

Workers' Compensation Regulatory Services

Applying for a claim review

A worker, claimant or employer can apply to the Workers' Compensation Regulatory Services (WCRS) for a review of some decisions by Insurers.

The review - in brief

- WCRS is not a part of WorkCover or a self-insurer.
- A worker, claimant or employer can apply to WCRS for a review of some decisions of insurers.
- Our review service is free.
- An application for review must be lodged within three months of receiving the Insurer's written decision.
- If the written reasons for the Insurer's decision have not been included with the decision then it is essential for you to request those reasons within 20 business days of receipt of the insurer's written decision.
- A review decision will be made within 25 business days, unless an extension has been agreed or information is being exchanged through procedural fairness processes.
- If you apply for a review you have the opportunity for a 'right of appearance'. This means you can meet with the Review Officer in person, or make representations over the phone or by another method.
- You do not need a legal representative in the review process. Any legal advice or representation you may obtain is at your expense.
- Workers can obtain advice from Queensland Council of Unions (Workers' Compensation Information Service): 1800 102 166 (you don't need to be a union member). If you are a member of a union, your union may also offer assistance.
- Employers can obtain advice from the Chamber of Commerce and Industry Queensland (Workers' Compensation Advice Line) on 1300 365 855 or associations of which you are a member.

To lodge an application for review

- Complete the Application for claim review Form 542.3
- Provide your grounds for review—why you believe the insurer decision is wrong in your own words
- Attach all of your supporting documents to your application
- Sign the form
- Submit your review application to WCR within three months of receiving the written reasons for decision from the Insurer

You can submit your review application by any of the below methods:

Online: visit WorkSafe.qld.gov.au and search for 'lodging a review'

Post: Workers' Compensation Regulatory Services
Review Unit
PO BOX 10119
Brisbane Adelaide Street, QLD, 4000

E-mail: reviewunit@oir.qld.gov.au

Frequently asked questions

What does 'grounds for review' mean?

Your grounds for review are the reasons why you believe the Insurer decision is wrong. Your grounds for review must be relevant to the injury and the claim e.g. The Insurer did not consider the relevant medical information—you can then attach appropriate material such as a new medical report.

WCRS cannot review Insurers' procedures or the way they manage a claim. It is important your grounds for review relate to the Insurer's decision about the claim. By providing detailed grounds for review, it will help the Review Officer better understand the issue.

If there are not sufficient grounds for review or the grounds are not adequately described, your application may be deemed as non-compliant and will require more information in order to proceed.

What supporting information do I need?

We conduct what is called an 'administrative review'. This means there will be no further investigations.

The Review Officer will not contact doctors, witnesses or specialists. Any information that supports the claim should be provided with your application for review. If you have any additional medical reports, witness statements, payslips etc. that support the issue you wish to have reviewed, it is crucial you submit them with the application.

The Review Officer will make the review decision based on the information the Insurer had at the time of the claim decision, and any additional information provided with the application for review.

Does my review application and information get sent to the other party?

We make an administrative decision and are obliged to ensure there is procedural fairness. This means that it is likely that new information you provide may be disclosed to the other parties impacted by the information.

What if three months have passed and I haven't lodged my review?

The *Workers' Compensation and Rehabilitation Act 2003* (the Act) allows us to extend the legislative timeframe to lodge your application if special circumstances exist.

What if I require more time to lodge my review?

We have the discretion to grant extensions to applicants for a review only once.

A request for an extension of the three month timeframe may be requested and must be supported by special circumstances. The request must specify how long the extension is required and the special circumstances/reasons as to why you require an extension.

As the timeframe to lodge a review is three months, it is expected that requests for the claim file, medical appointments and medical reports are attended to during this three month period, i.e. these do not constitute special circumstances.

Once the extension request has been received, we will make a decision as to whether or not the extension is granted within five business days.

Our policies and procedures regarding extensions can be found on our website. Visit worksafe.qld.gov.au and search for 'Policy and procedure regarding the review process'.

How long does a review take?

The decision is made within 25 business days unless we have agreed to an extension. You and the other party will receive the written decision within 10 days after the decision is made.

The review decision will either:

- confirm the original decision
- vary the original decision
- set aside the original decision and substitute another decision
- set aside the original decision and return it to the Insurer with directions

The 25 business day decision period can be extended only if you:

- agree to allow us to obtain more information for your application
- apply for an extension to supply more information for your application and we allow that extension.

The 25 business day timeframe can be extended due to procedural fairness if we determine this is required.

What is a Right of Appearance?

A Right of Appearance is the opportunity for the applicant to highlight matters they consider support their application for review or expand upon their grounds for review. This is commonly referred to as making submissions.

Your submissions can be made in the manner most appropriate to you such as by telephone or in person by making an appointment to meet with the Review Officer.

