



Naomh Muire Ladies Injury Reporting & Claim Process

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Introduction

The LGFA Injury Fund has been set up to ease some of the burdens of injury-related costs for player/players' families.

Strict criteria are in place and must be met in order for a claim to be processed.

The ladies registrar is the Ladies Injury Coordinator (club) for the 2021 season and can be contacted via nmladiesinjurycoordinator@gmail.com

Registration

- The injury fund is completely funded by registration fees paid to the LGFA by players, coaches and other non-playing members annually.
- In order to qualify for the scheme, all players, coaches, mentors, club officers, etc. must be registered with the LGFA & CLG Naomh Muire and have opted into the scheme. Players are automatically added to the scheme, but coaches and all other pitch-side personnel need to be added via the Foireann system. This must be completed by the Club Registrar as part of the registration process.
- For queries on registration please contact the Club Registrar.

Scope

- There is no legal obligation on the LGFA to administer an Injury Fund.
It is the responsibility of all members to ensure that they have sufficient financial resources for any treatment they wish to pursue due to an injury.
If a player is covered under another source, they must claim through that source first – i.e., private medical insurance (VHI, LAYA, Irish Life) or School Insurance
- The Injury Fund applies to the cost of all injury related treatment.
- The Fund applies to youth and adult players on a team registered with the LGFA who incur accidental injury while playing ladies Football, either
 - in the course of an official competitive game or challenge game, or
 - in the course of an official and supervised team training session.
- It also applies to Club Officers, Team Coaches & Mentors, Match Officials i.e. Referees, Umpires and Linespersons.
- The scheme runs in line with the LGFA registration dates each year. Please see <https://ladiesgaelic.ie/lgfa-hub/clubs/registration/> for more details.

- **Any player who plays while receiving treatment under the scheme may have her claim disallowed.** This is monitored by the LGFA Injury Fund Coordinator, based in Croke Park.
- All private treatment needs to be pre-approved by the LGFA Injury Fund Coordinator, including, but not limited to: consultant visits, attendance at specialist clinics, surgeries, scans including MRI.
- The following medical expenses are covered under the LGFA Injury Fund without prior approval:
 - 90% of the first 6 physiotherapy sessions after injury
 - GP Visits
 - ED visits (including emergency attendance to VHI Swiftcare/LAYA ExpressCare clinics, up to a maximum €100)
- Preliminary Claim Forms must be returned to the LGFA Injury Fund Coordinator within 8 weeks of the occurrence of the injury. N.B. forms should be returned as soon as possible to facilitate any pre-approval of required treatment(s).
- Where a claim is less than €200, the 'Full Claim Form' must be used and also submitted within 8 weeks.
- The maximum amount that can be claimed is €5,500 for injuries and €3,500 for dental.

Procedure

The claim procedure consists of two main steps

- Preliminary Claim Notification
- Settling a Claim

Preliminary Claim Notification (use for claims that are expected to exceed €200)

- Any injury or suspected injury must be notified to the team manager as soon as possible after the injury is sustained/realised.
- The team manager will advise the injured person/parent to complete the [LGFA Preliminary Claim Form](#). This can also be downloaded from the Club website <https://www.naomhmuire.ie/player-injuries.html>. The manager will also give the player a "voucher" for physiotherapy treatment.
- The injured person/parent must liaise with the Ladies Injury Coordinator (club) directly to ensure that the form is signed by the Ladies; Club Secretary and also to ensure that the injury is recorded correctly, notified to the LGFA and any pre-approval of treatment is initiated.

- The injury coordinator (club) will keep a log of all injuries that are reported.
- Once the form is signed by all relevant club personnel, the Ladies Club Secretary is responsible for sending it to the LGFA County Secretary, who forwards it to the LGFA Injury Fund Coordinator in Croke Park.
- Once the LGFA Injury Fund Coordinator receives the Preliminary Form, they will contact the injured person/parent directly, via email and advise them of the claim number and any other relevant information. Examples of other relevant information include a referee's report (match injury) or attendance record (training injury).

Prior Approval of Treatment(s)

