

# Request for replacement hearing aid – temporary form due to COVID-19



State Insurance  
Regulatory Authority

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Complete this form and return to the insurer when requesting a replacement hearing aid.

Workers may, if required, be provided with replacement of supplied hearing aid(s) where the supplied hearing aid:

- has been lost or damaged and is not covered by warranty or other insurance, or
- the worker can no longer communicate effectively using the current hearing aid.

This form does not need to be completed for new claims or for claims for further hearing loss.

## Help with completing this form

For injured workers: contact the insurer in the first instance, or alternatively the Workers Compensation Independent Review Office (WIRO) on 13 94 76.

For employers, insurers and other stakeholders: contact SIRA on 13 10 50.

**Note:** Parts A, B and C of the form are to be completed and signed by the worker.

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## Part A: Personal and claim details

Name

Street address (include unit/street/property/Lot or DP number if applicable – must not be a PO Box)

Suburb

State

Postcode

Contact number

Email

Claim number

## Part B: To be completed by the worker

I require a replacement hearing aid because (tick whichever applies):

my hearing aid has been lost and is not covered by warranty or other insurance

my hearing aid is damaged or is no longer functioning and is not covered by warranty or other insurance

I can no longer communicate effectively using the current hearing aid

How frequently did you use the hearing aid before it was lost or damaged?

Signature

Date (DD/MM/YYYY)

**Part C: Attach quote for replacement hearing aid(s) from a SIRA approved hearing service provider or SIRA trained ear, nose and throat (ENT) specialist**

I have attached a quote for replacement hearing aid(s) from a SIRA approved hearing service provider or SIRA trained ear, nose and throat (ENT) specialist.

**Part D: In response to COVID-19 the requirement for certification by the worker's general practitioner has been temporarily removed.**