

# Injury Management Program

**Workers Compensation**

**New South Wales**

## CCI Workers Compensation NSW – Injury Management Program

**Updated: September 2023**

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This document is provided by Catholic Church Insurance (CCI) for use by Catholic Church Insurance Limited staff, clients (employers) and workers. It is to be regarded as Commercial in Confidence.

CCI undertakes a formal review of this Injury Management Program at regular intervals at least annually to ensure that any changes in legislation, guidelines and CCI's policies are captured. This program can be accessed through the CCI website.

This Injury Management Program provides general guidance in relation to all parties' obligations under the NSW Workers Compensation Scheme. It has not been tailored to the circumstances of our employers' businesses and must not be relied upon as legal advice. Our employers should seek further advice from CCI in relation to individual claims and circumstances. CCI may amend and update its procedures, including those described in this Injury Management Program periodically in response to changes implemented across the scheme by SIRA and SafeWork NSW, decisions from the Personal Injury Commission (PIC) or in response to recommendations from either SIRA and SafeWork NSW or the Independent Review Office (IRO).

Within this document our employers will find information and tools needed to meet their legislative obligations, both when workplace injuries occur, and when completing their own Return to Work Program. This document contains information about:

- Employer and worker obligations.
- CCI's obligations as a workers compensation insurer.
- The approach we will take should a workplace injury occur.
- What our employers can do to support their workers returning to work.
- The process for submitting feedback and managing any disputes that may arise.

If you have any questions or feedback on this Injury Management Program, please contact the Workers Compensation department at CCI on 1800 011 028. Our specialist staff are available to answer any questions or address any other requirements you may have.

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# 1. Overview

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Following the announcement in May 2023 that Catholic Church Insurance (CCI) has been placed into run-off, we will no longer issue new policies or renew existing policies when they expire. However, CCI will continue to honour and manage existing claims, and any new claims lodged on current in force policies for incidents that occur before their expiry date.

We remain committed to providing quality customer service to workers and employers through a fully integrated approach to case management, where the focus is on recovery at work and delivering quality outcomes. Our methodology emphasises a collaborative, fair, empathetic, and timely approach to the analysis, planning and coordination of each worker's claim while recognising their individual needs.

We will work in partnership with our employers to manage workplace injuries in a way which provides pastoral care to their workers and minimises the disruption to our employers' business. In doing so, we will always seek to achieve timely and durable return to work outcomes, assist with the worker's recovery at work and aim to reduce the overall cost of workers compensation to their business.

When working with CCI our employers can expect:

- Flexible and responsive injury and claims management services
- Responsiveness, transparency, and open communication regarding premium impacting decisions, claims and injury management support or general workers compensation advice.
- Staff who understand and respect the needs of the Church and community.

## 2. References

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This Injury Management Program is designed to provide employers and workers with information on the strategies and processes that will be implemented by CCI when workplace injuries occur.

This Injury Management Program has been developed in accordance with;

- Workers Compensation Act 1987
- Workplace Injury Management and Workers Compensation Act 1998
- SIRA's Standards of Practice
- SIRA's Injury Management Program Guidelines
- SIRA's Workers Compensation Benefits Guide
- Work Health and Safety Act 2011
- Privacy Amendment 2018 (Privacy and Personal Information Protection Act 1998)
- Health Records and Information Privacy Act 2002

### 3. CCI Case Management Model

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In the unfortunate event of a workers compensation claim, CCI will support our employers and workers in all aspects of claim and injury management. This includes:

#### Early intervention

Research indicates the longer a worker remains off work, the less likely it is for them to successfully return. CCI advocate for early intervention and ensure contact is made with key stakeholders within the first three (3) days. This includes contact with the worker, a representative from the employer and the nominated treating doctor supported by scripts to ensure sufficient information is being obtained to understand the individual risks to recovery and support a 'person centred' case management approach. At this time our Claims Specialist will apply an evidence-based risk triage screen to identify any potential barriers such as complex injuries or psychosocial barriers that may influence the worker's return to health and recovery at work.

The evidence-based risk triage screening utilises Official Disability Guidelines (ODG) which allows for the formulation of risk scores based on an individual worker, their diagnosis, and their individual risk factors for delayed recovery. Our Claims Specialist will then develop a tailored injury management strategy for the worker and advise the employer of their obligations and what supportive actions they can take to best assist the worker's recovery. We empower the worker to manage their own injury and we encourage, where possible, that the worker is given the opportunity to recover at work.

#### Partnership and collaboration

Claims and injury management decisions are made collaboratively with all parties throughout the return-to-work process. We support our clients to identify suitable and meaningful duties in line with the nominated treating doctor's recommendations. CCI use an Injury Management Plan (IMP) template that is tailored to the workers specific type of claim and their individual circumstances. The worker's input is maximised through a person-centred approach, with an emphasis on including goals and actions which harness the worker's strengths, abilities, and preferences, as well as manage any additional risks of delayed recovery which have been identified.

CCI ensures that all workers are advised and educated on their responsibilities and entitlements at early contact, and we include detailed explanations in our liability letters to ensure workers are empowered, with knowledge, in relation to their rights within the NSW Workers Compensation scheme. At appropriate times we will help our employers to engage the support of a workplace rehabilitation provider to support a worker's recovery at work.

#### Specialist Injury Management knowledge and expertise

CCI's dedicated claims team provide empathetic customer service and expert case management advice in the event of a workplace injury. We have adopted a risk-based approach to ensure return to work and injury management strategies are tailored to the worker, including the assignment of the most appropriate expertise within CCI. Our claims team have a range of experience suited to different injury types and presented risks including specialised Psychological Claims Specialists to ensure appropriate support for psychological claims.

We also have a team of Allied Health professionals who provide additional injury management support in the instance of more complex recoveries or when psychosocial risks present to promote

early recovery and return to work and return to health. Whilst employers are provided with a lead contact, they are supported by a concentration of specialists to allow our staff to develop specialist skills, maximise return to work outcomes, and ensure expert advice is being provided to workers and employers.

### Strategic Planning

CCI's risk-based claims approach uses specialist skills of a Claims Specialist and team manager, and for more complex claims an Injury Management Specialist, to develop tailored and proactive injury management strategies for workers based on their diagnosis, assessed psychosocial barriers and work capacity. Throughout the life of a claim, CCI Claim Specialists will conduct 'Strategic Claim Reviews' which provide an opportunity to further identify any additional risk factors which have evolved throughout the claim, or changes in circumstances or needs. From these reviews the claims strategy is revised if needed and the IMP updated in collaboration with the relevant stakeholders.

### Treatment

Approval of treatment is made in accordance with current medical literature and:

- Workers Compensation Act 1987
- Workplace Injury Management and Workers Compensation Act 1998
- Workers Compensation Benefits Guide

### Dispute and conflict resolution

Working as a specialised insurer we pride ourselves with maintaining strong relationships with our employers and their workers. CCI provides a dispute resolution process and escalation channel to ensure our collaboration is fostered and decisions are made within commercial and shared value parameters.

## 4. Obligations and Responsibilities

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It is important that all stakeholders understand their role in helping a worker return to health and recover at work following a workplace injury.

The following obligations are sourced from:

- Workers Compensation Act 1987
- Workplace Injury Management and Workers Compensation Act 1998
- Workers Compensation Benefits Guide
- SIRA's Standards of Practice

### CCI's obligations and commitments

CCI will comply with the following;

- Contact the worker, employer and nominated treating doctor within three (3) working days of being notified of a workplace injury.
- Advise employers of their obligations and responsibilities under the Injury Management Program.
- Advise workers of their obligations and responsibilities in line with legislation.
- Advise the worker and employer in writing of the initial liability decision within seven (7) calendar days of notification.
- Inform the worker and employer of entitlements and how they are calculated.
- Commence payments of weekly benefits and medical expenses if liability is accepted.
- Approve treatment in a timely manner to support the worker's recovery.
- Create a tailored Injury Management Plan for every worker with a significant injury in consultation with the worker, employer and nominated treating doctor that contains the:
  - Return to Work strategy.
  - Approved treatments and any planned actions to be taken by each stakeholder.
  - Obligations of all stakeholders.
- Review and update the Injury Management Plan in consultation with the relevant stakeholders when there are substantial changes in the worker's medical or return to work circumstances.
- Work collaboratively and transparently with all stakeholders to help facilitate a timely, safe and durable return to work for all workers where it is reasonably practicable for the worker to return to work.
- Provide advice to employers on the provision of suitable employment, redeployment options and use of vocational programs.



