

Green Slip scheme quarterly insights

State Insurance
Regulatory Authority

January to March 2019

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Executive Director's message



In 2019, we remain focused on the scheme delivering an optimal customer experience for vehicle owners purchasing a Green Slip, and for people recovering from a motor accident injury.

As a regulator, our purpose is to ensure that our insurance and support systems are easy to navigate, deliver good outcomes and are affordable and sustainable.

To increase people's knowledge of important scheme features we are continuing to build a suite of educational resources. More animations and fact sheets are being created, recognising the different ways that people seek information in our diverse community.

Over the last twelve months we refined our approach to insurer supervision, as insurers became familiar with the 2017 scheme. In 2019, we will be enhancing our supervisory approach through the insurer self-assessment tools and more targeted audits of insurers.

We are continually measuring customer satisfaction with our CTP Assist service. Maintaining high customer satisfaction scores in 2019 is our goal.

Our many feedback channels provide additional insights into the experience of people injured in a motor vehicle accident under the 1999 and 2017 schemes. These insights are used to improve our services and those of the insurers we regulate.

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

Mary Maini

Executive Director
Motor Accidents Insurance Regulation SIRA

The scheme to date

Some key figures for the 2017 CTP scheme for its first sixteen months:
1 December 2017 to 31 March 2019.



OVER
4.2 MILLION
GREEN SLIP
CHECKS



121,431
INTERACTIONS WITH
CTP ASSIST

AVERAGE PREMIUM
\$502
DOWN
20.9%

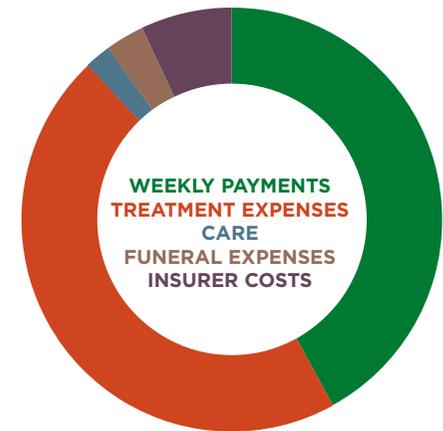
NSW average premium all vehicles
March 2019 vs pre-reform



14,888
CLAIMS
LODGED

OVER
7.8 MILLION
POLICIES SOLD

CLAIM RELATED
PAYMENTS
\$132.3 million



OVER
\$212 MILLION
REFUNDED

Green Slip refunds

By the end of March 2019, 85 percent of the total value of refunds had been returned to policy holders.

Green Slip prices were reduced for most classes of vehicles¹ from 1 December 2017 when the 2017 scheme commenced.

If people bought or renewed a Green Slip with a start date before 1 December, their premium would be based on the 1999 scheme.

The refund applies to the owner of the vehicle at midnight 30 November 2017 and is calculated proportionally. That is, the closer the policy start is to 1 December 2017, the larger the refund.

Over 81 percent of policy holders (vehicle owners, businesses and taxis) had made refund claims and \$212 million had been returned to 3.4 million policy holders by the end of March 2019.

Refunds can be claimed through [Service NSW online](#), by phone (on 1300 287 733 from 7 am-7 pm Monday to Friday or outside those hours on 13 77 88) or by visiting any of its service centres and council agencies around the state.

¹ Motorcycle owners will not receive a refund. Instead, injured motorcycle riders, particularly those at fault in the accident, get more benefits under the 2017 scheme.

'Buy Now' added to Green Slip Check

[Green Slip Check](#) is a fast, user-friendly price comparison tool which helps motorists get the best Green Slip price. Over 4.2 million checks have been made since it was launched in November 2017.

Click-through to buy

Since November 2018, the 'Buy Now' option has been available on the website, allowing visitors to click through to CTP insurers and buy a Green Slip directly.

'Buy Now' provides us valuable customer insights to help us improve our services for motorists and to support our regulatory role with insurers. Data collected tells us how the tool is being used in different areas of NSW and which insurers are selected. It also increases our data on insurer market share, helps us monitor Green Slip premium prices filed with SIRA by insurers and indicates the numbers of people changing insurers for a better deal.

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



Looks like if you switched insurers you could save around \$7.06 on a 12 month policy***

5. Price Check (incl. Fund levy & GST)

The buying options column enables you to click to link with the CTP insurer of your choice to renew or obtain a new CTP Quote for your vehicle. By selecting the 'Buy from insurer' button, you can continue the process with that insurer without needing to re-enter details you have provided. You will still need to enter some additional details to complete the purchase or re-new of your CTP insurance. If there are technical issues with this transition, we will direct you to the relevant insurers web-site.

12 MONTH PRICE	INSURER	6 MONTH PRICE	PHONE	BUYING OPTIONS
\$423.36 Details	Allianz	\$216.66	1300 137 664	BUY FROM INSURER
\$425.37 Details	QBE	\$217.68	133 723	BUY FROM INSURER
\$430.42 Details	NRMA***	\$220.24	132 132	BUY FROM INSURER
\$485.78 Details	GIO	\$248.35	131 010	BUY FROM INSURER
\$497.66 Details	AAMI	\$254.37	132 244	BUY FROM INSURER

CTP Assist: help for injured people and their families

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

Our support officers make regular contact with people after they have lodged a claim to ensure they receive support. The same support officer calls each time to maintain a strong connection.

For anyone who needs CTP help phone:

1300 656 919

8:30 am to 5:00 pm
Monday to Friday

email

ctpassist@sira.nsw.gov.au

or

enquire online at
www.sira.nsw.gov.au

Case study

The following is a recent example of how people are helped by the service (names and personal details have been changed for privacy):

Valuable information

Eleven-year-old Zoe was hit by a car while riding her bike. She was receiving treatment and had returned to school when Kelly from CTP Assist made a call to Sam, Zoe's mother, to check on her recovery.

Sam told Kelly that, while Zoe appeared to be recovering well, participating in usual activities, she was concerned that Zoe had started talking about the accident.

In case Zoe required psychological treatment in the future, Kelly provided information about lodging a damages claim with the insurer. Kelly also connected Sam to the insurer case manager to further discuss options for supporting Zoe. Sam expressed gratitude for the valuable information and support that Kelly from CTP Assist had provided.

