

# Insurer Guidance

## Reporting and data requirements

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### Section 39 of the *Workers Compensation Act 1987*

Information for  
insurers

April 2017  
(v2)



State Insurance  
Regulatory Authority

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# Part A - Introduction

## A1: Summary

The State Insurance Regulatory Authority (SIRA) provides information to assist insurers submit data in relation to claims impacted by section 39.

Insurers are required to provide regular data reporting to advise SIRA on their progress as to the status of each claim.

To support this process SIRA provides three separate reporting templates for insurers:

- Section 39 data reporting template.
- Section 39 high risk reporting template.
- Section 39 media activity reporting template.

These templates have been designed to:

- capture key information and activities for claims where entitlement to weekly payments are projected to cease
- provide regular reporting and data to SIRA in relation to claims that are impacted
- ensure SIRA is informed of any significant risk to the worker, others, or likely media activity.

This insurer guidance (reporting and data requirements) provides detail on what is required of insurers, to accurately and consistently complete each reporting template.

**Note:** this guidance should be read in conjunction with the Insurer Guidance - *Cessation of weekly payments after five years (260 weeks) section 39 of the Workers Compensation Act 1987*.

## A2: Exempt categories of workers

This insurer guidance does not apply to:

- exempt categories of workers (police officers, paramedics or fire fighters)
- coal miners
- volunteers prescribed by the *Workers Compensation (Bush Fire, Emergency and Rescue Services) Act 1987*, or other voluntary work or unpaid employment.

## A3: Monitoring and evaluation

SIRA, as the Regulator, will be monitoring the performance of each insurer. Consistent with the objective of the Act to promote fairness and return to work opportunities where possible, SIRA expects that all insurers will focus on ensuring that workers impacted by this legislation are treated fairly and equitably, and are provided with timely support and communication to enable orderly cessation of their weekly entitlements.

It is expected that all insurers' data submissions are accurate and on-time. Where anomalies in data reporting are identified, reports will be returned to the insurer for correction.

SIRA has provided insurer guidance which outlines SIRA's minimum expectations when consulting with workers, employers and other stakeholders in relation to the operation of section 39. This is detailed in the Insurer Guidance – *Cessation of weekly payments after five years (260 weeks), section 39 of the Workers Compensation Act 1987*.

**Note:** data captured focuses on key outcomes for workers, and SIRA may report back to each insurer on their performance, relative to the scheme.

## A4: Further information

Insurers with queries about this guide and / or section 39 should email their enquiry to: [transition.strategy@sira.nsw.gov.au](mailto:transition.strategy@sira.nsw.gov.au)

# Part B – Insurer reporting schedule

Insurers are required to provide SIRA with accurate reports in accordance with the reporting schedule.

## B1: Section 39 data reporting template

Commencing from May 2017; insurers are required to submit their section 39 data reporting on a monthly basis.

The next report will be due on or before the **19 May 2017** and must include all open claims with 208 weeks or more of weekly payments (paid or payable) as at 1 December 2016.

For each subsequent monthly report, insurers are required to include all open claims that have reached 208 weeks as at the end of the month prior to the reporting due date.

Any changes or movements must be reflected in the report for each reporting period.

SIRA will review all insurer data provided during each reporting period and may contact the insurer where further information or verification is required.

**Note:** claims reported cannot be a closed claim for the purposes of section 39.

## B2: Section 39 high risk reporting template

For claims identified as high risk; insurers must complete the high risk reporting template and submit to SIRA within **24 hours** from the date identified.

## B3: Media activity reporting template

Where there is potential / actual media activity by a worker regarding their claim; the insurer must complete the media activity reporting template and submit to SIRA within **24 hours**, from the date identified.

## B4: Reporting schedule

Insurers are required to submit completed reporting template(s) as per the following schedule:

Month	Section 39 reporting due dates
February 2017	By 5pm Friday 17/02/2017
April 2017	By 5pm Friday 21/04/2017
May 2017	By 5pm Friday 19/05/2017
June 2017	By 5pm Friday 16/06/2017
July 2017	By 5pm Friday 21/07/2017
August 2017	By 5pm Friday 18/08/2017
September 2017	By 5pm Friday 22/09/2017
October 2017	By 5pm Friday 20/10/2017
November 2017	By 5pm Friday 17/11/2017
December 2017	By 5pm Friday 15/12/2017
January 2018	By 5pm Friday 19/01/2018
February 2018	By 5pm Friday 16/02/2018
March 2018	By 5pm Friday 16/03/2018
April 2018	By 5pm Friday 20/04/2018
May 2018	By 5pm Friday 18/05/2018
June 2018	By 5pm Friday 22/06/2018

July 2018	By 5pm Friday 20/07/2018
August 2018	By 5pm Friday 17/08/2018
September 2018	By 5pm Friday 21/09/2018
October 2018	By 5pm Friday 19/10/2018

## B5: Submission

Submit all data reporting via data exchange.