- Carry out work capacity assessments when new information is received about a worker's capacity and must be conducted after 78 entitlement weeks, where it is likely that the worker's entitlement to weekly payments will continue beyond 130 weeks, except for seriously injured workers.
- Complete a Work Capacity Decision on all claims upon reaching 130 weeks duration, and then every two years thereafter.

## Informing Stakeholders of their Rights and Obligations

As workers compensation specialists, CCI staff are required to educate employers, workers and nominated treating doctors of their responsibilities and obligations under the Injury Management Program. CCI satisfy this obligation by:

- Providing copies of the Injury Management Program to all employers,
- Meet with employers to discuss their obligations under the Injury Management Program,
- Outline obligations, rights, and responsibilities specific to each claim through the Injury Management Plan,
- Detail the process a worker must take to change their nominated treating doctor,
- Explain to workers their rights, responsibilities, and requirements in line with the legislation.

### Early and Regular Communication

Early and regular communication with all parties is critical to initiate a case management strategy which assists timely, safe and durable return to work for workers. Upon receipt of all claims CCI is required to contact the worker, employer, nominated treating doctor when reasonably necessary, within three (3) business days. Supported by scripts to ensure sufficient information is being obtained to understand the individual risks to recovery, CCI will discuss with all parties the injury, diagnosis, treatment plan, recovery progress and what further support the worker would benefit from to aid their recovery at work. This information assists in determining liability and developing an effective injury management strategy for the claim.

CCI holds great importance in building and sustaining strong rapport with workers and employers and provide clear guidance to workers and employers regarding any claim actions and obligations within the workers compensation system. CCI maintains regular communication throughout the life of each claim to ensure all parties are working towards a common recovery at work goal and everyone is well informed of the worker's recovery progress. In addition to regular contact with the worker and treatment providers, CCI conducts claims reviews with employers, at a frequency which matches the needs of the employer and CCI. These meetings ensure that employers have a clear understanding on how to meet their obligations as well as address work related barriers to recovery.

### Individualised Injury Management Plan

An Injury Management Plan (IMP) is a claim specific document that outlines the recovery at work goal, treatment program and obligations of each of the parties involved in the management of the claim. The CCI Claims Specialist responsible for the claim will develop the initial IMP, in consultation with the worker, employer, nominated treating doctor and other key stakeholders, for all significant

injuries, once they have sufficient medical and return to work information to ensure the plan is specific to the worker's circumstances. An injury is considered to be a significant injury when the worker cannot resume their pre-injury duties within seven (7) continual days.

The Claims Specialist will actively seek relevant material to support the development of the IMP and the plan will be developed within the first 20 days from notification of a significant injury. The IMP will be reviewed periodically throughout the claim to ensure it remains up-to-date and relevant to the worker's circumstances to drive the recovery and return to work outcome of the claim.

Please see in the [Appendix 2](#) for a template of CCI's Injury Management Plan.

## Employer Obligations

As an employer in NSW, you are responsible for the safety and wellbeing of your staff. According to the Workers Compensation Act 1987 and the Workplace Injury Management and Workers Compensation Act 1998 employers are required to:

- Provide a safe workplace ensuring the health and welfare of all employees.
- Ensure a current workers compensation policy is in place.
- Ensure appropriate first aid is given to workers.
- Provide and maintain a register of injuries.
- Document all reported incidents or injuries.
- Notify SafeWork NSW on 13 10 50 following a serious injury.
- Notify CCI within 48 hours of becoming aware that a worker has experienced a workplace injury.
- Comply with CCI's Injury Management Program.
- Establish and maintain a Return-to-Work Program for their workplace.
- Provide suitable duties for workers where possible in line with their Certificate of Capacity.
- Participate in the Injury Management Plan for their workers.
- Establish and maintain a return to work or recovery at work plan for relevant workers.
- Work with an appointed workplace rehabilitation provider in relation to worker's vocational rehabilitation.
- Comply with requirements of Section 248 of the Workers Compensation Act 1987 which, in general terms makes it an offence to terminate a workers employment as a result of the injury within six (6) months of the worker becoming incapacitated for work.

### Serious Injuries

All serious injuries must be reported directly to SafeWork NSW as per Work Health and Safety Act 2011. A serious injury that must be reported includes:

- The death of a person.
- A 'serious injury or illness'.
- A dangerous incident arising out of work carried out by a business or workplace.

Notification of a serious injury or illness is required if the worker requires any of the following:

- Immediate treatment as an in-patient in a hospital.
- Immediate treatment for the amputation of any part of the body.
- Immediate treatment for a serious head injury.
- Immediate treatment for a serious eye injury.
- Immediate treatment for a serious burn.
- Immediate treatment for the separation of skin from an underlying tissue (such as de-gloving or scalping).
- Immediate treatment for a spinal injury.
- Immediate treatment for the loss of a bodily function.
- Immediate treatment for serious lacerations.
- Medical treatment within 48 hours of exposure to a substance.

### Employer Return to Work Programs

The Return-to-Work Program is a necessary part of the employer's workers compensation Injury Management Program. It contains the policies and procedures their business has in place to help workers with their recovery and return to work following an injury. The employer's Return to Work Program should be consistent with their insurer's Injury Management Program and should be reviewed at least every two years.

Requirements of employers fall under the following two categories;

	CATEGORY 1	CATEGORY 2
<b>Basic Tariff Premium</b>	<ul style="list-style-type: none"> <li>• Exceeds \$50,000 per annum, or</li> <li>• Insured by a specialised insurer and employs more than 20 staff</li> </ul>	<ul style="list-style-type: none"> <li>• Up to \$50,000 per annum, or</li> <li>• Doesn't fit into category 1</li> </ul>
<b>Return to Work Program requirements</b>	<ul style="list-style-type: none"> <li>• Appoint a Return-to-Work Coordinator</li> <li>• Develop a Return-to-Work Program</li> <li>• Consult with workers and Unions</li> <li>• Implement the program</li> </ul>	<ul style="list-style-type: none"> <li>• You can adopt a standard Return to Work Program prepared by SIRA or develop your own program based on SIRA's standard program</li> </ul>

You can review the specific requirements of your Return-to-Work Program through the SIRA Website [here](#).

### Employer Return to Work Plans

A Return-to-Work Plan is a customised document for each individual worker to coordinate and manage their return to suitable work following a work-related injury. The Return-to-Work Plan needs to reflect the medical information provided by the nominated treating doctor on the Certificate of Capacity and should be updated to reflect any changes in the worker's capacity.

The Workers Compensation Act 1987 determines that the employer must provide employment to the worker that is:

- So far as reasonably practicable, the same as or equivalent to the employment in which the worker was employed in at the time of the injury; and
- Otherwise, suitable work for the worker.

## Worker Rights and Obligations

A worker who lodges a workers compensation claim must:

- Notify their employer of a workplace injury as soon as possible.
- Make all reasonable efforts to return to suitable employment as soon as practicable or maintain suitable employment in some capacity from the time of the injury if possible.
- Nominate a treating doctor who is willing to participate in the Injury Management Plan.
- Actively participate in the development of the Injury Management Plan and Return to Work Plan and adhere to the obligations outlined in the Injury Management Plan and Return to Work Plan.
- Give consent for their nominated treating doctor to provide relevant information to CCI and/or their employer for the purposes of return to work and their recovery.
- Attend medical, treatment and return to work appointments and actively participate in services to promote their recovery.
- Seek alternative employment if they are unable to return to their pre-injury employment or their employer cannot provide suitable duties.

A worker has the right to:

- Choose their own nominated treating doctor, rehabilitation provider and any treatment providers.
- Change their nominated treating doctor after providing reasons and obtaining approval from CCI.
- Be involved in the development of their Injury Management Plan and Return to Work Plan.
- Have a union representative and/or a support person for meetings.

## Nominated Treating Doctor's Obligations

The nominated treating doctor is the medical practitioner the worker selects to medically manage their injury and assist in coordinating their recovery and return to work. The nominated treating doctor is required to:

- Issue regular Certificates of Capacity detailing what treatment the worker would benefit from and their capacity for work.
- Advice on likely recovery times.
- Participate in the development of the Injury Management Plan and Return to Work Plan.
- Provide relevant information to the employer and insurer.
- Recommend and arrange reasonable and evidence-based treatment.

- Be available for scheduled communication with the employer, insurer, treatment providers and rehabilitation provider when required.
- Advise of any changes or restrictions on their practice.

## Approved Workplace Rehabilitation Provider Obligations

Workplace rehabilitation providers are accredited by the SIRA and are appointed to provide workers with specific rehabilitation services to assist them with their return to work.

