



2021 FOOTBALL NSW PERSONAL ACCIDENT POLICY INFORMATION FOR CLUBS

CONTENTS

1. 2020 v 2021 Personal Accident Policy Comparison
2. Scenarios
3. Personal Accident Policy Overview (Category One - players aged 18+)
4. Personal Accident Policy Overview (Category Two – administrators aged 18+)
5. Personal Accident Policy Overview (Category Three - players and administrators aged under 18)

2020 v 2021 Personal Accident Policy Comparison

Policy Limits, Coverage & Premium

	2020	2021
Aggregate Limit Of Liability:	\$5,000,000	\$5,000,000
SECTION 1: PERSONAL ACCIDENT & SICKNESS		
Part A – Lump Sum Benefits		
Accidental Death	\$100,000	\$100,000
Paraplegia or Quadriplegia	\$100,000 (\$250k whilst playing or training) + \$500,000 (with separate insurer)	\$250,000 + \$500,000 (with separate insurer)
Loss of sight of both eyes	\$100,000	\$100,000
Loss of sight of one eye	\$50,000	\$50,000
Loss of use of one or more limbs	\$100,000	\$100,000
Permanent and incurable insanity	\$100,000	\$100,000
Permanent loss of		
a) hearing in both ears	\$100,000	\$100,000
b) the lens in both eyes	\$100,000	\$100,000
Permanent loss of		
a) hearing in one ear	\$30,000	\$30,000
b) the lens in one eye	\$60,000	\$60,000
Permanent Loss of use if four Fingers and Thumb of either hand	\$80,000	\$80,000
Burns:		
a) Third degree burns and/or resultant disfigurement which covers more than 20% of the entire external body	\$50,000	\$50,000
b) Second degree burns and/or resultant disfigurement which covers more than 20% of the entire external body	\$20,000	\$20,000
Permanent Loss of use of four fingers on either Hand	\$50,000	\$50,000
Permanent Loss of use of one Thumb of either Hand:	\$40,000	\$40,000
a) Both joints	\$20,000	\$20,000
b) One joint	\$20,000	\$20,000
Permanent loss of one finger 3 joints of either hand - each	\$15,000	\$15,000
Permanent loss of one finger 2 joints of either hand - each	\$10,000	\$10,000
Permanent loss of one finger 1 joint of either hand - Each	\$5,000	\$5,000

Permanent loss of all toes of either foot	\$15,000	\$15,000
Permanent loss of great toe 2 joints of either foot	\$5,000	\$5,000
Permanent loss of great toe 1 joint of either foot	\$3,000	\$3,000
Permanent loss of toes, other than great toe, of either foot - each toe	\$1,000	\$1,000
Fractured leg or patella with established non-union	\$10,000	\$10,000
Shortening of a leg by at least 5cm	\$7,500	\$7,500
Permanent partial disablement not otherwise provided for under Events 2 to 18 inclusive	\$75,000	\$75,000

Part B – Weekly Benefits – Bodily Injury (Senior Players - 18yrs+)		
Temporary Total Disablement	85% of weekly salary up to \$250 for 52 weeks	Replaced with Injury Inconvenience Benefit (see table below)
	7 day Excess	Nil Excess
Part B – Weekly Benefits – Bodily Injury (Non-Senior Players, Officials, Volunteers)		
Temporary Total Disablement	85% of weekly salary up to \$250 for 52 weeks	85% of weekly salary up to \$250 for 52 weeks
	7 day Excess	7 day Excess

Non-Medicare Medical Expenses		
	100% of \$5,000 \$350 limit on physio prior to surgery	100% of \$5,000 Doctor certification for more than six physio treatments

Additional Benefits		
Exposure to the elements (must be due to a bodily injury)	Included	Included
Disappearance	\$100,000	\$100,000
Rehabilitation benefit	\$20,000	\$20,000
Re-imbursment of professional or membership fees	\$500	\$500
Modification Expense	\$10,000	\$10,000
Bed care	\$300 x 52 weeks	\$300 x 52 weeks

Endorsements		
Domestic Help	Included	Included

Student Tutorial Benefits	Included	Included
Funeral Expenses	\$6,000	\$6,000
Travel and Accommodation Expenses	\$1,500	\$1,500
Out of Pocket Expenses	\$1,500	\$1,500

