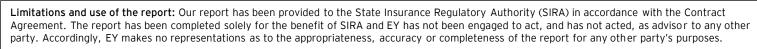
## 2017 CTP Scheme

# Quarterly Actuarial Monitoring

31 December 2021 data

15 February 2022



In completing the report we have relied on information provided by SIRA. The reliance and limitations are set out in the report.



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#### Purpose

- This report is a quarterly actuarial monitoring report for the 2017 CTP Scheme using data as at 31 December 2021
- This report is an actuarial monitoring report. As such, key actuarial measures and indicators are used to monitor scheme experience at an overall level, rather than supervisory measures at an operational level
- This report is used for monitoring purposes and is not an actuarial valuation report. Any key insights or trends observed in this monitoring will be used for further investigations which could result in operational insights and recommendations, or subsequent changes to valuation assumptions and/or models
- This report includes the 2021 Schedule 1E parameters (effective 15 January 2021). The 2021 Schedule 1E parameters reflect a lower expected number of claims in the not at-fault non-minor injury category in comparison to the initial 1 December 2017 Schedule 1E:
  - The minor injury threshold was a new feature introduced with the 2017 Act and was a segmentation not seen in other jurisdictions. As such, there was additional uncertainty on where this threshold would resolve on the injury continuum. The initial 1 December 2017 Schedule 1E parameters estimated a higher number of claims in the not at-fault non-minor injury category as it allowed for a number of lower injury severity claims to be assessed (either by the insurer or following relevant dispute processes) as non-minor. To date, it appears that the minor injury assessment threshold is relatively stable, and most lower injury severity claims are being assessed as minor rather than non-minor. The 2021 Schedule 1E estimate of claims in these categories has been adjusted to allow for this experience. The cost per policy impact of this adjustment has been relatively modest as the initial estimates already allowed for the lower cost of these claims, however it was not known precisely how these claims would be distributed between the minor and non-minor claim categories.



#### Executive summary (1/3) Key observations on claim numbers

Total claim numbers:

~3200 claims/quarter

2800 statutory

benefit claims\*

Claims reported

500 at-fault

claims

1200-1500

not at-fault

minor claims

#### Statutory and non-statutory\* benefit claims Claims for damages

**77%** 

of expected claims for damages have been lodged for the first accident year\*

\*13 months; 1 Dec 2017-31 Dec 2018

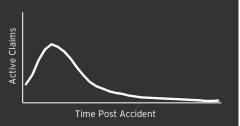
## 20 month

key legislative milestone has now passed for claims arising from accidents occurring between 1 Dec 2017 - 30 April 2020; of these, all not atfault non-minor claims are now eligible to make a claim for damages.

#### **Active claims**

#### Claims are remaining active as expected

At-fault and not at-fault minor injury claim timeline:



At-fault and not at-fault minor injury claims remain active for 3-4 months after accident, before approaching close to zero at 12-18 months post-accident

As expected, not at-fault nonminor claims are remaining active for extended periods.

## \*Remaining 400 claims in guarter from early notifications, interstate claims, compensation to relatives and workers compensation recoveries

900

not at-fault

non-minor

claims

Claims continue to transition between different claim types during claims management process



Due to the recent COVID-19 lockdown in 2021Q3, the ultimate claims over this period are expected to be lower. For 2021Q4, ultimate claims are expected to return to a level similar but slightly lower than pre-COVID levels.



## Executive summary (2/3) Key observations on claim payments



- 44% of the ultimate expected payments for first accident year have been paid. The majority of the remaining 56% relates to lump sum damages payments
- This is not surprising as it reflects the availability of statutory benefits for up to 5 years and the 24 month waiting period for settlement of claims for damages (for claims with whole person impairment less than or equal to 10 percent).

\*Expected payments as at 31 December 2020 valuation

**Average Claim Payments** 

\$16,000 - \$20,000

Per at-fault claim

\$4,500 - \$7,000

Per not at-fault minor claim

Figures have been estimated from claims in early accident quarters; 26 week benefit entitlement period has been reached for these claims.

#### Developing Average Non-Minor Claim Payments



Average claim payments for not at-fault non-minor claims continue to develop upwards as these claims continue to access statutory benefits for up to 5 years.



Expected\* average amount of damages for claims with Whole Person Impairment (WPI)

\$110,000

\$485,000

for WPI ≤ 10%

for WPI > 10%

\*Figures estimated when most damages claims have been settled, which will take several more years



## Executive summary (3/3) Key observations on experience (reported versus ultimate)

- The table below shows the actual number of claims reported for the first accident year (1 Dec 17 to 31 Dec 18), the second accident year (1 Jan 19 to 31 Dec 19), third accident year (1 Jan 20 to 31 Dec 20), and the fourth accident year (1 Jan 21 to 31 Dec 21) compared to their expected ultimate claims across all claim types
- Nearly 100% of expected ultimate statutory benefit claims have been reported for the first accident year
- For non statutory benefit claims, which includes interstate, workers compensation and death claims, around 94% of expected ultimate claims have been reported for the first accident year, as these claims may follow different reporting patterns
- The third accident year was impacted by COVID-19 lockdowns, where traffic volume was observed to be lower than historic levels from March 2020 to June 2020, with some residual afterwards. The impact of this reduced exposure was greater on less severe claims than more severe claims. The ultimates for 2020Q3 and 2020Q4 have reverted back towards pre-COVID periods as exposure has returned to closer to pre-COVID levels
- Similarly, the fourth accident year has been impacted by the most recent COVID-19 lockdown in which the ultimates for 2021Q3 are expected to be lower than historic levels, including the 2020 lockdown. The ultimate claims for 2021Q4 is expected to revert back to a level that is similar to earlier quarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.

		Not at-fault minor claims	Not at-fault non-minor claims	At-fault claims	Non statutory benefit claims	Early notification claims	All statutory benefit claims	All claims	Claims for damages
1st accident	Reported to date	6,157	3,893	2,139	960	542	12,295	13,801	2,821
year (13 months)	Expected ultimate	6,270	3,899	2,147	1,020	537	12,316	13,873	3,649
2nd accident	Reported to date	5,535	3,727	2,095	863	484	11,418	12,778	2,356
year	Expected ultimate	5,615	3,791	2,120	994	461	11,527	12,982	3,542
3rd accident	Reported to date	4,856	3,052	1,847	616	203	9,843	10,670	607
year	Expected ultimate	4,938	3,234	1,893	753	187	10,065	11,004	3,080
4th accident	Reported to date	3,520	2,167	1,171	383	275	7,996	8,662	71
year	Expected ultimate	4,564	2,987	1,764	781	227	9,315	10,323	2,881



#### Scheme development Key legislative milestones

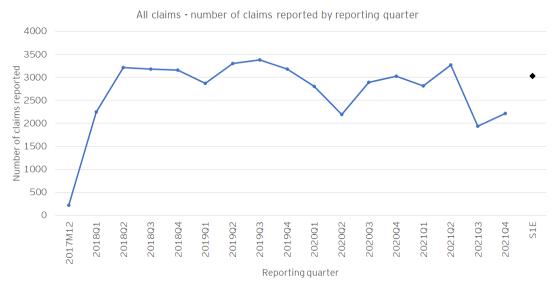
The following chart shows the level of claim experience available for the first accident year of the 2017 Scheme (i.e. accidents occurring between 1 Dec 2017 to 31 Dec 2018) as at 31 Dec 2021. The key points for this accident year are:

- ▶ 100% of accidents have already occurred;
- Nearly 100% of expected statutory benefit claims have been lodged;
- > The 26 week benefit entitlement period for at-fault and not at-fault minor injury claims has ended for all claims;
- Around 23% of expected claims for damages (Part 4 MAIA) are yet to be made damages claims account for approximately 65% of total expected claims costs;
- The key 2017 Scheme milestones which will trigger lodgements of claims for damages have occurred for all claims occurred in the first accident year. However, the lack of settlement experience for these claims continues to create uncertainty in assessing the financial performance of the 2017 Scheme.





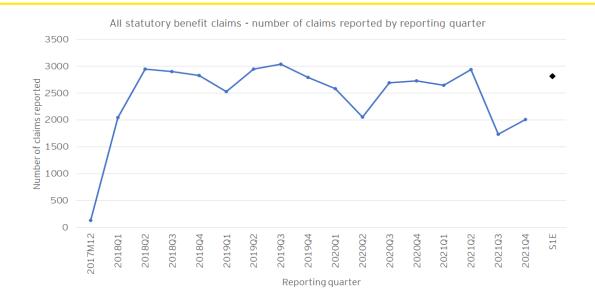
#### All claims - reporting quarter basis



- This chart shows the total number of statutory benefit and non-statutory benefit claims reported by reporting quarter (or claim lodgement quarter)
- Claims by reporting quarter act primarily as an indicator of changes in reporting from older accident periods, operational changes, and calendar time effects
- As expected, claim numbers reported started to stabilise around 2018Q2, six months after the 2017 Scheme commenced
- Reporting quarter 2020Q2 was impacted by the COVID-19 lockdown in NSW, which began in March 2020 and continued until June 2020. As a result, reported numbers sit lower at 2,200 for 2020Q2
- 2020Q3 to 2021Q1 are higher at around 3,000 claims, however this is still lower in comparison to 2019 as these reporting quarters were still impacted by low accident volumes during the COVID-19 lockdown. Reported claim numbers in 2021Q2 returned to pre-COVID-19 lockdown levels
- Reporting quarter 2021Q3 was impacted by the most recent COVID-19 lockdown due to the spread of the Delta strain. This lockdown was longer and more severe than the previous lockdown in 2020Q2. As such, numbers for 2021Q3 sit lower at 1,900
- In 2021Q4, reported claim numbers have increased slightly at 2,200 but this still sits well below pre-COVID lockdown levels
- Excluding 2020Q2, 2021Q3 and 2021Q4, on average around 3,200 claims are reported per quarter.



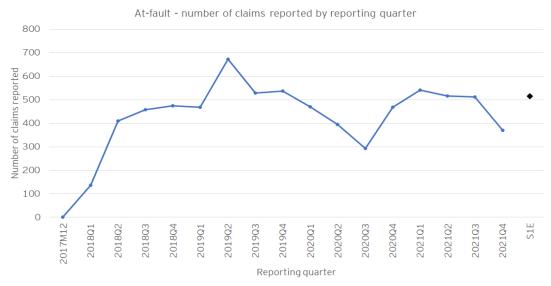
#### Statutory benefit claims - reporting quarter basis



- This chart shows the total number of statutory benefit claims reported by reporting quarter
- The number of statutory benefit claims reported shows a similar trend to all claims reported in the previous slide
- Reporting quarter 2020Q2 was impacted by the COVID-19 lockdown in NSW, which began in March and continued until June. As a result, reported numbers in 2020Q2 sit lower at 2,000 claims reported in the quarter. 2020Q3 to 2021Q1 are higher at 2,700 claims reported, however this is still lower in comparison to 2019 as these reporting quarters were still impacted by low accident volumes during the COVID-19 lockdown
- Reporting quarters 2021Q2 indicated a return towards pre-COVID-19 lockdown levels
- However, due to the most recent COVID-19 lockdown which was longer and more severe than the previous lockdown in 2020Q2, reported numbers for the 2021Q3 and 2021Q4 guarter sit lower at 1,700 and 2,000 respectively
- On average, around 2,800 statutory benefit claims are reported per quarter, excluding 2020Q2, 2021Q3 and 2021Q4.