An approved workplace rehabilitation provider is an independent party to liaise and negotiate with all stakeholders involved in the worker's rehabilitation. Workplace rehabilitation providers must:

- Be approved by SIRA.
- Promote an early and safe return to suitable employment through proactive and evidence-based injury and case management.
- Facilitate communication between all parties.
- Help identify the most appropriate return to work goal given the specifics of the claim.
- Identify any risks and barriers that may impact on the worker's return to work and develop strategies to overcome them.
- Provide detailed plans, assessments and updates as part of their return-to-work services.
- Ensure all services are delivered in a cost-effective manner.
- Conduct services in accordance with SIRA [‘Workplace Rehabilitation Providers Code of Conduct’](#).

CCI has established relationships with preferred workplace rehabilitation providers, however, we are happy to honour any current agreements or preferences of the worker or employer. CCI recognises that workplace rehabilitation provider knowledge of an employer's workplace can be critical in building effective recovery and return to work plans.

## 5. Return to Work and Rehabilitation Practices

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Employers play an integral role in the return to work and recovery process. In order to maximise the chances of returning workers to suitable work, the following activities will be considered.

### Workplace Rehabilitation Providers

At CCI, our focus after a worker sustains an injury is to help them recover whilst maintaining their involvement at their place of employment. One of the key strategies to achieve this, is targeted and systematic referrals to workplace rehabilitation providers.

Workplace rehabilitation providers identify and address critical physical, psychological, and social barriers which impact the timeliness of a worker's return to work. These providers specialise in workplace injuries and have the skills and experience to identify barriers and develop strategies in conjunction with the other key parties involved to help expedite a worker's recovery at work.

CCI's internal Injury Management Team monitor the effectiveness of the workplace rehabilitation providers' services through monthly reporting and escalation of individual claims via the Claims Teams where the worker's recovery is protracted. CCI's Claims Specialists and/or Injury Management Specialists review all requested services by the workplace rehabilitation provider to ensure they are appropriate and that the planned services will support the worker to make a recovery at work.

CCI utilises the specialities of workplace rehabilitation providers to provide the following services:

<b>Workplace Assessments</b>	A specialised on-site assessment of the worker's pre-injury role and potential suitable duties. The rehabilitation provider will liaise with the worker's manager, return to work coordinator and the worker to determine the critical demands of their work tasks and identify alternate duties to allow for a return to work or upgrade in duties.
<b>Functional Assessment</b>	The objective measure of a worker's current work capacity to identify existing capabilities and/or limitations. Various testing is performed which involves observation of the worker's performance and measurement against identified physical work task requirements. The result will indicate a worker's physical tolerances in relation to the work that will be required of them in their employment.
<b>Vocational Assessment</b>	This is an assessment of the worker's transferrable skills, abilities, aptitudes, and interests in relation to creating a work profile. The workplace rehabilitation provider will match the worker's profile with suitable employment options.
<b>Vocational Re-deployment</b>	Vocational redeployment is considered if the worker is unable to return to work with their pre-injury employer. Vocational rehabilitation will assist to gain new employment and/or a real increase for earnings of the worker. The

appointed workplace rehabilitation provider will assist with job seeking and applications for potential suitable employment.

**Activities of Daily Living Assessment**

Activities of daily living assessments review the impact of a workplace injury on a worker's ability to perform everyday tasks such as personal care, and household chores. The report may provide recommendations to help support the workers recovery, such as aids or domestic services.

## SIRA Funded Programs

SIRA funds several programs to support eligible workers with their recovery at work. CCI will engage all key stakeholders to consider the appropriateness of these programs when a worker is unable to commence a recovery at work and they have some capacity for work, or if the return-to-work goal of pre-injury duties cannot be achieved in the foreseeable future and the employer is unable to offer prolonged suitable duties or suitable employment.

**Recover at Work Assist for Small Businesses**

This program helps small businesses overcome financial hardship when providing suitable work to their worker to aid in their recovery at work.

**Work Trial Program**

Work trials provide work-based opportunities for a worker to upgrade their capacity, develop skills and/or gain on-the-job experience following a work-related injury or illness. A work trial is a short duration, voluntary agreement with a host employer. The worker receives no payment from the work trial host.

**Connect2work Program**

A voluntary short term work placement with a host employer. It supports recovery at work for workers where their pre-injury employer is unable to offer suitable work due to COVID-19 or they are looking for new employment.

**Equipment and Workplace Modification Program**

The equipment and/or workplace modifications program provides funding for workplace equipment and/or modifications that may help a worker to remain at work with their pre-injury employer or commence work with a new employer.

**Training Program**

A training program can help a worker to develop new skills to help them secure durable employment

**JobCover Placement Program**

This program provides incentives to new employers to employ a worker who is unable to return to work with their pre-injury employer.

**JobCover6**

A modified version of the JobCover program designed to help workers locate suitable work where ongoing employment cannot be secured with a new employer. The program supports employers to offer employment for up to 6 months duration to a worker recovering from a work-related injury, where the worker is looking for new employment.

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**Transition to  
work program**

This program can help pay for the immediate or short-term costs that prevent a worker from commencing employment.

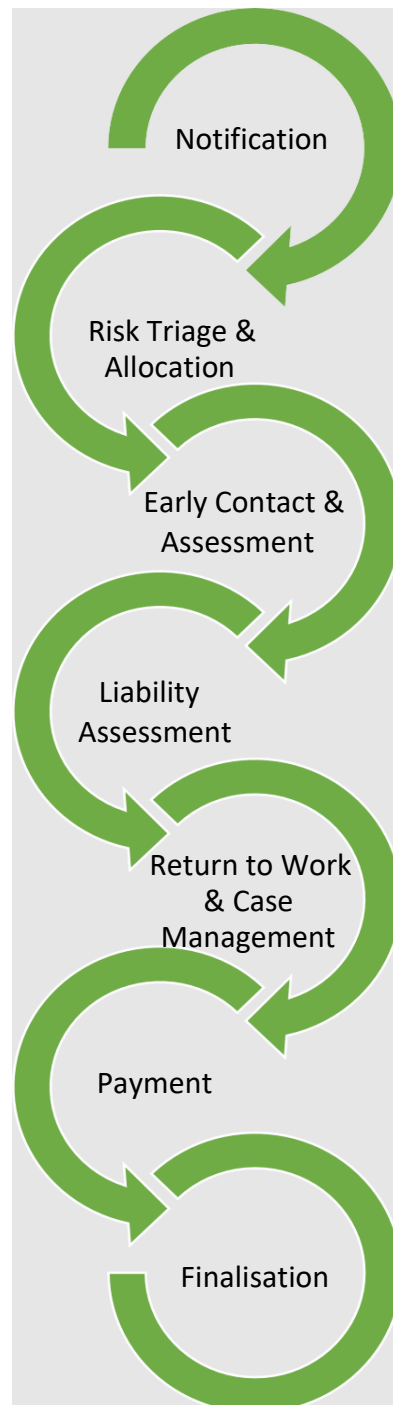
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## 6. Claims Management Process

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CCI is committed to providing quality service to workers and employers through every aspect of claims and injury management. The following section looks at the lifecycle of a claim, from notification to finalisation.



## Notification

When an injury takes place CCI must be notified within 48 hours of the employer becoming aware of the injury. Early notification ensures that a worker receives appropriate treatment and allows CCI to successfully manage the injury to allow for the best possible chance of a timely recovery and return to work. If the worker does not require any medical attention the incident must still be recorded in the Workplace's Register of Injuries.

In the unfortunate event of a serious injury or illness employers must report the details of what happened to SafeWork NSW on Ph: 13 10 50.

All notifications of an injury should be notified to CCI via the contacts below:

Email	<a href="mailto:WorkersCompensation@ccinsurance.org.au">WorkersCompensation@ccinsurance.org.au</a>
Telephone:	1800 011 028

The person providing the notification will be required to provide all the following information:

- The date, time, location, and nature of the injury.
- How the injury occurred.
- The worker's name, address, contact number, gender, and date of birth.
- Employer's name.
- Notifier's name and address.
- Notifier's relationship to the worker.

CCI has its own Notification of Injury form which includes all required information. Once the Notification of Injury form is completed the notifier should attach a copy of the worker's Certificate of Capacity and forward to CCI using one of the above methods of notification.

## Workers Consent

Upon notification of a new claim and where not provided, CCI requests a worker's written consent to releasing personal and health information to a third party. As part of gaining a worker's consent, CCI advises the worker of their rights and obligations and the types of information that may be released in relation to their workers compensation claim.

## Review and Allocation

Each employer will have a dedicated team to attend to their claims and workers compensation needs. Claims will be triaged by risk at the initial assessment and periodically throughout the lifecycle of each claim to ensure the most effective resources are applied throughout.

For low-risk claims, a Fast Track Specialist will provide quick and predominantly telephone and email contact to administer claims to closure.

