



Your Recovery Guide: what you need to know

NSW Workers Compensation

Getting started

This guide outlines the worker's compensation claims process and will help explain what you need to know as you start on your recovery journey. You may want to save it so you can refer back to it later. It covers:

(Click page number to jump to section)



Some important terms

Certificate of Capacity: A certificate issued by a medical practitioner or your treating physiotherapist or psychologist (for subsequent certificates only and who are SIRA approved) to establish your ability to work.

Provisional Liability Acceptance: Allows us to commence wage and medical payments on a claim whilst information for a formal liability decision is being gathered. This decision will be provided to you in writing.

Liability Decision: The decision to formally accept or decline the claim which will be provided to you in writing.

Staying in touch

Your case management team will keep you updated about your claim by phone and email. Let them know what method of communication works for you and when the best times to call you are. If you need to contact us about your claim, you can contact your lead case manager directly or you can contact your case management team at:



1300 130 664 (and select 1)

Monday to Friday 8.30am – 5.00pm



Allianzclaims@icare.nsw.gov.au

(Please include your claim number in the subject line so we can identify your claim).

You need to let us know if any of the following change:

- Your employment status or employer
- Personal details
- · Your medical or treatment providers

We're here to support you in your recovery to health and work, so please get in touch if you need help with your claim.



The claims process



There's an incident

Report the incident to your employer and seek medical assistance.



Initial assessment and provisional liability

Once your claim has been lodged and we have received your certificate of capacity (which your nominated treating doctor can provide) we will be able to start reviewing your claim. We will let you know via phone and email within seven days of receiving your claim notification whether your claim has been provisionally accepted.

This will help us to start making wage and preapproved medical treatment payments whilst information is being gathered for a formal liability decision. We will let you know via phone and email within seven days of receiving your claim notification whether your claim has been provisionally accepted.

Pre-approved medical treatments may include:

- · Diagnostic investigations
- Physiotherapy, Chiropractic, Osteopathic, Exercise Physiology and/or Psychology.
 These consultations require a referral from a medical practitioner and the provider must be SIRA approved
- Public Hospital services
- · Pharmacy supplies



Independent Medical Exam and information review

You may be asked to attend an independent medical exam and to provide other information about your condition, such as medical scans or other test results, to inform and assist in determining your claim, and to inform the development of your treatment plan.



Liability decision

Once all the information pertinent to your claim has been reviewed, we will notify you in writing as to whether your claim has been accepted. It can take up to 12 weeks to deliver a formal liability decision, however we will keep you informed of your claim's progress during this time.

If your claim is not accepted, we will explain in writing the reasons why and what steps you can take if you would like to have the decision reviewed.



Treatment and recovery

During your recovery, it's important to focus on what you can do, rather than what you can't. Your tailored recovery plan will detail which treatments you need and whether you are able to recover at work by completing the same role, working reduced hours, or performing different duties, if appropriate.