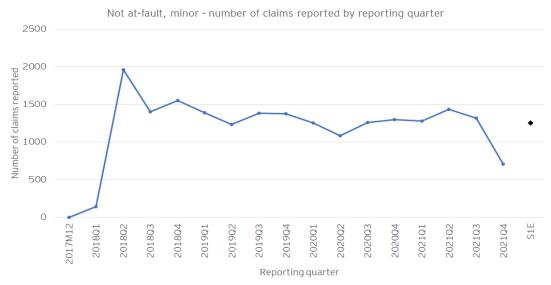
#### At-fault injury claims - reporting quarter basis



- This chart shows the total number of at-fault and mostly at-fault claims reported by reporting quarter. It should be noted there is a delay of up to around three months between a claim being reported to an insurer, and the claim being assessed as 'at-fault'. This chart illustrates the quarter a claim was determined as 'at-fault', rather than reported to the insurer
- Reporting quarter 2020Q2 sits lower at 400 due to the COVID-19 lockdown in NSW. This continues to be even lower in reporting quarter 2020Q3 at 300, which could reflect lower volume of at-fault claims during COVID and/or an operational delay in determining fault status. Since then, claim numbers have been trending up with reporting quarter 2021Q1 sitting at 540 which is above pre-COVID lockdown levels. This is due to an insurer catching up with fault status determination processes for claims that occurred in 2020
- At-fault claims have returned to pre-COVID levels for reporting quarters 2021Q1 and 2021Q2
- Despite experiencing the restrictions under the most recent lockdown, at-fault claims for 2021Q3 remained at a level similar to previous quarters. In the first lockdown, the drop in at-fault claims occurred in the subsequent reporting quarter 2020Q3. Similarly for the most recent lockdown, there has been a drop in at-fault claims for reporting quarter 2021Q4. This behaviour may be due to the nature of fault assessment processes
- After allowing for the one-off increase in the second quarter of 2019 and excluding reporting quarters 2020Q3 and 2021Q4, on average, around 500 at-fault claims are currently being reported per quarter.



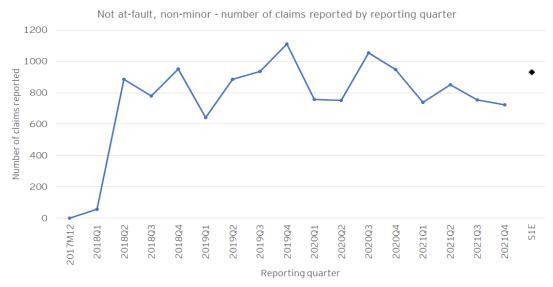
#### Not at-fault minor injury claims - reporting quarter basis



- This chart shows the total number of not at-fault minor injury claims reported by reporting quarter. In addition, any finalised not at-fault claims with an unknown severity status are assumed to be not at-fault minor, and are also included in the chart above. These finalised unknown severity cohort accounts for around 50-100 claims per quarter
- It should be noted that there is a delay of up to around three months between a claim being reported to an insurer, and the claim being assessed as 'minor'. This chart illustrates the quarter a claim was determined as not at-fault minor, rather than reported to the insurer
- Not at-fault minor claim numbers include claims assessed as 'minor', and fault status determined as 'not at-fault'. In addition, minor claims with fault status 'yet to be determined' are included in this chart, as a large proportion have historically been determined as not at-fault claims
- In earlier reporting quarters, a relatively low volume of claims reported between December 2017 and March 2018 quarter were classified as not at-fault minor. This is due to the scheme taking six months to stabilise after commencement, as well as insurers developing processes to complete the minor injury assessment
- In 2020Q2, we observe a slight drop in claims reported to 1,100 claims due to the first COVID-19 lockdown in NSW. Whilst subsequent quarters have appeared to return to pre-COVID-19 levels, a significant reduction in claims reported is observed in 2021Q4, which sits at 700 claims. This is likely a delayed effect of the second COVID-19 lockdown in 2021Q3 which was longer and more severe than the lockdown in 2020Q2
- On average, excluding reporting quarters 2020Q2 and 2021Q4, there appears to be between 1,200 to 1,500 not at-fault minor injury claims reported per quarter



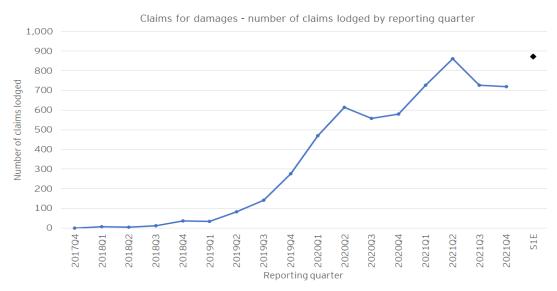
#### Not at-fault non-minor claims - reporting quarter basis



- This chart shows the total number of not at-fault, non-minor claims reported by reporting quarter. It should be noted that there is a delay of up to around three months between a claim being reported to an insurer, and the claim being classified as 'non-minor'. This chart illustrates the quarter a claim was determined as not at-fault non-minor, rather than reported to the insurer
- Lower reported numbers are observed for 2019Q1, 2020Q1 and 2021Q1, which appears to be a seasonal effect
- Reporting quarter 2020Q2 sits slightly lower than 2019Q2, due to the first COVID-19 lockdown in NSW. Similar claims reported numbers are observed for both 2021Q3 and 2021Q4, reflecting the effect of the second COVID-19 lockdown, which was longer and more severe than the previous lockdown
- Even though claim numbers are volatile, the decreases in claim numbers for this claim cohort over the COVID-19 lockdown periods do not appear as large as those observed for at-fault and not at-fault minor claims
- The volatility present between reporting quarters is due to combinations of insurer processes for minor injury assessment and/or volatility in the rate at which not at-fault minor injury claims transition into not at-fault non-minor claims following the completion of insurer internal review and dispute processes combined with claims reporting patterns



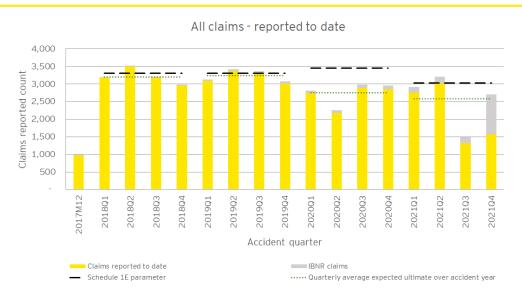
#### Claims for damages - reporting quarter basis



- This chart shows the total number of claims for damages made by reporting quarter. It includes non-minor claims with whole person impairment (WPI) less than or equal to 10 percent, WPI greater than 10 percent, as well as claims with an undetermined WPI
- The number of claims for damages continued to trend up till 2021Q2. However, the number of claims lodged for damages in reporting quarters 2021Q3 and 2021Q4 sit lower at 728 and 721 claims respectively. This may be attributed to the most recent COVID-19 lockdown
- Overall, however, the number of claims for damages shows an upward trend, and the number of claims reported should continue to increase before stabilising, as more claims continue to pass the 20 month key legislative milestone
- The timing of claim lodgements appears to be volatile due to interaction between different accident years, all at different development stages
- Once the number of claims for damages stabilises, approximately 800 to 1,000 claims are expected to be reported per quarter
- Currently, the assumed proportion of non-minor claims that will lodge for damages remain unchanged from the last valuation. This assumption may be revised in the December 2021 valuation and will be documented in the December 2021 valuation pack and March 2022 quarterly actuarial pack.



#### All claims - accident quarter basis

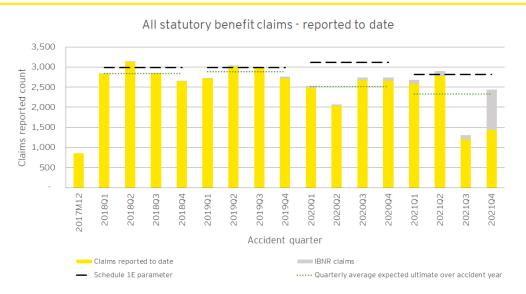


1st accident	Reported to	13,801
year (13	date	15,001
months)	Expected	13,873
1110111113)	ultimate	13,013
	Reported to	12,778
2nd accident	date	12,770
year	Expected	12,982
	ultimate	12,902
	Reported to	10,670
3rd accident	date	10,070
year	Expected	11,004
	ultimate	11,004
	Reported to	8,662
4th accident	date	0,002
year	Expected	10 222
	ultimate	10,323

- This chart shows the total number of claims reported to date by accident quarter. The 2017 Scheme experience is compared to the expected level under Schedule 1E
- Earlier accident periods are more developed, and more recent accident quarters still have a number of incurred but not yet reported (IBNR) claims
- The table on the top right shows the actual number of claims reported for the first accident year (1 Dec 17 to 31 Dec 18), the second accident year (1 Jan 19 to 31 Dec 19), the third accident year (1 Jan 20 to 31 Dec 20), and the fourth accident year (1 Jan 21 to 31 Dec 21) compared to their expected ultimate claims. For the first accident year, approximately 99% of expected ultimate claims have been reported
- The observed drop in projected ultimate claims in 2020Q1 and 2020Q2 is due to a reduction in exposure during the COVID-19 lockdown in NSW. 2020Q2 was most heavily impacted, as traffic reduced for the months of April, May and June 2020. This has led to lower ultimate claims projected for 2020Q2
- The significant reduction in 2021Q3 ultimate claims is attributed to reduced exposure during the most recent lockdown, which was more severe compared to the 2020 lockdown
- The ultimate claims for 2021Q4 is expected to revert back to a level that is similar but slightly lower than earlier accident quarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.



#### All statutory benefit claims - accident quarter basis



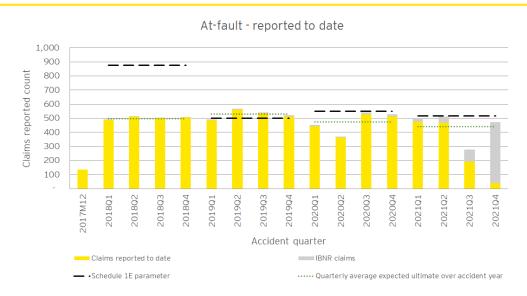
1st accident	Reported to	12,295
year (13	date	12,293
months)	Expected	12,316
months)	ultimate	12,510
	Reported to	11,418
2nd accident	date	11,410
year	Expected	11,527
	ultimate	11,521
	Reported to	9,843
3rd accident	date	9,043
year	Expected	10,065
	ultimate	10,005
	Reported to	7,996
4th accident	date	7,990
year	Expected	9,315
	ultimate	9,313

- This chart shows the total number of statutory benefit claims (i.e. all claims, excluding workers compensation, interstate and compensation to relatives, and early notifications) reported to date by accident quarter
- ▶ The 2017 Scheme experience is compared to the expected level under Schedule 1E\*
- Earlier accident periods are more developed, and more recent accident quarters still have a number of IBNR claims
- For the first and second accident years, over 99% of statutory benefit claims ultimately expected have been reported
- The observed drop in projected ultimate claims in 2020Q1 and 2020Q2 is due to a reduction in exposure during the COVID-19 lockdown in NSW. 2020Q2 was more heavily impacted, as traffic has reduced by up to 30%, 20% and 10% for the months of April, May and June 2020 respectively.
- The significant reduction in 2021Q3 ultimate claims is similarly attributed to reduced exposure during the most recent lockdown, which was more severe compared to the 2020 lockdown.
- The ultimate claims for 2021Q4 is expected to revert back to a level that is similar but slightly lower than earlier accident quarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.

