Workers' Compensation Claims

What to Expect from Us

RiskCover?

The Insurance Commission of Western Australia, provides workers' compensation cover and manages claims on behalf of the WA Government and its agencies that contribute to the RiskCover Fund.

What is required to make a claim?

If you are injured at work:

- Complete a workers' compensation claim form; and
- submit the form and a **First Certificate of Capacity** signed by a medical practitioner to your employer.
- Ask your employer if you can submit your claim **online**.

When will a decision be made?



You will be notified within **17 days** of your claim lodgement if your claim is accepted, declined or pended.

What am I covered for?

You may be entitled to:



Time lost from work due to your injury in the form of weekly compensation.



Prescribed medical treatment to support your recovery.



Cost of travel for injury-related medical appointments.



Support from an **Approved Workplace Rehabilitation Provider** to assist with your return to work.



Compensation for **permanent impairment**.

Each entitlement has a prescribed annual amount set by WorkCover WA: workcover.wa.gov.au/resources/rates-fees-payments/



What will happen with my pay once my claim is accepted?

Your employer will pay you as normal and seek reimbursement from us.

If you have used sick leave while waiting for a decision on your claim this will be credited back to you.

Contact your employer if you have any questions about how your weekly payments are calculated.

If you need more help, contact your claims officer.

What happens if I am not fit for work or have restrictions?



You will be supported to return to work by your employer, your General Practitioner

and your claims officer. This may include a graduated return to work with restrictions on your duties and/or hours.

How can I get an update on my claim?

Contact your claims officer (see any letter from us for those details).

How quickly will you respond to me?

We aim to respond to queries within two business days.

Telephone Freecall Email Office Hours gi@icwa.wa.gov.au Monday to Friday 8am-5pm



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Can I seek treatment if my claim is pended?



Treatment Provider Ask if you need to pay while a cl

Ask if you need to pay while a claim is being determined.



Accounts

Accounts are held until a decision is made.



Claim Decision

Accepted claim: reasonable treatment will be paid via your claim.

Declined claim: it is your responsibility to pay for treatments/accounts.

How do you work with me?

We aim to work with you in a positive, honest and professional manner. We understand the time following an accident or injury can be difficult.

We are committed to managing your claim promptly and efficiently.

We will keep you updated as your claim progresses.

How do I submit accounts for reimbursement?

Email your accounts to invoices@icwa.wa.gov.au



- Your full name and claim number need to be in the subject line.
- PDF format for the account.
- Leave the body of the email blank.

You can also post your accounts to the address on our letters.

What if I have more information to provide?

Please email your claims officer directly.

How quickly will I be refunded?

We aim to reimburse you within 10 days of an account being received when:

- your claim has been approved; and
- you have completed an EFT form.

What if I do not agree with a claims decision or have a complaint?

Contact your claims officer in the first instance to see if the issue can be resolved.

You can also request for the decision to be internally reviewed by a senior member of staff.

If that is not satisfactory to you, WorkCover WA's Conciliation and Arbitration Service provides an independent process to review claims decisions. Call 1300 794 744.

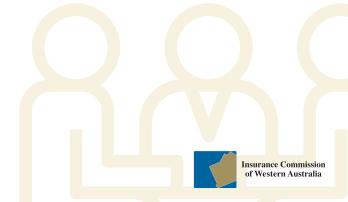
Contact Us

We can respond more quickly if you provide your claim number and full name on all correspondence, and/or you call the number provided on any claims documentation.

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Office Hours:	Monday to Friday 8am-5pm



On request, this guide can be made available in alternative formats