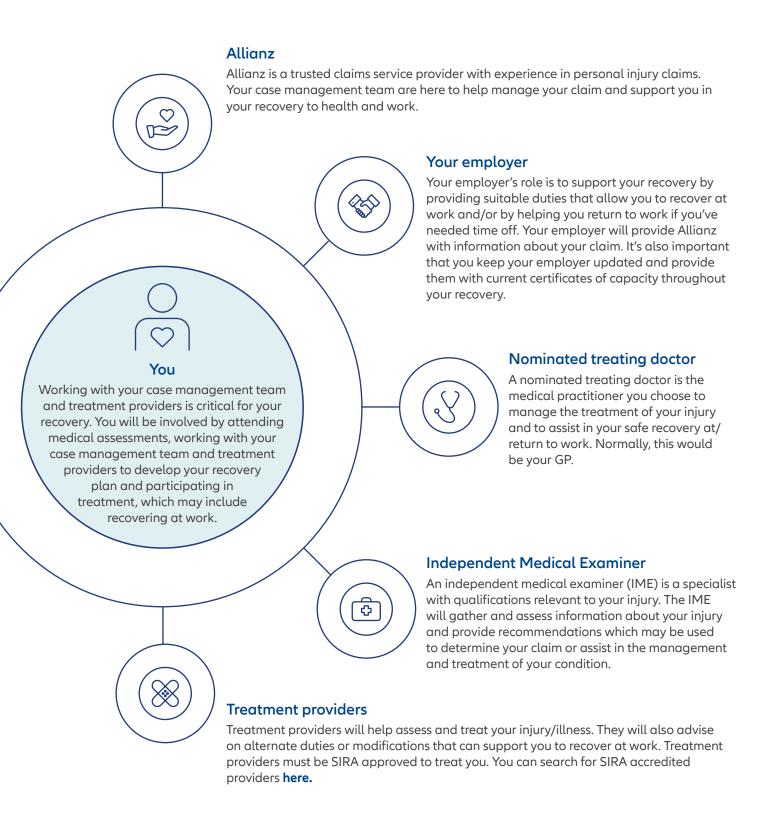


Claim finalised

The claim will be finalised when the medical entitlement period ends or when you have recovered from your injury.

More information about the medical entitlement period can be found here.

Who is involved with my claim? Your support crew.



Certificate of capacity

What is a certificate of capacity and how is it different from a normal sickness certificate?

A SIRA certificate of capacity is used by your nominated treating doctor, treating physiotherapist or psychologist who are SIRA approved, to describe the nature of your injury/illness, capacity for work, and your required treatment for a safe and sustainable recovery. It differs from a normal sickness certificate because it provides essential information to the insurer managing the claim, including:

- Your name and details
- The type of injury/illness (diagnosis) and date it occurred
- How the injuries impact your ability to do normal activities including work
- The details of your medical practitioner who completed the certificate including their provider number
- Information on the planned treatment

Why do I need to obtain a certificate of capacity?

You must have a valid certificate of capacity in order to claim workers compensation and ongoing weekly benefits. The certificate of capacity is the tool your nominated treating doctor will use to communicate with your employer and your case management team. It provides critical information that your case management team will use to tailor an approach for your injury management and recovery at/return to work.

How often will I need to obtain an updated certificate of capacity?

As you progress in your recovery, your capacity for work may change. As such, it is important that you maintain a current, completed certificate of capacity and provide it to your employer or insurer so that they can continue to tailor the approach for your injury management and recovery at/return to work. Usually, a certificate of capacity does not exceed 28 days.





Further information on the certificate of capacity can be found **here.**

Independent Medical Exam



You may be referred for an independent medical exam (IME) to assist with decisions about your rehabilitation, recovery at/return to work and your entitlements to compensation. An IME may be useful when:

- Information from your doctor is unavailable, inadequate or inconsistent
- · An assessment of permanent impairment is required
- There are unresolved issues with your support team

If you are referred to an IME, you will need to confirm and attend the appointment with all medical scans and test results relevant to your claim. If you would like, you are able to take a support person to the IME.



During the IME, the doctor will ask questions to understand the extent of your injury or illness and how it affects your life, such as:

- Your past and present medical and work history
- What caused the injury or condition
- How the injury affects you now
- · The treatment you have received or are considering

The doctor will produce a report based on the interview, examination, and the information you provide, including previous radiography and test results. The report and recommendations may be used to determine your claim or assist in the management and treatment of your condition. A copy of the report will be provided to you and/or your nominated treating doctor as required.





More information about the IME can be viewed **here.**

Treatment and compensation benefits

As part of your recovery, you may need to receive medical or other treatment, such as:

- Treatment in a public hospital
- Treatment by medical practitioners, physiotherapists, chiropractors, osteopaths, psychologists, exercise physiologists, other allied health practitioners
- · Diagnostic investigations and
- Provision of artificial aids
- Medical and medicine supplies*
- Domestic assistance services and/or modifications to your home or vehicle

If the claim has been provisionally accepted, you will receive a letter outlining your pre-approved treatment and medical services as requested or referred by your nominated treating doctor. As they are pre-approved treatments, you are not required to obtain written approval from Allianz prior to commencing the initial medical treatment/services.