Table of Benefits - Injury Inconvenience Benefit*			
Injury Type	Benefit	Injury Type	Benefit
Serious Sprain/Strain/Tear - Grade 2	\$600	Simple or Complex Fracture - Other	\$800
Serious Sprain/Strain/Tear - Grade 3 or 4	\$800	Simple Fracture - Head	\$800
Simple or Complex Fracture - Hip	\$1,200	Complex Fracture - Head	\$1,500
Simple Fracture – Arm/Upper body	\$800	Dislocation – knee, shoulder, elbow, jaw, ankle, hip or wrist	\$700
Complex Fracture – Arm/Upper body	\$1,200	Organ Damage – spleen, kidney, liver, heart, lung or brain	\$800
Simple Fracture – Leg/Lower body	\$800	Other Bodily Injury requiring surgical procedure	\$600
Complex Fracture – Leg/Lower body	\$1,200	<i>*supporting evidence required (X-ray, CT Scan, MRI)</i>	

Scenarios

Scenario 1

31 year old Sally twisted her knee while playing in a match. Her knee was sore and swollen so she visited her GP on the following Monday.

The GP referred Sally for an MRI and she was diagnosed with a Grade 4 ACL tear. Sally was reviewed by an Orthopaedic Surgeon and referred for surgery in a Private Hospital one week later.

The Orthopaedic Surgeon informed Sally that she cannot return to her office based occupation for ten days post-surgery. Sally earns \$2,000 per week before tax in her job.

Sally commenced physiotherapy post-surgery and had eight sessions before her doctor referred her to a gym for three months of self-directed rehabilitation. The physiotherapy cost was \$90 per session.

Sally returned to work after five weeks. Sally received two weeks paid sick leave from her employer.

2020 Personal Accident Policy		2021 Personal Accident Policy	
Loss of Income	Before tax = \$250/week After tax (if tax free threshold not claimed) = \$195.00/week One week excess period Two weeks paid sick leave from employer \$195.00 x 3 weeks = \$585*	Injury Inconvenience Benefit	\$800 tax free
MRI (non-Medicare)	\$700	MRI (non-Medicare)	\$700
Private Hospital	\$2,500	Private Hospital	\$2,500
Physiotherapy treatment post-surgery	\$720 (8 sessions at \$90 each)	Physiotherapy treatment post-surgery	\$720 (8 sessions at \$90 each)
Gym membership	\$480	Gym membership	\$480
TOTAL	\$4,985	TOTAL	\$5,200

* Under the old policy, there was a seven day waiting period before the loss of income benefit would be paid. Further, the loss of income benefit was not payable while the claimant was being paid sick leave by their employer. Therefore, under the old policy, Sally:

- would not have been paid the loss of income benefit in the 1st week of her injury (one week waiting period + sick leave paid by employer);
- would not have been paid the loss of income benefit in the 2nd week of her injury (sick leave paid by employer); and
- would have been paid the loss of income benefit in the 3rd, 4th and 5th weeks of her injury.

Scenario 2

John is 25 years old. During training one evening he tripped and fractured his arm. John was in a lot of pain and an ambulance was called.

At the hospital, an x-ray was taken and the diagnosis was a Simple fracture of the Ulnar (i.e. the long bone in the forearm).

John returned to work after one week. The cast was removed after six weeks and John had six sessions of physiotherapy at \$90 each.

John does not have private health insurance so he was required to pay a \$50 excess.

2020 Personal Accident Policy		2021 Personal Accident Policy	
Loss of Income	\$0*	Injury Inconvenience Benefit	\$800 tax free
Ambulance	\$450	Ambulance	\$450
Arm sling	\$50	Arm sling	\$50
Physiotherapy (no surgery)	\$350 (capped at \$350) Out of pocket = \$190 ((\$90 x 6) - \$350)	Physiotherapy (no surgery)	\$540 (6 sessions at \$90 each) [#]
Excess payment	-\$50 [^]	Excess	-\$50 [^]
TOTAL	\$800	TOTAL	\$1,790

In this scenario, John will receive an extra \$990 in insurance benefits under the new policy but, when one considers the fact that, under the old policy, he would have been out of pocket \$190 for the physiotherapy expenses he incurred that were above the \$350 cap, John is actually **\$1,180** better off under the new policy (\$990 + \$190).