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 Accident Injuries Act 2017* (2017 Act) and supporting regulations.

A fact sheet explaining the CTP Legal Advisory Service is available [here](#).

CTP Assist's consultants promote the advisory service when taking inquiries from injured people or their representatives.

There have been 10 referrals to the Legal Advisory Service since it commenced, including one referral during the March quarter.

SIRA has commenced evaluating the pilot and the report is at its final stages.

Using the legal advisory service

To use this phone-based service, a person can simply call CTP Assist (1300 656 919) and a support officer will help arrange a referral if they are eligible. Advice is personal and confidential. There is no charge to people injured in a motor accident.

Measuring customer satisfaction with SIRA's CTP Assist Service

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

Together, these ratings let us continuously measure the overall quality of the service and identify opportunities for improvement.

NPS measures how likely a customer is to recommend CTP Assist to others. CTP Assist's rolling average score for the four months December 2018 to March 2019 has reached an all-time high of +51. This is an exceptional score, making CTP Assist a national leader in delivering a great customer experience according to the Australian NPS Pulse Check (see diagram below).

CES measures how easy it is for a customer to get the help they need. The CES score has remained at an excellent four month rolling

average level of 4.1 out of 5 since April 2018, suggesting that the customers believed CTP Assist made it easy to get help.

Some comments received with NPS scores include:

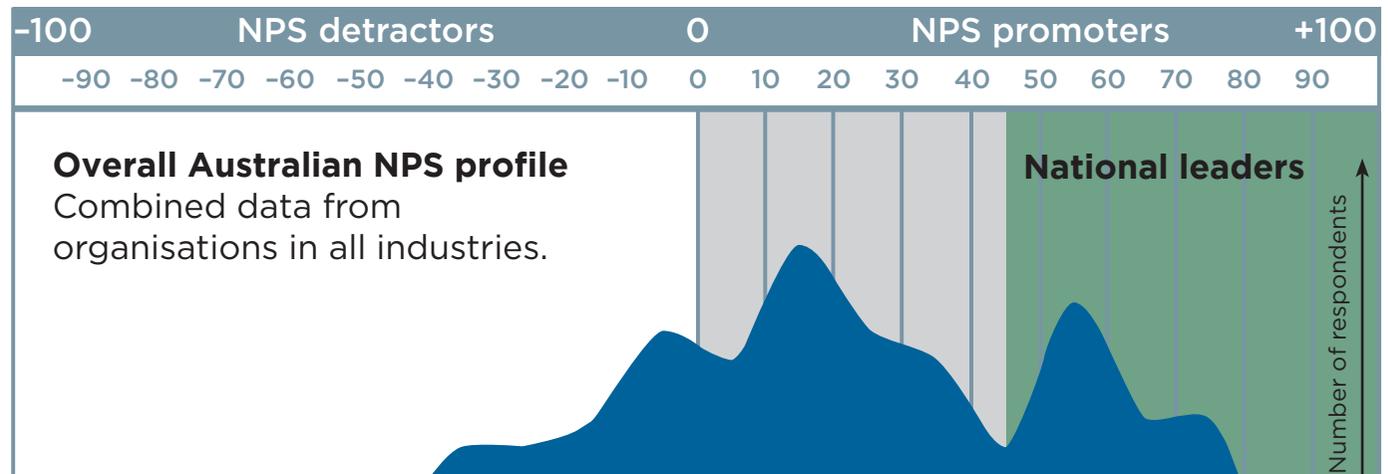
"Sam was good at listening to me. I felt heard and therefore I felt he could really help me because he knew my situation but also the practicalities around it."

"The service that CTP Assist provided was great and easy. I didn't think I would get a response in a short period of time but it happened which surprised me. Thank you for the phone call check-ups and the fast service 10/10".

CTP Assist

NPS +51

CES 4.1



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

Lifetime Care and Support Scheme participants²

The Lifetime Care and Support (LTCS) Scheme is established by the *Motor Accidents (Lifetime Care and Support) Act 2006* to provide treatment, rehabilitation and care to people severely injured in motor accidents in NSW, regardless of who was at fault.

The LTCS Scheme began on 1 October 2006 for children and was extended to adults on 1 October 2007. To be eligible for the LTCS Scheme, severe injury criteria must be met which includes brain injury, spinal cord injury, specific types of amputations, blindness or burns.

Once eligibility is determined, the person becomes an 'interim participant' for an initial two-year period (or up to five years for children under three). During this time, icare Lifetime Care pays for the participant's treatment and care related to the accident. Before the end of the interim period, the person's injuries are assessed again to determine if they will become a 'lifetime participant'. The LTCS Scheme is administered by Insurance and Care NSW and funded from a levy on Green Slips.

As of 31 March 2019, there were 1,425 participants in the LTCS Scheme which includes 299 interim participants. Over the past 12 months, from 1 April 2018 to 31 March 2019, 163 participants entered the LTCS Scheme.

Age of participants (age at time of accident)

The age group with the largest representation is 15-19 years which includes 14.7 percent of all participants in the LTCS scheme. This is followed by the age group of 20-24 years with over 13.1 percent of participants.



² Provided by the Lifetime Care and Support Authority

CTP Care

What is CTP Care?

The CTP Care program or 'CTP Care' is the name given to services provided by icare Lifetime Care in performing its new function under the *Motor Accident Injuries Act 2017*.

Under CTP Care, icare Lifetime Care will provide treatment and care statutory benefits for people injured in a motor accident in NSW from 1 December 2017, whose injuries do not qualify them for the Lifetime Care and Support Scheme and who have needs five years or longer after their accident.

This means, after five years from the date of the accident, icare Lifetime Care will become responsible for paying for reasonable and necessary treatment and care instead of the CTP insurer.

CTP Care is separate to the Lifetime Care and Support Scheme which is also run by icare Lifetime Care.

What are we doing?

SIRA is working with icare Lifetime Care and other stakeholders on an implementation strategy for CTP Care, to ensure a sound customer experience for people whose payments for treatment and care will transfer to icare Lifetime Care.