For medium and high risk claims a Claims Specialist or Senior Claims Specialist will be supported by our Injury Management Specialists (Allied Health professionals) and/or Technical Specialists. Specialist support will be tailored to the nature of each claim.

Once the injury notification has been received by CCI, a Claims representative will contact the worker, employer and nominated treatment doctor within three (3) business days and commence case management activities to ensure that the worker can receive appropriate treatment and benefits as soon possible.

### Pre-Injury Average Weekly Earnings (PIAWE)

The Claims Specialist will work with the employer and worker to determine the appropriate pre-injury average weekly earnings (PIAWE) for the worker.

The calculation of PIAWE has been revised for injuries that occurred on or after 21 October 2019. Further information about these changes, including a reference guide and PIAWE forms and agreement, can be found on the SIRA website [here](#). In addition SIRA's Return to Work Coordination Learning Portal includes a module titled Workers entitlements – weekly payments, Employers can access this training at the following address - <https://www.sira.nsw.gov.au/sirartwelearning/modules/worker-entitlementsweekly-payments>.

Where CCI is unable to gain the information to confirm the PIAWE rate we will commence interim payments within seven (7) calendar days of notification calculated from the available information and will be communicated via a Work Capacity Decision. Once all PIAWE information is received CCI will recalculate the workers PIAWE within five (5) business days and pay any adjustments required within 14 days.

Details on how to calculate PIAWE for injuries that occurred prior to 21 October 2019, can also be found on the SIRA website [here](#).

## Early Contact and Assessment

Upon receipt of a notification of a claim the Claims Specialist supported by scripts to ensure sufficient information is being obtained to understand the individual risks to recovery will contact the worker, employer, and nominated treating doctor to:

- Establish communication and working partnerships.
- Gather information to determine claim liability and commence return to work planning.
- Provide education and advice and to clarify processes including explaining stakeholder obligations, rights and responsibilities.
- Promote positive expectations for early return to work.
- Identify potential recovery and return to work barriers.
- Develop appropriate strategies to facilitate return to work as soon as possible.
- Determine a realistic and achievable return to work goal and communicate this with all the parties.

- If the worker has sustained a significant injury (where the worker has been unable to resume their pre-injury role in more than seven (7) continuous days) coordinate the development of the initial and subsequent Injury Management Plans.
- Within fifteen (15) business days of a notification CCI will screen for potential recoveries.

The CCI Claims Specialist may discuss any of the following relevant points:

- How the injury occurred and whether it is related to employment.
- The worker's condition and capacity for work.
- Time lost as a result of the injury.
- Wage details.
- Pre-injury job description and requirements.
- Suitable duties relevant to the injury and the worker's functional capacity.

### Assessing Liability

A decision on liability will be made within seven (7) calendar days of the claim being notified to CCI. This decision will be made in consultation with the worker, employer and nominated treating doctor based on the information communicated at initial contacts and taking into consideration details on the Certificate of Capacity and notification form. If any form of liability is accepted the Claims Specialist will work with the worker and employer to determine the appropriate rate of pay.

Before a claim can be accepted CCI must consider the following three points:

1	Was the injured person a worker?	2	Did the injury occur at work or as a result of their employment?	3	Was work a substantial contributing factor to the injury?
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If all three criteria have been met, then CCI will determine liability based on one of the following options.

Decision	Criteria and timeframes
<b>Provisional Liability (PL)</b>	<ul style="list-style-type: none"> <li>• Must be determined within seven (7) calendar days unless the claim was previously reasonably excused.</li> <li>• Written notice will be provided to the worker and employer within two (2) business days of making the decision and will include PIAWE information and how it was calculated.</li> <li>• Provisional liability can be accepted for reasonably necessary medical expenses up to \$10,000 and/or weekly payments up to 12 weeks.</li> <li>• If the maximum entitlements in either weekly or medical expenses are reached, and payments are to continue, full liability must be determined.</li> </ul>
<b>Liability Accepted</b>	<ul style="list-style-type: none"> <li>• Liability can be accepted within seven (7) calendar days where considered appropriate</li> </ul>

Decision	Criteria and timeframes
	<ul style="list-style-type: none"> <li>Alternatively, liability can be accepted within the provisional period or prior to expiration of the provisional liability period. Written notice will be provided to the worker and employer within two (2) business days of making the decision and will include PIAWE information and how it was calculated</li> </ul>
<b>Reasonable Excuse (RE)</b>	<ul style="list-style-type: none"> <li>Reasonable excuse must be determined within seven (7) calendar days.</li> <li>Reasonable excuse can be used in the following situations only:               <ul style="list-style-type: none"> <li>Insufficient medical information</li> <li>Injured person is not a worker.</li> <li>CCI cannot contact the worker.</li> <li>Worker refused CCI access to information.</li> <li>Evidence that the injury is not work related.</li> <li>The injury is not significant and further information needed.</li> <li>Notification is greater than two months after date of injury.</li> </ul> </li> <li>Written notice will be issued to the worker and employer within two (2) business days of making the decision that outlines the relevant reasonable excuse(s) and what the worker must do to resolve the issue.</li> </ul>
<b>Liability Disputed</b>	<ul style="list-style-type: none"> <li>In situations where there is evidence that suggests liability should not be supported a decision to dispute liability can be made</li> <li>A dispute notice under S78 of the Workplace Injury Management and Workers Compensation Act 1998 will be issued within seven (7) calendar days.</li> <li>The worker has the right to request a review of this decision.</li> </ul>

## Payments & Recoveries

### Wage Reimbursements

Although our primary goal is to help workers back to work following an injury, we also understand the financial pressures of day-to-day life that continue after an injury has taken place. A worker will receive weekly compensation if applicable within seven (7) calendar days of CCI being notified of an injury. CCI have a Wage Reimbursement Schedule (WRS) Agreement with the majority of our employers which allows the employer to initiate weekly wage payments to their workers as soon as initial liability has been determined, and the wage rates have been confirmed by the CCI.

Once CCI has received the WRS from the employer, reimbursement of wages will be made within ten (10) business days. Employers should send through their WRS each fortnight to ensure the worker's wage rate and reimbursement is always current, and to speed up the claim finalisation process.

Please see [Appendix 1](#) for a copy of CCI's WRS.

## Provider Payments

CCI understands the pressures of third-party providers and we maintain a ten (10) business day timeframe for payment of invoices from service providers. Please forward all invoices to CCI via email to [WorkersCompensation@ccinsurance.org.au](mailto:WorkersCompensation@ccinsurance.org.au).

## Direct wage payments

CCI can also pay workers their weekly benefits directly. This is usually in the case that the worker is no longer employed. If this is required, the Claims Specialist will consult with the worker and employer and provide written advice within five (5) days of commencing direct payments. CCI's Claims Specialist will also contact the worker to request they complete a Tax File Number Declaration Form.

## Authorising Payments

Prior to authorising any payments CCI's Claims Specialist will review the payment request to ensure we are paying the appropriate weekly benefit in line with the worker's PIAWE or service provider rate in line with the workers compensation fees order NSW. If for any reason there will be a delay in reimbursement CCI will notify the worker, employer or service provider within ten (10) business days of receiving the invoice or WRS.

If CCI identifies an overpayment to the worker, we will negotiate a repayment arrangement considering the worker's specific circumstances.

## Reduction of Payments in Compensation

CCI will keep the worker and employer informed about the worker's claim particularly regarding the workers entitlements and statutory steps down in weekly payments. CCI will advise a worker and employer no less than 15 business days prior to the reduction in payments.

Entitlement periods throughout the life of a claim include;

- First entitlement period (0-13 weeks from notification) the worker receives 95% of PIAWE.
- Second entitlement period (14-130 weeks from notification);
  - No capacity for work or working less than 15 hours per week the worker receives 80% PIAWE.
  - Working 15 hours per week or more the worker receives 95% of PIAWE.

## Recovery from a Third Party

In some circumstances CCI may be able to recover a share of liability for an injury from other insurers or individuals. This contribution reduces the overall cost of the claim.

Potential for recovery will be assessed during the early contact process, or when any additional information is received indicating possible third-party contribution.

## Claims Management

CCI will work with the worker, employer, and their nominated treating doctor to ensure there is a focus on recovery at work, appropriate treatment is proactively organised and funded and entitlements are paid in a timely fashion. CCI's claims management approach aims to assist the

worker to recover from their injury in a timely manner including a focus on a safe and durable return to work. CCI's focus is to also minimise cost and disruption to the employer's business.

The duration of the claim and the actions CCI takes to manage the injury and return to work will be dependent on the complexity and nature of the injury. Claims will fall into one of two categories:

- 1. Non-significant injury claim:** The worker is able to return to their pre-injury duties within seven (7) days of the injury.
- 2. Significant injury claim:** The worker is not able to return to their pre-injury duties for a period of more than seven (7) days.

