

From: [REDACTED]
To: [consultation](#)
Subject: Public Consultation - Feedback - icare workers" comp scheme review
Date: Friday, 17 May 2019 2:56:45 PM
Attachments: [image001.png](#)

Find below some feedback for the public consultation process.

I operate a small brokerage in NSW (as an Authorised representative of a larger Broking Group). I have approx. 100 workers compensation clients & provide assistance with most aspects of the management of their policies;

- a) Premium reviews for large policies
- b) Issuing new policies on-line
- c) Monitoring the renewal process
- d) Assisting with claims
- e) Discussing general matters with clients
- f) Providing clients with support to manage their WH&S obligations

Whether it's by phone or on-line the whole process is aimed at dealing direct with the customer & whilst that model responds fine to most of the simple work that icare perform it is frustrating to get something complex or technical sorted out with any degree of confidence. Most of the problems are reoccurring & fall into the same areas;

Letter of Appointment:

The biggest issue that I have with icare is their insistence that I provide a letter of appointment (LOA) for each client when first making an enquiry about their policy. Presumably the data handed over from the previous scheme agents included details of the introducer. What's more frustrating is that for new clients, where we have set the policy up on-line with icare, icare still insist on the LOA. We charge a fee for service & sending out an authority for a client to complete & getting it back is a time consuming cost that wasn't factored into the agreed fee.

Satisfaction Survey:

The phone satisfaction survey is a nuisance that I don't participate in anymore. After the completion of a call the satisfaction survey is triggered & whilst the phone call may have concluded in a satisfactory manner, most of our queries are a little complex and will rely on further information or action before the query is complete. Initially I would give the call the thumbs up but find out that I was given wrong information, incomplete information or the promised action (from icare) did not eventuate. Commenting on the satisfaction level at the conclusion of the phone call is premature in most cases.

Renewals:

We've encountered numerous instances where renewals haven't been produced until after the renewal date. In one case, for a large client, the 2017-2018 renewal was not generated for 8 months until after the renewal date. The late production of the renewal

was not a concern but the lack of action each time I followed it up was very frustrating.

As the broker, I still don't know which clients we will receive the renewals for, in which instances we will receive a copy or for which cases we will receive nothing. It's quite unacceptable.

Overdue Premiums:

Not issuing statements for overdue premiums is quite alarming. In the last 60 days we had one client that we performed some work for in relation to their 2019-2020 renewal only to find out that the premium for the last years renewal was still outstanding.

Technical Queries:

With General insurance we are provided with contact lists & we're able to directly contact the individuals or departments that are responsible for a specific issue but with icare, every call goes to the general phone number & you have to explain what you want & they then email instructions to the relevant department. An individual from that dept will then reply but there are no phone numbers or individual emails & if you have to clarify the response then you need to go through the whole process again. It seems like the system is a little impersonal & no one is accountable for resolving anything (they just provide an answer & if it's questioned then you might end up dealing with someone else who has a different take on the matter).

Regards,

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