fraudulent Claims

If any Claimant\* \ Designated Interfirm Representative makes or tries to make a dishonest claim under the GAA Injury Benefit Fund, Cumann Lúthchleas Gael have the right to:

- Cancel the Claimant's membership of Cumann Lúthchleas Gael if a member
- Cancel the Interfirm's cover under the GAA Injury Benefit Fund and refuse to repay any subscriptions received
- Refuse to pay any benefits for the Claimant\*.
- Request that the Claimant\* \ Designated Interfirm Representative reimburses the GAA Injury Benefit Fund for payments issued that the Claimant\* \ Interfirm is not entitled to.
- Impose appropriate punishments and sanctions as decided upon by the GAA Risk & Insurance Committee

All claimants \ Designated Interfirm Representative should be aware that Willis Towers Watson undertakes regular audits of claims received and in all instances where fraud is suspected in respect of a particular claim, a full and comprehensive investigation will be carried out and reported to the GAA Risk & Insurance Committee. In addition, Cumann Lúthchleas Gael reserves the right to refer the details of any claim submitted which is in any respect fraudulent to the appropriate authorities in order to prosecute the member.

Examples of fraudulent claims discovered but not limited to:

- Declaring that a claimant\* has no third party private medical insurance and it is subsequently discovered that the claimant has cover
- Seeking to claim loss of wages benefit although the claimant\* is fit to work

### Contact Information:

GAA Injury Benefit Fund  
Willis Towers Watson  
Elm Park  
Merrion Road  
Dublin 4

Email: [gaa.queries@willistowerswatson.com](mailto:gaa.queries@willistowerswatson.com) Telephone: 01 6396343

GAA Risk and Insurance Committee  
C\O GAA Injury Fund Manager  
Páirc an Chrócaigh  
Baile Atha Cliath 3

Telephone: 01 8363222





## GLOSSARY

### **Accidental bodily injury**

Identifiable physical injury to a claimant's body which is caused directly and solely by an accident is not intentionally self-inflicted and does not result from sickness or disease.

### **Accident**

A sudden, unexpected and specific event external to the body which occurs at an identifiable time and place.

### **Adult Member**

An Adult is a registered and paid member of the GAA as per the official guide who is 18 years of age or over on the 1st January of the calendar year

### **Youth Member**

A Youth is a registered and paid member of the GAA as per the official guide who is under 18 years of age on the 1st January of the calendar year.

### **Claimant**

Shall mean one of the following:

- 1.1 Registered Players on a team registered with the GAA Injury Benefit Fund who incurs accidental bodily injury while playing Hurling, Gaelic Football, Handball or Rounders' only, either in the course of an official competitive fixture or an official sanctioned challenge game or in the course of an official and supervised training session.
- 1.2 Match officials' i.e. referees, linesmen or umpires injured while officiating at an official fixture 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

### **In-patient Medical \ Dental Expenses**

Shall mean expenses for medically necessary treatment which involves in-patient treatment, day care or side room procedures in hospital. Examples of such expenses include hospital accommodation expenses, surgical fees and anaesthetist fees.

### **Out-patient Medical \ Dental Expenses**

Shall mean expenses for medically necessary treatment which does not involve in-patient treatment, day care or side room procedures in hospital. Examples of such expenses include doctor's fees, out-patient consultations and post-physiotherapy treatments.

### **Statement of Account**

A document supplied by your private medical insurer outlining the medical receipts which they have received, the amount they have contributed and any shortfall. A **letter from your private medical insurer stating no claims have been made will not be accepted.**



#### **An in-patient statement of account**

Relates to a claim made for i.e. surgery or overnight stay in hospital. This is usually dealt directly between the private health insurer and the hospital. The private medical insurer will provide a statement detailing the claim and a copy of this must be provided when requested.

#### **An out-patient statement of account**

Relates to any out- patient treatment received i.e. G.P visits, Consultant visits, MRI Scans, post-op physiotherapy etc. The claimant must make this claim directly through their provider by submitting all original medical receipts. The private medical insurer will provide a statement detailing the claim and a copy of this must be provided when requested.

#### **Medical Expenses**

Defined as doctor's fees, consultation fees, surgery fees, prescription charges, injection fees, MRI Scans and post-operative treatments.

#### **Surgery**

Defined as treatment administered by a surgeon by the act of incision on an anaesthetised patient (whether conscious or unconscious) to investigate and \ or treat a condition to help improve bodily function that has been damaged or injured as a result of GAA playing activity. This does not include treatments using a local anaesthetic for injections or manipulation used in treating dislocations.

#### **Excess**

Shall mean the first amount of a claim expressed as a monetary amount which the claimant must bear.

#### **Hospital**

Shall mean any establishment which is registered or licenced as a medical or surgical hospital in the country in which it is located and where the claimant is under the constant supervision of a qualified medical practitioner.

#### **Employment**

Shall mean permanent gainful employment of not less than 16 hours a week at the date of the injury.

#### **Basic Nett Wages**

Shall mean in the case of a claimant who is an **employee**, basic net wages excluding overtime, bonuses, unsocial working hours payments, commission or other allowances



## GAA Injury Benefit Fund Registration Form

Interfirm Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person \_\_\_\_\_

Contact Phone Number

Mobile \_\_\_\_\_ Landline \_\_\_\_\_

No. of Teams Registering

Football \_\_\_\_\_ Hurling \_\_\_\_\_

EUR200.00 per team registered

Payment amount owed \_\_\_\_\_

Payment by cheque or bank transfer, please confirm \_\_\_\_\_

If by bank transfer, please confirm the date payment was issued \_\_\_\_\_

Signed By

Interfirm Contact

Signature \_\_\_\_\_ Print Name \_\_\_\_\_