### Non-Significant Injuries

In situations where the worker requires less than 7 days away from their pre-injury duties, their claim will be managed by a Fast Track Specialist who will provide quick processing, action, and turnaround. Specifically:

- Timely processing of treatment approvals.
- Payment of accounts and wages for time lost.
- Ensuring the claims process runs smoothly allowing the claim to be finalised swiftly.
- Keeping all parties aware of the status of the claim.

To assist us achieve the optimal goals with these claims, it is the employer's role to provide timely notification of all injuries along with all relevant documentation for prompt processing of approvals.

### Significant Injuries

When an injury is more significant and a longer period of treatment is required before the worker can return to work performing their pre-injury duties, CCI will develop a personalised strategy for the injury and claims management through consultation with the worker, employer, nominated treatment doctor and other relevant stakeholders involved in the claim. This process will include:

- Development of an Injury Management Plan that will outline the return-to-work goal, treatment plan for the worker, the responsibilities and obligations of all stakeholders involved in the claim and the implications for not complying with these obligations.
- Processing and determining approval for reasonably necessary treatment in consultation with the nominated treating doctor to agree on the type of treatment and the frequency and number of treatment sessions required by the worker. This will be incorporated into the Injury Management Plan.
- Case conferences with any combination of the stakeholders involved in the claim. These are designed to ensure everyone has the same understanding of where the claim is at, what is required next and who is responsible.

### Reasonably Necessary Treatment

Medical services can support and expedite a worker's recovery and return to work. CCI must determine if the recommended treatment is reasonably necessary in relation to the workplace injury. To do this CCI will consider the following factors;

- the appropriateness of the treatment.
- the availability of alternative treatment.
- the cost of the treatment.
- the actual or potential effectiveness of the treatment.
- the acceptance of the treatment by medical experts.

CCI will acknowledge all requests for treatment or medical service requests within 10 business days or earlier. CCI will make a decision regarding funding for treatment or medical services requested at our earliest possible opportunity and no later than 21 calendar days from the receipt of the request. CCI will advise all relevant parties of the decision regarding the requests within two (2) business days of the decision being made. If treatment is deemed reasonably necessary CCI's Claims Specialist will ensure that the service provider is appropriately qualified and will review and confirm the proposed fees are consistent with the workers compensation fees order.

Some treatments and services don't require pre-approval from CCI, these include the following;

Treatment	Expense	Timeframe from date of injury
<b>Initial treatment</b>	<ul style="list-style-type: none"> <li>Initial treatment</li> </ul>	Within 48 hours
<b>Nominated Treating Doctor</b>	<ul style="list-style-type: none"> <li>Consultation or case-conferencing for the injury, apart from telehealth and home visits</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Treatment during consultation</li> </ul>	Within one month
<b>Public hospital</b>	<ul style="list-style-type: none"> <li>Services provided in the emergency department for the injury</li> </ul>	Ongoing
	<ul style="list-style-type: none"> <li>Further services after receiving treatment at the emergency department for the injury</li> </ul>	Within one month
<b>Medical specialists</b>	<ul style="list-style-type: none"> <li>If referred by the nominated treating doctor, any consultation and treatment during consultations for the injury (apart from telehealth). Referrals for diagnostic tests must meet the Medicare Benefits Schedule criteria.</li> </ul> <p><u>Note:</u> Medical specialist means a medical practitioner recognised as a specialist by the Australian Health Practitioner Regulation Agency and remunerated at specialist rates under Medicare</p>	Within three months
<b>Diagnostic investigations</b>	<ul style="list-style-type: none"> <li>If referred by the nominated treating doctor for the injury, any plain x-rays</li> </ul>	Within two weeks
	<ul style="list-style-type: none"> <li>If referred by the nominated treating doctor, and the worker has been referred to a medical specialist for further injury management:               <ul style="list-style-type: none"> <li>ultrasounds and CT scans</li> </ul> </li> </ul>	Within three months



Treatment	Expense	Timeframe from date of injury
	- MRIs  Note: General Practitioners must satisfy the Medicare Benefits Schedule criteria when making an MRI referral	
	<ul style="list-style-type: none"> <li>If referred by the treating medical specialist for the injury, any diagnostic investigations.</li> </ul>	Within three months
<b>Allied health services</b>	<ul style="list-style-type: none"> <li>This includes services with a physiotherapist, psychologist, counselor, accredited exercise physiologist, osteopath, and chiropractor.</li> <li>Up to eight consultations with a SIRA approved treatment practitioner where treatment starts in the first three months of the date of injury.</li> <li>Up to three consultations with a SIRA approved treatment practitioner where treatment starts more than three months after the date of injury.</li> </ul>	Within three months
<b>Pharmacy</b>	<ul style="list-style-type: none"> <li>Dispensed prescription drugs and over-the-counter pharmacy items prescribed for the injury by the nominated treating doctor or medical specialist.</li> </ul>	Within one month
	<ul style="list-style-type: none"> <li>Prescription drugs and over-the-counter pharmacy items prescribed for the injury and dispensed through the Pharmaceutical Benefits Scheme (PBS).</li> </ul>	Ongoing

When further information is required and CCI is unable to gain this from the key stakeholders, or if there is a difference of opinion between the worker, employer, nominated treating doctor and/or treating team CCI may engage the below service providers to assist in supporting the worker's claim for compensation;

### Independent Medical Examinations

An Independent Medical Examination (IME) is an impartial assessment performed by a qualified medical professional for the purpose of providing information to assist with workers compensation injury and claims management. An IME can comment on all medical and injury related aspects of the claim such as diagnosis, causation, treatment options, prognosis, and capacity for work.

Referral to an IME is only appropriate in situations where information from the nominated treating doctor or nominated treating specialist is inadequate, unavailable, or inconsistent, and where the Claims Specialist has been unable to resolve the issues directly with these treating practitioners. Once a referral has been made to an IME the Claims Specialist can then only ask the independent doctor the same questions that have been directed to the treating doctors. If subsequent IMEs are required for the same work-related injury, then the insurer is required to refer to the same doctor

who performed the original IME unless this doctor is no longer consulting in a location convenient to the worker, or they are no longer performing IMEs.

As soon as a worker has been referred to an IME, they will immediately be notified by CCI ensuring they are given at least two (2) weeks' notice of the assessment or unless otherwise agreed to by the worker. This will always be followed up in writing with the appointment details, assessing doctor's name and address.

### **Injury Management Consultants**

When a worker has been identified at risk of delayed recovery or a specific return to work or injury management issue has been identified, a referral to an Injury Management Consultant may be considered after attempts have been made to resolve the issues with key stakeholders.

Injury Management Consultants (IMC) are registered medical practitioners experienced in occupational injury and workplace-based rehabilitation. The services of an IMC can be utilised to help open the communication pathways with the nominated treating doctor, employer, worker and CCI to negotiate an upgrade, or identify barriers to return to work and assist to implement a new claims strategy. Prior to making a referral to an IMC CCI will contact the worker and nominated treating doctor to advise of the purpose of the referral, explain the role of the IMC and that a copy of the report will be provided once received by CCI.

### **Independent Consultants**

Like an IMC, SIRA has approved various treatment practitioners to conduct independent peer reviews in determining reasonably necessary treatment for a worker. The role of these consultants is to liaise with the treatment provider as well as the nominated treating doctor to determine whether further treatment is reasonably necessary and to make their recommendations in writing to all the parties involved.

CCI has engaged with a network of Independent Consultants, both physiotherapists and psychologists, who can perform a file review and phone contact with the treating party. Alternatively, they will recommend a physical examination of the worker for a more comprehensive analysis of the worker's treatment requirements.

### **Factual and Surveillance Investigators**

Another service that is utilised by our claims team is that of an investigator. These service providers are most requested to provide factual investigation reports and in exceptional circumstances may also conduct surveillance.

Factual investigations will only be used when necessary and prior to arranging a factual investigation CCI will first try and obtain all required information by less intrusive means. Factual investigation reports can be useful when trying to obtain large amounts of factual evidence such as witness statements, company policies and procedural documents, email correspondence between staff, anecdotal records etc. Factual investigators will take instruction from CCI and employers to conduct relevant staff interviews with minimal disruption to their business. Factual investigation reports may be helpful in determining circumstances surrounding unsubstantiated allegations, factors causing psychological injury, recovery potential or identifying employer negligence and subsequent Common Law exposure.