<sup>\*</sup>Schedule 1E parameter has been modified to remove non-statutory benefit claims and early notifications to enable like-for-like comparison with the reported to date



#### At-fault claims - accident quarter basis

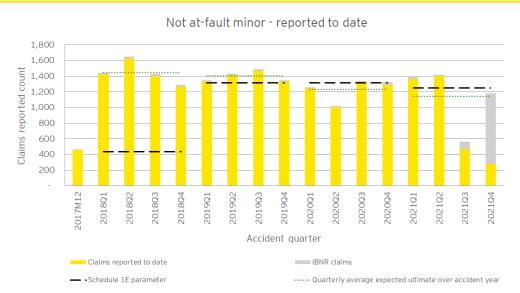


1st accident	Reported to	2,139
year (13	date	2,157
months)	Expected	2,147
1110111113)	ultimate	2,141
	Reported to	2,095
2nd accident	date	2,073
year	Expected	2,120
	ultimate	2,120
	Reported to	1,847
3rd accident	date	1,047
year	Expected	1,893
	ultimate	1,093
	Reported to	1 171
4th accident	date	1,171
year	Expected	1,764
	ultimate	1,764

- This chart shows the total number of at-fault and mostly at-fault claims reported to date by accident quarter
- At-fault claim numbers include all claims determined as 'at-fault', regardless of injury severity
- The 2017 Scheme experience is compared to the expected level under Schedule 1E
- Earlier accident periods are more developed, and more recent quarters still have a number of IBNR claims
- The fault status of the claim may be undetermined for up to 3 months post the claim received date, and therefore a material number of claims incurred in the last two quarters are yet to receive a fault determination
- on average across all quarters in the latest accident year excluding 2021Q3, around 500 at-fault claims are expected to be incurred per quarter
- For the first and second accident years, nearly 100% of ultimate expected at-fault claims have been reported
- The observed drop in expected ultimate claims in 2020Q1 and 2020Q2 was due to a reduction in vehicle traffic during the COVID-19 lockdown in NSW
- The significant reduction in 2021Q3 ultimate claims is attributed to reduced exposure during the most recent lockdown, which was more severe compared to the 2020 lockdown.
- The ultimate claims for 2021Q4 is expected to revert back to a level that is similar to earlier accident quarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.



#### Not at-fault minor claims - accident quarter basis



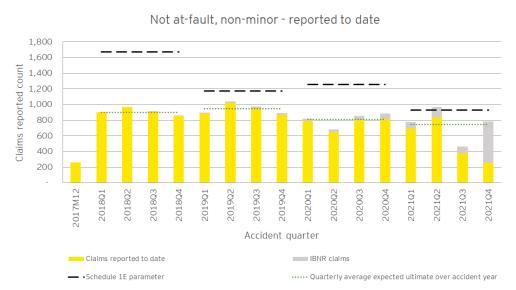
1st accident year (13 months)	Reported to date	6,157
	Expected ultimate	6,270
2nd accident	Reported to date	5,535
year	Expected ultimate	5,615
3rd accident year	Reported to date	4,856
	Expected ultimate	4,938
4th accident year	Reported to date	3,520
	Expected ultimate	4,564

- This chart shows the total number of not-at-fault minor claims reported to date by accident quarter
- Not at-fault minor claim numbers include claims assessed as 'minor', and fault status determined as 'not at-fault'. In addition, minor claims with fault status 'yet to be determined' are included in this chart, as a large proportion have historically been determined as not at-fault claims. Any finalised not at-fault claims with an unknown severity status are assumed to be not at-fault minor, and also included in the chart above
- Earlier accident periods are more developed, and more recent accident quarters still have a number of IBNR claims, particularly the most recent accident quarter. For the first and second accident years, we expect some current not at-fault minor claims to transition to not-at-fault non-minor following the completion of dispute processes
- The minor injury assessment can take up to 3 months following claim lodgement to be completed, therefore a material number of claims incurred in the last quarter are yet to receive a minor injury assessment
- The observed drop in expected ultimate claims in 2020Q1 and 2020Q2 is due to a reduction in exposure; 2020Q2 was more heavily impacted, as a result the ultimate projected for these accident quarters are lower than prior accident periods
- The significant reduction in 2021Q3 ultimate claims is similarly attributed to reduced exposure during the most recent lockdown, which was more severe compared to the previous lockdown. The ultimate claims for 2021Q4 is expected to revert back to a level that is similar but slightly lower than earlier accident guarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.



<sup>\*</sup>Schedule 1E parameter has been modified to remove early notification claims to allow for like-for-like comparison with reported to date

#### Not at-fault non-minor claims - accident quarter basis

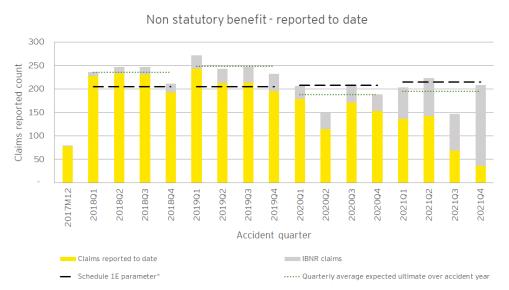


Reported to	3,893
date	3,073
Expected	3,899
ultimate	3,099
Reported to	3,727
date	3,121
Expected	2 701
ultimate	3,791
Reported to	3,052
date	3,032
Expected	3,234
ultimate	3,234
Reported to	2,167
date	2,107
Expected	2 007
ultimate	2,987
	date Expected ultimate Reported to date

- This chart shows the total number of not at-fault non-minor claims reported to date by accident quarter
- Not at-fault non-minor claim numbers include claims assessed as 'non-minor', and fault status determined as 'not at-fault'. In addition, claims assessed as non-minor with fault status 'yet to be determined' are included in this chart as a large proportion have historically been assessed as not at-fault claims
- All accident periods (to a much lesser extent accident year 1) are expected to develop upwards from current levels. This is due to the lodgement of claims which are currently incurred but not reported, and for not at-fault minor injury claims which are 'overturned' to not at-fault non-minor claims following the completion of insurer internal review and external dispute processes
- The minor injury assessment can take up to 3 months following claim lodgement to be completed, therefore a material number of claims incurred in the last two quarters are still awaiting a minor injury assessment. The latest expected ultimate numbers allow for a reduction in the minor injury overturn rate assumption following a lower than expected emergence of overturns
- The observed drop in expected ultimate claims in 2020Q2 is due to reduction in exposure as a result of the NSW COVID-19 lockdown
- The significant reduction in 2021Q3 ultimate claims is attributed to reduced exposure during the most recent lockdown, which was more severe compared to the previous lockdown.
- The ultimate claims for 2021Q4 is expected to revert back to a level that is similar to earlier accident quarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.



#### Non statutory benefit claims - accident quarter basis

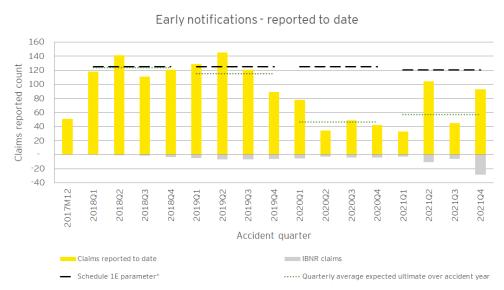


Reported to	060
date	960
Expected	
	1,020
· ·	863
date	
Expected	994
ultimate	)
Reported to	616
date	010
Expected	753
ultimate	153
Reported to	202
date	383
Expected	701
ultimate	781
	date Expected ultimate Reported to date Expected

- This chart shows the total number of non-statutory benefit claims reported to date by accident quarter
- Non-statutory benefit claims include workers compensation, interstate and compensation to relatives claims (excluding early notifications)
- All accident years still have a number of IBNR claims reflected in their expected ultimate
- On average across accident quarters prior to 2020, approximately 240 non statutory benefit claims are expected to be incurred. This is lower for the accident years 2020 and 2021, where approximately 190 non statutory benefit claims are expected to incur per accident quarter due to the lockdowns and prolonged State border closures which leads to fewer interstate claims
- At the December 2020 valuation, a more comprehensive approach was applied for all non statutory benefit models, which has resulted in higher ultimate frequency for interstate claims
- ▶ The significant reduction in 2021Q3 ultimate claims is attributed to reduced exposure during the most recent lockdown
- The ultimate number of non statutory benefit claims for 2021Q3 is comparable with accident quarter 2020Q2. Despite the reduction in expected ultimate interstate claims due to the extended lockdown, it is offset by the higher expected ultimate workers compensation claims compared to 2020Q2.
- The ultimate claims for 2021Q4 is expected to revert back to a level that is similar to earlier accident quarters in 2021 due to increased exposure resulting from the end of the recent COVID-19 lockdown.



#### Early notification claims - accident quarter basis

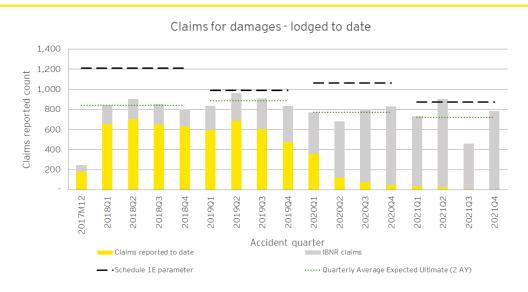


1st accident	Reported to	542
	date	542
year (13 months)	Expected	537
months)	ultimate	531
	Reported to	484
2nd accident	date	404
year	Expected	461
	ultimate	461
	Reported to	203
3rd accident	date	203
year	Expected	187
	ultimate	107
	Reported to	275
4th accident	date	215
year	Expected	227
	ultimate	221

- This chart shows the expected total number of early notification claims by accident quarter that are not expected to progress to become a statutory benefit claim
- An implicit allowance is made in Schedule 1E for the frequency of early notification claims. In this chart, an explicit allowance has been determined for the purpose of comparing the actual experience to the expected level under Schedule 1E
- On average across all accident quarters prior to 2020, approximately 110 early notification claims are expected to be ultimately incurred per accident quarter.
- The reduction in early notification claims for accident quarters 2020Q2 2021Q1 and 2021Q3 reflects lower exposure due to COVID-19 restrictions in 2020 and 2021
- At the December 2020 valuation, the early notification model was updated to allow for the rate at which claims can transition out of the early notification model once they progress to become a statutory benefit claim. This change results in a negative development for the more recent accident periods.



