

Green Slip scheme quarterly insights



State Insurance
Regulatory Authority

July to September 2018



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Executive Director's message



Since July, we advanced projects to improve service delivery, raise awareness of available benefits and scheme support, and strengthen the journey to recovery for injured people.

Last quarter I mentioned SIRA's updated, centralised, complaints-handling function, which has now been successfully piloted. It will now enable smoother resolution of complaints through a clear triage process. Simple matters will be quickly dealt with by CTP Assist while complex matters are escalated to the responsible experts. We are acting on the valuable insights into all aspects of the scheme gained from the feedback.

Our rigorous insurer supervision program continues. During the quarter we conducted claims file reviews with all insurers to assess standards of operations and case management practices within the scheme. This program is underpinned by our data collection strategy, including complaints data.

The second in our series of animated explanatory videos went live on the SIRA website and YouTube. While the first showed the steps in the return to health of someone who had not been seriously injured, the second goes through the recovery journey of someone seriously injured.

We commenced an important project with icare, to ensure the smooth transition of severely injured people to the Lifetime Care and Support Authority, which will manage their long-term treatment and care needs.

Regular stakeholder meetings and consultations were held, including a workshop with the point to point industry – taxi and rideshare services – to identify long-term issues to consider. The young drivers telematics trial has continued, with a steady stream of data for analysis.

We are now approaching the end of the first year of the 2017 scheme. As the scheme matures, we will be able to provide greater insights, giving us the opportunity to improve the customer experience.

Mary Maini

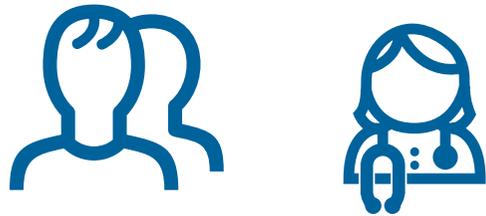
Executive Director
Motor Accidents Insurance Regulation SIRA

The scheme to date

Some key figures for the 2017 CTP scheme for its first ten months:
1 December 2017 to 30 September 2018



**OVER 2.6 MILLION
GREEN SLIP CHECKS**



**74,790
TRANSACTIONS WITH
CTP ASSIST**



**7,825
CLAIMS LODGED**

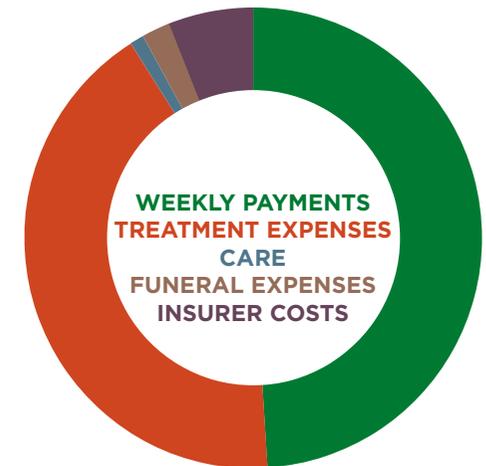
1 LITIGATED CLAIM

AVERAGE PREMIUM

**\$517
14% DOWN**

NSW average passenger vehicle premium
September 2018 vs September 2017

**PAYMENTS
\$49.9 million**



**\$196 MILLION
REFUNDED**

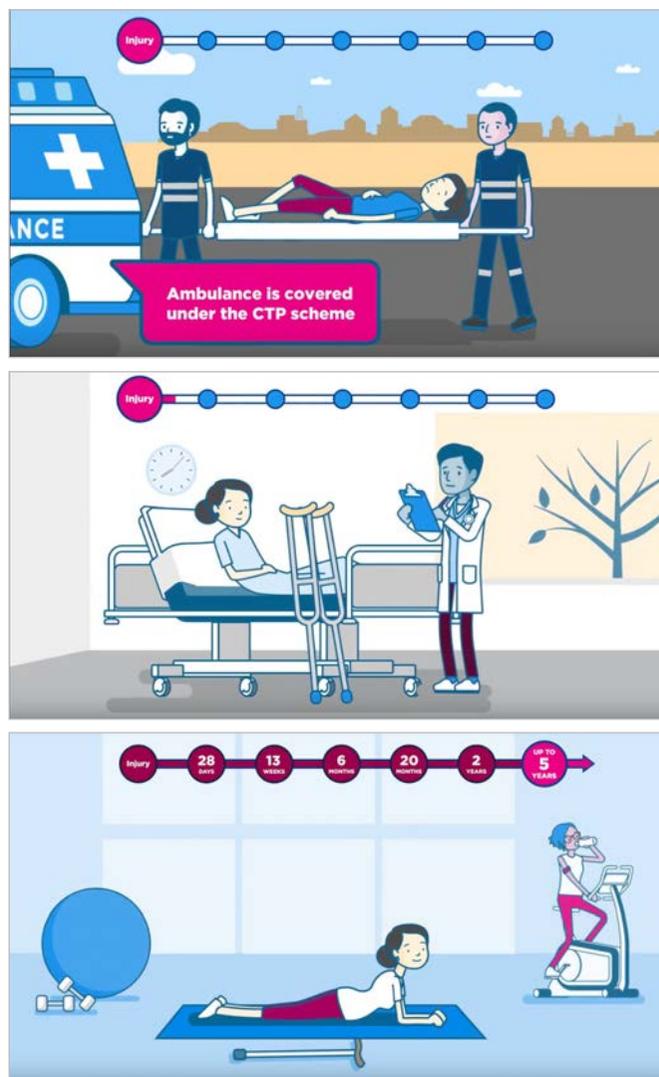
Information that's accessible to all

The second in our series of animated explanatory videos is now live on the SIRA website and our YouTube channel.

Using the story of Li, who's been seriously injured in a vehicle crash, the animation goes through the benefits available, time limits, how to apply, the people involved and the support available to help her recover.

In just a few minutes, it covers every step in Li's recovery: including CTP cover for ambulance and hospital, online claiming, how the system works with doctors, other health professionals and employers, benefits to replace lost income and returning to work part or full time.

View this, along with other videos and explanatory information, at the [SIRA website](#).



Connect directly to an insurer

[CTP Connect](#) makes it simple to identify the right insurer, based on a vehicle's registration number. It's a secure online system that works for the 2017 scheme.

