

Your Guide to NSW Workers' Compensation

Information for employers



Disclaimer

This publication contains guidelines for managing workers' compensation claims.

It is designed to provide general information only and is not intended as a substitute for any legislation or resource to which it refers. You should not act or omit to act on the basis of anything contained herein. In relation to any particular matter you should seek legal advice where appropriate.

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Your Guide to Workers' Compensation

As the largest workers' compensation provider in Australia, CGU gives you access to industry benchmarking information and a range of specialists who can assist you with complex issues.

Throughout the claim process we make sure you understand your rights and obligations and that you are involved every step of the way. We aim for a positive result for both you and your injured employee.

This guide explains the basics of the NSW Workers Compensation scheme; what to do if one of your employees sustains a work related injury or disease and the basic process of making a workers' compensation claim with CGU in NSW.

The Basics

Who needs workers compensation insurance?

All employers in NSW (except exempt employers) must have a Workers Compensation insurance policy. You are deemed an employer if you employ or hire workers on a regular, casual or contract basis.

You are exempt from taking out Workers Compensation insurance if your annual wages bill is less than \$7500.

Workers and deemed workers

Your workers and deemed workers are covered by your workers compensation insurance. A worker is someone who receives wages or commission from you, regardless of the number of hours worked each week. This includes those who work away from your premises, your trainees and your apprentices.

People working as contractors may be considered deemed workers and are also covered by your workers compensation insurance policy.

If you are unsure whether you have workers or deemed workers, see the checklist and self assessment tool on the WorkCover website at www.workcover.nsw.gov.au

Sole traders and partnerships

Require workers compensation insurance if they employ workers or deemed workers but the sole traders and partners themselves are not covered by this insurance.

Your Premium

CGU calculates your premium in accordance with the formula and rules set out in the legislation.

The main factors which influence the way we calculate your premium are:

WorkCover Industry Classification (WIC)

Each industry in NSW is classified according to the WIC system. A WIC rate is determined by assessing the predominant business activity of an employer.

Some employers may be allocated to more than one industry class if they undertake two or more separate and distinct businesses. In most instances, support activities such as clerical, administrative, sales and marketing, head office and warehousing activities are considered to be incidental to the main business activity and are not allocated to a separate industry class.

Wages

On taking out a workers compensation insurance policy, you are required to provide us with an estimate of the gross wages you expect to pay over the next 12 months.

For the purposes of premium calculation, wages include, but are not limited to:

- salary
- overtime, shift work and over-award payments
- bonuses and commissions
- employer superannuation contributions (including the superannuation guarantee levy)
- grossed-up value of fringe benefits (i.e. value of the fringe benefit multiplied by the ATO fringe benefit formula)
- payments to working directors (including directors' fees)
- payments for public and annual holidays (including leave loadings)
- payments for sick leave and long service leave
- payments for terminations
- value of board and lodging provided by the employer for the worker
- payments made by trusts or companies in lieu of wages
- any other amounts awarded to the worker under a contract of service.

Wages do not include directors' fees paid to non-working directors or compensation benefits paid to injured workers under the Workers Compensation Act 1987.

Claims experience

For some employers, additional premium is payable over and above the basic tariff premium to take into account the frequency/severity of workers compensation claims and the cost of these claims. Claims costs used in the premium calculation reflect the total cost of each claim. This includes any amount paid on a claims plus any amount we have placed in reserve for future costs. This is limited to \$150,000 per claim.

The following claims are excluded from Claims Experience for the purpose of premium calculation.

Journey claims

Claims cost related to injuries sustained as a result of an accident which occurred in a journey to or from the workplace are not included in the experience premium calculation.

Recess claims

Claims costs related to injuries sustained during an authorised break away from the workplace are not included in the experience premium calculation.

Small employers

That is, you pay a basic tariff premium of \$10,000 or less, or annual wages equal to or less than \$300,000, the cost of claims will not impact your premium.

Medium employers

That is, you pay a basic tariff premium of between \$10,000 and \$500,000, with an annual wage bill of more than \$300,000, the cost of claims will have an impact but the impact is limited depending on your basic tariff premium. See below for where you can obtain more specific information.

Large Employers

That is, you pay a basic tariff premium of over \$500,000. Your claims experience will impact on your premium calculation.

WorkCover NSW has introduced an optional alternative premium model for large employers based on commercial arrangements for retro-paid loss schemes.

