

Workers Compensation Claims

What to expect

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:

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

When will a decision be made?

 You will be notified if your claim is accepted, declined or deferred, within 14 days of your employer lodging your claim.

What am I covered for?

You may be entitled to:

- **Time lost from work** due to your injury in the form of income 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/

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.

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

Your employer will pay you as normal and seek reimbursement from us. Contact your employer if you have any questions about how your income compensation is calculated.

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



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 or provide more information?

Contact your claims officer (see any letter from us for those details). We aim to respond to queries within two business days.



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How do I submit accounts/invoices for reimbursement?

Online at

https://www.icwa.wa.gov.au/reimbursements

As long as your treatment was approved, and you provided your bank details when you submitted your invoices, you will be reimbursed within 10 days.

Can I seek treatment if my claim is deferred?

It is recommended to seek early treatment when you have an injury, regardless of the status of your claim, as it has been proven to help with recovery.

You may be eligible for provisional payments for income and/or medical and health expenses if a decision has not been made about your claim in 28 days. In these cases, your claims officer will advise you of your eligibility and provide more information on provisional payments.

Once a claim is approved, the Insurance Commission will cover any reasonable treatments related to your injury. For claims that have been declined, it will remain your responsibility to seek and pay for your treatment.

What if I disagree 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 the outcome of that review 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.

In the first instance, use the email address or call the number provided on any email or letter you have received from your claims officer.

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

icwa.wa.gov.au