



Injury Fund Guide

ABOUT THE LGFA INJURY FUND

The Injury Fund was introduced by Cumann Peil Gael na mBan to help alleviate otherwise unrecoverable expenses incurred due to a physical bodily injury sustained during an official match or training session. There is no legal obligation on the Association to provide such a Fund or on any club/county to pay for a players/officials medical expenses.

The participation in all sports, especially contact sports, carries an inherent risk of injury which is accepted by members when they voluntarily participate in sport. At all times players/officials should take necessary precautions to minimise the risk of injury by following player welfare and injury prevention guidelines issued. The LGFA Injury Fund was introduced to assist with the reimbursement of some incurred expenses which arise due to an injury sustained from participation in ladies Gaelic football and should not be relied upon for full reimbursement of all costs incurred.

The LGFA Injury Fund is completely funded through the fees paid by registered members at registration each year. There is no insurer involved and it is not an insurance policy/scheme and should not be referred to as such. The Fund is not in place to cover every expense incurred due to injury but to assist in reimbursing expenses not recoverable elsewhere, such as private health insurance (VHI, LAYA Healthcare, Irish Life etc.) or Personal Accident insurance policies (Allianz Schools policy).

Should a member wish to pursue private treatment following an injury, they must ensure that they have the adequate financial resources to cover such treatment and must not rely solely on the LGFA Injury Fund for reimbursement. All members should make themselves aware of the benefits and procedures in place relating to the Injury Fund.

WHO IS COVERED BY THE LGFA INJURY FUND

All players/officials must be registered with the LGFA Injury Fund to be covered¹.

- Adult Member: is a Full Registered member of the Association who is 18 years of age or over on the 1st January of the year.
- Youth Member: is a Full Registered member of the Association who is under 18 years on the 1st January of the Year.

REGISTRATION

- Clubs and other units of the Association must submit their registration in line with the deadlines published by the Association each year in order to be covered under the LGFA Injury Fund. The registration year for 2022 – 2033 commences on 1st June 2022 and terminates on the 31st March 2023.
- Any player/official or club registering or affiliating to the Association after 1st January in any year shall be included in the fund up to and including the expiry date of membership the following year.

- In the case of a new player/official registering with an existing club between 1st January and membership deadline of a particular year, they must be included on the registration form for the new registration year.
- Refunds of subscriptions will not be considered.
- Fees are determined by Central Council and at present are as follows:
 - Adult – €25
 - Juvenile/U18 – €10
- The subscription fee for non-playing members shall be €25, which will entitle the applicant to be considered for the payment of wages/salary lost together with medical expenses only.
- All playing members should be registered members before the commencement of playing activities for the relevant year and should the club fail to register a member. There are implications for the unit in the event that a player takes a legal action against the unit, as the unit may be found to be negligent for permitting a member to play which is against the rules of the Official Guide, which in turn will invalidate any Liability Insurance claim that may arise as it is a strict condition of the Liability Insurance program that all units are in compliance with the Official Guide.

CLAIMS PROCESS

Notification

- Preliminary Claim Forms must be completed and submitted to the LGFA Injury Fund Co-ordinator, within 8 weeks of the date of injury.
- Where expenses will not exceed €200 and do not need prior approval, an Injury Claim form may be submitted with original medical receipts within the 8 weeks notification period
- Once a claim has been notified, the player/official has 2 years to submit the fully completed Injury Claim Form and original medical expenses
- All claims are permanently closed after 2 years
- As per Rule 74, any player that returns to sport will be considered to have completed all treatment necessary to be fit to return to sport and this will close their claim. However, where a player is medically directed to return to sport as part of a rehabilitation protocol they must follow the prior approval procedure to have the claim remain open.
- Any player that does not seek approval before returning to sport will have their claim closed. If it is found that a player returned to sport with prior approval and continues to seek reimbursement for expense after the date of return, this will be considered a fraudulent claim.

