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# Motor accident insurance authority forms

## A guide for GPs

This article forms part of our 'Paperwork' series for 2011, providing information about a range of paperwork that general practitioners complete regularly. The aim of the series is to provide information on the purpose of the paperwork, and hints on how to complete it accurately. This will allow the GP to be more efficient and the patient to have an accurately completed piece of paperwork for the purpose required.

### Background

In each jurisdiction of Australia there is a system to provide appropriate compensation for persons who are injured or die as a result of a transport accident. The schemes are compulsory and usually funded via a levy on vehicle registration or compulsory insurance. The exact eligibility and structure varies greatly between states and territories.

### Objective

This article highlights the important role that the general practitioner plays in an injured person's recovery, and provides an overview of the types of forms commonly requested from GPs and general guidelines for how these should be completed.

### Discussion

In order to determine the appropriate entitlements and reasonable treatment and services an injured person requires as a result of a transport accident injury, the authority may require information from the treating GP. The use of specific forms for this information aims to efficiently facilitate the allocation of these benefits. It is important that forms are completed accurately and provide sufficient information to enable the insurer to process the claim promptly. Regardless of whether or not the patient can claim insurance, the GP plays a pivotal role in any injured person's recovery and return to work.

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vehicle). However, some differences exist between the systems applicable in each state. Some states (such as Queensland), have a 'fault' based system which requires proof of liability. This means the injured party must be able to establish negligence against an owner or driver of a motor vehicle. Other states (such as Northern Territory and Victoria) have a 'no fault' system. There are also variations, such as the coverage for 'blameless' accidents in New South Wales.

Transport accident compensation schemes are usually funded via a levy on motor vehicle registration (such as in Western Australia) or compulsory third party insurance, such as the 'green slip' in New South Wales. In some states, the government owns the organisation that manages the insurance (such as the Transport Accident Commission [TAC] in Victoria or the Motor Accident Insurance Board in Tasmania), and in others the government licenses insurers (one or multiple) to provide the insurance (such as in Queensland) or to handle the claims (as in South Australia).

While general practitioners will mostly deal with patients with claims from their home state, it is possible for patients to have claims in other jurisdictions when the accident occurred in another state or involved a vehicle registered in another state. The names and website for each authority is listed in *Table 1*.

It is the role of the patient to make a claim and the insurer to accept (or not) the claim based on the applicable rules. Regardless of the whether or not the patient can claim insurance; the GP plays a pivotal role in an injured person's recovery and return to work after an injury. While the principles involved in completing

In each jurisdiction of Australia there is a system to provide compensation for persons who are injured or die as a result of a transport accident. These schemes all include compulsory third party cover (in which there is coverage for injury that a driver causes to another person due to the driver's actions when in a registered motor

transport accident compensation scheme paperwork in each state are the same, there is variation in what is covered by each insurance scheme and the types of forms used.

### What can be covered?

This will vary between jurisdictions and the relevant legislation. For example, in Victoria the *Transport Accident Act 1986* outlines the types of benefits the TAC can pay for an injured person and any conditions that apply.<sup>1</sup> Generally, the TAC can pay for the reasonable cost of medical treatment and other nonmedical services (such as travel costs to attend treatment or special equipment to help overcome accident injuries) that are related to an injured person's transport accident injuries and contribute to recovery and rehabilitation. An injured person may also be entitled to other benefits such as income, impairment and common law benefits.

### Forms

To understand an injured person's needs the insurer may seek information about a patient's transport accident injuries, progress, goals and future treatment plan. Forms have been developed to gather this information and provide GPs with a consistent format. Although usually not compulsory, the use of specific forms aims to efficiently facilitate appropriate treatment and services. The majority of forms can be downloaded from the website of the insurer (*Table 1*), however, a patient's claim manager or the patient themselves may provide the forms to the GP directly. Many medical software programs also include the forms as templates.

It is important that forms or requests for treatment and services are completed accurately and provide sufficient information to enable the insurer to determine that the request

is related to the transport accident injuries and will contribute to the injured person's recovery and rehabilitation.

### Medical certificates

The medical certificate is a key communication tool that enables the GP to indicate an injured person's work capacity and any additional support services that may be required as a result of a transport accident.

