Frequently Asked Insurance Questions

Direct excerpt from SV Roller Derby Membership Bylaw
Skate Victoria is a State Sporting Association not an insurer. Clubs and individuals register with Skate Victoria as members which provides the sport of Roller Derby with a range of benefits including insurance.

Membership benefits include support through the Skate Victoria office with a high level of customer service, development programs which include Coaching Accreditation, Standardised Assessments, Quad Fit, Junior programs, Policy development, Executive Induction program, grievance resolution and governance support. Advertising and promotion through Skate Victoria’s social media outlets and participation development support.

This Bylaw is to be read in conjunction with Skate Victoria Safety Protocol, which can be downloaded from our website at: [www.skatevictoria.com.au/documents-and-policies/](http://www.skatevictoria.com.au/documents-and-policies/)

Clubs are required to be sole affiliates of Skate Victoria to provide Public Liability, Professional Indemnity and Personal Accident coverage. Skate Victoria cannot provide affiliation to clubs wishing to have dual insurance coverage.

Skate Victoria strongly recommends that skaters also carry their own private medical and income protection. Personal Sports Accident coverage through Skate Victoria insurance is intended to supplement Medicare and Private Medical coverage, NOT replace it.

Clubs are required to adopt the Skate Victoria Return to Play Policy which can be downloaded from our website at: [www.skatevictoria.com.au/documents-and-policies/](http://www.skatevictoria.com.au/documents-and-policies/). Once a claimant returns to the sport, which includes training, they can no longer claim ongoing expenses ie: physio, massage, etc.

For full details of coverage, the AJ Gallagher policy needs to be read in conjunction with the schedule - both documents can be downloaded from our website at: [www.skatevictoria.com.au/documents-and-policies/](http://www.skatevictoria.com.au/documents-and-policies/)

### Frequently Asked Insurance Questions

#### Non Medicare Medical Expenses Claim

1. Please note that due to Federal Government Legislation (Sec126, Health Insurance Act 1973) General Insurers are unable to provide benefits on any Medicare related expenses, including gap payments. Surgeon fees, Assistant fees, Anesthetists fees – are all doctors and their fees and charges are Medicare claimable. The Medicare “Gap” which is the portion Medicare does not rebate back to you is not compensable under any insurance policy. The “Gap” is created when doctors charge more than the Medicare schedule fee.

2. Claims for treatment given by a chiropractor, masseur, naturopath, osteopath or physiotherapist must be accompanied by a referral from a registered medical doctor.


4. Ambulance Coverage and Income Protection are not covered under the policy.

5. If you hold private health insurance you are required to claim all expenses from your private health fund first. Once you have claimed from your health fund please forward your 'Statement of Benefits Paid', the account and receipt to AJ Gallagher Melbourne Office.

6. If you have already incurred non-Medicare medical expenses, please attach the original tax invoices along with a receipt confirming the account has been paid & forward to AJ Gallagher.