

Resolving disputes about eligibility

What is a dispute about eligibility?

A dispute about eligibility is when someone disagrees with Lifetime Care's decision about your eligibility for participation in the Lifetime Care and Support Scheme (the Scheme). This can be for either 'interim participation' (for two years) or 'lifetime participation' (for life).

You must have been severely injured in a motor accident in NSW since 1 October 2006 to be accepted as a participant in the Scheme. Severe injuries that may be eligible for the Scheme include:

- spinal cord injury
- brain injury
- amputations (or equivalent impairment)
- burns
- permanent blindness.

To be eligible, you need to meet specific criteria for both your injury and the motor accident. These criteria are outlined in the *Lifetime Care and Support Guidelines* (the *Guidelines*). These are available on our website www.icare.nsw.gov.au

An eligibility dispute is different to a motor accident injury dispute. An eligibility dispute is when someone disagrees with our decision about whether your injury meets the criteria in the *Guidelines*. This is a medical dispute and is resolved by an independent panel of medical and healthcare professionals.

A motor accident injury dispute is when someone disagrees with our decision about whether your injury is a 'motor accident injury', which is whether it meets the legal definition of a motor accident. This is a legal dispute and is resolved by an independent panel of legal professionals. For details, see our information sheet: *DC03 Resolving disputes about a 'motor accident injury'*, on our website www.icare.nsw.gov.au.

How are decisions about eligibility made?

We make a decision about your eligibility based on the information provided in your *Application* form and additional information provided in other reports we receive, such as police and ambulance reports and hospital records. We assess the information to see if you meet the criteria in the *Guidelines*. The process is the same for both interim and lifetime participation in the Scheme.

For some injury types (brain injury and burns), there is an additional assessment (called a Functional Independence Measure, known as FIM™ (or WeeFIM® for children), that your treating team completes and sends to us.

The *Application* form also contains a medical certificate signed by a medical specialist to confirm the severity of your injury.

We send our decision to you in writing. The decision includes whether or not you are eligible for the Scheme and how your application does or does not meet the criteria in the *Guidelines*.

Is a dispute different to a complaint?

Yes. A dispute is when someone disagrees about a decision we have made, such as:

- whether your injury meets the eligibility criteria to become a participant in the Scheme
- whether your injury meets the legal definition of a 'motor accident injury'

A complaint can be about any aspect of Lifetime Care, the level of service provided to you, or the services paid for by us. Anyone can make a complaint to us.

A dispute is resolved in a different way than a complaint. For more information, see the complaints and disputes information on our website www.icare.nsw.gov.au. You can also see our information sheet about compliments and complaints: *DC07 Your feedback - Tell us what you think*, on our website.

Who can lodge an eligibility dispute?

An eligibility dispute can be lodged by:

- you (the injured person)
- your representative (for example, a family member or a solicitor)
- a relevant Compulsory Third Party (CTP) insurer

When can an eligibility dispute be lodged?

A dispute can only be lodged after you've received our written decision about your eligibility.

The dispute needs to be lodged within 6 months of receiving the decision.

How do I lodge an eligibility dispute?

Disputes can be lodged verbally (by phone or in person) or in writing, either by a letter or email to us. The letter or email needs to explain why you disagree with our decision. You should include why you think you meet (or do not meet) the injury criteria in the *Guidelines*. These are available on our website www.icare.nsw.gov.au. You can contact our Customer Resolution Team on 1300 738 586 or by email: feedback.lifetimecare@icare.nsw.gov.au for more information or to lodge a dispute.

If you need help to lodge a dispute, we also have several support and advocacy providers who can help you to navigate the dispute process. For details, see our information sheet: *P13 Support and Advocacy Service*, on our website www.icare.nsw.gov.au.

Alternatives to a dispute

Sometimes we might find that a dispute application gives us enough information to make a new decision about your eligibility. We may ask you to complete another application to the Scheme instead of raising a dispute, or we may be able to treat your dispute application as a new application to the Scheme. These alternatives only apply if you are not a participant in the Scheme at the time of the dispute application.

Who assesses the dispute?

We'll appoint an assessment panel of three independent assessors to resolve the dispute. None of the

assessors will have assessed or treated you before.

All dispute assessors are medical and health professionals and have extensive experience assessing and treating people with severe injuries. All dispute assessors are independent from us.

How will the panel make a decision?

Each panel member is sent all the relevant information about the dispute. The panel then decides together how to assess the dispute. If they decide that a further assessment is needed, we will let you know. Any further assessment will involve speaking with the people involved in your life (such as family members or your service providers).

Can I give information to the panel?

You or your representative can give information to the panel. The information needs to be in writing and sent to our Customer Resolution Team. You can phone 1300 738 586 or email: feedback.lifetimecare@icare.nsw.gov.au.

It's important to provide any relevant information as soon as possible to ensure the panel reviews it, as it may affect how the panel assesses the dispute.

We'll send the information to the panel and to any other parties involved in the dispute (for example, an insurer). You'll also be sent a copy of any information provided by another party.

How long will the dispute process take?

Disputes about eligibility may take several months to resolve. This is because of the time required to gather information or to complete assessments to ensure the right decision is made. The panel will try to resolve the dispute as quickly as possible.

We'll keep you informed throughout the process.

What happens next?

We will send you the decision that resolves the dispute in a written certificate, which includes the panel's reasons for the decision.

Once the assessment has been completed, the panel will make a joint decision about the dispute. This decision is legally binding, which means you and Lifetime Care must accept the decision.

Can I review the eligibility dispute decision?

Sometimes, there are certain grounds for review. These are explained in our information sheet: *DC02 Review of an assessment panel's decision about eligibility* available on our website www.icare.nsw.gov.au.

For more information, contact our Customer Resolution Team on 1300 738 586 or email: feedback.lifetimecare@icare.nsw.gov.au.

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