



Making a Claim for Workers Compensation

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Introduction

The following information sets out the procedures for making a claim for Workers Compensation at the University of South Australia and the management process.

Making a Claim

[Workers Compensation claim forms](#) can be downloaded.

An employee who has suffered a work related injury or illness can make a claim for worker's compensation but must complete the following forms and e-mail or fax 8302 1380 to OHSW & IM Services:

- [OHSW Incident Report](#) (Online)
- Workers Compensation Claim Form, the employee should retain a copy
- Prescribed WorkCover Medical Certificate (WMC) the employee should retain a copy
- Authority to Exchange Information Form
- Record of Attendance Form
- accounts for payment or reimbursement for medical and travel expenses
- attach travel expense receipts to the travel claim Form OHSW 65

Where an employee or supervisor is uncertain as to the appropriate forms that should be completed, assistance can be provided from the OHSW & IM Services Administrative Officer at 8302 1634, Rehabilitation Consultant 8302 1709 or WMC@unisa.edu.au

Claim Process

Upon receipt of a claim, OHSW & IM Services will forward the claim and WMC to the Claims Manager at Lawson Risk Management.

OHSW & IM Services will provide written information to the claimant about the Workers Compensation process. Until the claim has been determined the claimant will utilise sick leave or other accrued leave entitlements.

The Claims Manager shall establish and maintain a file for each claim. Claim files will be stored in a secure location with access limited to those with the appropriate delegated authority.

The Claims Manager will ensure that necessary investigations and inquiries are made to determine the claim. This may involve ascertaining:



- the nature, extent and possible duration of the employees' disability
- the treatment (if any) being provided to the employee
- any other information necessary to determine the claim

If further information is required, the Claims Manager will outline the reasons to the injured employee within 5 business days.

Claim Determination

Consistent with the requirements of Section 53(4) of the WR&C Act, the Claims Manager will endeavour to provide the employee with a determination of the claim within 7 working days of taking receipt of the employee's claim.

Where a claim cannot be determined within 7 working days, the Claims Manager will communicate in writing to the employee, setting out the reasons why such determination has not been made. The Claims Manager will also advise the employee of his/her rights to a course of action to expedite a decision.

In determining a claim, a decision may be made to:

- accept the claim for ongoing income maintenance and medical expenses reasonably incurred as a result of the disability
- accept the claim for a closed period of income maintenance and medical expenses reasonably incurred as a result of the disability
- accept the claim for medical expenses only, reasonably incurred as a result of the disability
- defer a decision to determine the employee's claim pending further investigation
- reject the claim

Where a determination is made of an employee's claim, the Claims Manager will also advise the claimant in writing of the Workers Compensation Dispute Resolution Process. Refer also to the [University OHSW & IM Workers Compensation and Rehabilitation Complaint Management Procedure](#).

Provisional Liability

Provisional liability provides an early intervention mechanism for meeting medical expenses and income maintenance payments before a claim is determined. More information can be obtained from the Claims Manager.

Claims Management Responsibility

The Claims Manager is responsible for:

- all aspects of claims management within the requirements of the Workers Rehabilitation and Compensation (WR&C) Act 1986 and Regulations and WorkCover SA Code of Conduct including prompt determination of claims, reimbursement of medical expenses, and determination of notional weekly earnings
- notifying injured employees when their Income Maintenance payment will be reduced to 90% after 13 weeks and at 26 weeks to 80% of Notional Weekly Earnings
- advising employees that their superannuation contribution rate may be affected when their income maintenance payments have been reduced to 90% or 80% and that they should contact the Universities Superannuation officer
- notifying OHSW & IM Services where an injured employee's Income Maintenance payment will cease or will be reduced to 90% or 80% of Notional Weekly Earnings
- referring injured employees for independent medical examinations or assessments

Rights of an Employee

If you sustain a work related injury / illness you have a right to:

- have your claim determined, wherever possible, within 7 working days of lodging a claim form with your Prescribed WorkCover Medical Certificate attached
- be advised about the possibility of payment of interim benefits or provisional liability
- be paid weekly payments once your claim is accepted
- have medical and other expenses paid promptly e.g. medication or travel
- have an individual rehabilitation program or rehabilitation and return to work plan developed if you are incapacitated and unable to return quickly to work
- be meaningfully involved in all decisions regarding your rehabilitation program/plan



- have a current copy of your approved rehabilitation program / plan
- to raise any dissatisfaction you have with the person managing your claim or rehabilitation plan (see [Complaint Management Procedure](#))
- have a treating medical practitioner / specialist of your choice and provide WMC's to continue your rehabilitation program or return to work plan
- obtain a second opinion from a specialist
- be provided with copies of all medical reports concerning your claim within seven days of the Claims Manager receiving them
- have a representative present at any meeting or hearing about your claim (e.g. union, employee advocate, solicitor)
- have any personal information kept confidential
- apply to have most decisions reviewed by Worker's Compensation Tribunal e.g. rate of pay
- have an interpreter at meetings and appointments
- have information about rehabilitation provided in a manner and language that you can understand
- access to counselling through the University [Employee Assistance program](#)