* Under the old policy, there was a seven day waiting period before the loss of income benefit would be paid. As John returned to work after just one week, the loss of income benefit would not have been payable.

[#] Under the old policy, physiotherapy where no surgery was performed was capped at \$350. Under the new policy the \$350 cap is removed. A doctor's referral is required after every six sessions. Physiotherapy is included in the non-Medicare Medical section of the policy which is up to \$5,000 in total combined expenses.

[^]As John does not have private health insurance a \$50 excess is payable.

Scenario 3(a)

Jason is a 25 year old builder earning \$3,000 per week from that job.

Jason tore his ACL whilst tackling an opposition player. His doctor referred him for an MRI which confirmed a Grade 2 ACL tear.

Jason was referred for an intensive course of physiotherapy. Each physiotherapy treatment costs \$90 per session and Jason attended 32 sessions over 16 weeks.

Jason returned to work after 18 weeks, however, he will need to be cautious with his knee. Jason will continue self-guided rehabilitation at the gym for three months on the recommendation of his doctor.

2020 Personal Accident Policy		2021 Personal Accident Policy	
Loss of Income	Before tax = \$250/week After tax (if tax free threshold not claimed) = \$195.00/week One week excess period \$195.00 x 17 weeks = \$3,315	Injury Inconvenience Benefit	\$600 tax free
MRI (non-Medicare)	\$700	MRI (non-Medicare)	\$700
Physiotherapy (no surgery)	\$350 (capped at \$350) Out of pocket = \$2,530 ((\$90 x 32) - \$350)	Physiotherapy (no surgery)	\$2,880 (32 sessions at \$90 each)
Gym membership	\$480	Gym membership	\$480
TOTAL	\$4,845	TOTAL	\$4,660

While Jason will receive \$185 less in insurance benefits under the new policy (\$4,845 - \$4,660), it is important to note that, under the old policy, he would have been out of pocket \$2,530 for the physiotherapy expenses he incurred that were above the \$350 cap. When one factors this in, Jason is actually **\$2,345** better off under the new policy (\$2,530 - \$185).

Scenario 3(b)

Instead of **32 physiotherapy sessions** over 16 weeks, Jason had **35 physiotherapy sessions** over 16 weeks.

2020 Personal Accident Policy		2021 Personal Accident Policy	
Loss of Income	Before tax = \$250/week After tax (if tax free threshold not claimed) = \$195.00/week One week excess period \$195.00 x 17 weeks = \$3,315	Injury Inconvenience Benefit	\$600 tax free
MRI (non-Medicare)	\$700	MRI (non-Medicare)	\$700
Physiotherapy	\$350 (capped at \$350) – out of pocket = \$2,800 ((90 x 35) - \$350)	Physiotherapy	\$3,150 (35 sessions at \$90 each)#
Gym membership	\$480	Gym membership	\$480
TOTAL	\$4,845	TOTAL	\$4,930

In Scenario 3(b), Jason will receive an extra \$85 in insurance benefits under the new policy but, when one considers the fact that under the old policy he would have been out of pocket \$2,800 for the physiotherapy expenses he incurred that were above the \$350 cap, Jason is actually **\$2,885** better off under the new policy (\$2,800 + \$85).

PLEASE NOTE THESE ARE EXAMPLES ONLY.

ALL INSURANCE CLAIMS ARE SUBJECT TO THE TERMS, CONDITIONS AND EXEMPTIONS UNDER THE POLICY

Personal Accident Insurance – Policy Overview (Category One)

Personal Accident insurance is for registered players, non-playing officials including team managers, referees, coaches, committee members, directors, office bearers, administrators, selectors, medical officers, physiotherapists, ambulance officers, voluntary workers and other match officials of the Policyholder who are **aged eighteen (18) years or older at the date of injury**, and engaged in the following activities:

- (a) Participating in official matches or training;
- (b) Travelling to participate in representative matches or authorised games;
- (c) Travelling directly to or from home and one of the activities (a) – (b).