SIRA is developing guidelines for insurers, health practitioners and lawyers who are helping patients or clients who have a claim that will, at least in part, be managed by icare Lifetime Care under CTP Care. SIRA will consult with relevant stakeholders prior to the release of the guidelines and will provide education to stakeholders about CTP Care before the guidelines are published.

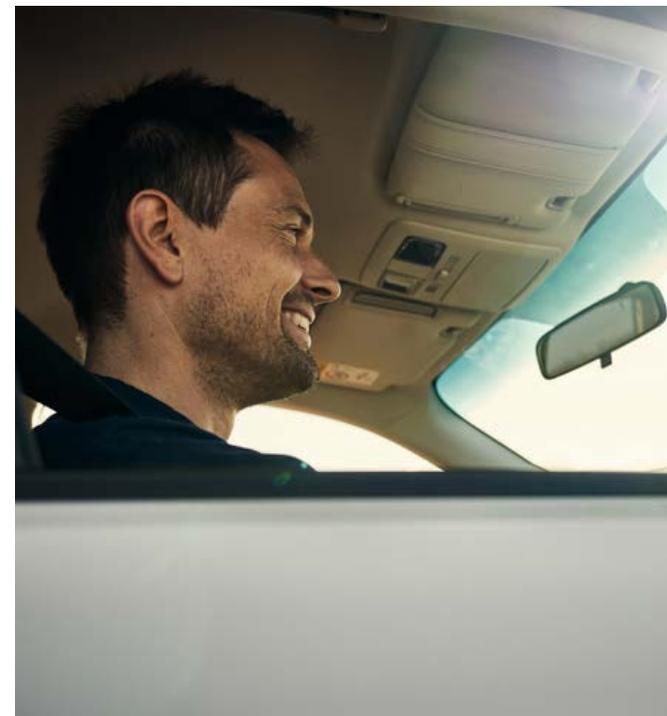
When will CTP Care start?

icare Lifetime Care will assume responsibility for the payment of treatment and care to eligible people from December 2022, with the possibility for earlier transfer of these benefits from December 2019 in some circumstances.

Reporting on the number of people in CTP Care

When the CTP Care program starts, SIRA will be reporting on the number of people in the program.

If you need more information about CTP Care contact SIRA's CTP Assist on CTPAssist@sira.nsw.gov.au.



Key statistics

2017 scheme

This report includes data from the scheme's start on 1 December 2017, with a focus on the three months from 1 January to 31 March 2019.

Minor injury assessment

1 December 2017 to 31 March 2019

Injury category	To date
Assessed minor injury	5,456
Indicative minor injury	1,269
Assessed non-minor injury	3,696
Indicative non-minor injury	726
Not yet known	2,258
Total	13,405

Earning status of injured people

1 December 2017 to 31 March 2019

Earning status	To date	%
Earners	7,341	54.8%
Non-earners	3,174	23.7%
Not stated	2,890	21.6%
Total	13,405	100%³

³ Rounding

³ Rounding

⁴ Larger than sum of items due to rounding

⁵ Centre for Road Safety, Transport for NSW

Statutory benefits claims

1 January to 31 March 2019 (Quarter) and 1 December 2017 to 31 March 2019

Claim type	Qtr	To date
At fault	519	1,944
Not at fault	2,040	8,079
Fault not determined	175	3,382
Total CTP claims	2,734	13,405
Early notifications	150	755
Interstate claims	96	384
Workers compensation	57	88
Compensation to relatives	57	256

Claims by insurer

1 December 2017 to 31 March 2019

Insurer	No. of claims	% of total
NRMA	4,313	32.2%
QBE	2,839	21.2%
GIO	2,623	19.6%
Allianz	1,684	12.6%
AAMI	1,082	8.1%
CIC-Allianz	864	6.4%
Total	13,405	100%³

Legal representation – statutory benefit claims

Representation	To date
Legally represented	3,174
Self represented	10,231

Payments 1 December 2017 to 31 March 2019

Payment type	Amount
Weekly payments	59,545,651
Treatment expenses	61,863,439
Care	1,513,858
Funeral expenses	2,904,182
Insurer investigation	6,231,775
Insurer medico-legal	253,237
Insurer legal	178,765
Damages	0
Claimant legal	217,964
Recoveries	-424,267
Total	\$132,284,60⁴

Dispute resolution

Dispute review type	Qtr	To date
Insurer internal review	789	2,255
Dispute Resolution Service	366	1,122

Note: For a more detailed breakdown of dispute resolution refer to the statistics 'Insurer internal review' and 'Disputes and litigation' on pages 13 and 14.

Fatalities

No of fatalities on NSW roads	Qtr
Fatalities	110 ⁵

Late claims (lodged 90 days after the accident)

Late claims	To date
Number of late claims refused	166 (from cohort of 555 claims classified as not eligible for benefits for the first 26 weeks)

Scheme insurers

The Green Slip market is privately underwritten⁶ by six licensed insurers operated by four organisations: Suncorp (AAMI and GIO), Allianz Australia (Allianz and CIC Allianz), NRMA and QBE. CIC Allianz ceased issuing Green Slips from 15 January 2019.

Best prices by insurer

In the table below, the best price is the lowest CTP premium price (including levies and GST) offered by each insurer to a new customer, aged 30 to 54, for a private use passenger vehicle garaged

Sydney best price December 2018 quarter end compared to March 2019 quarter end (inclusive of the Fund levy reduction of \$13)

Insurer	December 2018	March 2019	Best price change
NRMA	\$468	\$448	-\$20 (-4.3%)
GIO	\$457	\$444	-\$13 (-2.8%)
AAMI	\$459	\$446	-\$13 (-2.8%)
Allianz	\$478	\$454	-\$24 (-5.0%)
QBE	\$470	\$448	-\$22 (-4.7%)

in Sydney. Best prices are sourced from insurer filings⁷ effective during the relevant quarter.

Following the Fund Levy reduction on 15 January 2019, all insurers best prices reduced by \$13 (reflected in the March quarter best price table), resulting in a \$13 premium reduction for most motorists renewing during the March quarter.