Most jurisdictions have specific 'initial' and 'subsequent' medical certificates that have been developed for this purpose.

The 'initial' medical certificate is usually a part of, or attached to, the patient's initial injury claim form and will often be provided to the GP by the patient. For example, in New South Wales it is part of the Accident Notification Form. Alternatively in Victoria, TAC medical certificates can be downloaded from the TAC

**Table 1. Motor vehicle insurance authorities**

State/territory	Authority	Telephone	Address	Email	Website
Australian Capital Territory	Department of Treasury	02 6240 4700	See website for specific details		<a href="http://www.treasury.act.gov.au/compulsorytpi">www.treasury.act.gov.au/compulsorytpi</a>
New South Wales	Motor Accidents Authority (MAA)	1300 137 131	Level 25 580 George Street Sydney 2000	<a href="mailto:maa@maa.nsw.gov.au">maa@maa.nsw.gov.au</a>	<a href="http://www.maa.nsw.gov.au">www.maa.nsw.gov.au</a>
Northern Territory	Territory Insurance Office (TIO)	1300 301 883	GPO Box 770 Darwin 0801	<a href="mailto:maca@tiofi.com.au">maca@tiofi.com.au</a>	<a href="http://www.tiofi.com.au">www.tiofi.com.au</a>
Queensland	Motor Accident Insurance Commission (MAIO)	1300 302 568 07 3227 8088	GPO Box 1083 Brisbane 4001	<a href="mailto:maic@maic.qld.gov.au">maic@maic.qld.gov.au</a>	<a href="http://www.maic.qld.gov.au">www.maic.qld.gov.au</a>
South Australia	Motor Accident Commission (MAC) (Claims handled by Allianz Insurance)	1300 137 331 08 8221 6377	GPO Box 2438 Adelaide 5001	<a href="mailto:mac@sa.gov.au">mac@sa.gov.au</a>	<a href="http://www.mac.sa.gov.au">www.mac.sa.gov.au</a>
Tasmania	Motor Accident Insurance Board (MAIB)	1800 006 224 03 6336 4800	PO Box 590 Launceston 7250	<a href="mailto:info@maib.tas.gov.au">info@maib.tas.gov.au</a>	<a href="http://www.maib.tas.gov.au">www.maib.tas.gov.au</a>
Victoria	Transport Accident Commission (TAC)	1800 332 556 1300 654 329	PO Box 742 Geelong 3220	<a href="mailto:info@tac.vic.gov.au">info@tac.vic.gov.au</a>	<a href="http://www.tac.vic.gov.au">www.tac.vic.gov.au</a>
Western Australia	Insurance Commission of Western Australia (ICWA)	1800 643 338 08 9264 3333	GPO Box U1908 Perth 6845	<a href="mailto:mvpidenq@icwa.wa.gov.au">mvpidenq@icwa.wa.gov.au</a>	<a href="http://www.icwa.wa.gov.au">www.icwa.wa.gov.au</a>

website (*Table 1*) or general practices can request hard copies from the TAC.

Each insurer will have its own rules about the length of medical certificates, for example generally, the TAC in Victoria will accept medical certificates for a period of no more than 3 months duration. However, the TAC will consider accepting medical certificates of up to 12 months duration for clients who have a 'severe'<sup>2</sup> transport accident injury, and/or are residing in a residential facility as a direct result of transport accident injuries.

In general, shorter periods of certification for no work, with an expectation of return to work at some point is the preferred approach, while recognising that some severely injured patients will never be able to work again. Returning to work after an injury or illness may depend on various factors, including individual circumstances and the injury sustained. General practitioners are encouraged to talk with a patient's employer regarding a structured return to work solution that may incorporate modified duties. Release of medical information requires patient consent.

The Australasian Faculty of Occupational and Environmental Medicine's 'Realising the health benefits of work' position statement is relevant to GPs and other healthcare professionals who are required to provide medical certification. It has been endorsed by The Royal Australian College of General Practitioners and has drawn support from a wide range of stakeholders in both Australia and New Zealand, including the Committee of Presidents of the Medical Colleges, The Business Council of Australia and the National Aboriginal Community Controlled Health Organisation. The position statement is a culmination of international and Australian evidence about the positive impacts of work on health and work's potential to assist with rehabilitation. Key themes are that, 'work is generally good for health and wellbeing' and that 'long term work absence, work disability and unemployment have a negative impact on health and wellbeing'.<sup>3</sup>

A medical certificate should clearly outline the patient's transport accident injuries and include the periods the injured person:

- is considered unfit for any work

- is fit for modified or alternate duties, and
- is expected to be fit for usual duties.