A retro-paid loss model of insurance is one in which an employer's premium more closely reflects their individual experience and success in injury and claims management over a period of several years. If you are interested in obtaining further information about this scheme, please contact your CGU Account Manager.

Other

Dust disease and GST are also included in your premium calculation. The mine safety levy is also included for certain industry types.

Further information

For further information about your premium, contact CGU Workers Compensation on 1300 666 506 or go to www.cgu.com.au/workerscompensation

Alternatively, you can contact WorkCover NSW on 13 10 50 or at www.workcover.nsw.gov.au or speak to your insurance broker.

Your CGU Case Manager can provide you with specific information about the estimated cost of your claims.

Your Obligations as an Employer

An employer must comply with all aspects of the Workers Compensation Act 1987 and Workplace Injury Management and Workers Compensation Act 1998. This includes:

- complying with CGU's Injury Management Program
- developing and maintaining a Return to Work Program.

CGU's Injury Management Program

This document provides the information and tools you need to meet your legislative obligations in completing your Return to Work Program, and when workplace injury occurs, and our obligations as your Workers Compensation provider.

This includes:

- the approach we will take should a workplace injury occur
- what you can do to support early RTW outcomes and thus reduce the direct and indirect costs of workplace injury
- the process for submitting feedback and managing any disputes that may arise
- a copy of CGU's Injury Management Program is available to our policy holders on request or from our website at www.cgu.com.au/workerscompensation

Your Return to Work Program

This document details the policies and procedures your business has in place to help injured workers with their recovery and return to the workplace. You are required to have a Return to Work program in place within 12 months of becoming an employer. It must then be updated every two years.

Your program must be consistent with the *CGU Injury Management Program* and developed in consultation with your employees and any relevant union representatives. CGU can guide you through this process and also provide a template for you to use. This template is available as an appendix within our Injury Management Program and is available for download from www.cgu.com.au/workerscompensation. You can also access *WorkCover Publication 4 – Standard Return to Work Program and Guidelines for Workplace Return to Work Programs* from www.workcover.nsw.gov.au to assist you in developing your program.

Occupational Health and Safety

As an employer you are responsible for ensuring the health, safety and welfare at work of all employees. You must provide:

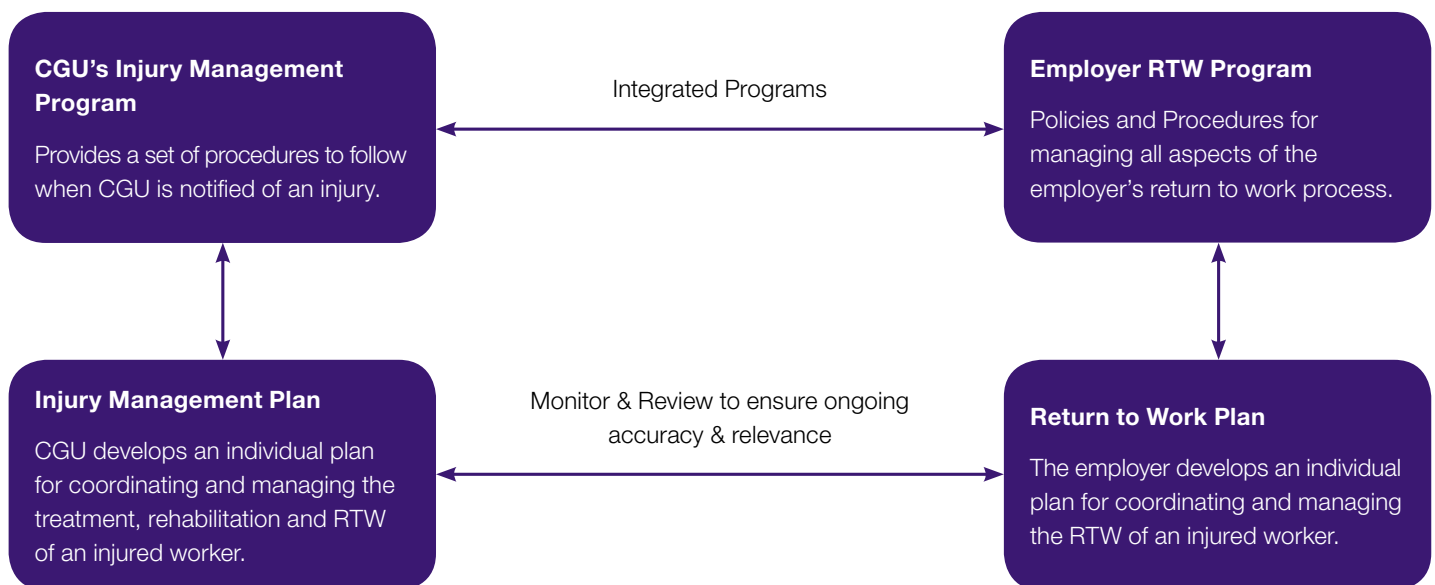
- safe premises
- safe machinery and substances
- safe systems of work
- information, instruction, training and supervision for workers
- suitable working environment and facilities.