This makes it fast and easy for insurers to approve limited initial treatment for those who have notified but not yet lodged a claim. And it helps injured people gain access to scheme benefits as quickly as possible.

Online claims submission - lodging a claim for benefits

Full claims for benefits under the 2017 scheme can now be lodged entirely online, using Service NSW identity verification.

The digital claim form is very flexible and injured people can attach medical certificates, photos and videos, pinpoint the accident location through Google Maps and add information later. System integration and portal access enables insurers to manage the claim on their systems and download relevant supporting material.

If help is needed, and for those without access to technology, CTP Assist is available.

Full details are on the [SIRA website](#).

Green Slip refunds

By the end of the quarter, 75 per cent of the total value of refunds had been returned to policy holders as a result of the NSW Government's reforms.

In all, over \$196 million had been returned to over two million vehicle owners by the end of the quarter.

In August, the deadline to claim refunds was extended to 30 June 2019.

Refunds can be claimed through [Service NSW online](#), by phone on 13 77 88 or at any of its 182 service centres around the state.



Green Slip Check

Our popular Green Slip Check now lets you click straight through to buy a Green Slip.

[Green Slip Check](#) is a fast, user-friendly price comparison tool which improves our services for motorists. More than 2.8 million checks have been made since it started in November 2017.



Click-through to buy

In June, we added the ability to go directly from the Green Slip Check to buying a Green Slip from three insurers. This option is being taken by around 30 per cent of customers. This should be available from all insurers in November 2018.

Data collected (for example, how the tool is used by different areas of the state and which insurers are selected) helps SIRA verify usage patterns, supports insurer market share data, validates prices from premium filings and indicates the frequency of people changing insurers for a better deal.

www.greenslips.nsw.gov.au/price-check

Smooth transfer to the Lifetime Care and Support Authority

Some injured people will require ongoing treatment and care more than five years after their accident. The 2017 scheme covers the cost of whatever reasonable and necessary treatment and care they need, for life.

Treatment and care provided more than five years after the motor accident is payable by the Lifetime Care and Support Authority of NSW (LTCSA) under the Motor Accidents Injuries Act 2017. Like an insurer, the LTCSA will manage and pay for the injured person's statutory benefits for treatment and care.

The LTCSA may assume responsibility for paying treatment and care benefits earlier if it is satisfied that the injured person is likely to have a treatment and care need beyond five years. The LTCSA enters into an agreement with the CTP insurer to accept responsibility for the payment of treatment and care. The CTP insurer pays the LTCSA an amount (determined by the LTCSA) to fund the future treatment and care needs within the first five years after the motor accident.

Insurance and Care NSW (icare) has a statutory function to provide services (including staff and facilities) to the LTCSA. This means icare Lifetime Care will have a significant role in the daily management of claims for treatment and care more than five years after the accident.

SIRA and icare have established a steering committee to plan the transition to the LTCSA for those injured people in this category.

The work underway includes customer experience research and design, system changes for both icare and SIRA and monitoring and compliance actions with insurers.

Within this steering committee, SIRA will implement guidelines, reporting and monitoring frameworks to oversee the transition by insurers. Our focus is to ensure that the transition does not have any impact on the injured person's experience and that optimum health outcomes are achieved.

The Lifetime Care and Support Scheme

The LTCSA was established to run the Lifetime Care and Support Scheme under the Motor Accidents (Lifetime Care and Support) Act 2006. This scheme, funded from a levy on NSW Green Slips, manages and pays for the treatment and care needs of scheme participants. These severely injured people have brain injuries, spinal cord injuries, specific types of amputations, blindness or burns, caused by a motor accident in NSW. This is a no-fault scheme.

For accidents from 1 December 2017 until 30 September 2018, 86 severely injured people have been accepted as interim participants in the Lifetime Care and Support Scheme.

CTP Assist: help for the injured and their families

CTP Assist provides personalised claims support and information for injured people, policy holders and others in the CTP scheme such as doctors and health professionals, by post, phone, email or chat.

For anyone who needs CTP help:

1300 137 131

ctpassist@sira.nsw.gov.au

[or enquire online](#)

Our support officers make regular calls to injured people after they have lodged a claim, to make sure they get the support they need. The same support officer calls each time to maintain a strong connection.

Case studies

Here are some examples of people CTP Assist has helped recently (please note names and personal details have been changed for privacy).

Not just for injured people

Gary was pretty unhappy when he called CTP Assist. He'd just received his Green Slip renewal, and his premium had gone up, not down as he had expected.

Risheel of CTP Assist talked him through the 'risk factors' that insurers use to price policies and how his might have changed since the year before. To make sure Gary was getting the best deal he could, Risheel offered to run his details through SIRA's Green Slip Check. Gary agreed, and in a minute or two, Risheel found an insurer that would save him \$80 on his CTP.

The call ended with Gary much happier, with a better understanding of what affects Green Slip prices and how to get the best price. Not to mention being \$80 better off.

Help for a grieving visitor

Sadly, Maxine, a specialist injury lawyer, was calling us on behalf of a client who was travelling to Australia to retrieve a family member who had tragically died on a NSW road. As the vehicle and driver responsible hadn't been identified, the CTP claim would be made on the Nominal Defendant. Maxine's call was to see what could be done to expedite a claim for funeral expenses so it could be finalised before her client left the country in a few days.

Waisale, who'd taken the call at CTP Assist, conferred with colleagues Stephanie and Nathan to allocate the claim to an insurer and work with them to process it as promptly as possible.

The insurer was willing to help, and leveraged its systems and process to make the payment immediately, as hoped.

So at least a grieving family had one less thing to deal with.

Help for the injured and their families

A positive mindset is the best medicine

Things had looked pretty grim for Rob when he came off his motorcycle in May, fracturing his pelvis, some ribs and several vertebrae. His insurer put his prospects for recovery as 'poor', based on previous experience with similar injuries.

Rob saw it differently. And his positive attitude and commitment to doing all he could to get well had helped a lot. Along with the medical treatment, physiotherapy, hydrotherapy and gym program covered by his insurer. And his daily 'bay walk'.

Judy, from CTP Assist, had been in regular contact with Rob from the beginning. So she was delighted to hear his news when she made the



Regular follow-up calls are part of the support

routine 23-week call. That morning his doctor had cleared Rob to go back to work. He'd already spoken to his employer who was very happy for him to return, on reduced hours to start with, later in the week.