If a factual investigation is required CCI will notify the worker at least five (5) business days prior to the interview in writing. This will also include the purpose of the investigation, the anticipated timeframe and advise the worker that they can nominate a place for the interview, request an interpreter and identify witnesses to be considered for the investigation. CCI will also advise the

worker that they are not obligated to participate in the factual investigation. Following the interview, the worker will be provided with a copy of their statement, within 10 business days.

Surveillance observations may be conducted on workers who have been suspected of performing tasks outside their capacity as outlined by their nominated treating doctor or CCI has received misleading information in relation to the workers injury. This type of evidence is most useful when combined with other evidence. CCI uses surveillance as a claims action sparingly, when we are unable to gather the information required through less intrusive means. Referral for surveillance can only be approved by a manager. The surveillance providers CCI instruct will ensure that surveillance is conducted in a public place, does not interfere with the workers activities, or induce, entrap, or trespass. They will also demonstrate sensitivity to the privacy rights of children. Once received surveillance is stored securely. If a worker asks CCI if we have arranged surveillance CCI will answer this question transparently taking into consideration the worker's wellbeing.

### Interpreter Services

Open and clear communication is imperative to achieving any return-to-work outcomes. When a worker is from a non-English speaking background and identifies that they do not have a strong command of the English language, CCI calls upon the services of a qualified NATTI certified interpreter to ensure the worker's thorough understanding of their rights, obligations, and claims procedure and to ensure CCI fully understands the needs of the worker.

### Additional or consequential medical conditions

If a Certificate of Capacity is received identifying an additional consequential medical condition, CCI will contact the nominated treating doctor to establish the reason of the inclusion of the condition within five (5) business days following receipt of the Certificate of Capacity. CCI will then contact the worker to discuss the condition and establish whether they intend to claim for reasonably necessary treatment. If the worker intends to claim treatment costs for the condition CCI will determine liability within 21 calendar days.

### Ongoing Review

Communication is a key element of our case management methodology and is known to improve return to work outcomes. An employer will participate in regular claims reviews to ensure agreed strategy on all claims. Furthermore, CCI's claims specialist will ensure regular contact with all key stakeholders to track the worker's progress through 'Strategic Claim Reviews' which provide an opportunity to further identify any additional risk factors which have evolved throughout the claim, or changes in circumstances or needs. From these reviews the claims strategy is revised if needed and the Injury Management Plan updated in collaboration with the relevant stakeholders.

When new information is received for a claim, CCI will evaluate and implement any necessary changes such as updating key stakeholders, approving reasonably necessary treatment, organising referral to a workplace rehabilitation provider, updating estimates, and reviewing compensation benefits. Any necessary information will be discussed with all relevant stakeholders, including a change in capacity or restrictions which could result in the need for an updated Injury Management Plan and Return to Work Plan.

We encourage our clients to maintain regular communication with their employees throughout the life of their claim. Regular communication is encouraged and facilitated with workers who sustain a primary or secondary psychological injury to reduce any return work barriers which may occur due to lack of communication and isolation from the workplace. Where there is a communication breakdown between the worker and employer CCI will recommend referral to an accredited

mediation provider where appropriate to assist in reinstating open communication between all parties.

### **Change of Claim Specialist**

From time to time there is a possibility that a worker's claim will be managed by different Claims Specialists which could happen for a variety of reasons. To ensure a smooth transition, CCI will advise both the employer and the worker prior to handover via phone and in writing. The new Claims Specialist will be in contact with you in within 1 week of handover.

## **Fostering Open Communication**

### **Case Conferences**

As outlined above one of the most powerful tools in a successful return to work strategy is communication. CCI encourages Claims Specialists and Injury Management Specialists to organise case conferences to encourage collaborative discussion between all stakeholders and agree on proactive injury management and return to work strategies.

A case conference will most commonly occur at the nominated treating doctor's office (in person or via teleconference) and can include the worker, Claims Specialist, employer, a workplace rehabilitation provider, or a treatment provider depending on the reason for the case conference.

The case conference itself will be an opportunity to get the desired stakeholders together to discuss:

- The worker's capacity for work and/or restrictions.
- Possible suitable duties/suitable work options.
- Ongoing treatment or lack of treatment.
- Any other issues relating to return to work.

Prior to the case conference CCI will advise the worker of our intention to organise a case conference including the purpose of the meeting. We will ensure that an agenda is sent to all parties involved prior to the case conference. A case conference will be scheduled outside of the worker's normal nominated treating doctor consultation unless otherwise agreed by the worker and nominated treating doctor. Following a case conference, the CCI claims representative will update all stakeholders with the agreed outcome and/or actions.

### **Managing Disputes**

Staff at CCI take a consultative approach on all major claims decisions to ensure CCI and employers are partners in claims management to best support workers and to uphold alignment in the values between the two organisations. CCI must also comply with legislative requirements, and there may be, at times, conflict of opinion in claim strategy, or a decision made to dispute liability to a worker in relation to all or partial aspects of their claim. In such circumstances, the following dispute processes may apply:

#### **Medical or Treatment Dispute**

Where a concern or dispute arises as to whether a worker's medical or related treatment forms part of their workers compensation claim, the claims specialist is required to investigate the treatment

and necessity. Investigations may include information gathering from a range of treating providers, or via an Independent Medical Examination, to provide an opinion on the treatment requested. All subsequent liability determinations will be discussed with the worker, employer and treatment providers and provide reasoning for the determination.

### Liability Dispute

In the event that CCI makes a decision to dispute liability for a claim, all decisions are signed off by a Team Manager to ensure a soundly based decisions have been made.

Once the decision has been approved, a dispute notice under Section 78 of the Workplace Injury Management and Workers Compensation Act 1998 will be issued. The notice will explain:

- The decision that has been made.
- Reasons for the decision.
- Evidence relied upon by both the insurer and the worker.
- Options available to the worker to have the decision reviewed if required.

If the worker wishes to have the decision reviewed, a senior team member at CCI who had no part in the original decision will review the claim and make an independent determination. The worker would be encouraged to forward any new information that they think might influence the decision.

The worker may also wish to contact:

- Independent Review Office (IRO) Ph: 13 94 76
- Their union or solicitor

### Work Capacity Assessment and Decisions

A work capacity decision is a specific type of decision made by the insurer which is defined in Section 43 (1) of the Workers Compensation Act 1987 (NSW) as a decision about:

- a) A worker's current capacity for work.
- b) What constitutes suitable employment for the worker.
- c) The amount a worker is able to earn in suitable employment.
- d) The amount of a worker's pre-injury average weekly earnings or current weekly earnings.
- e) Whether a worker is, as a result of an injury, unable without substantial risk of further injury to engage in employment of a certain kind because of the nature of that employment.
- f) Any other decision of an insurer that affects a worker's entitlement to weekly payments of compensation, including a decision to suspend, discontinue or reduce the amount payable to a worker on the basis of any decision referred to in (a) –(e).

A work capacity decision can be conducted at any point throughout the life of a claim, however, the legislation stipulates that they must be conducted at least at the following stages of every claim:

- **130 weeks** – a work capacity decision must be completed prior to 130 weeks to determine a worker's benefits under Section 38 of the Workers Compensation Act 1987 (NSW).

- **Every two years thereafter** - if a worker has entitlement to weekly payments beyond 130 weeks, a work capacity decision must be made at least once every two years after that point, until such time as the worker's weekly benefit entitlement ceases.

Before a work capacity decision can be made on a claim, CCI needs to have adequate information. This review process is known as a work capacity assessment and will require specific reports and information tailored to each individual claim such as medical reports from the treating or independent doctors, reports outlining the worker's functional capacity or the worker's vocational or suitable employment options. Once CCI has received all of the information we will conduct a review of the file in order to make a determination of the worker's current work capacity.

A work capacity decision, in some instances, may result in a reduction or discontinuation of the worker's benefits. If, during a work capacity assessment, the evidence indicates that the worker's benefits may reduce or cease then the Claims Specialist is required to notify the worker that a work capacity decision has been made. If the decision impacts their weekly benefits CCI will provide the worker with a written notice in line with section 78 of the Workplace Injury Management and Workers Compensation Act 1998, including their right to request an internal review if they do not agree with the decision.

After receiving the Work Capacity Decision Notice, the worker will have three (3) months before any reduction is made to their weekly compensation payments if they have been receiving continuous weekly benefit payments for 12 weeks or more. If the worker ceases to have an entitlement to weekly wage payments their entitlement to medical and related expenses will cease 24 months or later as per section 59A of the Workers Compensation Act 1987, depending on their assessed whole person impairment.