You are also responsible for the health and safety of others in your workplace, such as visitors and customers.

For further information, refer to the WorkCover Website at www.workcover.nsw.gov.au or call the WorkCover Assistance Service on 131050.

If an injury occurs

In the event of an injury, the principles outlined in CGU's Injury Management Program are used to generate an individual, tailored Injury Management Plan (IMP) for the injured worker and your organisation's RTW Program is used to develop a specific RTW Plan for the injured worker.



What To Do If a Workplace Injury Occurs

As soon as you become aware of an injury

- Ensure the injured worker receives first aid treatment if necessary and appropriate emergency medical treatment.
- Involve immediate action to assess and control the risk of further injuries.
- Document the incident in your register of injuries.
- Notify CGU within 48 hours of becoming aware of an injury in your workplace.

Serious injuries and illness

If there is a serious injury or illness you must notify WorkCover NSW immediately on 13 10 50. These include:

- an injury or illness that requires immediate treatment as an 'inpatient' in hospital
- amputation
- serious head, eye or burn injuries
- de-gloving or scalping
- spinal injury
- loss of bodily function
- serious laceration
- exposure to a substance which requires medical treatment within 48 hours.
- fatality

Notify CGU of the injury

Early notification of claims to CGU is the first important step in the effective management of workers compensation claims. It can reduce the cost of claims to your business by enabling early intervention and reducing the amount of time lost from work.

You have a legislative obligation (Workplace Injury Management and Workers Compensation Act (s44)) to notify CGU or the WorkCover Authority within 48 hours of becoming aware a worker has sustained an injury. Notification within five (5) days of the injury has a financial benefit and allows CGU to waive your excess.

Your excess is the first week's worth of wages for each and every claim if not notified within five (5) days.

How to notify us

Initial notification of a workplace injury may be given by the injured worker, employer, or by some other person (for example, a medical practitioner) acting for, or on behalf of, the injured worker or employer.

The easiest and quickest way of CGU staff are trained to ensure the person notifying CGU is guided through the process and able to provide all required information for the notification to be handled promptly and professionally.

The easiest and quickest way to notify CGU is online at CGU's website .Live. When your online notification is complete you will receive confirmation and a reference number. It is important that you provide details of the injury and injured worker in your notification.

When notifying a claim to CGU, ensure you have access to as many of the following details as possible:

- your policy number and workplace information
- the name and contact details for the nominated employer contact
- the injured worker's name and contact details
- accurate information about the worker's average weekly earnings and award rate of pay or other industrial or enterprise bargaining agreement
- a description of the injury and how it occurred
- details of the injured worker's fitness for work and any treatment
- contact details for the general practitioner and/or hospital
- the WorkCover Medical Certificate
- details of any proposed return to work plan
- any other information or documents relating to the injury

Injury notification can be made by:

.Live	www.cgu.com.au/workerscompensation.live
Email	earlynotification.nsw@cgu.com.au
Telephone	24-hour toll free telephone number 1300 666 506
Fax	Dedicated fax line 1300 666 406
Mail	CGU Workers Compensation GPO Box 9960 Sydney 2001

What an injured worker must do

Once injured, a worker must provide you with the following information either verbally or in writing as soon as possible:

- details of where the injury occurred
- cause of the injury
- date it happened.

Even if the injured worker fails to notify you, they remain able to lodge a claim. A worker (or representative) may also contact us directly to notify an injury if the employer has not done so and can also submit a claim form. Regardless, all injuries must be notified to CGU.

Record the injury in your register of injuries

A Register of Injuries must be kept on your premises and be easily accessed by all workers. All workplace injuries and incidents (including near misses) that occur (including on a journey to and from the workplace) must be recorded in this register. This is a legislative requirement.