#### Lodged claims for damages - accident quarter basis

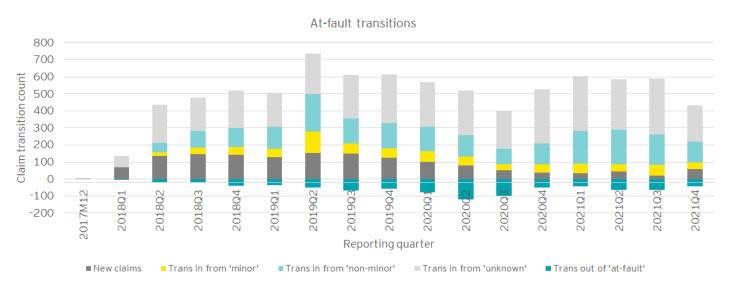


1st accident	Reported to date	2,821
months)	Expected ultimate	3,649
2nd accident	Reported to date	2,356
year	Expected ultimate	3,542
3rd accident	Reported to date	607
year	Expected ultimate	3,080
4th accident	Reported to date	71
year	Expected ultimate	2,881

- This chart shows the total number of claims for damages made to date by accident quarter, along with the expected incurred but not reported (IBNR) claims by accident quarter. The chart includes both non-minor claims with whole person impairment (WPI) less than or equal to 10 percent, WPI greater than 10 percent as well as claims with undetermined WPI
- The 2017 Scheme experience is compared to the expected level under Schedule 1E
- For the first accident year, 77% of expected claims for damages have been lodged. Only claims which occurred prior to 31 April 2020 have passed the 20 month key legislative milestone, in which non-minor claims with WPI less than or equal to 10 percent are eligible to lodge a claim for damages
- On average, excluding accident quarters affected by COVID-19, approximately 800-1,000 claims are expected to be incurred per accident quarter
- The table in the top right shows the actual number of claims reported compared to their expected ultimate claims for each accident year. For the first accident year, 23% of expected ultimate claims are yet to be reported
- Ultimate claims for accident quarter 2021Q3 has experienced a large reduction due to decreased exposure from the COVID-19 lockdown. Ultimate claims for accident quarter 2021Q4 is expected to return to levels similar to accident quarters before the recent COVID lockdown.
- Currently, the assumed proportion of non-minor claims that will lodge for damages remain unchanged from the last valuation. This assumption may be revised in the December 2021 valuation and will be documented in the December 2021 valuation pack and March 2022 quarterly actuarial pack.



#### At-fault claims - transitions by reporting quarter



- The chart above shows the number of claims that transition in and out of the at-fault claims model by reporting quarter. Either claims are newly reported ('New claims'), transition in from an alternative claim type ('Trans in') or transition out to an alternative claim type ('Trans out')
- When a claim is initially reported, for the purposes of our modelling, it is categorised as a 'not at-fault, unknown severity' claim, until the fault status and minor injury assessment is determined by the insurer. This is due to the vast majority of claims being eventually determined as not at-fault. Similarly, any minor or non-minor claims with undetermined fault status are initially categorised as not at-fault, and assumptions are made as to how many will eventually transition to an at-fault status
- Around 130 new claims are assigned to 'at-fault' within the first quarter of the claim being reported, noting the new claims for 2020Q2 to 2021Q4 reporting quarters are lower than previously observed, which could be a combined effect of operational delay in determining fault status by the insurers, as well as reduced claims volume due to the two main COVID-19 lockdown periods in 2020 and 2021
- This observed reduction of new claims is offset by higher transition in from the not at-fault models in 2020Q4 to 2021Q4, especially the transition from not at-fault, non-minor model, noting that the not at-fault models include claims with undetermined fault status, reflecting the process delay in fault determination
- There are also some claims (< 100 per quarter) which transition out of at-fault into other claim types.



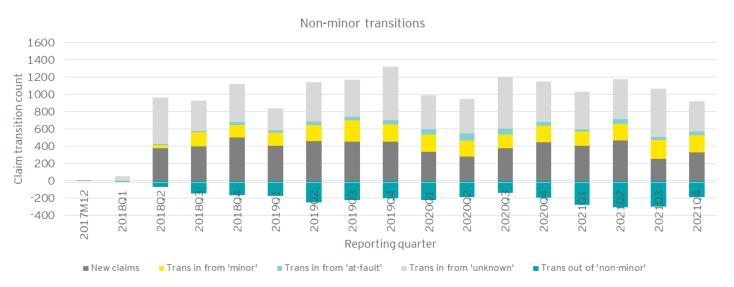
#### Not at-fault minor injury claims - transitions by reporting quarter



- The chart above illustrates the number of claims that transition in and out of the not at-fault minor injury claim category by reporting quarter
- Around 40% of the claims transitioning into not at-fault minor claims each quarter are due to new claims reported within the quarter. This has been sitting lower as a result of the 2020Q2 and 2021Q3 COVID-19 lockdowns, partially offset by the increase in transitions from 'unknown'
- However, for reporting quarter 2021Q4, the transitions from 'unknown' are significantly lower than experienced in previous accident quarters
- The majority of the remaining claims transitioning into not at-fault minor injury claims come from the not at-fault unknown severity claim type. This is expected, as these claims typically do not have a minor injury assessment completed until up to around three months after being reported
- There are also on average 200 claims per quarter transitioning out of the not at-fault minor injury claim type into other claim types.



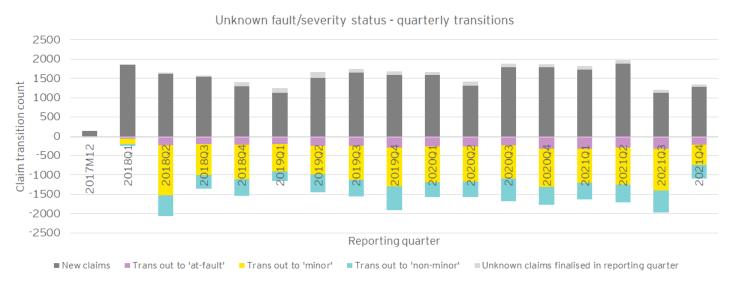
#### Not at-fault non-minor claims - transitions by reporting quarter



- Around 40% of the claims transitioning into the not at-fault non-minor category each quarter are due to new claims reported within the quarter
- The majority of the remaining claims transitioning into the not at-fault non-minor injury category come from the not at-fault unknown severity claim type. This is expected, as these claims typically do not have a minor injury assessment completed until up to around three months after being reported
- There are around 180 claims per quarter transitioning into the not at-fault non-minor injury category from the not at-fault minor injury category
- There is on average around 200 claims per quarter transitioning out of the not at-fault non-minor injury category into alternative categories. Initially, non-minor claims with an undetermined fault status are assumed to be not at-fault, so the majority of the transitions out of this category represent the claims which are later determined as 'at-fault'



#### Claims with an unknown fault/severity status - transitions by reporting quarter



- When a claim is initially reported, the fault status and the severity of the claim may be undetermined for up to around 3 months after the claim received date
- This cohort of claims is modelled separately, and assumptions are made about whether these claims eventuate as an at-fault (any severity), not at-fault minor, or not at-fault non-minor claim
- The chart above illustrates the transitions in and out of the unknown claim category. The number of claims finalising without a severity determination are illustrated by the light grey bar. The average claim size of these finalised claims indicates they are likely to be minor claims
- Around 1,500 new claims with an unknown fault or severity determination are reported per quarter
- In reporting quarters 2021Q3 and 2021Q4, reduced volumes were observed for new claims with the 'unknown' category, reflecting the impact of the recent COVID-19 lockdown.
- The number of claims transitioning out of the 'unknown' category have also reduced for reporting quarter 2021Q4, primarily driven by the reduced number of unknown claims transitioning out to the 'minor' category.



#### Statutory benefit claims reported

			Dece	mber 2020	- December	2021
Fault Status	Severity Claim Type	Claim Type	Actual	Expected	Actual -	Actual -
r duit Status		Actual	Lxpected	Expected (#)	Expected (%)	
At-Fault	All	Stat Ben	769	519	250	48%
	Minor	Stat Ben	1,061	1,148	-87	-8%
Not At-Fault	Non-minor	Stat Ben	903	1,169	-266	-23%
	Unknown	Stat Ben	-1,403	-1,570	167	-11%
	Total			1,266	64	5%

	Dece	mber 2020 ·	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
Accident Quarter	Actual	Lxpected	Expected (#)	Expected (%)
2019Q3 and Earlier	205	116	89	76%
2019Q4	40	30	10	33%
2020Q1	35	33	2	6%
2020Q2	43	40	3	8%
2020Q3	101	107	-6	-6%
2020Q4	906	940	-34	-4%
Total	1,330	1,266	64	5%

- A full statutory benefits valuation was carried out for 31 December 2020, and expected payments and claim numbers projected for future quarters for accidents to 31 December 2021
- In the twelve months leading up to 31 December 2021, reported claims have been higher than expected by around 5%, or 64 claims
- A higher than expected number of at-fault statutory benefit claims was offset by a lower than expected number of not at-fault nonminor claims
- This observed experience reflects the higher transition from non-minor model into at-fault model compared to history as noted on slide 22
- On an accident quarter basis, there are higher than expected claims reported in the accident quarters 2020Q2 and prior, partially offset by lower than expected claims reported in reporting quarters 2020Q3 and 2020Q4
- Note the reporting patterns are still developing in the 2017 Scheme, driving higher volatility in the actual versus expected from older accident periods.



#### Statutory benefit claim payments

			December 2020 - December 2021			
Fault Status	Severity	Claim Type	Actual	Expected	Actual -	Actual -
i duit Status	Severity	Стапті туре	Actual	Expected	Expected (#)	Expected (%)
At-Fault	All	Stat Ben	\$22.8m	\$10.9m	\$11.9m	109%
	Minor	Stat Ben	\$13.6m	\$9.9m	\$3.6m	36%
Not At-Fault	Non-minor	Stat Ben	\$158.1m	\$233.2m	-\$75.1m	-32%
	Unknown	Stat Ben	-\$4.1m	\$1.8m	-\$5.9m	-327%
Total		\$190.5m	\$255.9m	-\$65.4m	-26%	

	Dece	mber 2020 ·	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
Accident Quarter	Actual	Expected	Expected (#)	Expected (%)
2019Q3 and Earlier	\$72.1m	\$112.5m	-\$40.5m	-36%
2019Q4	\$12.9m	\$17.0m	-\$4.2m	-25%
2020Q1	\$15.9m	\$20.5m	-\$4.6m	-22%
2020Q2	\$15.6m	\$21.6m	-\$6.0m	-28%
2020Q3	\$29.8m	\$35.4m	-\$5.6m	-16%
2020Q4	\$44.3m	\$48.8m	-\$4.5m	-9%
Total	\$190.5m	\$255.9m	-\$65.4m	-26%

- Statutory benefit payments over the last twelve months to 31 December 2021 have been \$65.4m (or 26%) lower than expected
- There are a lower amount of payments for not at-fault non-minor and unknown claims. This is partially offset by the higher payments for at-fault claims and not at-fault minor claims
- On an accident quarter basis, the experience is consistent across most accident periods
- The lower than expected experience could be due to operational interruption as a result of COVID-19, which caused delays to scheduled treatment & care for claims incurred up to December 2020
- Recent developments of COVID-19 causing ongoing lockdowns continues to be a key source of uncertainty, especially the impact on public sentiment on seeking certain treatments.



Number of active claims receiving loss of income payments

			Dece	mber 2020	- December	2021
Fault Status	Severity	Claim Type	Actual	Expected	Actual -	Actual -
r duit Status	Severity	Claim Type	Actual	LAPCCICA	Expected (#)	Expected (%)
At-Fault	All	Stat Ben	846	259	587	227%
	Minor	Stat Ben	1,329	970	359	37%
Not At-Fault	Non-minor	Stat Ben	6,920	7,234	-314	-4%
	Unknown	Stat Ben	155	337	-182	-54%
Total			9,250	8,800	450	5%

	Dece	mber 2020 ·	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
Accident Quarter	Actual	Expected	Expected (#)	Expected (%)
2019Q3 and Earlier	4,273	3,321	952	29%
2019Q4	631	581	50	9%
2020Q1	712	723	-11	-2%
2020Q2	623	802	-179	-22%
2020Q3	1,202	1,325	-123	-9%
2020Q4	1,809	2,049	-240	-12%
Total	9,250	8,800	450	5%

- The number of 'active claims' i.e. those receiving a loss of income payment within the last three months of the reporting quarter are shown in this slide
- In the twelve months leading up to 31
  December 2021, there were 9,250 active claims which received loss of income payments. This was 450 (or 5%) more claims than expected
- This is primarily driven by the increase in atfault claims receiving loss of income payments, which was 587 (or 227%) more than expected
- The higher than expected number of at-fault active claims may be attributed to the potential data clean-up of one insurer in 2021Q2 for at-fault and not at-fault minor claims in all accident periods
- On an accident quarter basis, the higher than expected active claims for the period is primarily driven by accident quarters 2019Q3 and prior
- The level of claim activity is still developing, driving higher volatility in the actual versus expected experience from older accident periods.