### Internal Dispute Resolution

Should the CCI Claims Specialist and the employer not agree on a claim strategy, the employer can escalate the matter and it will be reviewed through the following escalation;

1. Team Manager
2. Manager, Claims / Injury, Technical and Performance Manager
3. Head of Workers Compensation Claims

With each escalation, CCI will seek to find an outcome in the interest of upholding employer and CCI values, commercial viability, sustainability of the decision, and legislative requirements.

### Commission Teleconferences, Conciliation or Arbitration

On occasion a claim may go to the Commission for review and resolution. In these circumstances CCI will ensure that the appropriate person with relevant claim knowledge participates during the commission dispute resolution process.

### Managing a Fatality

In the unfortunate circumstances of the death of an employee CCI will ensure proactive and sensitive management and prioritise liability decisions and payment of any entitlements. CCI will commence investigation of circumstances within five (5) business days and we will make a liability decision within 21 calendar days of being notified of the death. We will also contact the family and/or legal representative within five (5) business days of being notified of the death to advise them of our role and we will confirm in writing the liability decision within two (2) business days of the decision being made. CCI will contact any dependants (or their representative) of the deceased within 10 business days of accepting liability to advise of their potential entitlements and commence weekly payments.

## Whole Person Impairment

A lump sum payment may be made in addition to weekly benefits and medical expenses where a permanent impairment has resulted from a workplace injury. CCI will objectively consider any Whole Person Impairment Assessment report including confirmation that the information included is consistent with the claim file information and the NSW workers compensation guidelines for the evaluation of permanent impairment. Where appropriate CCI will negotiate with the worker and/or their legal representation the degree of impairment. Prior to negotiating the degree of permanent impairment, CCI will provide the worker with copies of all reports and other evidence at least five (5) business days before negotiations commence. Workers will be required to attend a medical assessment with a permanent impairment assessor, as listed on the SIRA website, to confirm their level of permanent impairment.

Prior to entering into an agreement for settlement of Whole Person Impairment CCI will confirm the worker has obtained independent legal advice (or waived the right to obtain) regarding the agreement.

## Work Injury Damages

If the work-related injury has resulted from negligence in the workplace the worker may be entitled to common law damages, also known as work injury damages. Eligibility criteria for work injury damages claim includes that the worker must have been assessed to have at least 15% whole person impairment.

The worker may wish to contact one of the following for further assistance:

- Independent Review Office (IRO) Ph: 13 94 76
- Their union or solicitor

## Commutations

A Commutation is where the worker and insurer agree on a single lump sum payment which removes the insurers liability to future weekly benefits and/or medical expenses for the injury. Eligibility criteria for commuting a claim includes that the worker must have been assessed to have at least 15% whole person impairment and have been paid to the worker as a lump sum payment, and that it has been more than two (2) years since the worker first received a weekly payment. They must also have an existing and continuing entitlement to ongoing weekly benefits and exhausted all rehabilitation options.

The worker may wish to contact one of the following for further assistance:

- Independent Review Office (IRO) Ph: 13 94 76
- Their union or solicitor

## Medicare and Centrelink clearance

Where appropriate a Medicare notice of past benefits will be requested, including the following circumstances:

- An application for dispute resolution has been lodged with the Workers Compensation Commission.



- Accepting liability for a condition that has been caused by gradual process or aggravation of a disease.
- When there is a retrospective entitlement to compensation.
- Settlement of a claim is initiated and will exceed \$5,000.

CCI will provide appropriate documentation to Centrelink when a settlement occurs for commutation or damages, or when the worker's entitlement has been affected by delays or reconsideration of entitlements.

### **Fraud**

Fraud in workers compensation can take many forms. Fraud involves making a false or misleading statement while claiming workers compensation with the intention of obtaining money or gaining financial advantage. CCI has a responsibility to detect, prevent and respond to fraud.

### **Quality Assurance**

In addition to the quality assurance activities outlined above CCI also undertake the following review points throughout the life of a claim;

#### **Monitoring Compliance**

As part of the regular review process CCI will monitor all stakeholders' compliance and responsibilities under the Injury Management Plan. Non-compliance by any stakeholder can directly impact the claim achieving optimal recovery or return to work and will be addressed by CCI.

#### **Regular Self Audit**

CCI utilises a version of the Specialised Insurer audit tool to randomly sample claims from its active database monthly. To ensure CCI upholds a high standard of regulatory compliance, individual claims are scored across the criteria in the audit tool, in addition to the mandatory audit submission to SIRA. Results are collated and evaluated monthly which feeds our continual improvement process and coaching improvements.

## **Finalisation**

The ultimate claim outcome for CCI is supporting a worker to successfully recover from their injury to the point of independent management, and safely return to their pre-injury duties. Most claim finalisations are due to this achievement. There are other scenarios that may prompt finalisation of a workers compensation claim, which include:

- The worker has returned to suitable alternative employment, has no wage loss and is not receiving further treatment. All invoices have been paid on the claim including wage reimbursement.
- The claim liability has been disputed, with no further proceedings.
- The claim has settled, and all entitlements have been completed.
- Limit on payment of compensation under section 59a of the Workers Compensation Act 1987 has been reached. Workers are entitled to medical benefits for a set period (2 years up to lifetime depending on their degree of permanent impairment) following cessation of weekly compensation payments.



- Workers have a 12-month limit of weekly compensation payments once they reach retirement age. Once this timeframe has been exhausted finalisation is reliant upon section 59a of the Workers Compensation Act 1987.
- Cessation of weekly payments after five (5) years section 39 of the Workers Compensation Act 1987. Workers are entitled to 260 weeks of weekly compensations if their whole person impairment is assessed at 20% or less. Once this timeframe has been exhausted finalisation is reliant upon section 59a of the Workers Compensation Act 1987.
- The recovery of costs from a third party.

Prior to finalisation of the claim CCI will contact the worker, employer, and any relevant service providers to advise of the intention to close the claim and to ensure outstanding invoices and reimbursements are paid. At the time of claim finalisation CCI will confirm in writing to the worker and employer the claim has been closed.

In the case of cessation of medical and treatment benefits under section 59a, cessation of weekly payments under section 39 or retirement age being reached CCI will provide written notice to the worker, employer and nominated treating doctor (section 59a only) at least 13 weeks prior to the cessation date.

### Recurrence or Aggravation

CCI understands that once a worker has returned to work, sometimes things don't go to plan. In cases where the worker has a recurrence or aggravation of a workplace injury, we will investigate as quickly as possible to determine the best course of action. Where CCI determine a recurrence or aggravation has occurred and further medical attention and treatment is required, we will contact the worker and employer to advise determination within two (2) business days of making the decision.

## 7. Employer Management Practices

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Our Injury Management Program is available via our website. We also advise our employers that they require a copy of our current Injury Management Program as it forms part of their Return-to-Work Program.

## 8. Complaints and Customer Feedback

Stakeholders can raise any concerns or issues relating to their experience with the claims process or general customer service. Complaints can be registered via an online form by visiting the CCI website at [www.ccinsurance.org.au](http://www.ccinsurance.org.au).

CCI has a three-stage complaint process to ensure access to the right people who can manage a full and fair investigation. We aim to resolve matters promptly, outlining each stage available to support an appropriate outcome.

STAGE 1	STAGE 2	STAGE 3
<p>The Workers Compensation Internal Dispute Resolution (IDR) Process begins when we receive an email or phone call, with workers compensation senior staff conducting a prompt and thorough review of the matter.</p> <p>There will be ongoing dialogue with the person providing the feedback or complaint to ensure they are aware of the progress and resolution.</p>	<p>If not satisfied with the outcome, our Workers Compensation team will activate a further review by Senior Workers Compensation Management who will make a final decision on behalf of our organisation.</p>	<p>The stakeholder may still choose to refer the dispute or complaint to the External Dispute Resolution body, IRO and SIRA.</p> <p>This complaint process is documented on CCI Workers Compensation website.</p>

This complaint process is documented on CCI Workers Compensation website.

## 9. Privacy and Confidentiality

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CCI are committed to ensuring we handle private and confidential information in line with Privacy Act 1988, inclusive of the 13 Australian Privacy Principles (APPs) set out within this Act.

CCI has a responsibility to ensure that information collected is protected by:

- Only collecting information about a worker that is necessary for the primary purpose of managing the claim.
- Only using and disclosing information concerning the worker if it relates to the primary purpose (managing a claim).
- Destroying or de-identifying any unsolicited personal information that is received.
- Outlining whether information will be disclosed to overseas recipients (i.e., re-insurers) and the nature of that disclosure and taking steps to ensure any overseas recipients of personal information do not breach the Australian Privacy Principles.
- When circulating personal information within the business, all identifying features about the worker are erased.
- When discarding a document which contains personal information enabling identification of the worker, the document is sent for secure disposal.
- Verifying all callers' identification.
- Medical information will be kept on the claim file and will only be accessible to authorised claims staff.