Reimbursement for these expenses can be paid electronically or via cheque. It usually takes 10 business days for the reimbursement to be processed.



To receive payments electronically, please complete the attached ETF Payment Form and send it to Allianzclaims@icare.nsw.gov.au

To claim these expenses, please send all treatment requests and itemised receipts to Allianzclaims@icare.nsw.gov.au with your name, claim number and the expenses you are claiming.

Depending on your condition, you may be eligible to receive compensation such as:

- Weekly payments
- Medical, hospital and rehabilitation expenses
- Travel expenses (see attached Travel Expense Form)
- Death benefits and funeral expenses (may be payable when a worker dies as a result of a workplace injury)

You may be entitled to weekly payments if your workplace injury or illness has led to a loss of earnings. Weekly payments are determined by the entitlement period and your capacity to work and are calculated using your pre-injury average weekly earnings (PIAWE) (up to a maximum amount).

Usually, your employer will process your weekly benefit payments in line with your normal pay-cycle. However, if you experience difficulties with your weekly workers compensation payments, your Case Management team is available to assist.



Further information on Workers Compensation benefits is available **here.**

*Allianz has partnered with Claims Pharmacy to provide your claim related medication needs. Your Case Management Team will help you access this service if needed.

The following table outlines the weekly payment entitlement periods and rates:

	First 13 weeks	Week 14-130
No capacity.	Up to 95% of PIAWE	Up to 80% of PIAWE
Workers who have returned to work for at least 15 hours per week.	95% of PIAWE	95% of PIAWE
Workers who have capacity to work but are working less than 15 hours per week.	95% of PIAWE	80% of PIAWE If a worker is able to work and is not working at least 15 hours per week by the end of the 130 weeks, entitlement to weekly payments will cease.

Further information



Allianz Worker Compensation

Your Case Management team is here to guide you through your return to health and help facilitate your recovery at work where medical evidence supports this.

Allianz also has helpful information on our website.

Here you will find videos, forms, templates and other important information to help you navigate your claim.

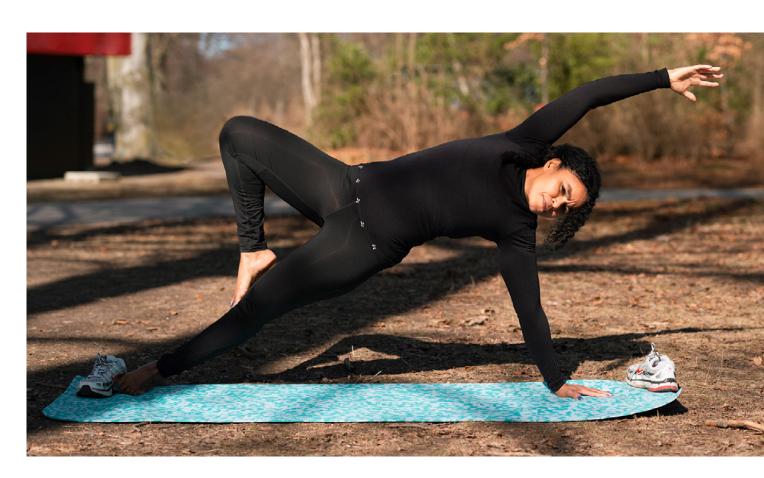
icare

For more information on the NSW Workers Compensation Scheme, visit **www.icare.nsw.gov.au**

SIRA

SIRA is the State Insurance Regulatory Authority. The SIRA website has details information regarding the NSW Workers Compensation Scheme.

Visit SIRA visit to learn more.



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