UniSA SPORT

UniSA Sport Member Insurance Coverage (revised June 2023)



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1. Introduction

As a registered member of UniSA Sport, you are provided with insurance cover which applies while you are involved in activities and clubs that are associated with UniSA Sport.

This document tells you when you are covered, what insurance cover is provided, and what to do if you ever need to make a claim.

Important Notes

- 1. The following information is only a summary of the cover provided. The policy documents with full terms and conditions are held by UniSA.
- 2. UniSA Sport has arranged this insurance program to provide benefits to those registered members who, through injury or accident, incur financial loss and who would otherwise not have received assistance. Federal Government legislation prevents insurance companies from paying any insurance benefit for a medical service that is covered by Medicare (including the Medicare Gap).
- 3. In addition to these policies all members are encouraged to take out Private Health Insurance and Income Protection Insurance or additional insurance over and above the benefits defined in this scheme.

2. Who Is Covered?

The following groups are covered:

- Full and/or part time students (including post graduates) who are members of UniSA Sport.
- All non UniSA students who are members of UniSA Sport.





3. When Am I Covered?

Coverage is 24 hours per day, 365 days per year whilst

- a) Participating in UniSA Sport activities on campus, i.e. Pick Up & Play and VC Cup.
- b) Representing Team UniSA at representative events, such as SA Challenge, UniSport Nationals and UniSport Australia Championships.
- c) Participating in UniSA Sport club activities, such as organised training sessions or practice matches, official club matches and social competitions.
- d) Engaging in administrative or organised social activities (excluding pub crawls and the like) organised by UniSA Sport or its affiliated clubs.
- e) Travelling directly to and/or from a UniSA Sport or affiliated clubs activities.

Drug & Alcohol Exclusion

The policy does not apply to any event resulting from the insured person being:

- under the influence of alcohol
- having a blood alcohol content over the prescribed legal limit whilst driving
- under the influence of a non-prescribed drug



4. What Cover Is Provided For Individuals?

4.1 Capital Benefits

A lump sum benefit is payable in the event of death or permanent disability arising from an accident whilst participating in an approved activity as described in section 3. The amount of the benefit is defined in the policy.

The maximum benefit payable for death and permanent paraplegia and quadriplegia is \$50,000 as defined by the policy.

4.2 Non-Medicare Medical Expenses

This covers insured persons for non-Medicare medical expenses. The policy is for reimbursement only.

That is, the member must pay the account and then claim reimbursement from this insurance cover.

The most common non-Medicare expenses include:

-	Ambulance	(emergency only)	-	Chiropractic
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- Medical Hospital
- Physiotherapist - Surgery
- X-ray

Due to the National Health Act, no coverage can be provided for medical expenses which are claimable through Medicare including the Medicare Gap.

The Benefits:

Reimbursement up to \$5000 for non-Medicare medical expenses paid for a period up to 12 months from the date of the injury or sickness.

Excess: \$50 excess applies to each injury.

Conditions:

If a member belongs to a private health fund, they must claim from that fund first.





5. Additional Cover Provided

5.1 Loss of Income

This benefit provides cover for 85% of earnings lost up to a maximum of \$500 per week. A 7 day excess applies. The maximum benefit period is 156 weeks.

5.2 HECS/ Post Graduate Fees

This benefit provides cover up to a maximum of \$10,000 to pay for HECS and/or Post Graduate Fees, as a result of an injury resulting in a payment under certain events in the policy. Only payable if the student is not able to complete their studies as a result of such injury.

5.3 Home/Car Modification Benefit

If as a direct result of injury the covered person requires home and/or car modifications in order to assist the person in maintaining their independence then the insurer will pay up to a maximum of \$10,000.

5.4 Emergency Home Help

Pays non-wage earners up to \$250 per week for domestic duties expenses as a result of bodily injuries. A 7 day excess period applies. The maximum benefit period is 52 weeks.

5.5 Student Tutorial Costs

If the covered person is a student and is unable to attend registered classes, the insurer will pay home tutorial services up to \$250 per week for a maximum of 52 weeks. Person must be registered as a full time student.

5.6 Bed Care/ Extra Cash

If the covered person is confined to a bed (other than in a hospital) as a result of bodily injury, for a period in excess of 48 hours. Insurer will pay \$35/day up to a maximum of 365 consecutive days.

5.7 Funeral Expenses

Pays 100% of the actual costs of funeral expenses of an insured person up to a maximum of \$7,500.





6. How Do I Make A Claim?

1.

Complete an Injury Report Form, available from the UniSA Sport website, <u>www.unisasport.com.au</u>.

2.

Report the injury and submit the Injury Report Form to UniSA Sport via email or in person. Contact must be made as soon as possible following the accident/injury occurring.

UniSA Sports Office:

Pridham Hall PH2-15 City West Campus E: unisasport@unisa.edu.au T: 08 8302 0661

3.

UniSA Sport will put you in contact with the UniSA Insurance Department, who will work through the claim process with you. The time limit from when the incident occurs until when a claim must be lodged is 12 months.

- 4. Order of claiming for treatments:
 - a. If the item you are claiming for is covered by Medicare then you will not be able to claim for it under the sports insurance policy.
 - b. If you don't have private health insurance and the treatment is not covered under Medicare then you are able to submit the claim.
 - c. If you do have private health insurance then claim from your private health insurance, and then from the sports insurance.

Prior to submitting a claim, all costs must be finalised and paid for by the individual. If approved, the insurance coverage provides re-imbursement only to the individual and does not directly pay any outstanding costs.