An entry represents a formal notification of a workplace injury by the injured worker. It should include:

- injured worker's name, address, age and occupation
- injured worker's type of industry and type of work undertaken at the time of injury
- date and time of injury
- type of injury and cause
- comments

If you do not have a Register of Injuries, contact your CGU Case Manager or our general information line 1300 666 506.

Gradual onset injuries

The cause of some injuries and illnesses are difficult to identify (such as psychological disorders), while others can happen over time (such as back injuries). If you believe these types of injuries may be occurring at your workplace, contact your CGU Case Manager.

What Happens Next?

We allocate you with a notification or claim number

This number must be included in all correspondence relating to the injured worker. Have this number handy every time you contact us regarding this matter.

We assign a Case Manager

Your CGU Case Manager is your main contact throughout your worker's recovery process. The claim will be appointed to an appropriate Case Manager based on your location and the type of injury or illness sustained. CGU has offices in Sydney CBD, Parramatta, Newcastle, Wollongong and Tamworth.

Your CGU Case Manager will contact you and the injured worker three (3) business days of injury notification. Your Case Manager will also contact the injured worker's nominated

treating doctor (NTD) within three (3) business days if the injury is significant (requiring more than seven days off work or away from their pre-injury duties).

Early communication is an opportunity to discuss the claim and set appropriate strategies and expectations designed to:

- manage the injury with appropriate treatment
- ensure that all parties are engaged in the return to work process
- enable a quick and active recovery wherever possible

Assessing Liability

CGU will make a decision on liability within seven (7) calendar days of injury notification. This decision will be made in consultation with you based on the information obtained through our initial contact. If the claim is accepted we will also work with you to determine the employee's entitlement to weekly benefits, along with medical and other expenses.

Within the NSW WorkCover scheme, there are four possible decisions that CGU could make when determining liability.

1. Provisional Liability

CGU determines Provisional Liability within seven (7) days from receipt of an injury notification. Provisional Liability is **not** a formal admission of liability, but allows us to commence payment of weekly benefits up to a period of twelve weeks. It also allows us to pay medical, treatment and other expenses up to an amount of \$7,500.

2. Liability Accepted

Your CGU Case Manager may accept full (ongoing) liability upon receipt of an injury notification if appropriate. Time frames for a full liability decision depends if Provisional Liability has been accepted. Full liability will be determined when Provisional Liability has been exhausted, or within twenty one (21) days from receipt of a claim form supported by a WorkCover Medical Certificate.

3. Reasonable Excuse

A Reasonable Excuse notice may be issued where there is strong evidence that does not support payment of Workers Compensation, or where CGU have exhausted all reasonable efforts to obtain important information on which to make a soundly based decision. This decision is made in accordance with clause 7 of the *WorkCover Guidelines For Claiming Compensation Benefits*.