Premiums – best price changes during the quarter

NRMA, Allianz and QBE implemented reduced prices during the March 2019 quarter, which, when included with the levy reduction, resulted

in their best price reductions of \$20, \$24 and \$22 respectively, as shown in the table below.

While CIC Allianz ceased issuing CTP policies from 15 January 2019, its policy renewals are being managed by Allianz.

Premiums collected

The table below compares the total premiums collected⁸ during the March 2019 and December 2018 quarters. The total premiums collected fell by 0.7 percent during the March 2019 quarter.

Premiums collected

Insurer	December 2018 Qtr	March 2019 Qtr	Premium change (\$)	Premium change (%)
NRMA	\$152,256,573	\$152,006,852	-\$249,721	-0.2%
GIO	\$85,410,821	\$78,897,644	-\$6,513,177	-7.6%
AAMI	\$36,126,473	\$40,467,976	+\$4,341,503	+12.0%
Allianz	\$63,840,469	\$97,351,942	+\$33,511,473	+52.5%
QBE	\$120,674,733	\$120,533,497	-\$141,236	-0.1%
CIC Allianz	\$36,601,013	\$2,129,452	-\$34,471,561	-94.2%
Total	\$494,910,082	\$491,387,363	-\$3,522,719	-0.7%

Note: If Allianz and CIC Allianz are consolidated the premium change is -\$960,088 (-1.0%).

⁶ Underwriting is the process of assessing risk and ensuring the cost and conditions of the cover take into account the risks faced by the individual concerned.

⁷ A filing shows proof of financial responsibility in setting premiums.

⁸ Total premiums collected is sourced from insurer Quarterly Premium Returns.

Scheme insurers

Market share

Under the 2017 Act insurers must provide SIRA with the amount of premiums collected from policies issued each quarter. This is called a Quarterly Premium Return. SIRA is then required to inform insurers of their proportion of market share.

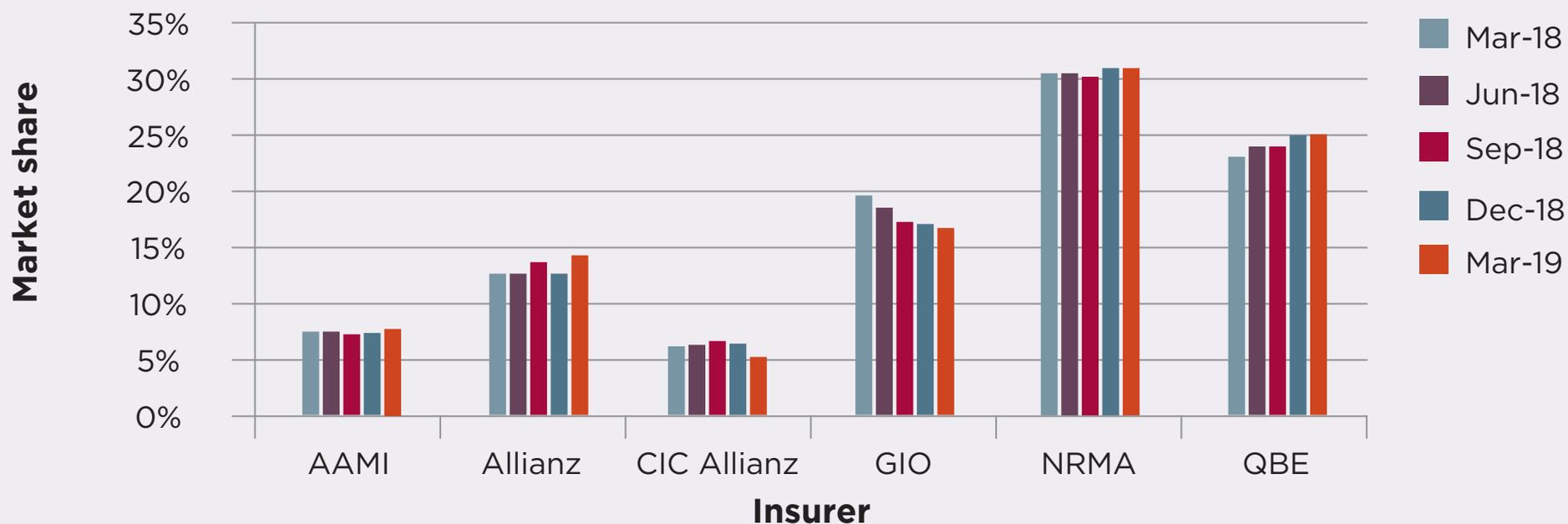
The graph below compares the proportion of annual premiums⁹ collected by insurers from the

March 2018 quarter to the March 2019 quarter. 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 the March quarter, NRMA retained the largest market share with 30.9 percent, followed by QBE with 24.5 percent, Allianz and CIC Allianz combined with 20.2 percent, GIO with

16.1 percent, and AAMI with 8.2 percent. Since March 2018, GIO has lost 1.8 percent market, QBE gained 0.4 percent, and Allianz gained 0.9 percent market share as it included CIC Allianz's portfolio from 15 January 2019.

Premium market share (rolling 12-month) comparison



Note: Graph is based on premiums paid by motorists without adjustment for any refunds because of the new scheme. Independent analysis showed the impact of including the refunds was minimal on each insurer's market share. All insurers agreed with this approach.

⁹ Annual premiums collected by insurer is sourced from insurer Quarterly Premium Returns.

Quarterly premium trends

The graph 'Average premium trends' shows that Green Slip premiums for all passenger vehicles have fallen since the 2017 scheme commenced and are below 2012 levels.

The average Green Slip premium¹⁰ paid by all NSW passenger vehicle owners at March 2019

was \$469, a \$19 (4 percent) reduction compared with the March 2018 quarter price of \$488.

The 'all vehicles' quarterly average premium at March 2019 was \$502, a \$26 (5 percent) reduction compared to the March 2018 quarter price of \$528.