- Where pre-approval for treatment is required, a letter from the treating practitioner (Consultant, GP, Physiotherapist) must be provided.
- The letter must:
 - be on headed paper
 - state Medical Council number or in the case of Physiotherapist, their registration number
 - state the reason(s) for requiring private treatment
 - state the anticipated number of Physiotherapy sessions required (once a limit of 6 has been reached – see Physiotherapy section below)
- This letter must be forwarded electronically to the Ladies Injury Coordinator (club), with a request for reimbursement for the treatment(s) under the scheme.
- The claim number must also be included (this will have been provided by the LGFA Injury Fund Coordinator via email). The Ladies Injury Coordinator (club) will forward this request to the LGFA Injury Fund Coordinator for approval, as the request must come from an official LGFA club email address.
- In the case of emergency treatment; deviations from this process may occur, however, the Ladies Injury Coordinator (club) & LGFA Injury Fund Coordinator must be made aware of the treatment in any event. Such treatments are usually covered as part of a visit to the Emergency Department.
- In certain circumstances treatment(s) received outside the island of Ireland may also be reimbursed under the scheme (e.g. where a player attends college in another country). All decisions made in relation to such treatment(s) are made by the LGFA Executive, in conjunction with the LGFA Injury Fund Coordinator.
- All private treatment needs to be pre-approved by the LGFA Injury Fund Coordinator, including, but not limited to: consultant visits, attendance at specialist clinics, surgeries, scans including MRI.
- The following medical expenses are covered under the LGFA Injury Fund without prior approval:

- 90% of the first 6 physiotherapy sessions after injury
- GP Visits
- A&E visits (including emergency attendance to VHI Swiftcare/LAYA ExpressCare clinics, up to a maximum €100)
- Preliminary Claim Forms must be returned to the LGFA Injury Fund Coordinator within 8 weeks of the occurrence of the injury. N.B. forms should be returned as soon as possible to facilitate any pre-approval of required treatment(s).
- Where a claim is less than €200, the 'Full Claim Form' must be used and also submitted within 8 weeks.

Physiotherapy

- Physiotherapy must be carried out by individuals with an appropriate third level qualification, who are members of a regulatory professional body in line with their qualifications (i.e. Irish Society of Chartered Physiotherapists) and who have appropriate insurance/indemnity. (Criteria can be checked with the LGFA Injury Fund Coordinator)
- CLG Naomh Muire has an agreement with certain Physiotherapists who bill the club directly for treatment. Players are not required to attend these Physiotherapists, however, where they choose not to, they must ensure, for the purposes of their claim, that any Physiotherapist they attend is appropriately registered and that valid referral letters/receipts are obtained & retained.
 - In the interest of player welfare, a maximum of 3 vouchers per injury only will initially be allowed. Any further treatment must first be referred to a qualified Medical Practitioner.
 - The player may pay the Physiotherapist themselves and will be reimbursed by the club provided they produce the voucher issued and the paid receipt from the Physiotherapist. Alternatively, the club may pay the Physiotherapist directly for up to a maximum of 3 sessions as per the Club Injury Policy.
 - Where the club has paid a Physiotherapist and a subsequent claim is processed, any monies received by the claimant in respect of Physiotherapy must be returned to the club.
- Contact details for club affiliated Physiotherapists can be obtained from the Ladies Injury Coordinator (club).
- Once a claim is opened, the Injury Fund covers 90% of costs for the first six sessions, without pre-approval. All treatments after that require approval from the LGFA Injury Fund Coordinator. A letter stating the reasons (as detailed above) is also required.

Note: A maximum of three vouchers are permitted for physiotherapy, after which time, if the injury has not improved, the injured player should visit their GP for further guidance.

Receipts

- All receipts pertaining to the claim must be held by the claimant.
- Only original receipts will be accepted for processing of the full claim form.

Private Medical Insurance

- If a claimant has Private Medical Insurance, they must submit all their injury-related receipts through their own policy initially and then submit that statement of claim with the Full Claim Form. Any reimbursements already received from Private Medical Insurance will be deducted from the overall LGFA claim.

Settling a Claim using the Injury Claim Form

- When all treatments have been completed/received the injured person/parent must complete the [Full Claim Form](#). The full claim form is also available on the club website at <https://www.naomhmuire.ie/player-injuries.html>.
- The form must be signed by the Team Manager & Ladies' Club Secretary. As with the Preliminary Claim form, the Ladies Club Secretary has responsibility for sending the Full Claim Form along with any supporting receipts to the LGFA County Secretary, who in turn completes a final check and forwards all documentation, by post, to the LGFA Injury Fund Coordinator for processing.
- Claims are settled by the issuing of a cheque directly to the claimant. CLG Naomh Muire, Practitioners, Clinics, etc. are not reimbursed under the scheme. Any monies owed to the club must be paid back once the full claim has been processed.

Notes:

- Where an injury is successfully treated within the 8-week time frame, no prior approval was required and the total cost was less than €200, the claim can be submitted using the Injury Claim Form (instead of using Preliminary Claim & Injury Claim forms), provided all signatures are obtained.
- In exceptional circumstances and only with Club Executive approval, CLG Naomh Muire **may** cover the cost of some private treatments on an interim basis (e.g. MRI). In such instances, any monies owed to the club must be paid back once the full claim has been processed and reimbursed.

For any queries relating to this process please contact Ladies Injury Coordinator (club):

nmladiesinjurycoordinator@gmail.com