Rob was very upbeat about his experience with CTP Assist. "While I know I've kept a positive mindset, it was good knowing I had your support all the way through. I really appreciated the calls. Thanks Judy."

Talking to CTP Assist can make a big difference to peace of mind

Jessica's mother had been in a car accident. Jessica was heading home to London soon, and wanted to be sure her mother would be looked after.

CTP Assist's Bano talked Jessica through the forms and documentation needed to lodge a claim, the follow-up calls she would make to her mother - everything she needed to know.

The call ended with Jessica relieved, grateful and confident her mother had good support and access to advice through CTP Assist if she needed it.

CTP Legal Advisory Service

A CTP Legal Advisory Service pilot was launched by SIRA in mid-December 2017. The service provides legal advice relating to statutory benefits claims, where legal fees are restricted by the *Motor Accidents Injuries Act 2017* and supporting Regulations.

To use the service, an injured person can simply call CTP Assist who will help arrange a referral if they are eligible. Advice is personal and confidential. There is no charge to injured people.

There were six referrals to the Legal Advisory Service during the quarter.

'Now we can put the claim behind us and get on with our lives.'

Joe's insurer payments started flowing again after a call to CTP Assist.

Net Promoter Score: measuring customer satisfaction

To measure and continuously improve customer satisfaction with CTP Assist, SIRA has adopted two widely used service quality measurements: Net Promoter Score (NPS) and Customer Effort Score (CES).

CTP Assist

NPS +48

CES 4.1

NPS measures how likely a customer is to recommend CTP Assist to others. It is calculated using a standard formula: the percentage of customers that score the service 9 or 10 out of 10 ('promoters') less the percentage who scored it at 6 or less ('detractors').

CTP Assist's NPS was +48 at the end of the quarter, making CTP Assist a 'national leader' in delivering a great customer experience according to the Australian NPS Pulse Check.

CES measures how easy it is for a customer to get the help they need, and is currently at 4.1 out of 5.

Both measurements include brief questions to get the details of what we're doing well and what needs work.

Together, these let SIRA constantly measure the overall quality of the service and identify opportunities to improve.

These early positive results have set a good benchmark. Customers are agreeing that CTP Assist is making it easy to get help.

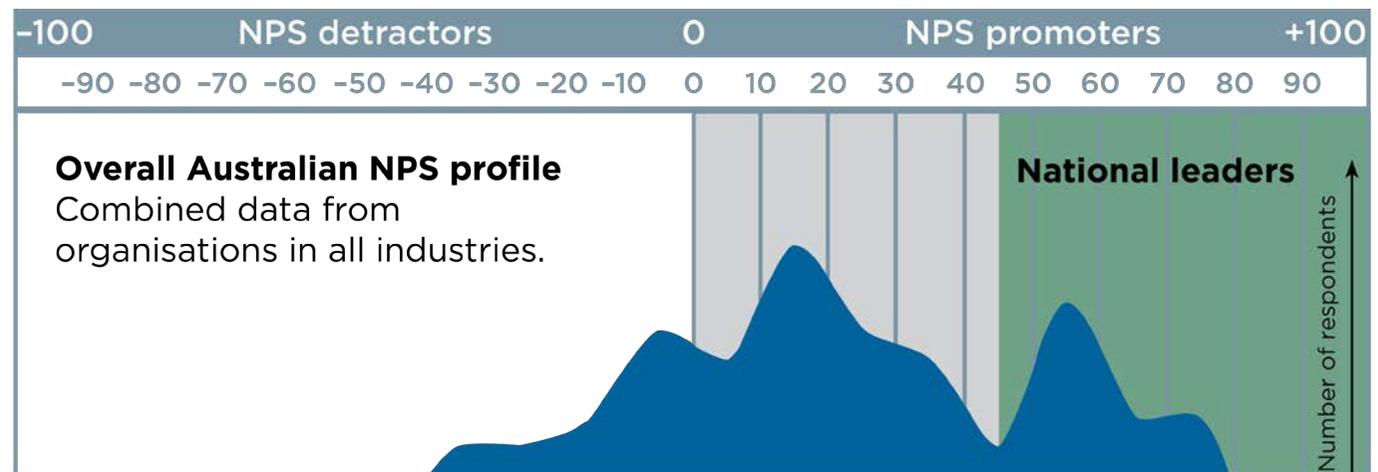


Diagram and results of the Australian NPS Pulse Check courtesy of the Customer Experience Company www.customerexperience.com.au.

Key statistics

2017 scheme

This report focuses on the three months from 1 July to 30 September 2018, with some data from the scheme's start on 1 December 2017.

While it is too early for trends to be visible, we are closely monitoring the scheme.

Minor injury assessment

1 December 2017 to 30 September 2018

Injury category	To date
Assessed minor injury	2,660
Indicative minor injury	939
Assessed non-minor injury	1,618
Indicative non-minor injury	521
Not yet known	2,087
Total	7,825

Claims 1 July to 30 September 2018 (Qtr) and 1 December 2017 to 30 September 2018

Claim type	Qtr	To date
Statutory benefit claims		
At fault	402	948
Not at fault	1,320	3,825
Fault not determined	966	3,052
Total	2,688	7,825
Early notifications	113	443
Interstate claims	54	181
Workers compensation	14	20
Compensation to relatives	55	136

Earning status of injured people

1 December 2017 to 30 September 2018

Earning status	To date	%
Earners	4,361	56%
Non-earners	1,629	21%
Not stated	1,835	23%
Total	7,825	100%

Claims by insurer

Statutory benefits 1 July to 30 September 2018

Insurer	No. of claims	% of total
AAMI	211	8%
ALLIANZ	326	12%
CIC	171	6%
GIO	498	19%
NRMA	947	35%
QBE	535	20%

Payments 1 December 2017 to 30 September 2018

Payment type	Amount
Weekly payments	\$24,631,136
Treatment expenses	\$21,150,995
Care	\$427,910
Funeral expenses	\$1,146,457
Insurer investigation	\$2,431,007
Insurer medico-legal	\$75,123
Insurer legal	\$13,185
Damages	\$0
Claimant legal	\$13,520
Other	\$14,986
Total	\$49,904,318

Legal representation - statutory benefit claims

Representation	Qtr	To date
Legally represented	769	1,820
Self represented	1,919	6,005

Dispute resolution

Dispute review type	Qtr	To date
Insurer internal review	482	795
Dispute Resolution Service	273	350

CTP Assist

Contact type	Qtr	To date
Customer phone & digital	14,465	44,815
Injured people connected with an insurer	644	2,291
Outbound calls	7,744	27,684

Scheme insurers

The Green Slip market is privately underwritten¹ by six licensed insurers operated by four organisations: Suncorp (AAMI and GIO), Allianz Australia (Allianz and CIC Allianz), NRMA and QBE. Zurich stopped issuing Green Slip policies to the public under the 1999 scheme on 1 March 2016.