Prior Approval

Medical/Dental Expenses

- For any Private Medical Treatment prior approval must be sought with a referral letter from a medical doctor* or physiotherapist as and a request for financial assistance from the claimant to the Injury Fund Coordinator
- In order to have expenses reimbursed, original medical receipts must be submitted with a fully completed Injury Claim Form.
- Once payment is issued the claim will then close and no further benefit will be available under that claim number
- In all cases where the claimant has private medical insurance, a statement from the insurer confirming that a claim has been submitted under their policy for the receipts being claimed must be submitted

Dental

- Dental expenses do not require prior approval
- The maximum benefit available for a dental expenses claim is €3,000
- Once payment is issued the claim will then close and no further benefit will be available under that claim number

Loss of Wages

- Section C: Loss of Wages Certification must be submitted
- Last 3 payslips or a letter from the claimants employer on their company headed paper confirming the Net Weekly Wage amount
- Social Welfare letter confirming that a claim was made and the benefit provided where applicable

Payment

- Once the full Injury Claim form and relevant documents are received, they are assessed by the Injury Fund Co-ordinator for payment
- All prior approval requests are checked against any receipts received for private treatment
- Payments are issued by cheque to the injured party (or their parent in the event of a juvenile)
- Any receipts not covered (due to not being prior approved or specifically excluded expenses) will be returned with the payment
- All receipts reimbursed by the LGFA Injury Fund are retained for auditing purposes

Notes

- Preliminary Claim Forms can be submitted in hardcopy or electronically by email. Please email a clear, scanned copy of the form to Amy.Coll@lgfa.ie by the County Secretary.
- Requests for prior approval (consisting of a letter of referral from the medical doctor/physiotherapist and a letter/email from the player/official) can also be submitted in hardcopy or electronically by email from the player/official
- All Claim forms are available on www.LadiesGaelic.ie for download

BENEFITS – Terms & conditions of the LGFA Injury Fund may be altered from time to time at the discretion of the LGFA Management Committee

Medical Expenses:

Otherwise unrecoverable inpatient* and outpatient* medical expenses are covered up to a maximum of €5,500.00

Medical Expenses covered under the LGFA Injury Fund:

1. GP visits
2. Accident and Emergency attendance
3. Physical Therapy (Also referred to as physiotherapy, please see definitions on page 7)*
4. Surgery²
5. Private Scans* – X-ray/MRI ²
6. Consultant Visits²

This is inclusive of the following inner limits:

- i. Private Scans*: 1 Scan per claim. Maximum Benefit €295
- ii. Physical Therapy*: 90% of first 6 sessions
- iii. A&E*: €100

Dental Expenses

Otherwise unrecoverable dental expenses up to a maximum of €3,000. Dental receipts must include a breakdown of the dates and dental treatments received.

Loss of Wages

Applicable to adults and under-age who are in employment and who have paid the €25 Subscription³
Unrecoverable loss of net weekly wages only, excluding additional payments such as overtime, bonuses, unsociable working hours etc. are payable for a maximum of 20 weeks.

Social Welfare and any other entitlements (such as income protection insurance) will be considered as recoverable income and will be deducted from the Basic Wage figure.

The maximum benefit payable is €40 per day to a maximum of 5 working days per week.