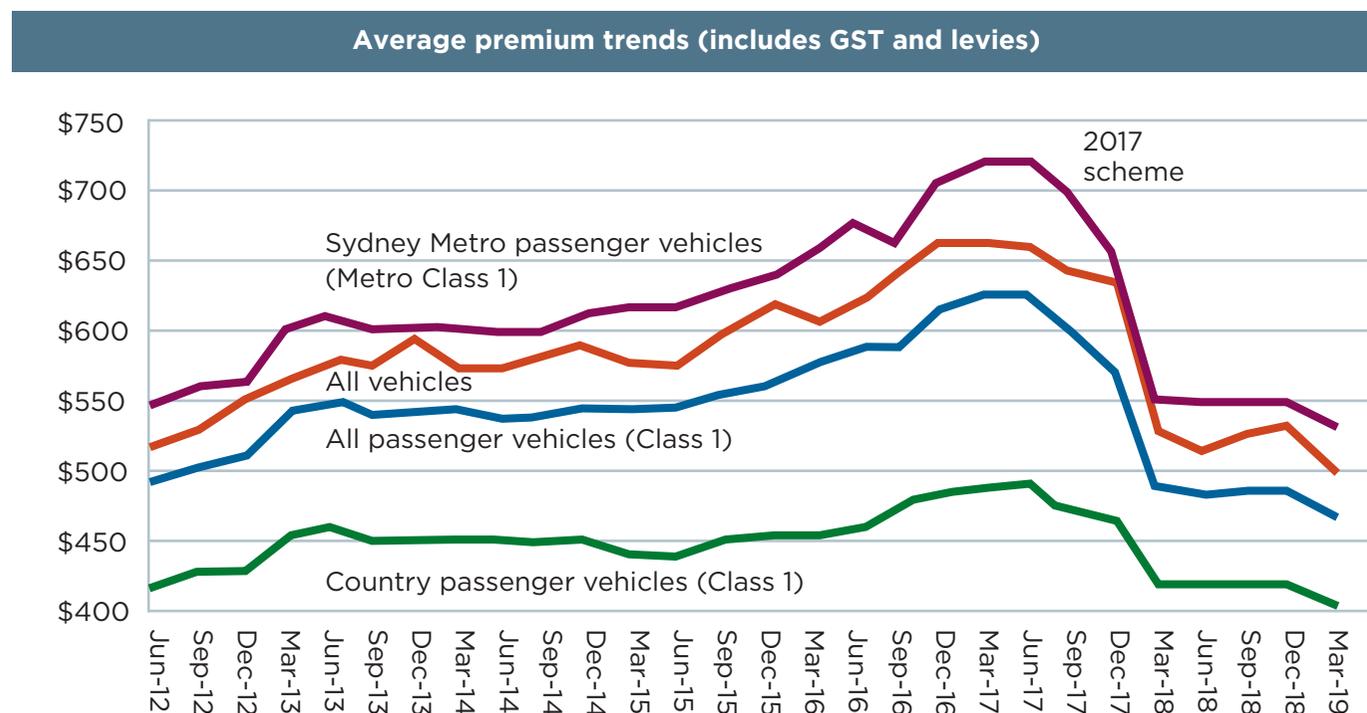
Insurer supervision

During the March quarter, insurer letter templates have been reviewed to ensure that legislative information and requirements were communicated in a simple and meaningful manner to people.

Insurer business plans were reviewed this quarter focusing on customer care and best practice. SIRA will provide feedback to insurers next quarter.

Insurers are required to regularly self-assess a sample of claims under the 2017 scheme using the *Motor Accident Injuries Act 2017* Self-Assessment Tool. Reviews to confirm the insurer self-assessment results were conducted by SIRA staff for all insurers. Improvement plans will then be established by the insurer.

The tool drives a continuous improvement cycle with better outcomes for injured people. A comparable tool is being developed for the 1999 scheme.



¹⁰ The average Green Slip premium is sourced from insurer Quarterly Premium Returns

Insurer internal reviews

If a person disagrees with the insurer's decision, they can request an insurer internal review.

The internal review will be conducted by someone with the required skills, experience, knowledge and training, who did not have a role in the original decision. This allows the person and insurer to resolve the disagreement quickly and easily.

If a 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.

313

Insurer internal reviews have been lodged this quarter

Internal reviews 1 December 2017 to 31 March 2019

Internal review type	No.	%	Internal review outcome	No.	%
Is the injury more than a minor injury?	1,140	50.6%	Decision upheld	1,280	56.8%
Amount of weekly benefit payments	161	7.1%	Decision overturned	388	17.2%
Is treatment and care reasonable and necessary?	366	16.2%	Withdrawn	153	6.8%
Is the injured person mostly at fault?	162	7.2%	Declined	161	7.1%
Statutory benefits claim time limits	53	2.4%	In progress	274	12.1%
Was accident the fault of another?	72	3.2%	Total	2,255	100%¹¹
Other	302	13.3%			
Total	2,255	100%¹¹			

¹¹ Rounding

Disputes and litigation

Where a person disagrees with an insurer's decision after an internal review, they can access SIRA's Dispute Resolution Service (DRS) to assist in reaching a resolution or independent determination of the dispute.*

* Some matters can proceed directly to DRS without requiring an internal review to be completed by the insurer.

Disputes

Disputes are different from complaints. Disputes are about a difference of opinion on a decision (a disagreement) while a complaint concerns dissatisfaction with a service, or disapproval of conduct or practices. Complaints can be about CTP policies, insurer practices, services or conduct.

In the quarter ended 31 March 2019, 366 disputes were lodged under the 2017 scheme, bringing the total since the scheme's commencement to 1,122.

Litigation

There have been no litigated claims under the 2017 scheme to date.

Dispute resolution - 2017 scheme - 1 December 2017 to 31 March 2019

Type	Dispute matter	Decision overturned	Decision upheld	Settled	In progress	Declined	Invalid	Withdrawn	Total
Medical	Minor injury	76	192	12	305	23	0	60	668
	Is treatment and care related to injury caused by accident?	3	9	1	13	5	0	5	36
	Is treatment and care reasonable and necessary?	7	18	0	55	2	0	6	88
Misc. claim	Is the injured person mostly at fault?	16	7	4	37	3	0	7	74
	Was accident the fault of another?	6	2	0	2	0	0	0	10
	Statutory benefit claim time limits	4	5	4	3	0	0	3	19
Merit review	Amount of weekly benefit payments	20	10	0	3	2	0	3	38
	Invalid dispute	0	0	0	0	0	36	0	36
	Other*	12	25	2	68	26	0	20	153
	Total	144	268	23	486	61	36	104	1,112

* 'Other' includes a range of dispute types with low numbers e.g. exclusion from statutory benefits when person commits a serious driving offence.