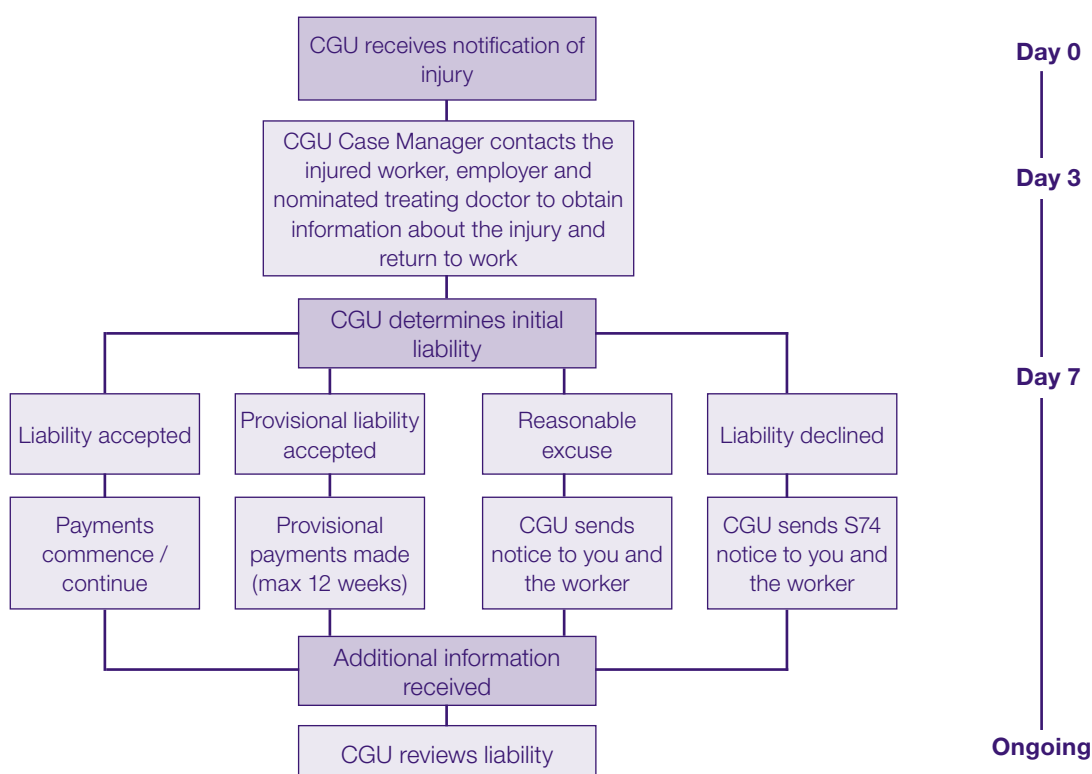
Notice will be issued within seven days of receipt of an injury notification. This will outline why a Reasonable Excuse notice has been issued and what the injured worker can do to resolve the issue. If the worker does remedy the issues outlined in the notice, CGU will again need to assess liability and may be required to accept or provisionally accept liability for the claim.

4. Liability Disputed

Where CGU has strong evidence to suggest that liability should not be supported, a written dispute notice will be issued. The injured worker has the option of requesting a review of our decision.

Your CGU Case Manager will continue to review ongoing liability throughout the life of the claim.

Initial liability timeline



Claim forms

Claim forms will be requested by your CGU Case Manager if required in the following circumstances:

- a reasonable excuse has been issued and continues to exist
- there is insufficient information to determine ongoing liability
- the injury was sustained in the course of a journey to or from work (a Journey Claim Form applies in these cases).

Contact your Case Manager for copies or download the forms from our website at

www.cgu.com.au/workerscompensation

Responsibilities of the People Involved

CGU Case Manager

The CGU Case Manager is responsible for the overall management of the case from start to finish. They are supported by technical and health professional staff within our organisation with specialist knowledge about the management of claims and injuries.

The Case Manager develops an Injury Management Plan (IMP) if your employee is likely to be, or is away from, his/her normal job for seven (7) days or more. We develop the IMP in consultation with you, the worker, the NTD and treating professionals within 20 days of being notified of a significant injury. It details:

- responsibilities of all parties
- plan objectives
- penalties or actions should any party fail to comply.

You, the employer

It is your responsibility to assist the injured worker to return to work in a safe, timely and durable manner. This means providing suitable duties if reasonably practicable.

You must develop a RTW Program for your organisation. In the event of injury you must assist us in developing an Injury Management Plan and you will need to develop a RTW Plan if the injured worker returns to work in a restricted capacity.

Return to Work (RTW) Coordinator

If you employ 20 or more workers, you must appoint a RTW Coordinator, responsible for identifying suitable duties and assisting workers to return to work. This role may be shared among your employees or outsourced.

CGU provides WorkCover approved Introductory RTW Coordinator training and an Advanced RTW Coordination course. Please refer to the course guide on the CGU website at

www.cgu.com.au/workerscompensation

Injured worker

The injured worker is expected to take an active role in their recovery and make every effort to return to suitable employment. They are expected to participate in the development of the Return to Work Plan and Injury Management Plan. The injured worker has a responsibility to accept a reasonable offer of suitable duties as outlined in his/her IMP. Failure to do so may compromise the worker's entitlements to weekly benefits.

Helping Your Injured Worker to Return to Work

As an employer, facilitating an early return to work is one of the most important factors in minimising the direct and indirect costs associated with workplace injury. An early return to work is also proven to help achieve the best health outcomes for injured workers. It is also important for you to keep in contact with the injured worker whilst they are absent from the workplace.