#### Number of active claims receiving treatment and care payments

			Dece	mber 2020	- December	2021
Fault Status	Severity	Claim Type	Actual	Expected	Actual -	Actual -
		7,00			Expected (#)	Expected (%)
At-Fault	All	Stat Ben	2,112	1,323	789	60%
	Minor	Stat Ben	6,036	5,057	979	19%
Not At-Fault	Non-minor	Stat Ben	18,313	20,425	-2,112	-10%
	Unknown	Stat Ben	637	1,092	-455	-42%
Total		27,098	27,897	-799	-3%	

	Dece	mber 2020 ·	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
Accident Quarter	Actual	Expected	Expected (#)	Expected (%)
2019Q3 and Earlier	10,204	10,903	-699	-6%
2019Q4	1,970	2,031	-61	-3%
2020Q1	2,228	2,386	-158	-7%
2020Q2	2,451	2,670	-219	-8%
2020Q3	4,383	4,621	-238	-5%
2020Q4	5,862	5,285	577	11%
Total	27,098	27,897	-799	-3%

- The number of 'active claims' i.e. those receiving a treatment & care payment within the last three months of the reporting quarter are shown on this slide
- In the twelve months leading up to 31
  December 2021, there were 27,098 active claims which received treatment & care payments, which was 799 (or 3%) less claims than expected
- Around 2,112 (or 10%) fewer not at-fault non-minor claims received a treatment and/or care payment compared to expected
- On an accident quarter basis, the lower than expected number of claims receiving treatment and/or care is driven by most accident quarters with the exception of the December 2020 quarter
- The lower than expected experience excluding 2020Q4 could be due to operational interruption due to COVID-19, as access to certain treatment & care procedures may have reduced or been delayed
- The level of claim activity is still developing, driving higher volatility in the actual versus expected experience.



#### Non-statutory benefit claims reported

		Dec	ember 2020	- December	2021
Head of damage	Claim Type	Actual	Expected	Actual -	Actual -
				Expected (#)	Expected (%)
Interstate	Non Stat Ben	8	2 212	-130	-61%
Death	Non Stat Ben	4	7 53	-6	-11%
Workers Compensation	Non Stat Ben	16	3 107	56	53%
Early notification	Non Stat Ben	-4	5 4	-50	-1258%
Total		24	376	-130	-35%

	Dece	mber 2020 ·	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
			Expected (#)	Expected (%)
2019Q3 and Earlier	30	230	-200	-87%
2019Q4	25	18	7	40%
2020Q1	27	20	7	38%
2020Q2	29	23	6	25%
2020Q3	47	33	14	42%
2020Q4	88	52	36	69%
Total	246	376	-130	-35%

- Non-statutory benefit claims include interstate, death, worker's compensation and early notification
- In the twelve months leading up to 31 December 2021, reported non-statutory benefit claims have been lower than expected by around 35%, or 130 claims
- The lower than expected claims numbers are primarily driven by the fewer than expected interstate, death and early notification claims, partially offset by a higher number of workers compensation claims
- On an accident quarter basis, the lower than expected claim numbers is primarily driven by accident quarter 2019Q3 and prior
- The level of claim activity is still developing, driving higher volatility in the actual versus expected experience.



#### Non-statutory benefit claim payments

		Dece	mber 2020	- December	2021
Head of damage	Claim Type	Actual	Expected	Actual -	Actual -
ricad or damage	Claim Type	Actual	Lxpcctcu	Expected (#)	Expected (%)
Interstate	Non Stat Ben	\$32.6m	\$39.3m	-\$6.8m	-17%
Death	Non Stat Ben	\$16.1m	\$3.6m	\$12.5m	350%
Workers Compensation	Non Stat Ben	\$10.0m	\$2.5m	\$7.5m	297%
Early notification	Non Stat Ben	\$46.5k	\$42.7k	\$3.7k	9%
Total		\$58.8m	\$45.5m	\$13.3m	29%

	Dece	mber 2020 <sup>.</sup>	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
Accident Quarter	Actual	Expected	Expected (#)	Expected (%)
2019Q3 and Earlier	\$42.7m	\$35.2m	\$7.5m	21%
2019Q4	\$5.9m	\$3.4m	\$2.5m	73%
2020Q1	\$5.6m	\$2.0m	\$3.6m	179%
2020Q2	\$1.7m	\$1.4m	\$0.3m	23%
2020Q3	\$1.2m	\$1.8m	-\$0.6m	-31%
2020Q4	\$1.7m	\$1.7m	-\$0.1m	-3%
Total	\$58.8m	\$45.5m	\$13.3m	29%

- Non-statutory benefit payments over the last twelve months to 31 December 2021 have been \$13.3m (or 29%) higher than expected
- This is primarily driven by a higher amount of payments for death claims and workers compensation claims, partially offset by interstate claims
- Higher than expected death payments were observed, despite lower than expected death claim numbers (on the previous slide). This could be due to Compensation to Relative (CTR) claims which typically settles for a higher claim amount than funeral only death claims
- On an accident quarter basis, there is higher than expected claims payments across most accident periods, excluding 2020Q3 and 2020Q4.



#### Claims reported for damages

			Dece	mber 2020	- December	2021
Fault Status	Severity	WPI	Actual	Expected	Actual -	Actual -
I duit Status	Severity	AALI	Actual	Lxpected	Expected (#)	Expected (%)
		> 10%	776	918	-142	-15%
Not At-Fault	Non-minor	≤ 10%	841	1,274	-433	-34%
		Unknown	810	1,014	-204	-20%
Other		537	0	537	-	
Total		2,964	3,206	-242	-8%	

	Dece	mber 2020	- December	2021
Accident Quarter	Actual	Expected	Actual -	Actual -
Accident Quarter	Actual	Expected	Expected (#)	Expected (%)
2018Q4 and prior	649	1,246	-597	-48%
2019Q1	285	208	77	37%
2019Q2	520	336	184	55%
2019Q3	529	409	120	29%
2019Q4	419	363	56	15%
2020Q1 - 2020Q4	562	644	-82	-13%
Total	2,964	3,206	-242	-8%

- In the twelve months leading up to 31
  December 2021, reported claims for
  damages have been lower than expected by
  around 8%, or 242 claims
- The lower than expected claims numbers are primarily driven by a lower than expected number of not at-fault non-minor claims across all WPI thresholds for damages
- Other' claims include claims that are at-fault, mostly-at-fault or minor claims which may not be eligible for damages claims settlements. Hence, these claims have not been modelled explicitly (i.e. there may be an expectation that they will become not at-fault, or an insurer coding may not have been updated)
- On an accident quarter basis, there is lower than expected claims reported for 2018Q4 and prior, as well as more recent accident periods in 2020, which is partially offset by higher than expected claims in all 2019 accident quarters
- Note that the reporting patterns are still developing in the 2017 Scheme, driving higher volatility in the actual versus expected from older accident periods, as the expected patterns are currently at inflexion points.



#### Claim payments for damages

			December 2020 - December 2021				
Fault Status	Severity	WPI	Actual	Expected	Actual -	Actual -	
					Expected (#)	Expected (%)	
Not At-Fault	Non-minor	> 10%	\$299.4m	\$116.9m	\$182.6m	156%	
		≤ 10%	\$38.3m	\$78.2m	-\$39.9m	-51%	
		Unknown	\$16.4m	\$0.0m	\$16.4m	-	
Other			\$10.7m	\$0.0m	\$10.7m	-	
Total			\$364.8m	\$195.1m	\$169.8m	87%	

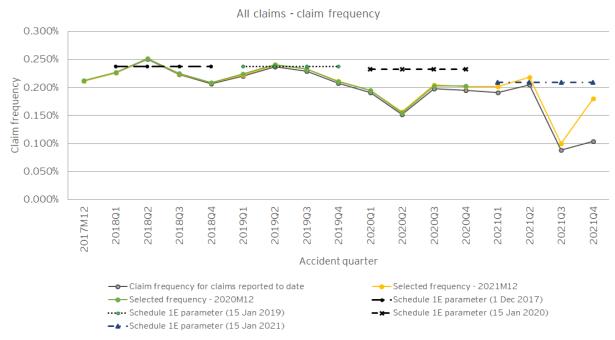
	December 2020 - December 2021				
Accident Quarter	Actual	Expected	Actual -	Actual -	
Accident Quarter			Expected (#)	Expected (%)	
2018Q4 and prior	\$225.2m	\$168.1m	\$57.1m	34%	
2019Q1	\$35.3m	\$11.0m	\$24.3m	220%	
2019Q2	\$45.3m	\$7.0m	\$38.3m	548%	
2019Q3	\$23.6m	\$3.5m	\$20.1m	568%	
2019Q4	\$14.2m	\$2.0m	\$12.2m	599%	
2020Q1 - 2020Q4	\$21.2m	\$3.4m	\$17.8m	522%	
Total	\$364.8m	\$195.1m	\$169.8m	87%	

- Claim payments for damages over the last twelve months to 31 December 2021 have been \$169.8m (or 87%) higher than expected
- This is largely driven by a higher amount of payments for not at-fault non-minor claims with WPI greater than 10%, across all payment categories, and is partially offset by the lower than expected payments for not-at-fault non-minor claims with WPI less than or equal to 10%
- 'Other' claims include claims that are at-fault, mostly-at-fault or minor claims which may not be eligible for damages claims. Hence, these claims have not been modelled explicitly
- On an accident quarter basis, the experience is consistent across all accident periods



## Claim frequency

#### All claims

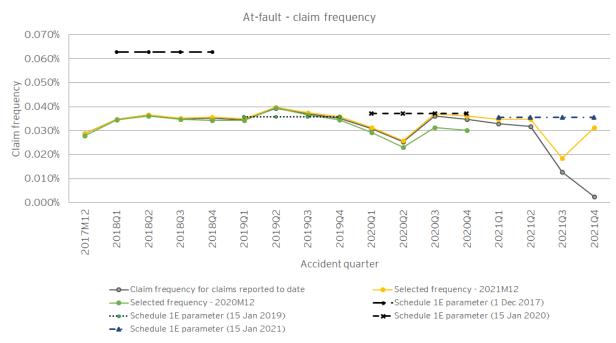


- The chart above shows the ultimate claim frequency for all claims per accident quarter
- A higher amount of uncertainty is associated with the most recent accident quarter, as a larger number of claims are still yet to be reported compared to previous quarters
- The gap between the grey line and the yellow line illustrates the claims which are expected to have been incurred but have not yet been reported
- The observed drop in 2020Q1 and 2020Q2 is due to a reduction in exposure during the first COVID-19 lockdown in NSW. Claim numbers for 2020Q3 2021Q2 are projected to return towards pre-COVID levels
- ▶ The observed reduction in 2021Q3 is due to the most recent COVID-19 lockdown in NSW
- ▶ Claim frequency for 2021Q4 are projected to return towards pre-COVID levels