To facilitate recovery and return to work the GP should assess the injured person's physical capacity and outline this on the medical certificate. Further discussion with the patient, and their employer or vocational rehabilitation provider can identify any specific restrictions or conditions on employment so that this can be noted on the certificate.

### Requests for treatment and support services

In some jurisdictions, the medical certificate can also enable treatment, referrals and other additional support services for the injured person such as home help or transport. For some services, or in some jurisdictions, specific forms may be required to request treatments or support services. Look at the website of the insurer covering the patient for more information on forms for requesting treatments or support services.

For example, in a TAC claim in Victoria the GP can provide a written request or specify on the medical certificate:

- the type of treatment or assistance required and how this relates to the injured person's transport accident injuries
- the number of services or length of treatment and the date this will be reviewed
  - home help requests should specify the household tasks that the patient is unable to perform due to their transport accident injuries, and the hours per day/week/fortnight/month that the home services are required
  - taxi travel requests should specify how the injury is preventing travel by other means (eg. train or bus)
- functional goals/outcome measures that will be used to evaluate the treatment and any self management strategies in place
- any further supporting medical evidence.

Requests for treatment or services to continue should include an evaluation (ie. the outcomes achieved to date), and rationale as to why additional treatment is required. The request should include the number of services proposed, expected duration, and how and by whom the treatment will be monitored.

### Pharmacy questionnaires

Pharmacy expenses may be able to be covered for an injured patient. For example in Victoria in general, the TAC can pay the reasonable cost of medications prescribed by a medical practitioner (or dentist) for the treatment of an injury or condition directly resulting from a transport accident.<sup>1</sup>

Medications must be registered (not listed) in the Australian Register of Therapeutic Goods and should be prescribed on the Pharmaceutical Benefits Scheme (PBS) as clinically indicated and available as per the rules of the PBS. It is legitimate to write a PBS prescription for a patient receiving compensation, provided they are an eligible Australian resident and hold a valid and current Medicare card – this can provide additional benefit to the patient when reaching the PBS family safety net. Visit [www.medicareaustralia.gov.au/pbs](http://www.medicareaustralia.gov.au/pbs) for more information regarding the PBS and compensation.

Where an injured person is prescribed a medication that has a potential for dependence (some Schedule 4 and all Schedule 8 drugs), further information will often be requested. For example, the TAC can pay for these medications, provided a legitimate clinical reason exists for their use and the prescribing medical practitioner adheres to the relevant legal requirements relating to their prescribing, dispensing and clinical use in the treatment of the transport accident related injury or condition. The TAC will only fund Schedule 8 medications that are prescribed in accordance with the PBS and has a policy of funding sedatives (including hypnotics and anti-anxiety medications) only for short term use.

A GP may be asked to complete a specific pharmacy questionnaire in relation to prescribing sedatives and medication for hypertension, erectile dysfunction, and weight loss.

### Initiatives to reduce paperwork

There is an understanding of the vital role that GPs play in the recovery of an injured person and that it may incorporate additional complexity and reporting requirements. In

Victoria, the TAC and WorkSafe Victoria through a collaborative body, the Health Services Group (HSG), are working to explore and implement more efficient ways for GPs to facilitate effective outcomes for injured Victorians. The HSG recently formed a working relationship with General Practice Victoria and has implemented the revised model for 'Treating health practitioner reports' aimed at providing consistency in the information and fees paid to GPs for reports, while reducing the time required to complete them. The HSG is also exploring opportunities to align the TAC and WorkSafe medical certificates to streamline the documentation for both organisations.

### Resource

Websites of each authority (listed in *Table 1*) provide their relevant forms and information on their rules. Many also provide clinical resources such as outcome measures and clinical guidelines for relevant conditions (eg. whiplash).

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