The Right of Appearance is an opportunity to put forward your view on how you consider the evidence should be interpreted.

If you have a particular issue or submission you wish to make clear it may be beneficial to also provide this in writing, for the Review Officer's later consideration. Likewise, should you have new evidence, such as a further statement from yourself or another witness, these should be provided in writing.

When making first contact with you, the Review Officer will ask whether you wish to exercise your Right of Appearance. At this time you should advise whether you wish to have a Right of Appearance and, if so, how you wish to appear – i.e. by telephone or in person.

If in person, the Review Officer will arrange a suitable time for you to attend our premises at 347 Ann Street, Brisbane.

We undertake the Right of Appearance in a polite, professional and non-adversarial manner and expect that attendees behave accordingly. Aggressive behaviour, threats or abusive language may lead to early termination of the Right of Appearance.

Common Questions:

1. How long does a right of appearance take?

Depending upon the extent of the submissions being made and how they are being given, a right of appearance can vary between ten minutes and up to an hour.

2. Can I attend anywhere else other than Brisbane?

Unfortunately no, our premises are located in Brisbane.

3. Can I bring a support person?

Yes, a support person attending with an applicant is a common occurrence which we welcome. Please advise if anyone will be accompanying you in advance to ensure adequate facilities for the meeting are available.

4. What should I bring?

If you have new documentary evidence you wish to rely on, or specific written submissions, copies of these can be provided to the Review Officer during the appearance.

What happens regarding expenses relating to the claim?

Workers—If your claim has been terminated or rejected, all expenses incurred in relation to your review application may be at your cost.

If we overturn the Insurer's decision, you may be able to have the costs of a medical examination and report reimbursed by the Insurer.

This may occur where we consider the medical examination and report substantially contributed to the review decision to set aside the Insurer decision.

We cannot make payments to claimants or reimburse medical treatment. If you are experiencing financial hardship you may wish to contact Centrelink or your superannuation fund.

Employers—Policy or premium increases may be placed on hold while the review takes place. You must negotiate this with the Insurer.

What do I do if I am unhappy with the review decision?

If you would like to dispute the review decision, the next step is for you to consider the value of lodging an appeal of the review decision.

If you decide to appeal you must lodge an appeal with the Queensland Industrial Relations Commission against the Workers' Compensation Regulator. The appeal must be filed at the Queensland Industrial Relations Commission within 20 business days of receiving the review decision and a copy must be served on us.

If we don't make a decision within the 25 business days, or the agreed extension timeframe, you can:

- appeal to an Industrial Magistrate in accordance with section 546(4) of the Act
- wait for the review decision to be made.

Want more help?

Call Workers' Compensation Regulatory Services Review Unit on 1300 739 021

Business address:	Unit/Building No.	Street No.	Street Name
	Suburb/Town/Locality		State Postcode
Postal address:	Unit/Building No.	Street No.	Street Name/PO Box
	Suburb/Town/Locality		State Postcode
Email:			

Section 2 - Grounds for Review (this section must be completed)

What Insurer decision do you wish to have reviewed?	<input type="checkbox"/> Acceptance of a claim <input type="checkbox"/> Rejection of a claim <input type="checkbox"/> Termination of a claim <input type="checkbox"/> Other – please provide details _____
Date of the insurer's decision you wish to have reviewed:	/ /

Section 542 (5) of the *Workers' Compensation and Rehabilitation Act 2003* states:
 The application for review:
 a) must be made in the approved form and given to the Workers' Compensation Regulator
 b) must state the grounds on which the applicant seeks review
 c) may be accompanied by any relevant document the applicant wants considered in the review.
 This means you need to specify why you think the Insurer's decision is wrong and should be changed.
**If there are any documents relevant to your application which you wish to be considered then they must be provided with the application.
 If insufficient space, attach separate pages.**

Do you have additional material to support your review? If yes, please attach:	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Your Review Officer will contact you to discuss your review and the process. You have the right to meet the Review Officer (right of appearance) to discuss the claim.
**All submissions must be in writing.
 A right of appearance is optional.**

Do you wish to have a right of appearance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Section 3 - Signature

Applicant's signature			
Print name		Date	/ /

Privacy statement:
 Workers' Compensation Regulatory Services respects your privacy and is committed to protecting personal information. The information will be managed within the requirements of the current state government privacy regime. Workers' Compensation Regulatory Services uses your personal information for the purposes for which it was collected and will not disclose it to a third party without your consent unless required or authorised to do so by law. Further information on our privacy policy is available at WorkSafe.qld.gov.au.

This form was approved by Workers' Compensation Regulator on 27 June 2017, pursuant to section 586 of the *Workers' Compensation and Rehabilitation Act 2003*.