Best prices by insurer

Below is a comparison of current Sydney best prices for passenger motor vehicles with prices at the end of the previous (June) quarter.

Prices are for drivers aged 30 to 54.

Insurer	June 2018	September 2018	Best price change
NRMA	\$468	\$468	\$0
GIO	\$471	\$471	\$0
AAMI	\$475	\$475	\$0
Allianz	\$478	\$478	\$0
QBE	\$470	\$470	\$0
CIC Allianz	\$467	\$467	\$0

¹ Underwriting is the process of assessing risk and ensuring the cost and conditions of the cover are proportionate to the risks faced by the individual concerned.

² A filing shows proof of financial responsibility in setting premiums.

Premiums

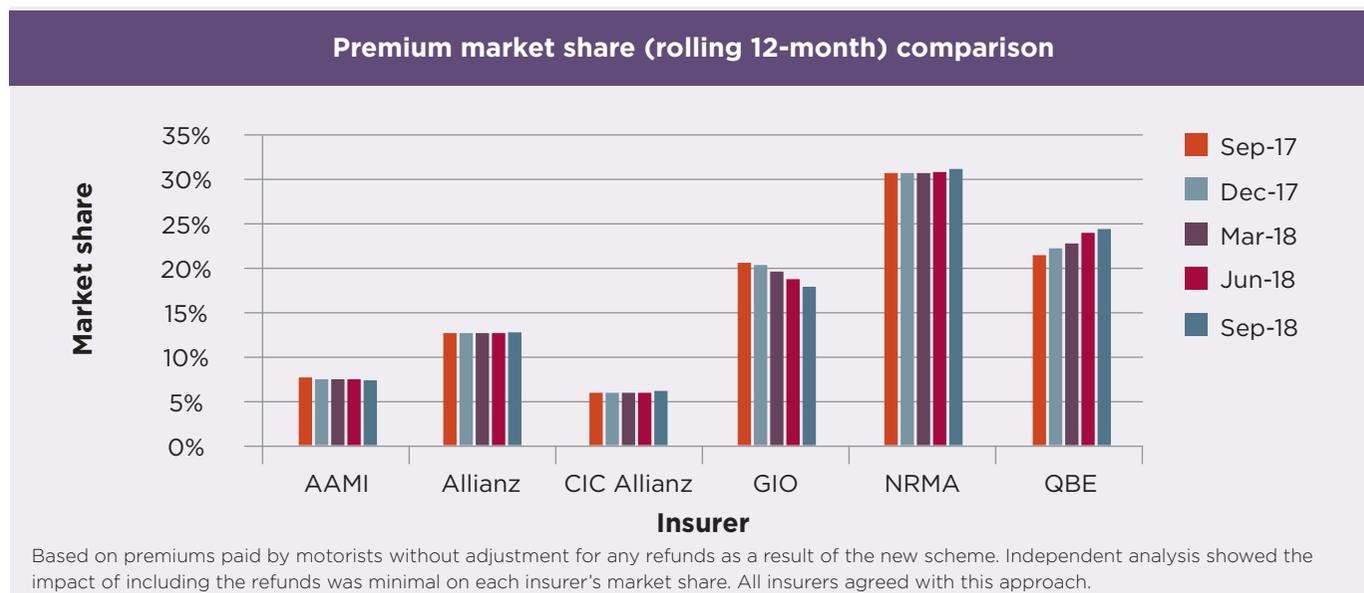
No insurer changed their best price during the quarter. CIC Allianz implemented new lower prices (between 4.3 and 8.3 per cent) for some fleet vehicles from 1 September 2018. Suncorp submitted filings² for price reductions to take effect on 1 December 2018. AAMI's best price will fall from \$475 to \$459; GIO's from \$471 to \$457.

Market share

The graph below shows the proportion of premiums collected by insurers from the September 2017 quarter to the September 2018

quarter and includes the 2017 scheme. It is based on a rolling 12-month period to smooth trends in market share by compensating for seasonal renewals of large fleets of vehicles.

During this quarter, NRMA retained the largest market share, with 31 per cent, followed by QBE with 24.5 per cent, GIO with 17.7 per cent, Allianz with 12.8 per cent, AAMI with 7.5 per cent and CIC-Allianz with 6.5 per cent. Since September 2017, QBE gained 2.4, NRMA 0.4, CIC Allianz 0.2 and Allianz 0.1 per cent market share respectively. GIO lost 2.9 and AAMI 0.2 per cent.



Premium trends

The graph below shows that Green Slip premiums for all passenger vehicles have continued to fall since the 2017 scheme commenced and are staying at levels similar to those in 2012. As the only filings received this quarter are for a further reduction, the 2017 scheme will have held premiums down for its first full year.

The average Green Slip premium paid by all NSW Class 1 passenger vehicle owners was \$496, a \$103 (17 per cent) reduction compared with the September 2017 quarter price of \$599 and \$1 less than the preceding quarter.

The 'all vehicles' average rose slightly due to the renewal during the quarter of large fleets with higher premiums, including heavy vehicles, State Transit Authority buses, police vehicles and ambulances.

Insurer supervision

Our Claims and Customer Outcomes team makes regular supervision visits to insurers to review all aspects of their claims handling and ensure they're meeting their obligations.