### Claim frequency

#### At-fault claims

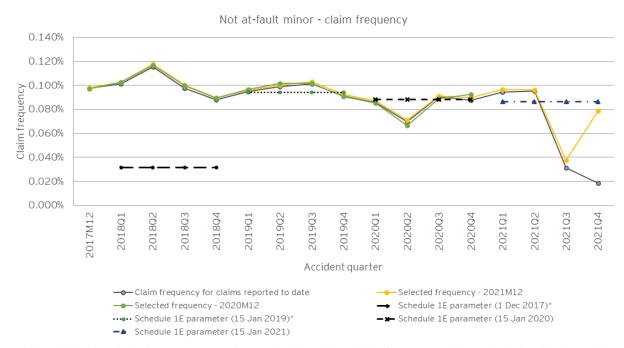


- The chart shows the ultimate claim frequency and reported to date claim frequency for at-fault and mostly at-fault claims
- The ultimate frequency for at-fault claims is broadly consistent with the previous full valuation in December 2020 (i.e. green vs yellow line) for accident quarters before 2020. For accident quarters in 2020, the selected frequency in 2021M06 is higher than what was selected in the previous full valuation, primarily driven by experience to date
- The gap between reported to date claim frequency and ultimate frequency illustrates the claims which have incurred but not yet been reported, or claims that have not yet been determined as 'at-fault'. For December 2017 to 2019Q2 accident periods, it is not expected that there will be any material additional at-fault claims reported
- The observed drop in 2020Q1 and 2020Q2 is due to a reduction in exposure during the first COVID-19 lockdown in NSW. Claim frequency is expected to return to pre-COVID levels for 2020Q3 2021Q2
- ▶ The observed reduction in 2021Q3 is due to the most recent COVID-19 lockdown in NSW
- Claim frequency for 2021Q4 are projected to return towards pre-COVID levels



### Claim frequency

#### Not at-fault minor injury claims



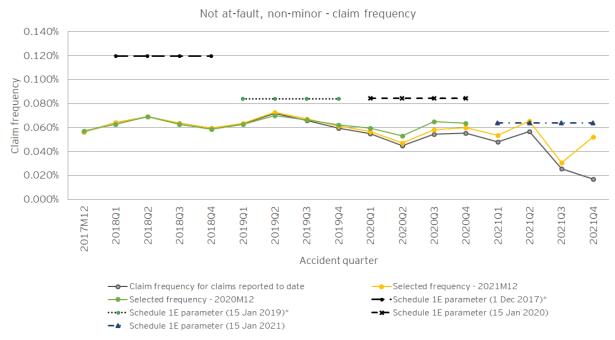
- The chart shows the ultimate claim frequency and reported to date claim frequency for not at-fault minor injury claims
- The ultimate frequency for minor claims is broadly consistent with the previous full valuation at December 2020
- Where the reported to date frequency is higher than the ultimate frequency, it means a proportion of reported claims are expected to transition out of not at-fault minor into the not at-fault non-minor claim category following the completion of insurer internal reviews and any further dispute processes
- The observed drop in 2020Q1 and 2020Q2 is due to a reduction in exposure during the COVID-19 lockdown in NSW. Claim numbers from 2020Q3 2021Q2 are projected to return towards pre-COVID levels
- ▶ The observed drop in 2021Q3 is due to the most recent COVID-19 lockdown in NSW
- Claim frequency for 2021Q4 are projected to return towards pre-COVID levels

\*Schedule 1E parameter has been modified to remove early notification claims to allow for like-for-like comparison with selected frequency



## Claim frequency

### Not at-fault non-minor injury claims



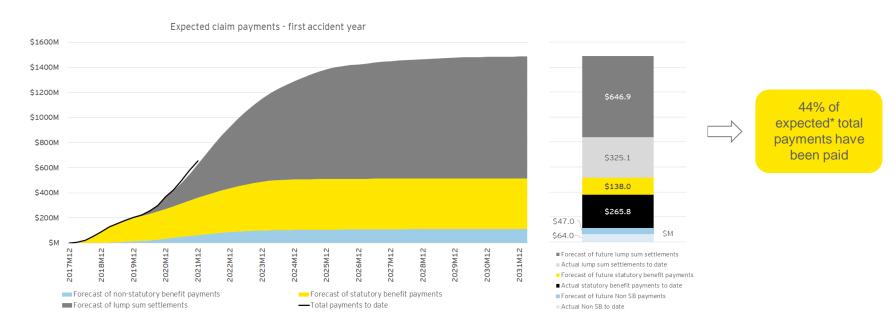
- The chart shows the ultimate claim frequency and reported to date claim frequency for not at-fault minor injury claims
- The ultimate frequency for minor claims is broadly consistent with the previous full valuation at December 2020
- Where the reported to date frequency is higher than the ultimate frequency, it means that a proportion of reported claims are expected to transition out of not at-fault minor into the not at-fault non-minor claim category following the completion of insurer internal reviews and any further dispute processes
- The observed drop in 2020Q1 and 2020Q2 is due to a reduction in exposure during the COVID-19 lockdown in NSW. Claim numbers from 2020Q3 2021Q2 are projected to return towards pre-COVID levels
- ▶ The observed drop in 2021Q3 is due to the most recent COVID-19 lockdown in NSW
- Claim frequency for 2021Q4 are projected to return towards pre-COVID levels

\*Schedule 1E parameter has been modified to remove non-statutory benefit claims to allow for like-for-like comparison with selected frequency



## Claim payments

Actual vs. expected payment pattern (1 Dec 2017 - 31 Dec 2018)



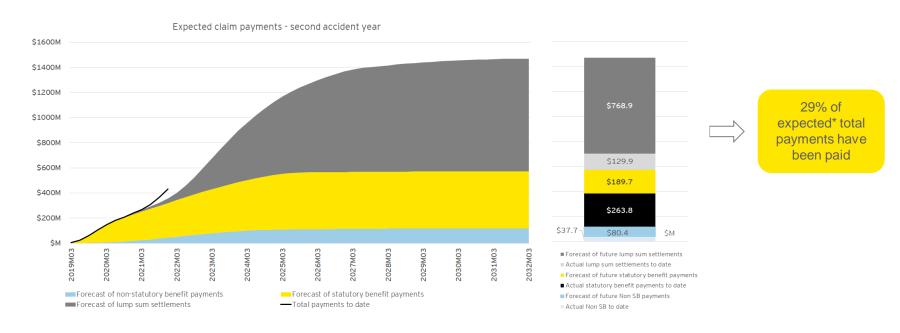
- The chart above shows the expected payment pattern of the scheme for the first accident year (1 Dec 2017 to 31 Dec 2018), split by statutory benefit payments, lump sum settlements and non-statutory benefit payments, note the first accident year is the first 13 months since the beginning of the scheme
- This graph shows that a material component of the claims cost in relation to the award of damages has yet to emerge due to the scheme design and access to statutory benefits in the interim
- In particular, it highlights that total payments to date account for 44% of total expected payments. In addition, approximately 65% of the expected claims costs are for the award of damages (grey segment). To date, there have been \$265.8m payments relating to statutory benefit payments, \$325.1m payments relating to lump sum settlements and \$64.0m payments relating to non-statutory benefit payments for the first accident year.



<sup>\*</sup>Expected total payments as at 31 December 2020 valuation

## Claim payments

Actual vs. expected payment pattern (1 Jan 2019 - 31 Dec 2019)



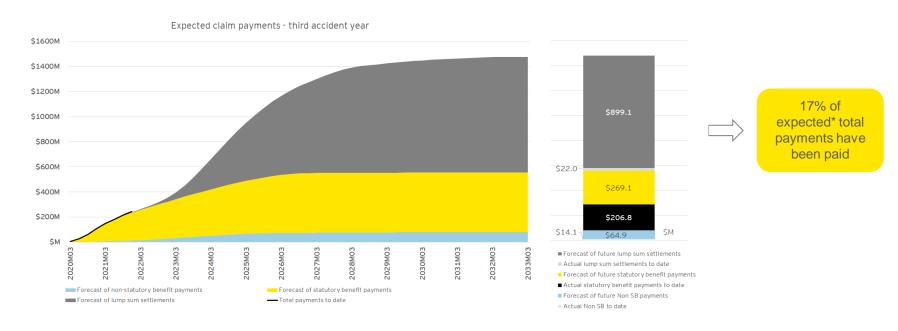
- The chart above shows the expected payment pattern of the scheme for the second accident year (1 Jan 2019 to 31 Dec 2019), split by statutory benefit payments, lump sum settlements and non-statutory benefit payments
- This graph shows that a material component of the claims cost in relation to the award of damages has yet to emerge due to the scheme design and access to statutory benefits in the interim
- In particular, it highlights that total payments to date account for 29% of total expected payments. In addition, approximately 61% of the expected claims costs are for the award of damages (grey segment). To date, there have been \$263.8m payments relating to statutory benefit payments, \$129.9m payments relating to lump sum settlements and \$37.7m payments relating to non-statutory benefits for the second accident year.



<sup>\*</sup>Expected total payments as at 31 December 2020 valuation

## Claim payments

Actual vs. expected payment pattern (1 Jan 2020 - 31 Dec 2020)



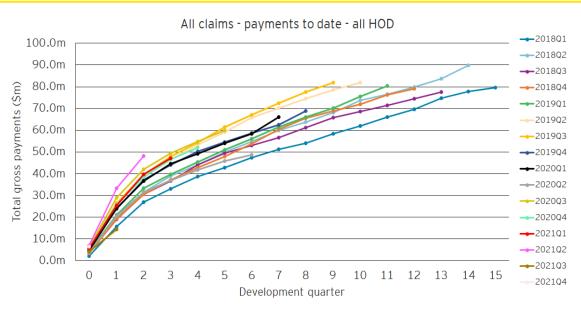
- The chart above shows the expected payment pattern of the scheme for the third accident year (1 Jan 2020 to 31 Dec 2020), split by statutory benefit payments, lump sum settlements and non-statutory benefit payments
- This graph shows that a material component of the claims cost in relation to the award of damages has yet to emerge due to the scheme design and access to statutory benefits in the interim
- In particular, it highlights that total payments to date account for 17% of total expected payments. In addition, approximately 62% of the expected claims costs are for the award of damages (grey segment), which are only expected to start emerging with any significance after December 2021 for the majority of claims. To date, there have been \$206.8m payments relating to statutory benefit payments, \$22.0m payments relating to lump sum settlements and \$14.1m non-statutory benefit payments for the third accident year.



<sup>\*</sup>Expected total payments as at 31 December 2020 valuation

## SB - claim payments

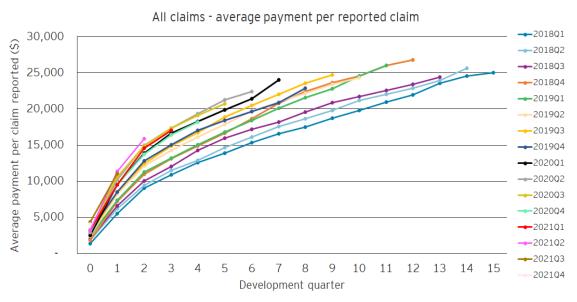
Total gross statutory benefit payments by development quarter (current value)



- The above chart shows the total statutory benefit payment profile for each accident quarter for all claims across all heads of damage (HOD)
- The more mature accident quarters are still developing, and this is mainly due to not at-fault non-minor claimants who are still eligible to receive statutory benefits
- The ultimate cost per accident quarter will not be known with certainty until after five years after the accident quarter, due to not atfault non-minor claimants being entitled to statutory benefits until this point, as well as the larger payments relating to the award of damages being finalised
- It appears for most recent accident quarters with the exclusion of COVID quarter 2021Q3, claimants are receiving higher payments compared to previous quarters at the same point of development. This may be due to insurers now having better established claims operations which are resulting in claimants receiving payments earlier, rather than higher payments overall. However, this is not known with certainty until the profile of these accident quarters develops over time compared to the earlier periods.
- For accident quarter 2021Q3, it appears that total gross payments are trending lower compared to previous accident quarters after one quarter of development. This is likely driven by the lower reported claim numbers due to the second COVID-19 lockdown in NSW.