Key statistics

1999 scheme

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

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

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).

SIRA monitors the 1999 scheme, allocating resources for insurer supervision activities, and to address fraud, exaggerated claims and

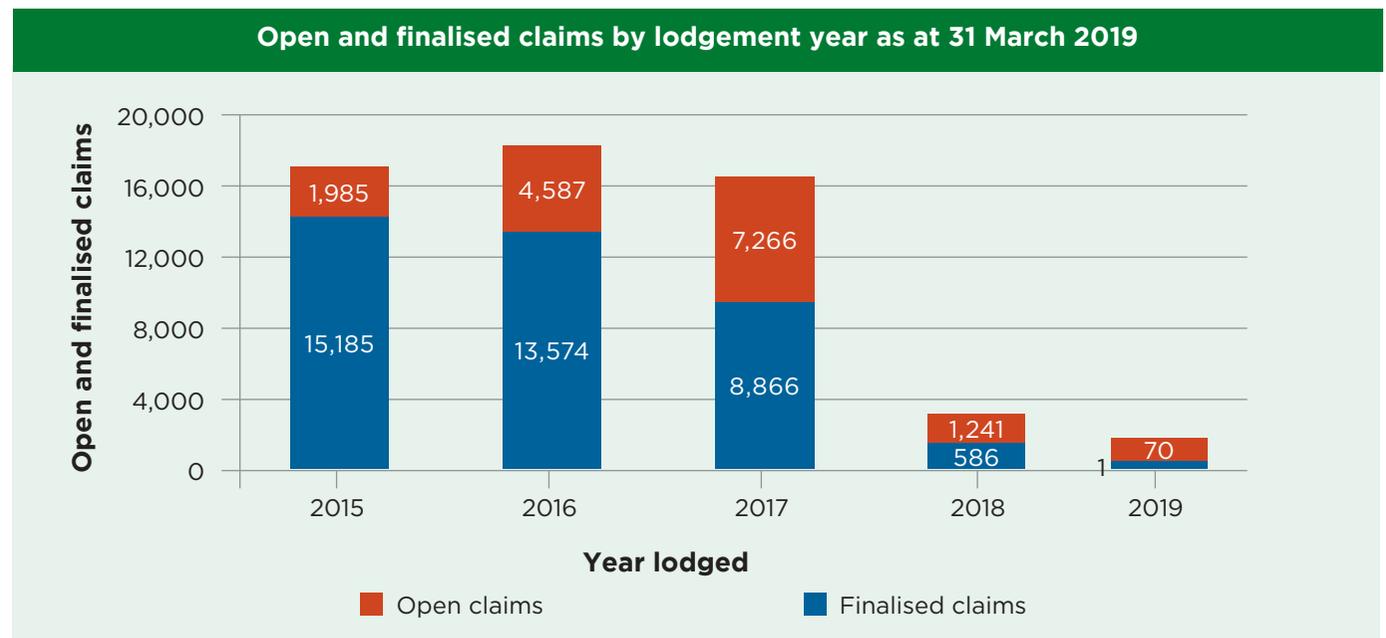
gaming activities (see Police update page 19). A good customer experience for people in the 1999 scheme is our goal.

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

Claims 1 January 2019 to 31 March 2019

71

new claims were lodged in the quarter



Open or active claims

As of 31 March 2019, there were 17,262 open claims under the 1999 Scheme. This compares with 19,302 as at 31 December 2018.

The time to settle a claim under the 1999 scheme may be affected by the time it takes for an injury

to stabilise. This enables 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.

March 2019

\$312 MILLION

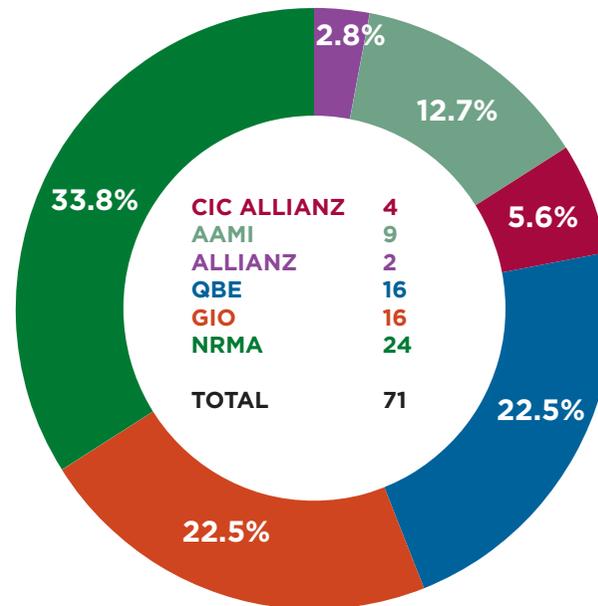
total gross paid in March quarter

March 2019

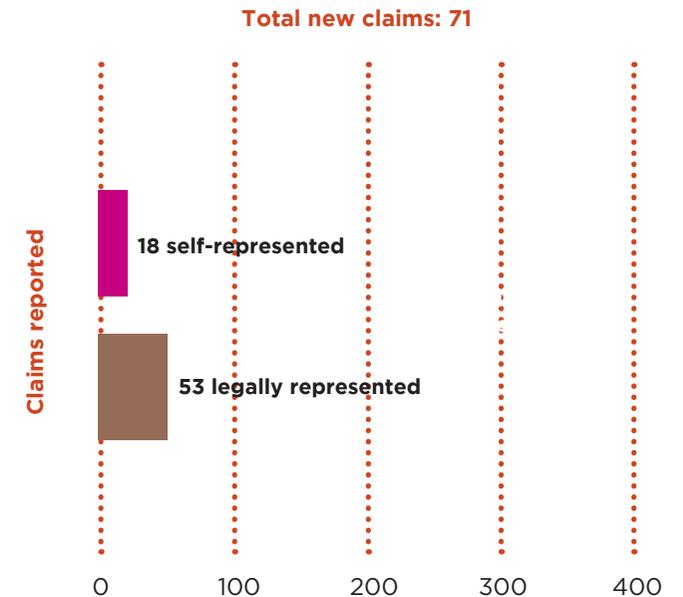
\$3.71 BILLION

outstanding estimate by insurers as at 31 March 2019

Claims lodged during the quarter by insurer



Injured people with legal representation



Medical Assessment Service (1999 scheme)

SIRA's Dispute Resolution Service also delivers the Motor Accidents Medical Assessment Service (MAS), as part of the 1999 scheme, to resolve any medical disputes between people who have been injured 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. For accidents occurring before the new scheme on 1 December 2017, we expect to see the volume of disputes continuing at the current rate until about mid-2020.