What is covered?

Capital Benefits			
Accidental Death		Maximum \$100,000	
Quadriplegia / Paraplegia		Maximum \$750,000	
Injury Inconvenience Benefit*			
Injury Type	Benefit	Injury Type	Benefit
Serious Sprain/Strain/Tear - Grade 2	\$600	Simple or Complex Fracture - Other	\$800
Serious Sprain/Strain/Tear - Grade 3 or 4	\$800	Simple Fracture - Head	\$800
Simple or Complex Fracture - Hip	\$1,200	Complex Fracture - Head	\$1,500
Simple Fracture – Arm/Upper body	\$800	Dislocation – knee, shoulder, elbow, jaw, ankle, hip or wrist	\$700
Complex Fracture – Arm/Upper body	\$1,200	Organ Damage – spleen, kidney, liver, heart, lung or brain	\$800
Simple Fracture – Leg/Lower body	\$800	Other Bodily Injury requiring surgical procedure	\$600
Complex Fracture – Leg/Lower body	\$1,200	<i>*supporting evidence required (X-ray, CT Scan, MRI)</i>	
Additional Benefits			
Rehabilitation Benefit (Quadriplegia / Paraplegia only)		Maximum \$20,000	
Reimbursement of membership fees (pro rata)		Maximum \$500	
Bed care		Maximum \$300 x 52 weeks	

Non-Medicare Medical Expenses (to a combined maximum of \$5,000)

Physiotherapy, Chiropractic, Remedial Massage, Acupuncture, Private hospital accommodation, Ambulance	Maximum \$5,000
Physiotherapy	Physiotherapy must be certified by a Doctor or Specialist as being necessary after every six visits.
Emergency Department Private Hospital Admission	Maximum \$375
Excess	\$50 / \$nil if member of a health fund
Other Benefits	
Funeral Expenses	Maximum \$6,000
Travel and Accommodation Expenses	Maximum \$1,500
Out of Pocket Expenses - For example: <ul style="list-style-type: none"> • Appliances/Prosthesis & Medical Aids (e.g. Knee Braces, Crutches & Wheelchair hire) • Local transportation (e.g. taxis) for travel between your home and place of treatment • Gym or Pool Membership (if referred by a treating Doctor) 	Maximum \$1,500

What is not covered?

✗ Sickness	✗ General Practitioner	✗ Anaesthetist	✗ Injury from illegal or criminal acts
✗ Illness	✗ Specialist	✗ Psychiatric conditions	✗ Pregnancy or related complications
✗ X-ray	✗ Surgeon	✗ Intentional self-injury	✗ Pre-existing injuries
✗ MRI (if Medicare claimable)	✗ Whilst under the influence of drugs or alcohol		

Important Notes

- Legislation prevents the insurer from reimbursing services with a Medicare item number.
- Non-Medicare Medical Expenses are expenses incurred within 12 months of the Date of Injury.
- All treatment must be referred by your doctor to receive reimbursement.
- You must pay the expense before seeking reimbursement. The insurer cannot pay the provider directly.
- If you are a member of a health fund, you must claim the expense from your health fund prior to claiming on the Personal Accident insurance.
- The Injury Inconvenience Benefit shall not be payable for more than one of the listed Bodily Injuries for the same accident.
- The insurer will not pay another Injury Inconvenience Benefit for an injury that occurs to the same body part unless six months has elapsed since a doctor certified that the injury has resolved.

How do I lodge a Personal Accident claim?

Lodge your claim via the Sports Claim Portal: <https://www.gowgates.com.au/claims/>

Who can I contact regarding a Personal Accident Claim?

Contact the Sports Claim team via the chat function in the Sports Claim Portal; or
Email: sportsclaims@gowgates.com.au; or
Call: **1300 469 428**

How do I obtain the full policy documents?

Please email your request to: sport@gowgates.com.au

Can I arrange additional cover?

Yes, Gow-Gates can arrange additional cover for an individual, team or club.
To enquire please contact: info@gowgates.com.au

Please contact Gow-Gates for additional information on the coverage limits, excesses, terms, conditions and exclusions for the covers listed in this document. Gow-Gates arrange the insurance and are not the insurer.