Exclusions

1. Claims were the preliminary or injury claim form is received beyond 8 weeks after the date of injury
2. Medical or Dental Invoices which have not been paid and no corresponding receipt received
3. If the player/official was not a registered member of the LGFA as per the Official Guide at the time of the injury
4. Any treatment outside of those specified under the Benefits section of this document
5. Any expenses submitted 2 years after the date of injury
6. Travel expenses, prescriptions, injections and medical aids are NOT covered under the injury Fund.
7. The Injury Fund shall not apply in the case of a player/official:
 - a. Who is injured during a game as a result of an assault wherein the claimant has been the aggressor
 - b. Whose injury arises from a pre-existing physical defect or infirmity or from the use of alcohol or drugs
 - c. Players who do not wear mouth guards.
 - d. Who may be pregnant, suffering from concussion etc, any player who plays in this condition is entirely responsible for any consequences that may arise.
8. Legal Expenses
9. Any private treatment which was not prior approved
10. If the injury occurs during a training session/match while playing on snow, ice or a pitch deemed unfit to play on
11. Any private treatment not prescribed by a Medical Doctor / Consultant / Qualified physiotherapist
12. Medical or Dental expenses which exceed the benefits specified
13. Any expenses which pre-date the date of injury
14. Loss of wages claim where the claimant was unemployed at the date of injury
15. Protective equipment needs to be medically prescribed by your doctor who is aware that it will be worn to play Ladies Gaelic Football and not pose a hazard to other players, then there is no issue with the wearing of same from the LGFA Injury Fund
16. Any person who requires corrective eyewear to participate in Ladies Gaelic Football should consult with their optometrist and review options to ensure safe participation. Optometrist expenses are not covered under the LGFA Injury Fund.
17. Medical expenses not previously defined including, but not limited to, crutches, prescriptions (including inhalers, pain relief), injections (including MRA expenses exceeding the maximum MRI benefit), prehab boots, air boots, any bio-mechanical testing (also referred to as ISO-Testing) or general optician expenses such as eye tests or glasses
18. Gym Memberships are not covered under the Fund

Fraudulent Claims

- a) In the event of an application made by any member which in the opinion of Central Council is not a bona fide application and which is made for the purpose of fraudulently obtaining payment to which they are not entitled, the application shall be declared void.
- b) Furthermore, Central Council shall be at liberty to suspend both the applicant and the persons who countersigned the application form for an indefinite period, and make an order for repayment of any monies that may have been made in respect of the application.

FURTHER EXPLANATIONS

- 1) Exemptions from the Fund shall be:
 - a) Players participating in official School competitions
 - b) Non playing members of the Association whose participation in the scheme shall be optional
 - c) International Units as sanctioned by Central Council
 - d) Players participating in Gaelic4Mothers&Others, however all participants must have their own personal injury cover to participate
 - e) Under 14 players under the control of the Provincial Council of Britain
 - f) HEC registered players where proof of insurance cover from the college can be provided
- 2) Prior Approval is required for all Private Medical Treatment as contained in the Prior Approval document. Treatment which does not require prior approval:
 - a) GP Visits
 - b) Public Hospital Attendances
 - c) Physical Therapy – first 6 sessions

Please note, attendances for private concussion clinics must be submitted for prior approval
- 3) Loss of Wages for Underage Players: It is recommended that an underage player in full or part time employment, pay the adult rate, as that would allow the player to claim loss of wages. The conditions in part (ii) also apply
- 4) As per the Prior Approvals Procedure, where a member attends a private Accident and Emergency Department – VHI Swiftcare, Laya Health & Wellbeing Clinics, Mater Rapid Injury Clinic – the maximum benefit applied will be €100
- 5) Tell your optometrist of your plans to play Ladies Gaelic Football. He or she will be able to fit you with glasses that use durable, unbreakable polycarbonate for the lens. You will also need to ensure your frames for sports glasses are as durable as the lenses
- 6) Any treatment not detailed as covered in this booklet will not be reimbursable under the Fund

DEFINITIONS

Physical Therapy practises covered under the LGFA Injury Fund are strictly:

- Physiotherapy
- Physical therapist visits
- Chiropractor
- Osteopath
- Neuromuscular Therapist

Any physical therapy outside of that listed must be submitted for prior approval to be covered under the Fund. Other treatments will not be considered under the first 6 sessions covered without prior approval.

Private Scans covered under the LGFA Injury Fund require prior approval. The following are the only scans considered under the Fund:

- Xray
- MRI
- Ultrasound
- CAT Scan

Official Training Sessions

Official training sessions must be a club team session. Gym/S&C sessions are not considered official training sessions and any injuries sustained during these sessions are not covered under the LGFA Injury fund.