New medical disputes referred to MAS this Qtr	No.
Permanent impairment	696
Treatment and care	148
Further medical assessment	76
Medical assessment review	218
Total for quarter ended 31 Mar 2019	1138
Total for previous quarter	1406

Disputes resolved by MAS

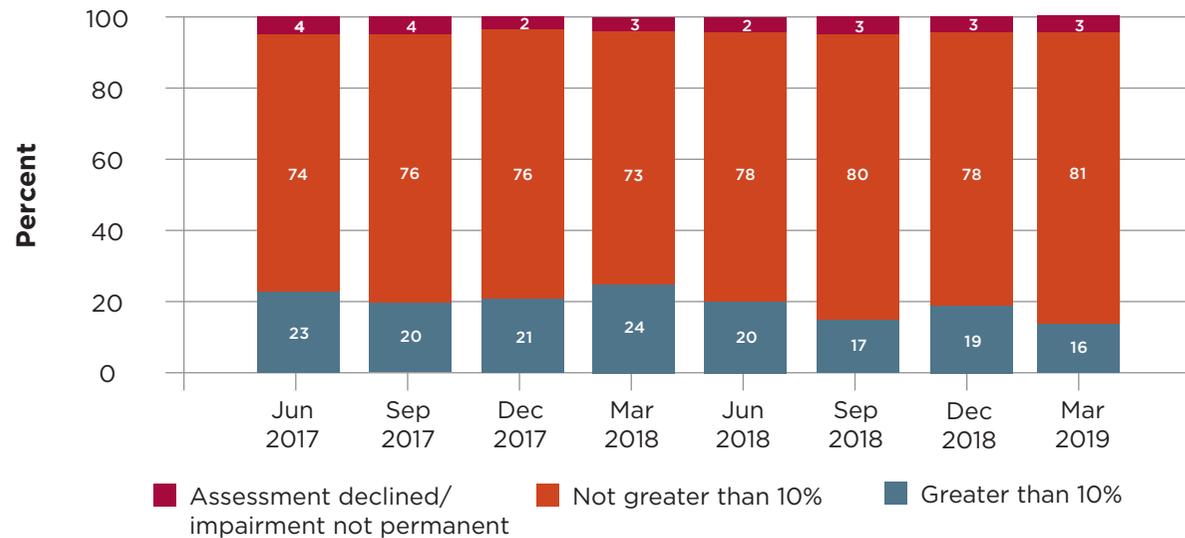
There were 1,386 disputes resolved by MAS this quarter, compared with 1,433 in the previous quarter.

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

People who have been assessed with permanent impairment of greater than 10 percent may claim for damages.

Five hundred and ninety-two (592) permanent impairment disputes were resolved in the March quarter. As the graph below shows, 16 percent of these were assessed as having a permanent impairment greater than 10 percent, a similar proportion to the previous quarter.

MAS permanent impairment disputes – assessed outcomes by type as a percentage



Claims Assessment and Resolution Service (1999 scheme)

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

Disputes about claims are referred to independent expert decision-makers (CARS Claims Assessor(s), 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. 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 this Qtr	No.
General claims assessment	526
Special assessments of procedural disputes	34
Applications for exemption from claims assessment	234
Total for quarter ended 31 March 2019	794
Total for previous quarter	950

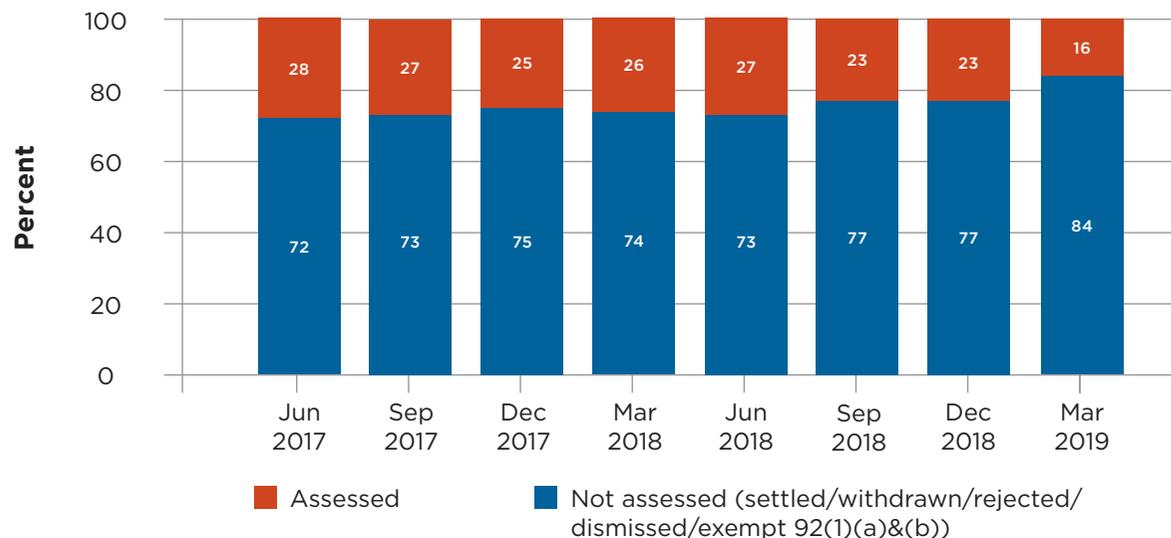
Disputes resolved by CARS

This quarter 801 disputes were resolved by CARS, compared with 832 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. Over 492 general assessment disputes were resolved in the March quarter, most without the need for a decision by a CARS Claims Assessor. This rate is consistent with prior periods.