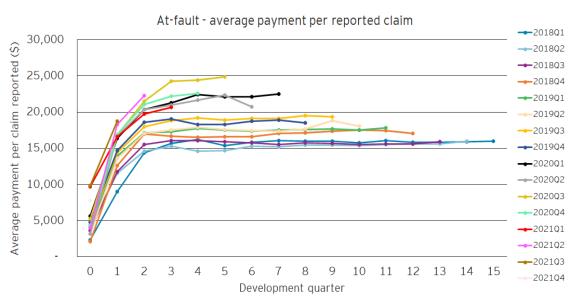
All claims - average cumulative payments per reported claim (current value)



- This chart shows the profile of average cumulative payments per claim reported by accident quarter and development quarter
- On a development basis, the more mature accident quarters are still showing development, which is due to non-minor claimants still receiving statutory benefit payments
- More recent accident quarters have a higher profile than older accident quarters which may indicate a speeding up of payments as the scheme has progressed, rather than higher payments overall. However, this is not known with certainty, until the profile of these accident quarters develops over time compared to the earlier periods



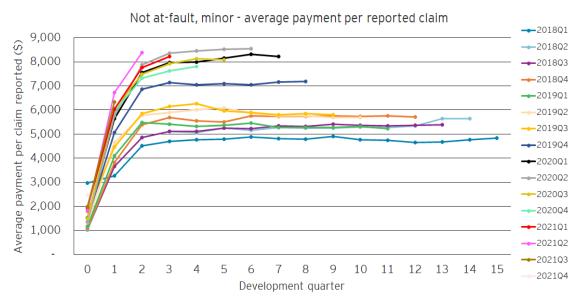
At-fault claims - average cumulative payment per reported claim (current value)



- This chart shows the profile of average cumulative payments per at-fault claim reported by accident quarter and development quarter
- On a development quarter basis, the older accident quarters have reached a steady level of average claim size by around development quarter 3. This is expected as at-fault claimants are entitled to 26 weeks of benefits, with some allowance for delay in payments and invoicing
- It appears the recent accident quarters have a higher average claim size than more mature accident quarters
- ▶ This chart indicates that the average claim size is emerging at around \$16,000-\$22,000 for at-fault claims
- The higher average claim size for 2021Q1 in development quarter 0 is mainly attributable to higher cost of treatment & care payments paid to some claimants with high injury severity. This has returned to levels in line with 2020Q1 onwards for development quarter 1 onwards
- Payments per claim reported in the accident quarter 2021Q2 has developed higher in comparison to other accident quarters for the first and second development period. Similarly, accident quarter 2021Q3 appears to be following this trend with a high average payment in development quarter 1.
- The behaviour of these recent accident quarters will continue to be monitored going forward.



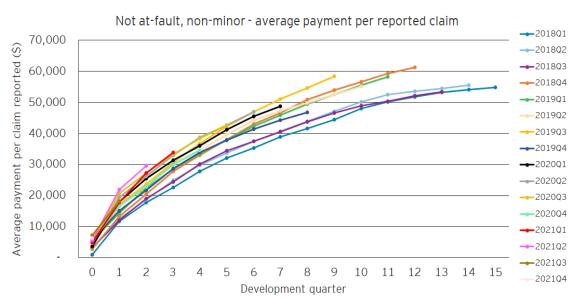
Not at-fault minor claims - average cumulative payment per reported claim (current value)



- This chart shows the profile of average cumulative payments per not at-fault minor injury claim reported by accident quarter and development quarter
- On a development quarter basis, the older accident quarters have reached a steady level of average claim size by around development quarter 3. This is expected as not at-fault minor injury claimants are entitled to 26 weeks of benefits, with some allowance for delay in payments, invoicing and accessing further benefits for some claims if the insurer agrees that further treatment will aid recovery
- lt appears that more recent accident quarters have around a 20% 60% higher average claim size than more mature accident quarters prior to 2018Q3.
- This chart indicates that the average claim size is around \$4,500 \$7,000 for not at-fault minor claims up until 2019Q4, and the average claim size is around \$7,000 \$9,000 for claims 2020Q1 and onwards
- Higher average claim sizes for recent accident quarters may be due to a change in claims mix for claims incurred during the COVID-19 lockdown. The reduced number of claims have a higher average severity compared to the those in prior quarters
- The 2021Q2 accident quarter appears to be developing at a higher rate than other accident quarters. We will continue to monitor this going forward.



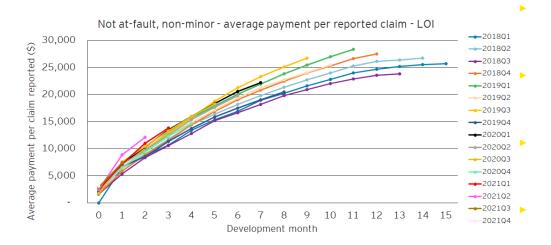
Not at-fault non-minor claims - average cumulative payment per reported claim (current value)

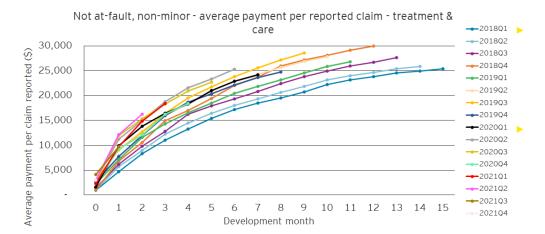


- This chart shows the profile of average cumulative payments per not at-fault non-minor injury claim reported by accident quarter and development quarter
- It appears that more recent accident quarters have a higher average claim size than more mature accident quarters prior to 2018Q3. This may be indicative of a speeding up of payments for more recent accident years and/or a higher ultimate average claim size for recent accident quarters
- The average cumulative payment per not at-fault non-minor claim reported will not be known with certainty until after five years after the accidents occur, due to not at-fault non-minor claimants being entitled to benefits up to this point, as well as the larger payments relating to the award of damages being finalised.



Not at-fault non-minor claims - average cumulative payment per reported claim (current value)





These charts illustrate the profile of average cumulative payments per not at-fault non-minor injury claims reported by accident quarter and development quarter, split by loss of income (LOI) payments and treatment & care payments Both payment types are continuing to develop which is not unexpected as the design of the scheme enables this cohort of claimants to continue to claim LOI and treatment & care benefits for up to five years

For LOI payments, the average claim sizes for each accident quarter are mostly analogous, averaging between \$12k - \$15k by development quarter 4 and between \$19k - \$23k by development quarter 8

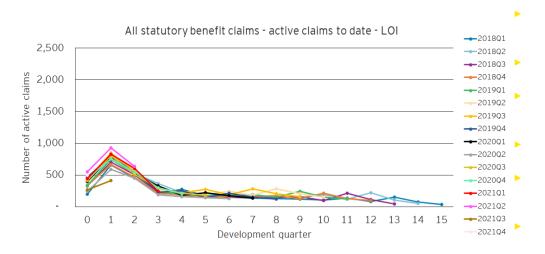
For treatment & care payments, it appears that the average claim size is developing upwards for more recent accident quarters. This could be indicative of speeding up of payments for more recent accident periods and/or a higher ultimate average claim size for recent accident periods

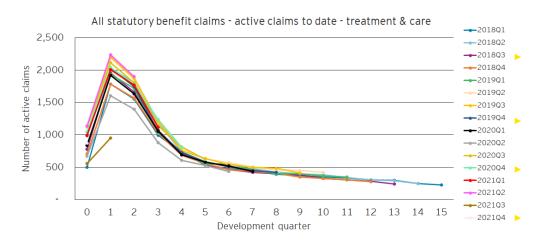
Superimposed inflation could also explain this trend as treatment costs are more susceptible to superimposed inflation, although it is more likely related to the longer term trends of the underlying scheme emerging, which includes insurer processes and providers adjusting over time

For both LOI and T&C payments, the 2021Q2 accident quarter shows a higher average payment per reported claim in development quarters 1 and 2; we will continue to monitor this going forward.



### All statutory benefit claims





These charts illustrate the number of 'active' claims (i.e. those receiving loss of income (LOI) and/or treatment & care benefits), by development guarter

A claim is determined as 'active' if the injured person has received a payment within the quarter

The volume of active claims reaches the peak around 1 quarter after the accident has occurred for loss of income benefits, and around 1 - 2 quarters after for treatment & care benefits

From this point onwards, the number of injured persons receiving these types of benefits starts to decline

By development quarter 4 for loss of income, and development quarter 6 for treatment & care, the claims receiving any payments are mostly the not at-fault non-minor claims

For both loss of income and treatment & care benefits, more recent accident quarters (other than COVID-impacted 2020Q2 and 2021Q3) have a higher proportion of active claims than more mature accident quarters. This indicates a higher number of claimants are receiving payments earlier and potentially staying active for longer

The uptick in LOI active experience for reporting quarter 2021Q2 across all accident quarters was due to one insurer for at-fault and not at-fault minor claims. We now see the number of active claims mostly returning to previous levels

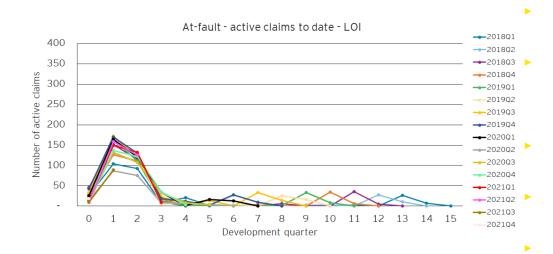
Overall, the volume of claims receiving treatment & care is much higher than loss of income benefits, and they remain active for relatively longer

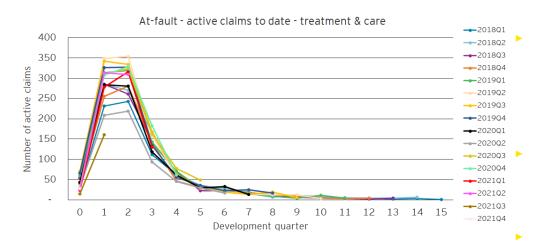
LOI and T&C active claims to date for the 2021Q2 accident quarter sits above all other accident quarters; we will continue to monitor this going forward

The 2021Q3 accident quarter has a significantly smaller number of active claims than other accident quarters at the same stage of development. This is likely a reflection of the most recent COVID-19 lockdown which had a longer and more severe impact.