Suitable duties

Depending on the nature of the injury and the requirements of the injured worker's original position, they may not be able to return to normal duties straight away following an injury. Suitable duties may include:

- parts of the job the worker was doing before the injury
- the same job, but on reduced hours
- different duties altogether or at a different site
- training opportunities
- a combination of some or all of the above

Developing a return to work plan

A Return to Work (RTW) Plan must be developed for all workers who are certified fit for suitable duties and have returned to work. It is the obligation of the employer to ensure this plan is developed. However, even while the injured worker is certified unfit, it is recommended that planning for suitable duties commences in readiness for the injured worker's return. The RTW Plan must be based on the current medical certificate and any restrictions outlined by the Nominated Treating Doctor.

CGU has developed an *Employer's Guide to Developing a Return to Work (RTW) Plan* to assist you with this process. This can be found on our website at

www.cgu.com.au/workerscompensation

If you require assistance in developing a RTW Plan, speak to your CGU Case Manager. They will be able to assist you by providing further information or by referring you to one of our specialised Network Service Providers.

Nominated Treating Doctor (NTD)

The injured worker is required to nominate a doctor who is prepared to participate in the injury management and return-to-work process. The NTD provides WorkCover medical certificates which will specify the worker's capacity for work and any restrictions. A WorkCover medical certificate must be provided to cover any period that your worker is unable to perform his/her normal job.

You can contact the doctor to ask about these restrictions and discuss suitable duties. CGU will communicate with the NTD when developing an Injury Management Plan.

Other health professionals

Other service providers such as a medical specialists, physiotherapists or psychologists may be involved in providing treatment to the injured worker. Your CGU Case Manager will coordinate all parties in assisting the injured worker to return to work.

CGU's Network Service Providers

Our Provider Network has been developed to create and sustain strong partnerships with us and our customers.

Rehabilitation providers

Rehabilitation providers are accredited by WorkCover to assist employers and workers in the return-to-work process. Workplace Rehabilitation Providers employ staff with appropriate qualifications and experience or provide specialised services based on the particular circumstances of the claim.

CGU has developed a range of service streams with our Network Rehabilitation Providers to meet the specific needs of the employer and injured worker involved. If you would like further information about these services, speak to your CGU Case Manager.

Medical assessment services

From time to time, it may be necessary to refer an injured worker for an independent medical assessment. CGU works with a network of medical assessment organisations to ensure high-quality service provision.

Injury Management Consultant (IMC)

An IMC is a registered medical practitioner who assists with return to work issues when there is a difference of opinion between the NTD, employer, injured worker and/or CGU. IMCs are appointed by WorkCover. The IMC will provide an opinion regarding return to work and will also communicate with the NTD and other relevant parties to reach an agreement wherever possible.

Independent Medical Examiner (IME)

An independent medical examination is an impartial assessment based on the best-available evidence, undertaken by an appropriately qualified and experienced medical practitioner (who is not in a treating relationship with the worker) for the purpose of providing information to assist with workers compensation injury and claims management.

Legal advice

In the event of complex liability issues or when there is a dispute, CGU may engage the services of our network of legal providers to assist us in making appropriate decisions. These providers are specialists in Workers Compensation Law and have extensive experience working in the NSW Workers Compensation scheme. However, they will not be able to provide advice directly to you regarding your employment practises or industrial relations.

What if Your Injured Worker is Unable to Return to the Same Job?

We try and identify these cases as soon as possible but sometimes it is unclear if a worker will have permanent restrictions until the injury has stabilised.

If this situation occurs, there are several options:

- maintain the worker in his/her normal job with some modifications to accommodate medical restrictions
- transfer the worker to a different job within your organisation.
- transfer the worker to a different job with a different employer.

The decision to terminate a worker's employment

If an injured worker has ongoing restrictions which cannot be accommodated within your organisation, you may need to consider terminating your worker's employment.

This can be difficult and can involve:

- replacement costs and delays
- a possible insurance premium impact
- industrial Relations repercussions
- direct and indirect costs from losing a skilled and experienced worker.

We can provide information regarding the potential impact on your insurance premium but the decision to terminate a worker's employment is yours.

Once you terminate a worker, we will continue to keep you informed about the case if you wish via updated IMPs. We ensure the worker receives assistance to obtain alternative employment as quickly as possible. WorkCover offer a variety of vocational rehabilitation programs to assist injured workers to return to work in a new job.

The injured worker has an obligation to actively participate in obtaining new employment. CGU will advise the injured worker of their obligations in writing.

Workers compensation and industrial relations

There are times when these issues overlap.