This brochure is a summary only of the main points of coverage. The information is of general nature only, no consideration has been made in regard to your own personal needs or circumstances.

This summary is prepared by Gow-Gates Insurance Brokers Pty Ltd (ABN 12 000 837 785 | AFSL 245423). For further information visit: www.gowgatessport.com.au/football.

Personal Accident Insurance – Policy Overview (Category Two)

Personal Accident insurance is for registered players, non-playing officials including team managers, referees, coaches, committee members, directors, office bearers, administrators, selectors, medical officers, physiotherapists, ambulance officers, voluntary workers and other match officials of the Policyholder who are **aged eighteen (18) years or older at the date of injury**, and engaged in the following activities authorised by the Policyholder:

- (a) Fundraising activities;
- (b) Administrative or organised social activities;
- (c) Unpaid voluntary work;
- (d) Travelling directly to or from home and one of the activities (a) – (c).

What is covered?

Capital Benefits	
Accidental Death	Maximum \$100,000
Quadriplegia / Paraplegia	Maximum \$750,000
Loss of Income	
Weekly Benefit	Maximum 85% of gross income or \$250 x 52 weeks (whichever is the lesser)
Excess	7 days
Additional Benefits	
Rehabilitation Benefit (Quadriplegia / Paraplegia only)	Maximum \$20,000
Reimbursement of membership fees (pro rata)	Maximum \$500
Bed care	Maximum \$300 x 52 weeks
Non-Medicare Medical Expenses (to a combined maximum of \$5,000)	
Physiotherapy, Chiropractic, Remedial Massage, Acupuncture, Private hospital accommodation, Ambulance	Maximum \$5,000
Physiotherapy	Physiotherapy must be certified by a Doctor or Specialist as being necessary after every six visits.
Emergency Department Private Hospital Admission	Maximum \$375
Excess	\$50 / \$nil if member of a health fund
Other Benefits	
Funeral Expenses	Maximum \$6,000
Travel and Accommodation Expenses	Maximum \$1,500
Out of Pocket Expenses - For example: <ul style="list-style-type: none"> • Appliances/Prosthesis & Medical Aids (e.g. Knee Braces, Crutches & Wheelchair hire) • Local transportation (e.g. taxis) for travel between your home and place of treatment • Gym or Pool Membership (if referred by a treating Doctor) 	Maximum \$1,500

What is not covered?

✗	Sickness	✗	General Practitioner	✗	Anaesthetist	✗	Injury from illegal or criminal acts
✗	Illness	✗	Specialist	✗	Psychiatric conditions	✗	Pregnancy or related complications
✗	X-ray	✗	Surgeon	✗	Intentional self-injury	✗	Pre-existing injuries
✗	MRI (if Medicare claimable)			✗	Whilst under the influence of drugs or alcohol		

Important Notes

- Legislation prevents the insurer from reimbursing services with a Medicare item number.
- Non-Medicare Medical Expenses are expenses incurred within 12 months of the Date of Injury.
- All treatment must be referred by your doctor to receive reimbursement.
- You must pay the expense before seeking reimbursement. The insurer cannot pay the provider directly.
- If you are a member of a health fund, you must claim the expense from your health fund prior to claiming on the Personal Accident insurance.

How do I lodge a Personal Accident claim?

Lodge your claim via the Sports Claim Portal: <https://www.gowgates.com.au/claims/>

Who can I contact regarding a Personal Accident Claim?

Contact the Sports Claim team via the chat function in the Sports Claim Portal; or
Email: sportsclaims@gowgates.com.au; or
Call: **1300 469 428**

How do I obtain the full policy documents?

Please email your request to: sport@gowgates.com.au

Can I arrange additional cover?

Yes, Gow-Gates can arrange additional cover for an individual, team or club.
To enquire please contact: info@gowgates.com.au

Please contact Gow-Gates for additional information on the coverage limits, excesses, terms, conditions and exclusions for the covers listed in this document. Gow-Gates arrange the insurance and are not the insurer.

This brochure is a summary only of the main points of coverage. The information is of general nature only, no consideration has been made in regard to your own personal needs or circumstances.