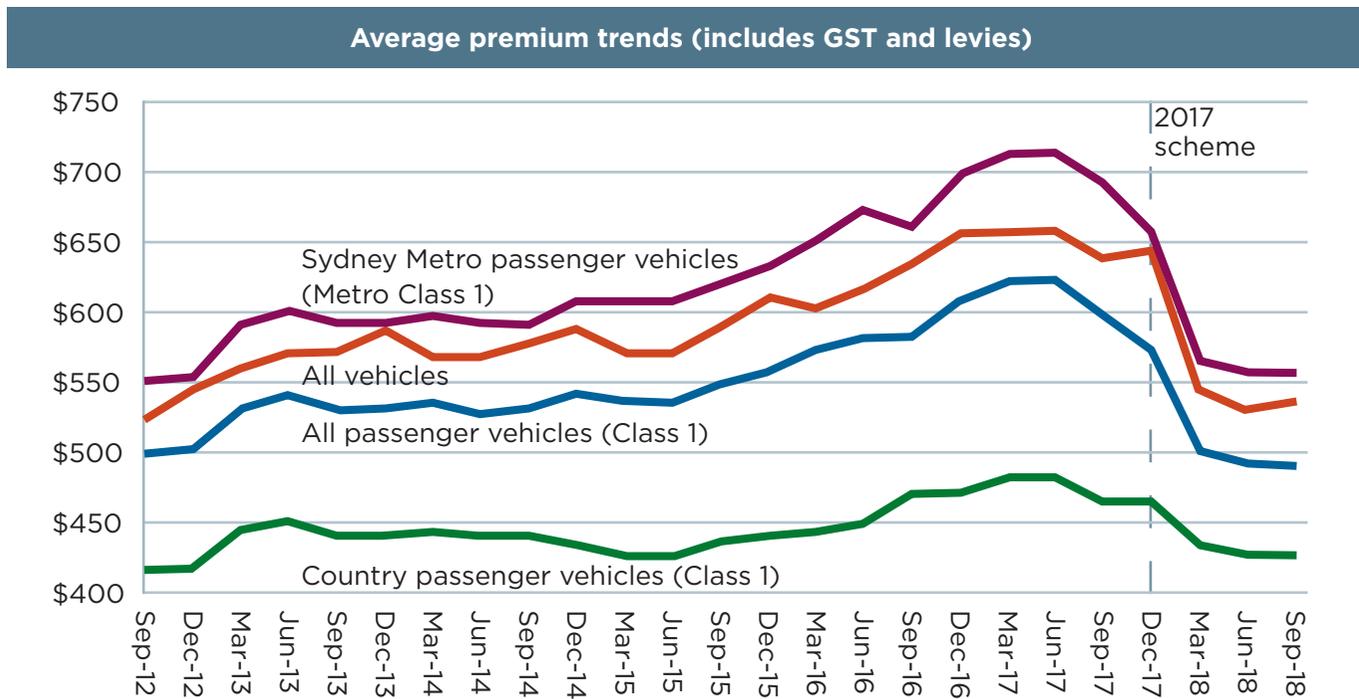
During the quarter, this included monthly insurer performance meetings and monthly meetings with claims managers.

The team reviewed all insurers' business plans for CTP to ensure they are aligned with our expectations and the objectives of the legislation and guidelines.

We also reviewed and provided feedback on all the insurers' template letters to make sure their messaging is consistent and appropriate, the language is clear and they are accurate, customer-centric and meet the requirements of the legislation and guidelines.

We developed data monitoring tools as well as an insurer self-assessment tool which we issued to insurers to complete.

Now that the scheme has been operating for months, SIRA is holding insurers accountable for service delivery in line with the new requirements.



Insurer internal reviews

The first step in resolving most disputes is for an injured person to request an internal review of a decision by an insurer.

This must be independent of the original decision maker, allowing the injured person and insurer to resolve the dispute promptly and simply.

If an injured person is not satisfied with the outcome, they can lodge a dispute with SIRA's Dispute Resolution Service (DRS).

An insurer internal review is needed before most disputes can be lodged with DRS.

482 Insurer internal reviews have been lodged this quarter

Internal reviews 1 December 2017 to 30 September 2018

Internal review type	No.	%
Is the injury more than a minor injury?	407	51%
Amount of weekly benefit payments	70	9%
Is treatment and care reasonable and necessary?	103	13%
Is the injured person mostly at fault?	61	8%
Other	154	19%
Total	795	100%

Internal review outcome	No.	%
Decision upheld	443	56%
Decision overturned	148	19%
Withdrawn	48	6%
Declined	63	8%
In progress	93	12%
Total	795	100%

Keeping the scheme sustainable

Fraudulent claims, with staged accidents, exaggerated injuries and collusion, are a burden for motor accident insurance schemes around the world.

The cost of this is carried by the whole community, specifically in the premiums we pay for our insurance. So reducing fraud benefits everyone.

New laws have strengthened SIRA's ability to investigate and prosecute.

Police update

We work closely with the NSW Police Force's Financial Crimes Squad to deter, detect and prosecute fraudulent claims.

As at September 2018, NSW Police had made 23 arrests and laid 174 charges relating to a total of approximately \$13.8 million in CTP claims fraud.

Disputes and litigation

Where an injured person disagrees with an insurer's decision after an internal review, they can access SIRA's Dispute Resolution Service (DRS).*

* Some matters can proceed directly to DRS.

Disputes

Disputes are distinct from complaints about CTP policies, insurer practices, services or conduct.

In the quarter ended 30 September 2018, 273 disputes were lodged under the 2017 scheme, bringing the total to 350.

Litigation

There has been one litigated claim under the scheme to date.