Reporting templates are located in the: 'Section 39 monthly submission' folder.

Please upload your reports into the: 'Section 39 monthly submission' folder.

The 'Section 39 monthly submission' folder is located within the: '*documents for insurer*' - '*section 39 transition strategy*' - '*reporting and data*' folders.

If you have any questions about data exchange or require access please send an email to [Transition.Strategy@sira.nsw.gov.au](mailto:Transition.Strategy@sira.nsw.gov.au) or contact Steve Pollicina on (02) 8267-1999.

## Part C – Completing the reporting templates

### C1: How to complete the section 39 data reporting template

The following table sets out each reporting field in the section 39 data reporting template and an explanation on the data that is to be captured in each field.

Insurers should acknowledge the relevant provisions outlined in the:

- *Workers Compensation Act 1987* (the 1987 Act)
- *Workplace Injury Management and Workers Compensation Act 1988* (the 1998 Act)
- *Workers Compensation Regulation 2016* (the Regulation).

Reporting field	Explanation
Insurer number	The insurer number as per claims technical manual (C: 1.2).
WCA claim number	The insurer claim number as per claims technical manual (C: 2.1.2).
Date claim entered on agent / insurers system	The date the claim was entered onto the insurer's computer system as per claims technical manual (C: 2.1.8).
Worker's given name	The worker's given name as per claims technical manual (C: 2.7.5).
Worker's surname	The worker's surname as per claims technical manual (C: 2.7.4).
Worker's postcode	The worker's postcode as per claims technical manual (C: 2.1.18).
Date of birth	The worker's date of birth as per claims technical manual (C: 2.1.20).
Gender	The worker's gender as per claims technical manual (C: 2.1.19).
Date of injury	The worker's date of injury as per claims technical manual (C: 2.1.43).
Date claim received by the insurer	<p>The date the claim was received by the insurer.</p> <p>This date will assist in determining the date the 260 week count commences:</p> <ul style="list-style-type: none"> <li>if the claim was received by the insurer on or after the 01/10/2012, the 260 week count cannot commence before the 01/10/2012</li> <li>if the claim was received by the insurer prior to 01/10/2012, then the 260 week count cannot commence before the 01/01/2013.</li> </ul>
260 week count commencement date (260 weeks must not commence prior to)	<p>This field will be auto populated after the above 'date claim received by insurer' field is completed.</p> <p>This will indicate to the insurer that the 260 week count for weekly benefits must not commence prior to either the 01/10/2012 or 01/01/2013.</p>
Has permanent impairment been assessed?	<p>Select either <b>yes</b> or <b>no</b> from the drop down list.</p> <p>This will indicate if a permanent impairment assessment has been completed for the purposes of section 39.</p>
Date of medical appointment if permanent impairment is still to be assessed	<p>This field only needs to be completed where permanent impairment has not yet been assessed for the purposes of section 39.</p> <p>For these claims, the insurer should:</p> <ul style="list-style-type: none"> <li>where appropriate, arrange a medical appointment with a trained assessor of permanent impairment and enter the date of the appointment in this field</li> <li>alternatively, where it is not appropriate to arrange an appointment (for instance, maximum medical improvement may not have been attained) then leave this field blank.</li> </ul>