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



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, 2,187 disputes were resolved by the Medical Assessment Service (MAS) and the Claims Assessment and Resolution Service (CARS).

Administrative challenges this quarter included the following for each of these services:

CARS

Three challenges to CARS decisions were commenced on behalf of an insurer.

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

One matter was set aside.

Eight challenges to CARS decisions are currently before the courts.

MAS

Seven challenges to MAS decisions were commenced, three on behalf of an injured person in a motor accident and four on behalf of an insurer.

Eight challenges to MAS decisions were finalised by the courts, six in favour of an insurer and two in favour of the injured person.

Two matters were set aside.

Twenty-five challenges to MAS decisions are currently before the courts.

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

25 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 people injured in a motor accident and insurers.



To help improve decision making, ensure the process is transparent and 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](#).

Keeping the scheme sustainable

Fraudulent claims, including those 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, in the premium prices we pay for third party insurance. This is why reducing fraud benefits everyone.

Powers under the 2017 Act have strengthened SIRA's ability to investigate and prosecute people attempting to cheat the system.

Police update

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

There were 13 criminal charges and four arrests by Strike Force Ravens this quarter.

Feedback, compliments and complaints

SIRA provides many feedback channels to encourage as many people as possible to engage with us.

Such channels include: by phone, email, post, through our website, or through the Feedback Assist widget on our website and Green Slip Check.

Policy holders, people injured in a motor accident and other members of our NSW community offer compliments, complaints and suggestions.

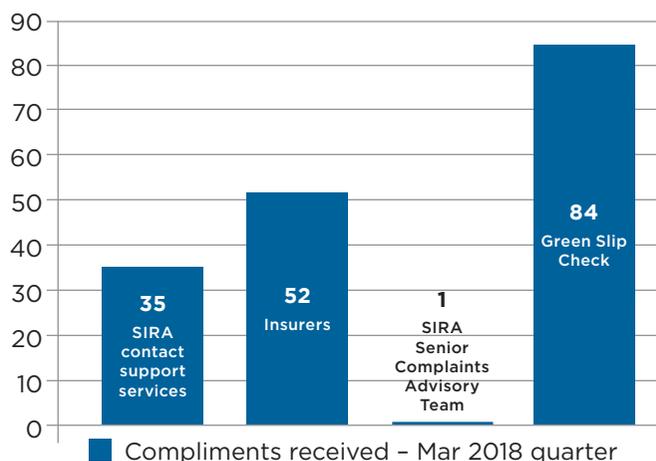
The different perspectives received enable us to improve the services we, and the insurers we regulate, deliver.

Compliments this quarter

In the March quarter, a total of 172 compliments were received by SIRA. Of these, 35 praised our contact support services, one praised our Senior Complaints Advisory Team which deals with escalated complaints, 52 praised an insurer, and 84 praised our CTP Green Slip Check.

Compliments provide insight into positive customer experiences and potential themes for best practice.

**Compliments received
January to March 2019 by service provider**



Compliments about insurers

The following table shows the percentage of compliments by insurer that were reported to SIRA this quarter.

Compliments reported to SIRA this quarter ¹²	
AAMI	15%
Allianz/CIC	17%
GIO	17%
NRMA	37%
QBE	13%

Centralised complaint handling

SIRA's centralised complaints handling function, that commenced in June 2018, tracks, monitors and resolves complaints under the 1999 and 2017 schemes.

Most complaints are straightforward and are resolved by our CTP Assist team (simple complaints). Complaints that need more time or are about more complex matters are resolved by our Senior Complaints Advisory team (complex complaints). Complex complaints include complaints escalated at the customer's request.

¹² Rounding

Feedback, compliments and complaints

Customers who are dissatisfied with SIRA's complaint handling can contact the NSW Ombudsman for assistance. Currently, no complaints have been lodged with the Ombudsman.

If a breach or non-compliance with the 2017 Act or *Motor Accidents Compensation Act 1999* or regulations is suspected, once a case is resolved, it is referred to our Compliance, Enforcement and Investigations team for consideration.

In the March quarter, SIRA resolved a total of 448 complaints

Category	No.	Key themes
Green Slip Check	259	System issues and insurer pricing
Simple complaints (generally resolved within two business days)	162	Around 80% are about insurer claims management
Complex complaints	27	About complex matters or escalated at customer request.
Total resolved	448	

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 were:

Green Slip Check	less than 2 days
Simple complaints	less than 2 days
Complex complaints	21 days.

Thirty percent of the claims-related escalated complaints are about the 1999 Scheme, and 70 percent are about the 2017 scheme.



Response time to resolve simple complaints

Complaints about insurers

This quarter, 191 complaints about insurers were resolved by our teams.

Complaint type	% ¹³
Insurer service	34%
Delays in claim payments and treatment	24%
Insurer decisions about payments, liability decisions and treatment	21%
Claims process	16%
Purchasing of the policy	4%

The following table shows the percentage of complaints by insurer that were reported to SIRA this quarter.

Complaints reported to SIRA this quarter ¹³	
AAMI	9%
Allianz/CIC	10%
GIO	19%
NRMA	42%
QBE	19%

Who complained

Complainant	No.
Person injured	102
Lawyers	73
Health provider	6
Customer	8
Other	2

¹³ Rounding

Compliance and Investigations

In the March quarter, eleven matters involving alleged breaches of the 2017 Act and the Motor Accident Guidelines by an insurer were escalated to the Compliance, Enforcement & Investigations (CE&I) team.

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.



Disclaimer

This publication may contain information that relates to the regulation of workers compensation insurance, motor accident 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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Motor Accidents Insurance Regulation,
Level 6, McKell Building, 2-24 Rawson Place,
Sydney NSW 2000

Phone enquiries:

CTP Assist
1300 656 919

www.sira.nsw.gov.au

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