Dispute resolution - 2017 scheme - 1 December 2017 to 30 September 2018

Type	Dispute matter	Decision overturned	Decision upheld	Settled	In progress	Declined	Withdrawn/invalid	Total
Medical	Minor injury	11	29	1	167	1	14	223
	Is treatment and care related to injury caused by accident?	1	1	1	11	3	3	20
	Is treatment and care reasonable and necessary?	1	7	0	12	0	3	23
Misc claim	Is the injured person mostly at fault?	2	0	2	15	1	1	21
	Statutory benefits time limits	1	2	1	3	0	1	8
Merit	Amount of weekly benefit payments	8	3	0	5	1	0	17
	Is death or injury from a NSW accident?	0	0	1	0	0	3	4
	No benefits if workers compensation payable	1	1	0	1	0	0	3
	Variation of weekly payments	0	1	0	0	0	0	1
	Gratuitous services	0	0	0	0	1	0	1
	Other	2	1	0	19	5	2	29
Total		27	45	6	233	12	27	350

Key statistics

1999 scheme

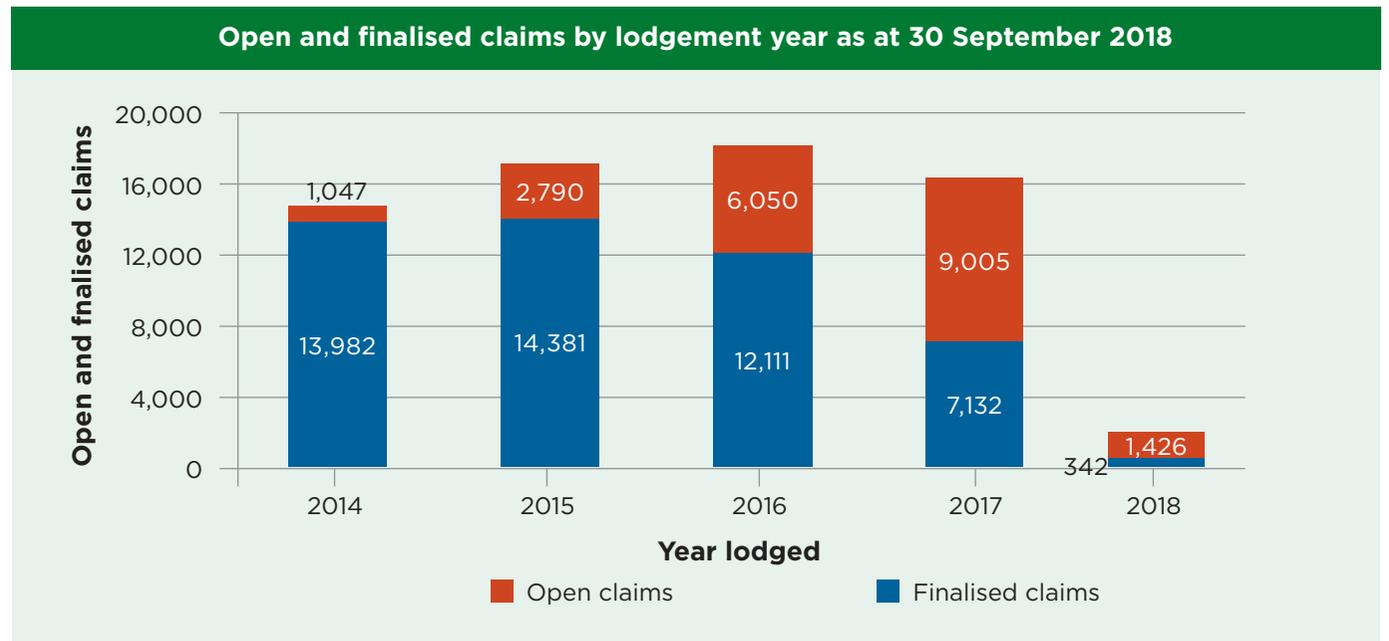
The last policies for the 1999 CTP scheme, which operated under the *Motor Accidents Compensation Act 1999*, were sold on 30 November 2017.

People injured up to that date could submit a claim up to six months after the accident. Late claims may be accepted under certain circumstances. Apart from these, there will be no further claims under the 1999 scheme.

Any disputes that may arise in claims in the months and years ahead may still be referred to the Medical Assessment Service (MAS) and the Claims Assessment and Resolution Service (CARS), operated by SIRA's Dispute Resolution Service (DRS).

This scheme will be in operation for many years, as people's injuries, claims and any disputes which may arise are resolved.

Claims 1 July to 30 September 2018



Key statistics

1999 scheme

Open or active claims

As of 30 September 2018, there were 21,869 open claims under the 1999 scheme. This compares with 24,135 as at 30 June 2018.

The time to settle a claim may be affected by the time it takes for an injury to stabilise, enabling

the parties to assess whether there may be an entitlement to damages for non-economic loss, and to resolve any disputes. It is not uncommon for claims to take three to five years to be resolved.

As people injured up to 30 November 2017 have up to six months after their accident to submit a claim, regular lodgement of claims ended on 31 May 2018. Claims may be lodged later either with the consent of an insurer or by order of a court.

September 2018

\$366 MILLION

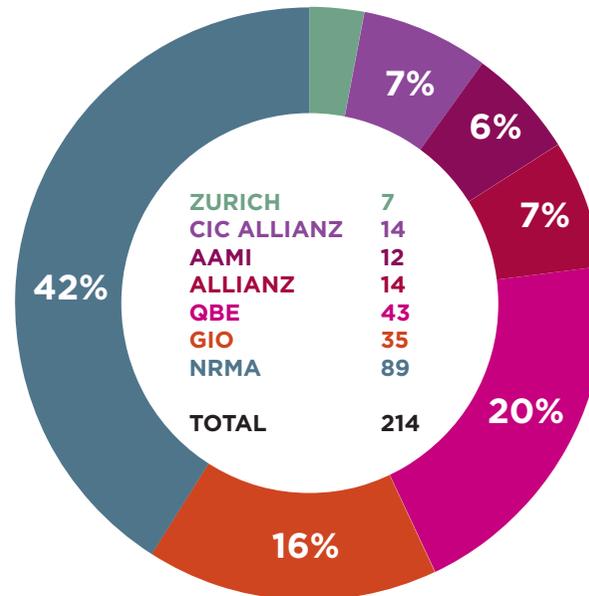
total gross paid
in September quarter

September 2018

\$4.29 BILLION

outstanding
estimate by insurers
as at 30 September 2018

Claims lodged during the quarter by insurer



Injured people with legal representation



Medical Assessment Service (1999 scheme)

SIRA's Dispute Resolution Service delivers the Motor Accidents Medical Assessment Service (MAS), as part of the 1999 scheme, to resolve any medical disputes between injured people and insurers.

Medical disputes are referred to independent expert decision-makers (MAS Medical Assessors) for determination.

Medical assessments, particularly about permanent impairment, are usually referred to MAS about two and a half years after a motor accident, once injuries have stabilised. So we expect to see the volume of disputes continuing at the current rate until about mid-2020, for accidents occurring before the new scheme started on 1 December 2017.