Additional information	<p>Select additional information from the drop down list, the options are:</p> <ul style="list-style-type: none"> <li>• work injury damages – common law settlement paid</li> <li>• WPI assessed for section 39 – MMI not reached</li> <li>• WPI assessment arranged (enter appointment date in Column “M”)</li> <li>• no longer in receipt of weeklies - liability disputed</li> <li>• no longer in receipt of weeklies - work capacity decision made</li> <li>• WPI deemed &gt; 20%.</li> </ul>
Permanent impairment (WPI per cent)	The percentage of permanent impairment that has been assessed for the purposes of section 39.
WPI dispute	<p>Select either <b>yes</b> or <b>no</b> from the drop down list.</p> <p>This will indicate if the permanent impairment assessment that was conducted for section 39 is disputed and lodged with the Workers Compensation Commission.</p>
High risk claim	<p>Select either <b>yes</b> or <b>no</b> from the drop down list.</p> <p>This field will capture claims identified as a high risk claim.</p> <p><b>Note:</b> refer to the definition provided on page eight, <i>C2: How to complete the section 39 high risk reporting template</i> on high risk categories. Where ‘<b>yes</b>’ has been selected, please submit your template to SIRA within five working days from the date identified.</p>
High risk category	<p>If ‘<b>yes</b>’ is selected in the above field, then this field provides five listed options where one must be selected:</p> <ul style="list-style-type: none"> <li>• threat of self-harm or suicide</li> <li>• actual self-harm or suicide</li> <li>• drug and alcohol abuse</li> <li>• unreasonable behaviour</li> <li>• other.</li> </ul>
If ‘other’ high risk category is selected please comment here	If ‘ <b>other</b> ’ is selected from the high risk category, the insurer must provide comments in this field which clearly indicate the reasons this claim is classified as ‘other’ high risk.
Media activity	<p>Select either <b>yes</b> or <b>no</b> from the drop down list.</p> <p>This field will capture claims identified with potential / actual media activity.</p> <p><b>Note:</b> refer to the definition provided on page nine, <i>C3: How to report media activity to SIRA</i>. Where ‘<b>yes</b>’ has been selected, please submit your template to SIRA within 24 hours from the date identified.</p>
Date media activity reported to SIRA	This field will capture the date the media activity was reported to SIRA.
Are weekly payments ceasing under section 39?	<p>Select either <b>yes</b> or <b>no</b> from the drop down list.</p> <p><b>Note:</b> This field should only be completed when a decision under section 39 has been confirmed.</p>
Date of section 39 formal notice to cease weekly payments	<p>If the field ‘<i>are weekly payments ceasing under section 39</i>’ is ‘<b>yes</b>’ then this field must be completed indicating the ‘<i>date of the formal notice</i>’ to cease entitlement to weekly payments <b>will be</b> issued to the worker.</p> <p>If the field ‘<i>are weekly payments ceasing under section 39</i>’ is marked ‘<b>no</b>’ then this field should be left blank.</p>
Date entitlement to weekly payments ceases	The date a worker’s entitlement to weekly payments ceases under section 39.



Returned to work	Select either <b>yes</b> or <b>no</b> from the drop down list. This field will capture if the worker is currently returned to work in any capacity.
Current work status code	Select the current work status code from the drop down list. The current work status code as per claims technical manual (C: 2.2.13).
Nature of injury code	The nature of injury / disease code as per claims technical manual (C: 2.1.45).
Body location code	The bodily location of injury / disease code as per claims technical manual (C: 2.1.46).
Comments	Please add any additional comments you feel are appropriate here.

## C2: How to report high risk category workers to SIRA

Insurers are expected to have relevant policies, procedures and protocols in place to appropriately manage 'high risk' workers.

Insurers must report workers who are classified as 'high risk' on the separate template; *section 39 high risk reporting template*.

Where more than one risk is identified, insurers should select the most significant risk.

### High risk category workers

Insurers should be aware that workers who are classified as high risk may be particularly vulnerable when their entitlement to weekly payments cease, and may require additional support throughout this process.

When reporting on 'high risk' category workers, the insurer must advise SIRA within **24 hours** (if not previously reported) via email to: [Transition.Strategy@sira.nsw.gov.au](mailto:Transition.Strategy@sira.nsw.gov.au).

Insurers are required to have a nominated contact(s) within their organisation that can be reached directly by SIRA for further information, if required.

\*There are five categories for high risk workers on the reporting template:

High risk categories	Comments
Threat of self-harm or suicide	Insurers should only report on workers where the risk or threat is current, and / or becomes apparent in response to activity undertaken on their claim.
Actual self-harm Or suicide	Insurers should only report on workers where the risk or event is current, and / or becomes apparent in response to their claim.

