

Frequently Asked Questions about the Saskatchewan Hockey Association Insurance Program

1. What is the purpose of the Saskatchewan Hockey Association Insurance program?

The Insurance Program must ensure that adequate financial resources are in place to compensate those who are injured or who have suffered a financial loss as the result of their involvement in hockey. It involves good financial management, so that funds are in place to meet claim obligations when they fall due. It also includes establishing control mechanisms so that only genuine claims are reimbursed.

Insurance is one important method of handling claims, but only when it is practical, possible and cost-effective. Ironically, insurance is not available to cover many hockey-related risk exposures, as many times the desired coverage is simply unaffordable.

Hockey Canada has constructed a National Insurance Program to provide financial resources to help deal with the cost of risks which confront organized hockey.

Hockey Canada and each of the Branches of which Hockey Canada is comprised is specifically named as an insured, and all sub-associations, leagues and teams which form a part of Hockey Canada. It includes any officer, director, employee, coach, volunteer worker, instructor, referee or member of a Committee while acting within the scope of his or her duties. It includes members of any teams, leagues, Branch teams, division teams, national teams or international teams provided all are registered with or affiliated with Hockey Canada.

2. What type of Coverage do we have and what are the limits?

Basic coverage includes:

- Comprehensive General Liability
- Accidental Death and Dismemberment
- Major Medical/Dental Coverage

*****IMPORTANT:** Senior Male, Adult Rec and College/University teams must purchase the Medical/Dental coverage separately; this is not included with your basic coverage due to half visors being worn at these levels. Before submitting a claim, please check with your team to ensure they have purchased the Medical/Dental insurance through the Saskatchewan Hockey Association.

3. Where are the forms to be submitted?

The Hockey Canada injury report must be sent directly to the SHA Office within 90 days of the incident. The form will then be forwarded to Hockey Canada by our branch administrator.

4. How long does it take to process the claim?

The time required to process the claim will vary due to the type of claim made. This process could take 6-8 weeks from the date that we receive it in our office as it is based on the volume of claims that Hockey Canada receives. It is based on a first come, first served basis and certainly the time of year also impacts on the speed of the process.

5. Why do I have to submit to my own insurance company first when it is a hockey injury?

The National Insurance Program is designed to be a secondary insurer for our participants. The policy is structured in a way that the participants' insurance pays first and the National Insurance Program pays second.

The insurance premium is very well priced considering the number of players and volunteers covered under the plan. This insurance coverage provides protection up to 20 million dollars for injuries occurred while playing hockey (in the event of being named in a personal liability suit, this figure is used). For comparison most homeowners' policies do not provide coverage to this extent and would cost significantly more to obtain this type and amount of coverage.

6. Why can't I get my salary replaced if I can't work because of a hockey injury?

Currently the National Insurance Program does not have a provision under the policy for Income Replacement. This type of insurance is costly and applies to a small percentage of players in Hockey Canada/SHA.

7. Do I have to wait until my treatment is complete before I send in my report?

It is imperative that the injury report be filled out completely, immediately following the hockey accident, no later than 90 days after the accident date. Claims are accepted up to one year from the injury date. Do not wait to send in your injury report while you wait on treatment, other forms, etc.

8. Who is responsible for filing my injury report?

There is no policy that states who is responsible for doing this, but if you have entrusted this with your team, please follow up with them to make sure they have filed it with us. It is best to keep copies for your records.

9. The doctor/hospital has charged me a fee for filling out the injury report. Who will pay me back?

If approved, Hockey Canada will reimburse this fee 100%, and you do not have to submit this through your Primary insurer. Please be sure to send us the original receipt.

10. Is there anything that may hold up processing of my claim?

The following will delay processing of your claim and cause your injury report and/or claim to be returned to you:

1. An incomplete injury report. Every section on the injury report form MUST be filled out or it will be returned to be completed and, as result, delay processing.
2. No indication of Primary Insurance.
3. You have indicated that you have Primary insurance, but you did not submit your claim to that company (see question #5 for further details).
4. Your report is not legible (faxed injury reports are accepted, but do not always come through clear).
5. You did not indicate who to "Make Claim Payable to" at the very bottom of the injury report. This tells Hockey Canada who to make the payment out to.
6. We must receive original receipts for your claim. If you have to send the originals to your Primary insurer and cannot get them back, please notify our office. Always keep copies for your records!

For further clarification on any of the above, or if you did not see your question here, please call the SHA office at (306) 789-5101 or email Derek Derow at derekd@sha.sk.ca .

Thank you!