New medical disputes referred to MAS	No.
Permanent impairment	1,005
Treatment and care	179
Further medical assessment	92
Medical assessment review	226
Total for quarter ended 30 Sept 2018	1,502
Total for previous quarter	1,454

Disputes resolved by MAS

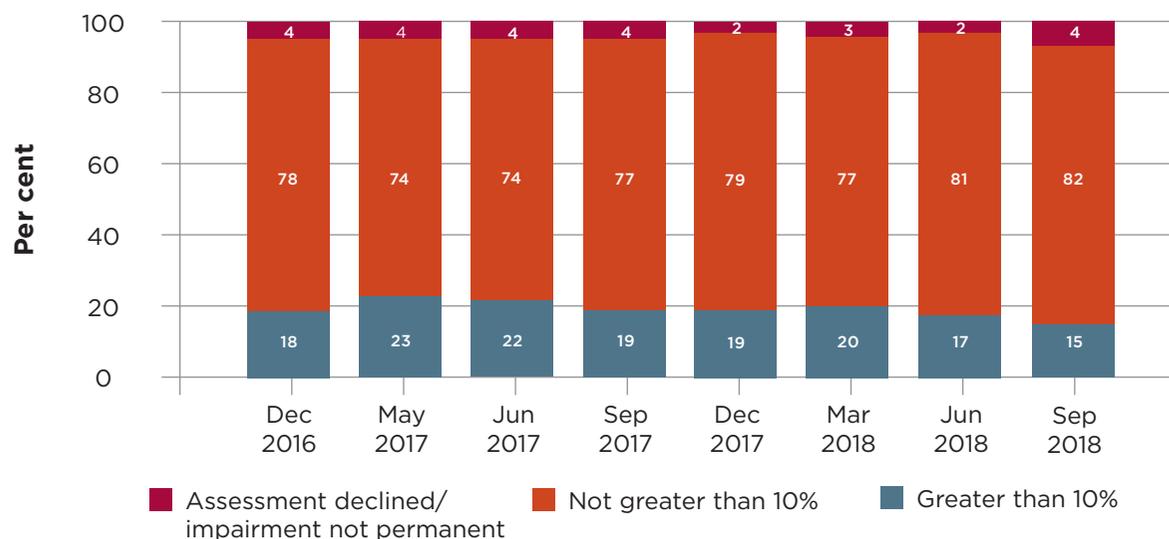
There were 1,286 disputes resolved by MAS this quarter, compared with 1,540 in the previous quarter.

The predominant medical disputes determined by independent MAS Medical Assessors are disputes about permanent impairment, to help parties determine whether an injured person is entitled to claim damages for non-economic loss.

Injured people who have been assessed with permanent impairment of greater than 10 per cent may claim for non-economic loss.

Over 900 permanent impairment disputes were resolved in the September quarter. As the graph below shows, 15 per cent of these were assessed as having a permanent impairment greater than 10 per cent, a lower proportion than prior periods.

MAS permanent impairment disputes – assessed outcomes by type



Claims Assessment and Resolution Service (1999 scheme)

The Dispute Resolution Service also delivers the Motor Accidents Claims Assessment and Resolution Service (CARS), as part of the 1999 scheme, to resolve any claims disputes between people injured in motor accidents and insurers.

Claims disputes are referred to independent expert decision-makers (CARS Claims Assessors), led by the Principal Claims Assessor.

Claims assessments are usually referred to CARS about three years after a motor vehicle accident, once injuries have stabilised and any damages can be assessed and potentially negotiated by the parties. So we expect to see the volume of claims assessments referred to CARS continuing at the current rate until about 2020, three years after the new scheme commenced.

New claims disputes referred to CARS	No.
General claims assessment	609
Further general claims assessment	1
Special assessments of procedural disputes	28
Applications for exemption from claims assessment	388
Total for quarter ended 30 Sept 2018	1,026
Total for previous quarter	1,070

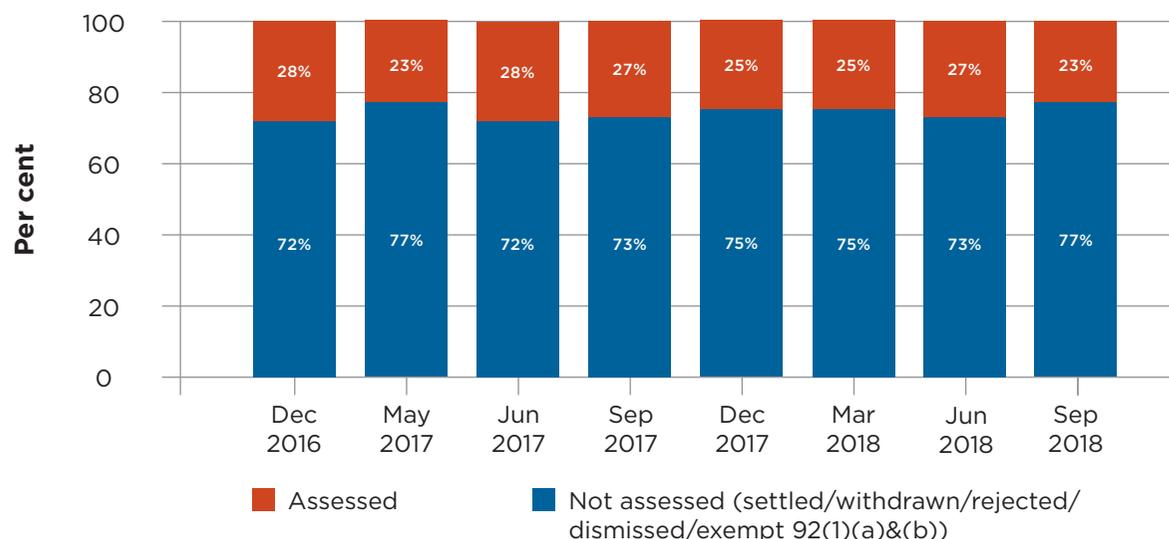
Disputes resolved by CARS

This quarter, 851 disputes were resolved by CARS, compared with 1,091 disputes resolved in the previous quarter.

General assessments of claims are the predominant dispute referred to CARS. These may include assessments of liability, damages and legal costs.