Responsibilities of an Employee

- submit work-related injuries/illnesses using the on-line hazard/incident reporting and investigation system within 12 hours after the occurrence, and participate in the incident / injury investigation process
- report work-related injuries/illnesses to your supervisor immediately
- promptly provide a prescribed WMC to OHSW & IM Services and a copy to your supervisor to cover all time lost from work or throughout the duration of you claim, within 24 hours of your medical appointment
- attend medical appointments reasonably made for you
- actively participate in an established rehabilitation program or rehabilitation and return to work plan with the agreed primary goal being a return to work
- accept duties and restrictions specified for the duration of the program or plan
- provide a copy of your Prescribed WorkCover Medical Certificate(s) to your supervisor for the duration of the incapacity, that is, from the time of incident to a return to work to pre-injury duties. WMC's also need to be provided after medical reviews if you are undertaking modified duties until your medical practitioner recommends that you can return to pre-injury workplace duties
- complete electronic leave form and submit to your supervisor for any leave taken whilst you are receiving income maintenance payments
- avoid disruptions to return to work activities by arranging, appointments outside agreed working hours if you are working normal hours
- abide by the agreed medical restrictions as outlined by your treating medical practitioner at work and at home
- notify your supervisor and the Rehabilitation Consultant immediately if you are unable to attend for work
- inform your supervisor of the circumstances if you need to leave work before completing the nominated hours prescribed by your treating medical practitioner. You should contact the Rehabilitation Consultant within 24 hours of the difficulties or aggravation to enable early corrective action to be taken. A change to duties may be necessary and the treating medical practitioner contacted and the rehabilitation plan altered
- ensure that you do not provide any false or misleading information about a claim (NOTE: it is an offence to provide false or misleading information about a claim)

Rights of the University

The University has a right to:

- seek assistance in the employee's rehabilitation and return to work
- review a claim if the claims manager believes that weekly payments to an employee should be stopped or reduced
- ask the claims manager to arrange for an injured employee to attend an examination by a recognised medical expert
- ask the Claims Manager to provide copies of medical reports and a report on an injured employee's medical progress and incapacity for work
- seek a review of the decision made about the claim



- ask the claims manager to consider any other relevant factors

Responsibilities of Managers / Supervisors

- facilitate appropriate management of injured or ill employees
- consider whether early intervention is required for an acute or chronic injury / illness (see Accident and Incident Reporting flow chart)
- notify OHSW & IM Services of an injury/illness if time is lost and an employee is unable to submit an Incident Report or claims documents
- ensure copies of injured employees WMC's and signed Record of Attendance (if an employee is working partial hours) are forwarded to OHSW & IM Services within 24 hours
- assess the need for rehabilitation promptly following a work related injury
- provide a safe work environment
- ensure an incident investigation is conducted within 5 working days of the incident occurring and complete the online investigation form outlining findings and corrective action to prevent a recurrence
- provide safe, suitable work duties and be actively involved in an employee's rehabilitation
- pay fortnightly income maintenance payments if an employee is off work or undertaking modified hours once notification of a claim is approved
- participate in the establishment of a rehabilitation program or return to work plan
- keep personal information confidential
- undertake OHSW & IM Online training i.e. Injury management for managers / supervisors

Income Maintenance

Income maintenance refers to your normal wages and maintaining your income if you are absent from work due to a work injury/illness and not earning a salary for work. An employee who is totally incapacitated for work will receive compensation based on their average weekly earnings. The amount will be calculated as "Notional Weekly Earnings" or an amount the employee would expect to receive, were they at work.

If an employee is partially incapacitated for work (i.e. undertaking reduced hours of work) they will receive salary for the hours worked and workers compensation weekly payments for the remainder of income maintenance.

Income maintenance is payable at 100% of the amount you were earning prior to being injured (pre-injury earnings for 13 weeks). At 13 weeks there is a reduction in payments to 90%, followed by a further reduction to 80% at 26 weeks.

Where the period of incapacity (whether total or partial incapacity) continues for more than 13 and 26 weeks the Claims Manager will conduct a review of the amount of weekly payments being paid.

Payment for Non Economic Loss

An employee who sustains a permanent disability may apply to the Claims Manager about their eligibility to receive a lump sum payment under Section 43 of the WR&C Act.

Other Compensable Expenses

An employee is entitled to be compensated for costs reasonably incurred as a result of their compensable disability in accordance with Section 32 of the WR&C Act.