### At-fault claims





These charts illustrate the number of 'active' at-fault claims (i.e. those receiving loss of income (LOI) and/or treatment & care benefits), by development quarter

On a development quarter basis, the number of at-fault claims receiving loss of income benefits reduces to almost 0 after 4 quarters; this is expected as benefit entitlements cease for at-fault claimants after 26 weeks, given allowance for delay in payments and invoicing

Claims receiving treatment & care benefits tend to remain active for longer; there are still a small proportion of the earlier claims which are still active eighteen months later

More recent accident quarters tend to have a higher volume of active claims receiving benefits. This indicates a higher number of claimants are receiving payments earlier

The low number of actives observed for 2020Q2 is due to reduced exposure as a result of the first COVID-19 lockdown

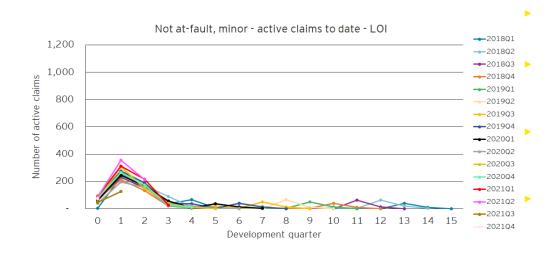
The uptick in LOI active experience for reporting quarter 2021Q2 across all accident quarters is due to one insurer. This seems to have reduced slightly for the latest quarter, however, there still appears to be some residual impact. For the earliest accident periods, we do not expect any active claims for this claim cohort. We will continue to monitor this going forward

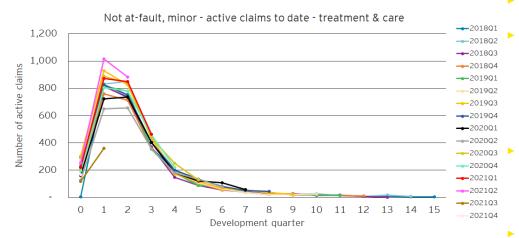
Accident quarter 2021Q3 has a lower number of active claims compared to the previous COVID-19 impacted accident quarter 2020Q2. This is likely due to the second COVID-19 lockdown which was longer and more severe than the previous lockdown

We will continue to monitor the development of the COVID accident quarters going forward.



### Not at-fault minor claims

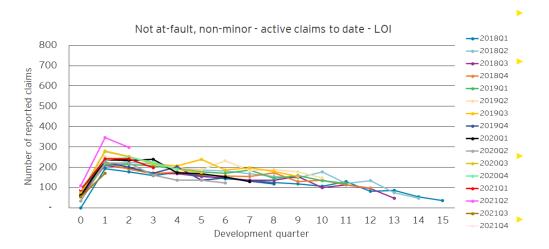


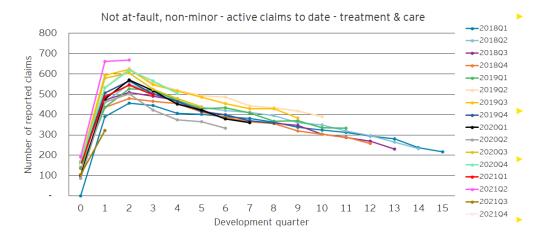


- These charts illustrate the number of 'active' minor claims (i.e. those receiving loss of income (LOI) and/or treatment & care benefits), by development quarter
- On a development quarter basis, not at-fault minor injury active claims follow a similar profile to at-fault claims, as their benefits also generally cease 26 weeks after the accident date
- Claims receiving treatment & care benefits tend to remain active for longer than for loss of income benefits, and hence there are still a small proportion of the earlier claims still active six quarters later
- This is related to the ability to receive treatment & care benefits more than 26 weeks after the accident if the insurer accepts that further treatment & care is likely to aid recovery
- The low number of actives observed for 2020Q2 is due to reduced exposure as a result of the COVID-19 lockdown
  The uptick in LOI active experience for reporting quarter
  2021Q2 across all accident quarters is due to one insurer.
  This appears to have reduced slightly for the latest development quarter, however, there still appears to be some residual impact. For the earliest accident periods, we do not expect any active claims for this claim cohort. We will continue to monitor this going forward
- Accident quarter 2021Q3 has a lower number of active claims compared to the previous COVID-19 impacted accident quarter 2020Q2. This is likely due to the second COVID-19 lockdown which was longer and more severe than the previous lockdown
- We will continue to monitor the development of the COVID accident quarters going forward.



### Not at-fault non-minor claims





These charts illustrate the number of 'active' not at-fault nonminor claims (i.e. those receiving loss of income (LOI) and/or treatment & care benefits), by development quarter

For both loss of income and treatment & care benefits, more recent accident quarters have a higher number of active claims than more mature accident quarters. This indicates a higher number of claimants are receiving payments earlier than previous accident quarters and this may persist to remaining active for a longer period of time as well

Not at-fault non-minor claims are entitled to statutory benefits for up to 5 years (injury severity dependent), so it is expected that claims will remain active for a prolonged period of time, unlike at-fault or not at-fault minor injury claims

The number of LOI actives and treatment & care actives are observed to be slightly lower for the 2020Q2 accident quarter compared to the same development period in 2019, due to reduced exposure as a result of the COVID-19 lockdown

In the 2021Q1 reporting quarter, following the uptick in LOI actives in the 2021Q4 reporting quarter, drops in LOI active experience were observed across all accident quarters. In the 2021Q2 reporting quarter, there was an uptick in the number of not at-fault non-minor active LOI claims again across all accident quarters

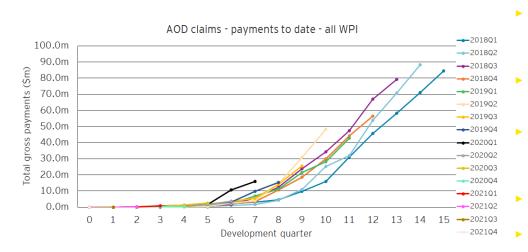
The 2021Q2 accident quarter shows higher active claim numbers compared to other accident periods; we will continue to monitor this going forward

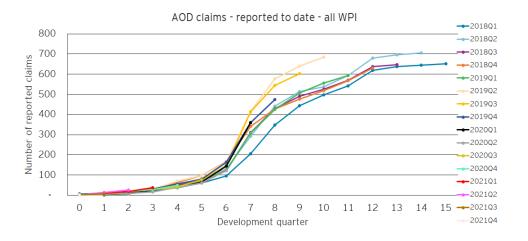
Accident quarter 2021Q3 has a lower number of active claims compared to the previous COVID-19 impacted accident quarter 2020Q2. This is likely due to the second COVID-19 lockdown which was longer and more severe than the previous lockdown We will continue to monitor the development of the COVID accident quarters going forward



## AOD - claim payments and reported numbers

### Award of damages (AOD) claims



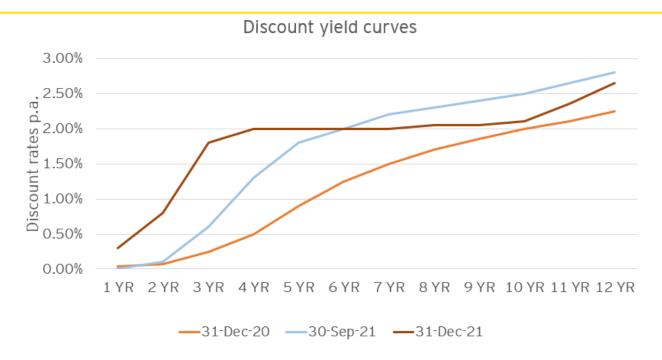


- The charts show the total payment profile and claims reporting profile for each accident quarter for all award of damages claims across all whole person impairment (WPI) levels, which includes undetermined WPI
- The key 2017 Scheme milestones which will trigger lodgements of claims for damages have occurred for all claims incurred in the first accident year
- Volatility in the payment profile of these AOD claims demonstrates the lack of experience for these claims continues to create uncertainty in assessing the financial performance of the 2017 Scheme
- Both payments and claims reported to date continue to increase for all accident quarters
  - It appears for most recent accident quarters, claimants are receiving higher payments compared to previous quarters at the same point of development. This may be due to the embedment of damages claims process between lodgements and payments, which will include the changes in interaction between those involved in the process. This is expected to result in claims receiving payments more quickly, rather than higher payments overall. However, this is not known with certainty until the profile of how these accident quarters develop over time compared to the earlier periods is better understood.



### **Discount Rates**

### Premium Impact



- The economic assumptions are updated quarterly
- The chart above shows the movement in yield curve, which is used for discounting premiums
- In comparison to the yield curve at 31 December 2020, the 31 December 2021 yield curve is still sitting higher across all periods, but the difference in discount rate is larger in the short to medium term
- > Typically, an increase in yield curve will act to decrease the average premium and vice versa.



### Reliance and limitations

- This report is a quarterly actuarial monitoring report for the 2017 CTP Scheme using data as at 31 December 2021.
- This report is an actuarial monitoring report. As such, key actuarial measures and indicators are used to monitor scheme experience at an overall level, rather than supervisory measures at an operational level.
- This report is used for monitoring purposes and is not an actuarial valuation report. Any key insights or trends observed in this monitoring will be used for further investigations which could result in operational insights and recommendations, or subsequent changes to valuation assumptions and/or models.
- The report provides scheme monitoring results and has been provided for the sole purpose of monitoring claims experience and should not be used or relied on for any other purpose or distributed to any other party outside of SIRA without EY's prior written consent. No representation, warranty or undertaking is made or liability is accepted by EY as to the adequacy, completeness or factual accuracy of the contents of our report. In addition, we disclaim all responsibility to any party for any loss or liability that any party may suffer or incur arising from or relating to or in any way connected with the contents of the report, the provision of the report to any party or the reliance upon the report by any party.
- In carrying out our work and preparing our report, EY has worked solely on the instructions of SIRA and has not taken into account the interests of any other party. Our report has been developed based on information current as of 31 December 2021 and provided to us by SIRA. Material events may have occurred since this date which are not reflected in this document.
- The results of our work is limited by the availability and quality of data. The results of our work and procedures performed do not constitute an audit, a review or other form of assurance in accordance with any generally accepted auditing, review or other assurance standards, and accordingly we do not express any form of assurance.



# Glossary

Term	Definition
Accident Month	Denotes the month in which the vehicle accident, giving rise to the claim, occurred.
Development Month	Denotes the time elapsed since the month in which the accident occurred and the month in which the claim is reported to insurers or SIRA.
Reporting Month	Denotes the month in which the claim is reported to either SIRA (through the online portal) or directly to an Insurer.
Early Notification	A notification of injury where a claims form for statutory benefits is not submitted however the injured party is entitled to access to treatment such as one general practitioner consultation and two treatment consultations (for example physiotherapy).
Compensation to Relatives	Claims in relation to the Compensation to Relatives Act (1897), where a financially dependent person or family member has made a claim in relation to a fatality from a motor vehicle accident.
Interstate	A claim arising from when a NSW registered vehicle has an accident in a state which is not NSW.
Statutory Benefit	A schedule of benefits prescribed in the legislation, with limits on some benefits accessed by submitting a statutory benefit claims form.
Statutory Benefit/Award of Damages	A statutory benefit claim which has also submitted a claim for damages. Also known as a 'lump sum' claim.



# Glossary

Term	Definition
Award of Damages Only	A claim where only a claim for damages is made
Workers Compensation	A claim whereby the workers compensation scheme provider seeks recovery of benefits paid to not- at-fault workers injured in a motor accident during the course of employment (excluding journeys to/from work and recess journeys) from the CTP insurer of the at-fault party.
Care	Covers payments in relation care including domestic care services, personal care services, past care and future care and home and vehicle modifications.
Treatment expenses	Covers payments in relation to GPs, Specialists, Imaging, Psychology, Physiotherapy, Chiropractic, Dental, Occupational Therapy, Exercise Physiologists, Optometry, Osteopathy services, Private Hospital Services etc.
Weekly payments or Loss of Income	Covers payments in relation to loss of income (Interim Payments, Partial Incapacity, Total Incapacity and Centrelink payback).
Payment in current values	Payments in historical values inflated to current valuation date



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