Nearly 500 general assessment disputes were resolved in the September quarter, most without the need for a decision by a CARS Claims Assessor. This is consistent with prior periods.

CARS claims assessments disputes resolved (with and without an assessment)



Administrative law challenges to decisions (1999 scheme)

Decisions made by statutory administrative decision-makers, including Merit Reviewers, Medical Assessors and Claims Assessors, are all potentially subject to administrative law judicial review in the NSW Supreme Court.

During this quarter over 2,100 disputes were resolved by the Medical Assessment Service (MAS) and the Claims Assessment and Resolution Service (CARS).

Administrative challenges this quarter included:

CARS

One challenge to a CARS decision was commenced on behalf of an insurer.

Two challenges to CARS decisions were determined by the courts, one each in favour of an insurer and an injured person.

Four challenges to CARS decisions are currently before the courts.

MAS

Ten challenges to MAS decisions were commenced, eight on behalf of an injured person and two on behalf of an insurer.

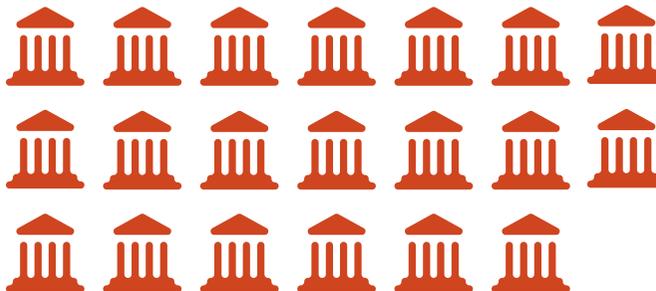
Five challenges to MAS decisions were finalised by the courts in favour of an insurer.

Twenty challenges to MAS decisions are currently before the courts.

4 challenges to CARS Claims Assessors' decisions are currently before the courts.



20 challenges to MAS Medical Assessors' decisions are currently before the courts.



DRS and court decisions are now online

SIRA's Dispute Resolution Service (DRS) is an accessible service that provides prompt, impartial resolution of disputes between injured people and insurers, at no cost to injured people.

To help improve decision making, ensure the process is transparent and help avoid unnecessary disputes, DRS merit review and claims assessment decisions are now being published on the SIRA website, as provided for in the 2017 Act.

Case studies on minor injuries explore a variety of situations and decisions on this aspect of the 2017 scheme.

Court decisions on administrative law challenges to DRS decisions under the 1999 scheme are also published.

For all decisions and case studies, head to the [SIRA website](#).

Feedback, compliments and complaints

We provide a broad range of feedback channels to encourage as many people as possible to engage with us. These diverse perspectives help ensure we, and the insurers we regulate, are delivering for the people of NSW.

Feedback from anyone, by any means

Policy holders, injured people and other members of our NSW community offer complaints, compliments and suggestions by phone, email, post, our website, or through Feedback Assist on both the SIRA website and Green Slip Check.

Compliments

In the September quarter, a total of 177 compliments were received by SIRA.

Of these, 126 praised Green Slip Check for its ease of use. The other 51 covered a range of topics.

Centralised complaint handling

In June 2018, to improve customer experience and increase regulatory insights into all aspects of the CTP scheme, we established a centralised complaints handling function to improve tracking, monitoring and resolution of complaints.

The majority of complaints are straightforward and can be resolved promptly by CTP Assist. To deal with more complex complaints, the new process can involve relevant specialists across SIRA, and outside if necessary.



Complaints

Complaints received this quarter

In the September quarter, SIRA received a total of 311 complaints.

Category	No.	Key themes
Green Slip Check	109	System issues and insurer pricing
Non-complex complaints (generally resolved within two business days)	147	Around 90% are about insurer claims management
Escalated complaints	55	See following

Escalated complaints this quarter

Escalated complaints are about more complex matters, or are escalated at the customer's request. Most are about claims management by insurers.

Claims management	19
Payments, travel, weekly benefits or settlement of claim.	8
Delays in issuing Section 81 notice (where an insurer admits or denies liability)	6
Authorised Health Practitioner	6
Other matters	16

Sixty per cent of claims-related escalated complaints are for the 1999 scheme, and 40 per cent are for the 2017 scheme.

Response times this quarter

We aim to resolve non-complex complaints within two working days, and most escalated complaints within 20 working days.

Our average time to resolve complaints this quarter:

Green Slip Check	1 day
Non-complex complaints	1 day
Escalated complaints	15 days

Future reporting

In the new year, SIRA is going to publish compliments and complaints by insurer.

Investigations

In the September quarter, three matters involving breaches of the Act and Guidelines by an insurer were escalated to the Compliance Enforcement & Investigations (CE&I) team under the new complaints process.

A total of nine matters were finalised during this quarter, which includes matters received by the CE&I team prior to the implementation of the centralised complaints process.

In addition, three referrals for alleged fraud were received during the quarter, which are currently being reviewed by the CE&I team.

Conclusion

Heading to the first anniversary of the 2017 scheme

As we approach the scheme's first anniversary, we continue to focus on improving the experience for injured people and delivering on the legislative objectives for the CTP scheme.

We have a solid set of processes and teams in place to monitor the scheme, continuously improve our support and information for injured people and maintain effective working relationships with insurers and other scheme stakeholders. Additionally, we are focusing on good claims outcomes and experiences for the injured person in the 1999 scheme.

We've commissioned a two year file review of minor injury claims to ensure the criteria for this category is working as intended. We've also commissioned an evaluation of health outcomes for injured people who've claimed under the scheme, to ensure it is aligned with the best possible outcomes.

As the scheme's regulator, it's our responsibility to identify any practices that could compromise the scheme or its ability to deliver for injured people. So as insurers become more familiar with the new scheme, we will keep refining our approach to supervision.

Feedback on how we can improve this report is appreciated and can be sent to: ctppolicy@sira.nsw.gov.au.

Disclaimer

This publication may contain information that relates to the regulation of workers compensation insurance, motor accident compulsory third party (CTP) insurance and home building compensation in NSW. It may include details of some of your obligations under the various schemes that the State Insurance Regulatory Authority (SIRA) administers.

However to ensure you comply with your legal obligations you must refer to the appropriate legislation as currently in force. Up to date legislation can be found at the NSW Legislation website legislation.nsw.gov.au.

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