





# **Insurance Program Summary**

Dear Members,

We are pleased to present this quick guide to the 2014/2015 Maximum Skating Sports Injury Insurance Program.

The purpose of this quick guide is to provide an overview of some of the main covers of the policies as well as instructions on how to make a claim. For full details of cover please refer to the policy documents available from the Association or call OAMPS on 1800 SPORT 1 (1800 776 781).

The cover provided is not "comprehensive" and as such we encourage all participants to take out Private Health, Life and Income Protection Insurance according to their own individual needs and circumstances. It is an individual's responsibility to ensure that he/she has adequate insurance cover for his/her needs.

We wish all participants a safe and enjoyable season.

Yours sincerely Kim Thomson Internal Account Executive OAMPS Insurance Brokers

Prepared: 1<sup>st</sup> August 2014



## **Sports Injury Insurance**

#### **INSURED PERSONS:**

All participating senior members, officials, coaches, instructors, trainers, first aid personnel, administrators, committee members and voluntary workers of Maximum Skating.

## **PERIOD OF INSURANCE:**

From 4:00pm on 1 August 2014 to 4:00pm 1 August 2015.

### **DESCRIPTION OF BUSINESS:**

Principally participation in skating.

### **SCOPE OF COVER:**

Cover applies whilst:-

- 1. Taking part in a competition, game, performance or training session;
- 2. Attending social functions;
- 3. Travelling to or from a competition, game, performance, social function, training session, administrative, fundraising or volunteer activity;
- 4. Staying away from home to take part in a competition, game, performance, social function, training session or administrative activities;
- 5. Engaged in administrative, fundraising or volunteer activities.

## **BENEFITS:**

## **Capital Benefits**

The cover under this section provides \$75,000 for death resulting from accident. All other permanent disabilities are calculated using a percentage of the death benefit depending on the severity of the injury. For full details of these percentages, please refer to the Schedule of Capital Benefits contained in the policy wording. Please Note Death is limited to 20% for Members whose age is less than 18.

## **Modification Expenses**

The cover under this section provides for costs necessary up to a maximum of \$10,000 to modify the Member's home and/or motor vehicle, or relocating to a suitable home if they are entitled to 100% of the Capital Benefit.

## **Funeral Expenses**

The cover under this section reimburses funeral costs up to a maximum of \$5,000.

### In Memoriam Benefit

The cover under this section provides for reasonable costs associated with observance of the death of a Member up to a maximum amount of \$1,000.

Prepared: 1<sup>st</sup> August 2014

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## **Loss of Earnings**

The cover under this section pays 100% of the Members actual weekly income, up to a maximum of \$500 per week, subject to a 7 day deferral period. Please note that income earned from participating in the sport is not covered. The benefit will be paid for the period of the Disablement as certified by a registered medical practitioner or 52 weeks whichever is the lesser.

## Student Help

The cover under this section reimburses 100% of the cost of Home Tutorial by a qualified tutor, up to a maximum of \$500 per week and subject to a 7 day deferral period. The benefit will be paid for the period of the Disablement as certified by a registered medical practitioner or 52 weeks whichever is the lesser.

## Home Help

The cover under this section reimburses 100% of the actual costs incurred for Home Help from a recognised and licensed Domestic Help Agency, up to a maximum of \$500 per week and subject to a 7 day deferral period. The benefit will be paid for the period of the Disablement as certified by a registered medical practitioner or 52 weeks whichever is the lesser.

### **Parents Allowance**

The cover under this section reimburses \$25 per day in-patient benefit to a full time student under 25 years of age for continuous confinement in hospital because of an accident. The benefit is limited to \$1,500.

## Dependent Children's Allowance

The cover under this section provides for reasonable costs incurred by the Dependent Children of a Member whilst the Member is undergoing medical treatment. The benefit is limited to \$500.

## **Medical and Dental Costs**

The cover under this section reimburses 85% of non-Medicare medical treatment including ambulance, hospital accommodation / theatre fees, orthotics, splints, prosthesis, treatments given by a dentist, chiropractor, masseur, naturopath, osteopath or physiotherapist. The maximum benefit for this section is \$2,500. All treatment must be certified by a registered medical practitioner and not subject to any Medicare rebate.

All claims are subject to a \$50 excess if no private health cover.

Any expenses must be incurred within 12 months of the insured person sustaining the injury.

## **Home Nursing Care**

The cover under this section provides for nursing care provided by a registered nurse (not related to the Member) where they are confined to bed for a period of not less than 7 days if certified medically necessary.

The maximum weekly benefit payable is \$300 per week, and is subject to a 7 day deferral period. The benefit will be paid for the period of the Disablement as certified by a registered medical practitioner or 52 weeks whichever is the lesser.

## **Ancillary Non Medical Expenses**

The cover under this section provides for ancillary non medical expenses (expenses related to medical treatment if certified as necessary. i.e. expenses include items such as travel to receive treatment, but does not include wages lost by any person). The maximum payable under this benefit is \$1,500.

## **Rehabilitation Benefits**

The cover under this section provides for reimbursement of:

- a) Tuition or advice fees from a vocational college if certified as necessary and agreed to. The maximum payable under this benefit is \$3,000.
- b) Rehabilitation expenses (eg gym membership) certified as necessary and agreed to. The maximum payable under this benefit is \$500.

Prepared: 1<sup>st</sup> August 2014



## **Unexpired Membership Reimbursement Benefit**

The cover under this section provides for pro-rata refund of your club's or association's membership/registration fee from the date of injury if the Member can't play for the rest of the season. The maximum payable under this benefit is \$500.

## **Double Capital Sum Insured**

The cover under this section provides for double the Capital Sum Insured to be paid for a person under 12 years of age who suffers: permanent total disablement or permanent paralysis of all limbs.

## Miscarriage and Premature Childbirth

The cover under this section provides for \$2,500 compensation for Miscarriage and Premature Childbirth as a direct result of an Accident whilst participating.

#### HIV

The cover under this section provides for 10% of the Permanent Total Disability Benefit 1. as listed in the Schedule of Capital Benefits if contracted as a result of an Accident.

## **Kidnapping**

The cover under this section provides for 10% of the Permanent Disability Benefit 1 as listed in the Schedule of Capital Benefits.

## How do I make a Sports Injury claim?

To make a claim for injury, take the following steps within 30 days of the injury occurring.

## Step 1:

Obtain a claim form from OAMPS Sport & Leisure by calling 1800 SPORT 1 (1800 776 781).

## Step 2:

Arrange for your doctor to complete the "Medical Statement"

### Step 3

Arrange for Maximum Skating to complete "The Club's Declaration"

If claiming loss of income, have the employer complete "The member's Employment Details".

## Step 4:

Return the completed claim form to OAMPS Sport & Leisure within 30 days of the injury occurring.

## How do I find out more?

OAMPS Insurance Brokers Ltd Sport Insurance Business Unit PO Box 3036

Parramatta NSW 2124

Phone: (02) 8838 5700 or 1800 SPORT 1 (1800 776 781)

Fax: (02) 8838 5701 Website: www.oamps.com.au

NOTE: PLEASE REFER TO POLICY WORDING FOR FULL TERMS, CONDITIONS, AND EXCLUSIONS.

Prepared: 1<sup>st</sup> August 2014

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