Drug and alcohol abuse	Insurers should only report on this category where the information suggests significant and current drug and / or alcohol abuse which may warrant additional treatment, intervention or support.
Unreasonable behaviour	Insurers should report the following behaviours: <ul style="list-style-type: none"> <li>• unreasonable or excessive complaint behaviour</li> <li>• aggressive, abusive, harassing or otherwise confronting behaviour</li> <li>• targeted threats towards staff</li> <li>• threats with a weapon</li> <li>• threats to damage property, including bomb threats (overt or covert)</li> <li>• stalking behaviour on-line or in person.</li> </ul>
Other	Where the insurer has identified a high risk, however this risk does not fit into one of the above categories, then select ' <b>other</b> ' and provide an explanation of the risk.

The following table sets out each field in the section 39 high risk reporting template and an explanation on the data that is to be captured in each field.

**Note:** insurers should only report those 'high risk' category claims that are directly impacted by activities undertaken in relation to section 39.

Reporting field	Explanation
Insurer number	The insurer number as per claims technical manual (C: 1.2).
Insurer name	The licenced insurer name.
WCA claim number	The insurer claim number as per claims technical manual (C: 2.1.2).
Worker's given name	The worker's given name as per claims technical manual (C: 2.7.5).
Worker's surname	The worker's surname as per claims technical manual (C: 2.7.4).
High risk category	If ' <b>yes</b> ' is selected in the above field, then this field provides five listed options where one must be selected: <ul style="list-style-type: none"> <li>• threat of self-harm or suicide</li> <li>• actual self-harm or suicide</li> <li>• drug and alcohol abuse</li> <li>• unreasonable behaviour</li> <li>• other.</li> </ul>
If 'other' high risk category is selected please comment here	If ' <b>other</b> ' is selected from the high risk category, the insurer must provide comments in this field which clearly indicate the reasons this claim is classified as 'other' high risk.
Date identified as high risk	The date the insurer identified the claim as high risk as per the high risk definitions.
Date SIRA notified	The date SIRA was notified of the high risk claim.

## C3: How to report media activity to SIRA

Insurers are expected to have relevant policies, procedures and protocols in place to appropriately manage inquiries and / or complaints.

In the event of potential / actual media activity by a worker regarding their claim, the insurer must advise SIRA within **24 hours** (if not previously reported) via email to: [Transition.Strategy@sira.nsw.gov.au](mailto:Transition.Strategy@sira.nsw.gov.au).

Insurers are required to have a nominated contact(s) within their organisation that can be reached directly by SIRA for further information, if required. 'Media activity' may include:

### Type of media activity

- use of social media to vilify, defame, harass, intimidate or threaten
- potential / actual phone call to radio
- potential / actual approach to television or news
- letter to a local member of parliament, the minister or premier
- other.

\*The media activity reporting template is summarised as follows:

Media activity reporting template	
Insurer	The insurer who is reporting the media activity.
Insurer's contact name	The nominated insurer contact's name.
Insurer's contact phone number	The nominated insurer contact's phone number.
Insurer's contact email address	The nominated insurer contact's email address.
Worker's given name	The worker's given name as per claims technical manual (C: 2.7.5).
Worker's surname	The worker's surname as per claims technical manual (C: 2.7.4).
WCA claim number	The insurer claim number as per claims technical manual (C: 2.1.2).
Date media activity identified	The date the insurer identified that a media activity exists.
Date media activity reported to SIRA	The date the insurer reported the media activity to SIRA.

<p>Type of media threat</p>	<p>This field provides five listed options where one must be selected:</p> <ul style="list-style-type: none"> <li>• use of social media to vilify, defame, harass, intimidate or threaten</li> <li>• potential / actual phone call to radio</li> <li>• potential / actual approach to television or news</li> <li>• letter to a local member of parliament, the minister or premier</li> <li>• other.</li> </ul>
<p>"Other" media activity</p>	<p>If <b>'other'</b> is selected from the media activity category, the insurer must provide an explanation to clearly indicate the reasons this claim is classified as 'other'.</p>
<p>Comments</p>	<p>Please explain the nature of the media activity including circumstances, actions, strategies and expected outcomes for the worker.</p>

#### Disclaimer

This publication may contain information that relates to the regulation of workers compensation insurance, motor accident third party (CTP) insurance and home building compensation in NSW. It may include details of some of your obligations under the various schemes that the State Insurance Regulatory Authority (SIRA) administers.

However to ensure you comply with your legal obligations you must refer to the appropriate legislation as currently in force. Up to date legislation can be found at the NSW Legislation website [legislation.nsw.gov.au](http://legislation.nsw.gov.au)

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