This summary is prepared by Gow-Gates Insurance Brokers Pty Ltd (ABN 12 000 837 785 | AFSL 245423). For further information visit: www.gowgatesport.com.au/football.

Personal Accident Insurance – Policy Overview (Category Three)

Personal Accident insurance is for registered players, non-playing officials including team managers, referees, coaches, committee members, directors, office bearers, administrators, selectors, medical officers, physiotherapists, ambulance officers, voluntary workers and other match officials of the Policyholder who are **aged under eighteen (18) years at the date of injury**, and engaged in the following activities:

- (a) Participating in official matches or training;
- (b) Travelling to participate in representative matches or authorised games;
- (c) Fundraising activities;
- (d) Administrative or organised social activities;
- (e) Unpaid voluntary work;
- (f) Travelling directly to or from home and one of the activities (a) – (e).

What is covered?

Capital Benefits	
Accidental Death	Maximum \$20,000
Quadriplegia / Paraplegia	Maximum \$750,000
Loss of Income	
Weekly Benefit	Maximum 85% of gross income or \$250 x 52 weeks (whichever is the lesser)
Excess	7 days
Additional Benefits	
Rehabilitation Benefit (Quadriplegia / Paraplegia only)	Maximum \$20,000
Reimbursement of membership fees (pro rata)	Maximum \$500
Bed care	Maximum \$300 x 52 weeks
Non-Medicare Medical Expenses (to a combined maximum of \$5,000)	
Physiotherapy, Chiropractic, Remedial Massage, Acupuncture, Private hospital accommodation, Ambulance	Maximum \$5,000
Physiotherapy	Physiotherapy must be certified by a Doctor or Specialist as being necessary after every six visits.
Emergency Department Private Hospital Admission	Maximum \$375
Excess	\$50 / \$nil if member of a health fund

Other Benefits

Funeral Expenses	Maximum \$6,000
Travel and Accommodation Expenses	Maximum \$1,500
Out of Pocket Expenses - For example: <ul style="list-style-type: none"> • Appliances/Prosthesis & Medical Aids (e.g. Knee Braces, Crutches & Wheelchair hire) • Local transportation (e.g. taxis) for travel between your home and place of treatment • Gym or Pool Membership (if referred by a treating Doctor) 	Maximum \$1,500

What is not covered?

✗ Sickness	✗ General Practitioner	✗ Anaesthetist	✗ Injury from illegal or criminal acts
✗ Illness	✗ Specialist	✗ Psychiatric conditions	✗ Pregnancy or related complications
✗ X-ray	✗ Surgeon	✗ Intentional self-injury	✗ Pre-existing injuries
✗ MRI (if Medicare claimable)	✗ Whilst under the influence of drugs or alcohol		

Important Notes

- Legislation prevents the insurer from reimbursing services with a Medicare item number.
- Non-Medicare Medical Expenses are expenses incurred within 12 months of the Date of Injury.
- All treatment must be referred by your doctor to receive reimbursement.
- You must pay the expense before seeking reimbursement. The insurer cannot pay the provider directly.
- If you are a member of a health fund, you must claim the expense from your health fund prior to claiming on the Personal Accident insurance.

How do I lodge a Personal Accident claim?

Lodge your claim via the Sports Claim Portal: <https://www.gowgates.com.au/claims/>

Who can I contact regarding a Personal Accident Claim?

Contact the Sports Claim team via the chat function in the Sports Claim Portal; or
 Email: sportsclaims@gowgates.com.au; or
 Call: **1300 469 428**

How do I obtain the full policy documents?

Please email your request to: **sport@gowgates.com.au**

Can I arrange additional cover?

Yes, Gow-Gates can arrange additional cover for an individual, team or club.

To enquire please contact: **info@gowgates.com.au**

Please contact Gow-Gates for additional information on the coverage limits, excesses, terms, conditions and exclusions for the covers listed in this document. Gow-Gates arrange the insurance and are not the insurer.

This brochure is a summary only of the main points of coverage. The information is of general nature only, no consideration has been made in regard to your own personal needs or circumstances.

This summary is prepared by Gow-Gates Insurance Brokers Pty Ltd (ABN 12 000 837 785 | AFSL 245423). For further information visit: www.gowgatessport.com.au/football.