For further information the following organisations may be of assistance:

- NSW Industrial Relations Commission
<http://www.industrialrelations.nsw.gov.au/Home.html>
- Small Business NSW: The NSW Government information website for people starting, running or growing a small business www.smallbiz.nsw.gov.au
- Fair Work Australia: the national workplace relations tribunal.
www.fwa.gov.au
- NSW WorkCover Authority (Workers Compensation and Occupational Health and Safety issues)
www.workcover.nsw.gov.au WorkCover Assistance Service 131050
- your employer association (e.g. Australian Industry Group, Australian Business Limited, Employers First)
- your legal adviser

Types of Benefits

The worker's entitlements depend on the type, nature and severity of the injury and include:

Wage replacement

Wage replacement benefits should be paid to the worker in the normal pay run wherever possible. As long as the injured worker is in your employment, CGU will pay this benefit directly to you in most circumstances. It is your responsibility to pass the payment on to the worker with the appropriate tax deducted.

If you anticipate any difficulties in meeting the requirement to continue paying your worker whilst he/she recovers, contact your Case Manager.

Your CGU Case Manager will advise you of the weekly benefit amount based on the current medical certification, pre-injury earnings, award information and the availability of suitable duties.

When the worker is certified totally unfit for work

For the first 26 weeks of incapacity, you should pay the worker's current weekly wage based on the applicable award or industrial agreement. When there is no applicable award or other agreement, you should pay 80% of the average weekly wage. This payment should not include loadings for shift work, overtime or other penalties and allowances.

If the worker continues to have incapacity beyond 26 weeks, you should commence paying the statutory rate. This rate is gazetted by WorkCover and is indexed every six months. The applicable statutory rate is dependent upon whether the injured worker has a dependent spouse and / or dependent children. Normally the statutory rate will be lower than the injured worker's normal rate of pay. These benefits are capped at the amount the worker would normally be paid if unfit for the first 26 weeks of incapacity.

When the worker is certified fit to perform suitable duties

If the worker returns to work on suitable duties and is earning less than before the injury (e.g. working fewer hours or at a lower pay rate), the injured worker is paid make-up pay.

Make-up pay is calculated as the difference between the worker's pre-injury average earnings (including overtime, shift allowances, etc, calculated over a 12-month period) and their actual weekly earnings (i.e. the value of the duties worked). Make-up pay is capped at the amount the worker would normally be paid if unfit for the first 26 weeks of incapacity. Beyond the first 26 weeks the amount is capped at the statutory rate.

If despite all efforts you are unable to offer suitable duties or the worker's employment has been terminated, the worker will be paid job seeking benefits for a maximum of 52 weeks.

Maximum weekly benefits

All weekly benefits paid to workers are capped at a maximum rate. This rate is gazetted by WorkCover and is indexed every six months.

Medical and related payments

CGU will pay for 'reasonably necessary' treatment and services related to the workplace injury. Our decision is guided by the following considerations:

- Appropriateness: will the service reduce the effects of the injury?
- Alternatives: have other types of treatment been considered?
- Cost: is the service cost effective?
- Effectiveness: can the service reduce the consequences of the injury?
- Acceptance: is the treatment generally accepted by the medical profession (or other appropriate professional group)?

Weekly Benefits Quick Reference Guide

Section 36	Section 37	Section 38	Section 40
<p>The Current Weekly Wage Rate (CWWR). That is:</p> <p>The Base Award, EBA, RIA</p> <p>or</p> <p>80% of Average Weekly Earnings (AWE)</p> <ul style="list-style-type: none"> Relates to Total Incapacity The first 26 weeks of total incapacity 	<p>The lesser of: The Statutory Rate</p> <p>or</p> <p>90% of AWE</p> <p>+</p> <p>dependants</p> <ul style="list-style-type: none"> Relates to Total Incapacity Post 26 weeks Statutory Rates based on dependants of the worker Amount payable cannot exceed S36 No maximum timeframe 	<p>Pre 26 wks Section 36 rate</p> <p>Post 26 wks The greater of: 80% of Section 36</p> <p>or</p> <p>The Statutory Rate</p> <ul style="list-style-type: none"> Relates to Partial Incapacity Maximum entitlement up to 52 weeks Amount payable cannot exceed S36 	<p>$A - B = S40$</p> <p>A = Pre Injury Average Weekly Earnings</p> <p>B = Actual Capable Earnings</p> <ul style="list-style-type: none"> Relates to partial Incapacity No maximum timeframe Amount payable cannot exceed the weekly amount that the worker would get if totally unfit. <p>That is:</p> <ul style="list-style-type: none"> During 1st 26 weeks: the rate in accordance with S36 <p>or</p> <ul style="list-style-type: none"> After 1st 26 weeks: the rate in accordance with S37

Travel costs

The worker is entitled to reasonable travel costs to/from:

- medical treatment
- medical consultations requested by us
- other appointments requested by us.