The Claims Manager will reimburse medical and travel expenses but an employee should provide evidence to the satisfaction of the Claims Manager demonstrating the expenses were reasonably incurred. Receipts for medication or an account from the provider of the medical service should be sent to the Claims Manager.

The employee must obtain prior approval from Claims Manager or OHSW & IM Services for certain expenses. These include:

- Surgery
- Dental / orthodontic
- Optical
- Podiatry
- Chiropractic



- Physiotherapy
- Massage
- Hydrotherapy
- Gym/swimming membership
- Acupuncture
- Speech Pathology
- Travel
- Home assistance
- Taxi

Medical Appointments

Where an employee is working modified hours with modified duties, medical appointments should, where possible, be made outside of normal working hours. This includes doctors / specialist consults, physiotherapy treatment or gym strengthening programs. Otherwise appointments should be arranged for close to the beginning or end of a working day if an injured employee is working normal hours with modified duties.

Work Related Journey Accidents

Normal travel between work and home is not covered by workers compensation unless the employee can demonstrate 'a real and substantial connection between the employment and the accident'. The fact that an employee has an accident whilst travelling to or from work is not in itself a sufficient connection.

Employees who are 'on call' or are undertaking journeys within a working day (eg from one campus to another) will usually be covered. Similarly, employees travelling away from home, including overnight absences will usually be covered for travel, provided that their manager has approved the journey.

Travel

If staff have an accident or illness whilst working overseas, they should follow the [Incident Reporting procedure](#) within 12 hours so that assistance can be provided. Please note staff also must complete an [Overseas Business Travel form](#) a [Business Travel Request form](#) (FS 87) and Line Managers should ensure that all staff travel is appropriately approved.

Psychological Claims

Claims for psychiatric or psychological illness may take longer to determine than those for physical injury. The reason for this is the specific criteria that need to be met before such a claim is compensable.

Employees who submit a claim for psychiatric or psychological illness may need to wait for their claim to be determined while a written report is sought from their treating practitioner. They may be referred to an independent medical expert for examination, and an independent claims investigator may also be appointed to seek further information that will assist the Claims Manager to determine the claim.

The Claims Manager will keep the claimant informed about the process and, if the claim is rejected, will explain to the claimant clearly why this has occurred together with the review rights if the claimant is not satisfied with the decision.

Obtaining Medical Information

The Claims Manager will obtain relevant medical information about the nature of the injury / illness, possible prognosis, treatment plan and capacity for work. Regular requests for updated information should be maintained with treating practitioners during the life of the claim.

Confidentiality

Information about injured employees will be kept maintained at all times and made available only to those specifically authorised and communication on "a need to know basis" to enable effective management of rehabilitation. Information shall only be shared with work colleagues with the consent of the injured employee.

Complaint Management

UniSA is committed to resolving issues employees have about their Workers Compensation claim. An employee who is dissatisfied with a decision made about their Workers Compensation claim or rehabilitation should in the first instance discuss their concerns initially with their Rehabilitation Consultant, Claims Manager or OHSW & IM Services Manager. If an employee



believes their issue has still not been dealt with appropriately then a conference may be called with all parties present so the employee has the opportunity to raise their concerns. If the matter is not resolved through this process, the employee may wish to take the issue to the SA Workers Compensation Tribunal. The usual process following an application to the Tribunal is for a conciliation conference to be called. If no agreement can be reached the matter will proceed further (to an arbitration hearing or judicial determination).

Monitoring and Review

This procedure will be reviewed on a biennial basis or where there are changes to legislation. A Self Audit will be completed on Claim Files at least annually. The results of the Self Audit will be measured for improvement by identifying any issue(s). An Injury Management survey will be conducted annually through the "Tell-Us" automated program for injured staff.

Documents/Forms

- [Workers compensation Claim form](#)
- [OHSW Incident Report](#)
- [Workers compensation Claim form](#)
- [OHSW 42 - Authority to exchange information](#)
- [OHSW 65 - Claim Worker's Compensation Travel Expenses](#)
- [OHSW 75 - Interim Payment Application Form](#)
- [Claim for Pharmacy Expenses related to a Worker's Compensation Claim](#)
- [Record of Attendance Form](#)
- [Injury Management Information Handbook](#)
- [Flowchart of the Injury Management process](#)
- [Complaint Management Procedure](#)

References

- [University OHSW&IM Policy](#)
- [University OHSW Strategic Plan 2009-2011 \(PDF 158kb\)](#)
- [University Injury Management Strategic Plan 2009 - 2011 \(PDF 85kb\)](#)
- [Workers Rehabilitation and Compensation Act 1986](#)
- [WorkCover SA Code of Conduct for Self Insured Employers](#)
- [OHSW & Injury Management System \(PDF 128kb\)](#)
- [Occupational Health Safety and Welfare Act 1986](#)
- [Occupational Health, Safety & Welfare Regulations, 2010](#)