Information relating to workers can only be made available to employers and other parties with appropriate consent from the worker. CCI will also advise the worker of the information that may be released, obtained, or used and who is authorised to release, obtain, or use this information. CCI will provide workers with information surrounding their rights and obligations including their right to withdraw consent at any time.

An employer is not entitled to receive Independent Medical Examination Report (in any form) without the consent of the worker. Both Privacy and Health Information legislation (listed below) applies to the collection and dissemination of medical reports. It is an offence for an insurer to disclose material gathered without appropriate consent.

- Health Records and Information Privacy Act 2002
- Privacy and Personal Information Protection Act 1998


The relevant legislation provides both insurers and employers with strict obligation for information to be used for the purpose that it has been gathered and any other usage is unlawful.

### Information and Record Management

CCI will provide workers with access to their personal and health information within ten (10) business days when requested by the worker or their representative.

# 10. Appendix 1

## CCI Weekly Compensation Wages Reimbursement Form



### Weekly Compensation Wage Reimbursement Form

Employer Details

Organisation Name   
 Cost Centre Name   
 Payroll Office/Claim Contact   
 Name (Person that is completing this form if different than payroll officer)   
 Account Name   
 BSB  Account Number   
 EFT Remittance Email Address

Client Number  Policy Number   
 Address   
 Email Address   
 Date   
 EFT Details (only if not already provided to CCI)  
 Payee Type

Worker's Details

STATE   
 Pre-Injury Average Weekly Earnings (PIAWE)

Name  Claim Number   
 Pre Injury Determined Weekly Hours (PID HOURS)

Weekly Compensation Wage Reimbursement Form must be completed in a 7 day weekly format. Exceptions to this rule apply when:

- The first date of incapacity falls mid-week.
- The income support cease or closed period end date falls mid-week.

Weeks Paid	Entitlement Week		Entitlement Period	DWB (Auto)	Earnings	Hours Worked	Hours Lost	Reimbursement (Auto)
	From	To						
			Select an Option					
<b>Total Reimbursement</b>					<b>\$0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>\$0.00</b>

Appendix

- **Weeks Paid**- Number of pay weeks (calculated on 7 day week) since date of injury
- **Entitlement Week**- Place the dates from and to for the period that is reflected on the payslip
- **Entitlement Period**- Select the applicable capacity in drop down option on the basis of period number of pay weeks since injury and worker's capacity for work
- **Determined Weekly Benefit (DWB)**(Auto calculated field)- The maximum weekly benefit entitlement amount for one week relating to the payment period (e.g. usually 95% or 80% of PIAWE)
- **Earnings**- The worker's earnings for actual work performed in the week including the first week and last week of claims benefit period
- **Hours worked**- applies to the actual work performed by the worker during the weekly pay cycle period.
- **Hours Lost** (Auto calculated field)- This is the total hours being claimed
- **Reimbursement** (Auto calculated field) -Enter the total claimable amount for the hrs lost during weekly pay cycle.
- **Verify**- Please click verify button below for mandatory fields before sending this form to us.
- **Example**- Company ABC seeking wage reimbursement for injured worker Mr X for the period 01/08/2021 to 28/08/21. Mr X has had 33 weeks entitlement paid since date of injury. Example shows Mr X worked 10 hr during the week period 08/08/21-14/08/21.

Weeks Paid	Entitlement Week		Entitlement Period	DWB (Auto)	Earnings	Hours Worked	Hours Lost	Reimbursement (Auto)
	From	To						
34	01/08/2021	07/08/2021	WPP007 14-130 weeks (second entitlement period) no capacity or working less than 15 hours	800.00			38	\$800.00
35	8/08/2021	14/08/2021	WPP007 14-130 weeks (second entitlement period) no capacity or working less than 15 hours	800.00	\$200.00	10.00	28	\$600.00
36	15/08/2021	21/08/2021	WPP007 14-130 weeks (second entitlement period) no capacity or working less than 15 hours	800.00			38	\$800.00
37	22/08/2021	28/08/2021	WPP007 14-130 weeks (second entitlement period) no capacity or working less than 15 hours	800.00			38	\$800.00
<b>Total Reimbursement</b>					<b>\$200.00</b>	<b>10.00</b>	<b>142.00</b>	<b>\$3,000.00</b>

<https://www.sira.nsw.gov.au/claiming-compensation/workers-compensation-claims>

If you have any questions regarding completing this form than please contact us on 1300 110 442 or through email on [workerscompensation@ccinsurance.org.au](mailto:workerscompensation@ccinsurance.org.au)

Email To CCI

Verify

## 11. Appendix 2

Sample of CCI Injury Management Plan



**workers**  
*compensation*

### Planning for your recovery

18 September 2023

This plan summarises the goals and actions agreed with you, and your support team, to help you recover and return to work. It is an evolving document which will be reviewed and updated throughout the life of your claim.

### When and how your plan will be reviewed

Your plan will be reviewed with you and your support team after any significant events occur in relation to your claim. In the absence of any significant events occurring, CCI will still review your plan every 4 weeks to ensure that it remains appropriate and relevant but will only re-issue the document if changes are required.

### Your support team

CCI Claims Specialist	
Employer Contact	
Nominated Treating Doctor	
Workplace Rehabilitation Provider	

### Your current return to work goal

Choose an item.

### Current agreed actions

Person Responsible	Action	Anticipated Outcome	Review Date
			Click or tap to enter a date.
			Click or tap to enter a date.
			Click or tap to enter a date.

			Click or tap to enter a date.
			Click or tap to enter a date.
			Click or tap to enter a date.

## Roles and responsibilities

### Your Responsibilities

You have responsibilities you must meet if you are claiming compensation for your workplace injury including:

**Choose a doctor:**

If you want to change your nominated treating doctor, contact CCI so that we can outline the process for you.

**Return to work:**

You must make reasonable efforts to return to suitable employment as soon as you are able to.

You may not be able to return to your usual hours or duties at first but recovering at work helps you stay active and get better sooner. Read more about the [Benefits of working while you recover](#).

**Attend treatment:**

You should contact CCI about commencing treatment recommended by your doctor to help you recover. Some treatments require prior approval. You must also follow the advice of your treatment providers to support your recovery and return to work.

**Attend appointments:**

You must attend appointments made by CCI for the purpose of understanding your injury, and how best to support your recovery and return to work.

**Provide a current Certificate of Capacity:**

It is important to maintain a current Certificate of Capacity, and to provide this to your employer and CCI to assist with planning. Your certificate must be updated at least every 28 days (if you are receiving weekly compensation benefits).

**Contact:**

You should let CCI know of any changes that might affect your earnings and weekly payments e.g., you return to work, upgrade your hours of work, or start work with a new employer.

**You can also contact CCI when:**

- you have any concerns about any aspect of your claim, or
- if things are not progressing as expected.

These responsibilities support your recovery and return to work. You have an obligation to follow them, and your weekly payments may stop if you do not. If you are having difficulties meeting these responsibilities contact CCI as soon as you can.

Those involved in helping you recover also have certain roles and responsibilities with the aim of helping you to recover and return to your usual activities.

### Employer Roles and Responsibilities

- provides information about the recovery at work process
- participates in planning your recovery with you and CCI
- provides suitable work to support your recovery (or asks CCI for assistance if necessary)
- makes any necessary adjustments to work or the workplace (with the assistance of CCI) e.g., manual training
- develops a recovery at work plan with you
- monitors and supports your recovery at work

### Nominated Treating Doctor Roles and Responsibilities

- assesses your injury, provides a diagnosis, and recommends treatment
- completes your Certificate of Capacity
- advises on likely recovery timeframes
- advises on what you can do (including work) to stay active and help you recover

### CCI Roles and Responsibilities

- coordinates all parts of your claim including payments, treatment, rehabilitation and return to work
- explains the claim and return to work process to you and your employer
- explains your entitlements, responsibilities, and decisions about your claim
- helps your employer to support your recovery at work
- arranges assessments or services to help determine your capacity / fitness for work
- develops (and implements) this plan with you, your employer and nominated treating doctor including actions, responsibilities, and timeframes to support your recovery

### Treatment Provider Roles and Responsibilities

- assesses your injury and provides treatment
- advises what actions you can take to get better sooner e.g., exercises
- reports your progress and sends treatment requests to CCI

### Workplace Rehabilitation Provider Roles and Responsibilities

Workplace rehabilitation providers help address issues which may affect your ability to recover at work e.g., difficulty finding suitable work. Read more here: [What to expect from your workplace rehabilitation provider](#)

Please contact CCI if you have questions or concerns about your roles and responsibilities, or those in your support team.