Travel is reimbursed at the rate paid for public transport (upon production of receipts), or per km travelled by private vehicle. Travel via taxi needs to be pre-approved by your CGU Case Manager.

Permanent impairment lump sum payment

Sometimes an injury may result in a permanent loss or impairment. In these cases the worker is entitled to an additional payment known as a section 66 payment. If the permanent impairment is medically assessed as being over a certain threshold, there is a further payment for pain and suffering. This is known as a section 67 payment.

We can only make this payment once the injury has stabilised. The worker's employment status does not impact on the amount paid.

These additional payments do not affect a worker's entitlement to other types of benefits such as treatment and wage reimbursement. Sections 66 and 67 payments do not impact on return-to-work planning.

If you receive a claim from the worker for compensation for permanent impairment and/or pain and suffering, forward the paperwork to us as soon as possible.

Work injury damages

In certain circumstances an injured worker is able to submit a claim for Work Injury Damages. Work Injury Damages is paid as a lump sum. Once Work Injury Damages are paid, the injured worker is not entitled to any further benefits and their claim will be closed.

To be eligible for Work Injury Damages, the injured worker must:

- reach a certain threshold for permanent impairment
- be able to prove that their injury was caused by negligence of their employer.

Dispute Resolution

Sometimes the parties involved in a workers compensation claim do not agree on the course of action to be taken. At these times we may request further dialogue with the worker's NTD and/or treating specialist. If this communication fails to resolve the matter, we may call upon medical experts relevant to the worker's condition to assist in negotiating an outcome.

If it is not possible to resolve an issue with your Case Manager, you may request an internal review by a CGU Team Manager or Claims Manager.

The following more formal avenues are also available:

CGU customer feedback

If you wish to provide more formal feedback regarding our services, we have a customer feedback process.

If you have concerns with the way a claim is being managed, this is best resolved by contacting us directly by:

- completing our online Customer Feedback form at **www.cgu.com.au/workerscompensation**
- emailing us at **customer.feedback@cgu.com.au**
- telephoning our toll-free Customer Feedback hotline on 1800 801 241
- faxing our Customer Feedback Coordinator on (02) 9088 9688
- writing to: CGU Workers Compensation (NSW)
Customer Feedback Coordinator
PO Box 9960, Sydney, NSW 2001

Complaints and queries directed to us by the WorkCover Claims Assistance Service (CAS) are also dealt with via this formal process.

A full copy of our Customer Feedback and Service Charter is available on request or can be found at

www.cgu.com.au/workerscompensation.live

WorkCover NSW

WorkCover's Claims Assistance Service (CAS) can be reached by telephoning 13 10 50. This service assists employers and injured workers when there are delays or problems with workers compensation claims.

Workers Compensation Commission (WCC)

The WCC deals mainly with disputes about liability, treatment, entitlement to benefits and work capacity. These matters are normally lodged by the worker or their representative. The WCC provides a formal dispute resolution process which may involve a conciliation hearing or arbitration.

It is best to attempt to resolve any disagreements through other channels before lodging a dispute with the WCC. Further information about the WCC is at **www.wcc.nsw.gov.au**

Further Information

Several resources have been referenced in this guide and are good sources of further information in relation to Workers' Compensation.

CGU resources are available on our website at **www.cgu.com.au/workerscompensation**

WorkCover NSW resources are available on the website at **www.workcover.nsw.gov.au**

All enquiries about policy and client services matters should be directed to the Sydney office. Claims enquiries can be directed to your closest regional office.

Contact details

Sydney

GPO Box 9960
Sydney NSW 2001
Phone: 1300 666 506

Policy enquiries

Fax: (02) 9088 9709
Email:
WCNSWenquiries@cgu.com.au

Client services

Fax: 1800 240 387
Email:
cguwc.nswcs@cgu.com.au

Claims enquiries

Fax: 1300 666 406
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WCNSWclaims@cgu.com.au

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