

WIRO 2019/20 Annual Report

APPENDIX

This appendix includes WIRO data for the financial year 2019/20 regarding early solutions, grants of legal funding and insurer data.

Early Solutions

Table 1: Complaint and Enquiry Issues for matters opened during the financial year

Issue	Complaint Number	%	Enquiry Number	%
Communication (secondary issue only)		0%	298	3%
Delay in determining liability	2263	27%	431	4%
Delay in payment	1714	20%	155	1%
Denial of liability	704	8%	970	9%
ILARS Lawyer Complaint		0%	252	2%
IME/IMC	292	3%	277	3%
PIAWE		0%	11	0%
Rehabilitation		0%	25	0%
RTW		0%	53	1%
S126		0%	16	0%
S39		0%	6	0%
WCD PIAWE Only		0%	2	0%
Weekly Benefits	1246	15%	716	7%
Work Capacity Decision	399	5%	352	3%
Further Inquiry - Secondary Issue Only	51	1%		0%
Request for Documents	509	6%	101	1%
Query about WC benefits	1	0%	1338	13%
Employer Complaint	1	0%	410	4%
How to make a Claim		0%	2880	27%
Who is the insurer?		0%	249	2%
General Case Management	724	9%	1530	14%
Workplace Injury Management	321	4%	422	4%
Query about leave entitlements		0%	91	1%
Non-Insurer Complaint	177	2%		0%
Complaint about Service Provider		0%	95	1%
Privacy Surveillance		0%	7	0%
Total	8402	100%	10687	100%

Note: A case may have more than 1 issue

Changes to the WIRO EarlySolutions Dataset

The expanded jurisdiction, as well as the declining numbers of complaints concerning Section 39 of the Workers Compensation Act, inspired a review of the categories of complaints WIRO uses to record issues raised by injured workers.

From reporting year 2019-20 (matters received on or after 1 July 2019), WIRO Solutions changed the categorisation of complaints and enquiries. The following is a summary of the changes made:

- The WIRO issues “PIAWE” and “Work Capacity Decision” were combined into one issue “Work Capacity Decision.”
- The issue “S126” was renamed “Request for Documents”
- The issues “Rehabilitation” and Return to Work (“RTW”) were combined into one issue “Workplace Injury Management”
- Complaints about Section 39 of the Workers Compensation Act 1987 (“S39”) were absorbed into the “Weekly Benefits” issue category.
- Complaints about lawyers (“ILARS Lawyer Complaint”) were absorbed into a newly created category “Non-Insurer Complaint.” Although WIRO has no jurisdiction to deal with these complaints, they are still logged when they are received.
- A new category “General Case Management” was created to cater to the expanded jurisdiction. Previous complaints that raised “Communication” were absorbed into this category.
- Complaints about delays in weekly benefits, previously categorised under “Weekly Benefits” were moved to a subset of the “Delay in Payment” category of issue.

Although some of the category names were kept the same, the bundle of complaints that make up those categories changed. Therefore, a like for like comparison is not always possible when examining changes to the number of complaints labelled with a certain issue.

For example, WIRO figures show that complaints classed as “weekly benefits” declined from July 2019 and those classed as “delay in payment” increased at the same time. That change is largely because complaints that were previously counted in the former started to be counted in the latter. The combined figures are broadly similar.

However, there are some instances where WIRO can compare trends across the dataset. For example, “PIAWE” is no longer recorded as a separate issue, but rather subsumed within the category “Work Capacity Decision.” However, when complaint outcomes are recorded, WIRO can see the number of complaints that relate to PIAWE and the number that relate to other kinds of work capacity decision.

Table 2: How complainants and enquiries come into contact with WIRO

Source	%	Number
Lawyer	51%	9211
Web search	21%	3798
Word of Mouth	9%	1656
icare/SIRA	7%	1304
Government Department	4%	731
Insurer	2%	428
Doctor	2%	334
Union	1%	259
Other source	1%	241
Rehabilitation Provider	1%	106
Employer	0%	56
Workers Compensation Commission	0%	34
WIRO Campaign	0%	24
Referral source not provided - Enquiries	0%	13
ILARS Case	0%	1
Total	100%	18196

Note: NB: The above table records the source of the first WIRO case in our database. The high incidence of lawyer reflects that many complainants and enquirers came to WIRO after their lawyers obtained ILARS grants.

Table 3: How complaints and enquiries are received

How Received	Number of Cases
Complaint	7835
Email	2243
In Person	4
Letter	13
Telephone	4832
Website	610
ILARS	133
Enquiry	10361
Email	757
In Person	14
Letter	5
Telephone	9290
Website	284
ILARS	11

Total	18196
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Table 4: Complaint timeliness – How long to close a complaint

Issue	A - Same day	B - Next day	C - 2 to 7 days	D - 8 to 15 days	E - 16 to 30 days	F - more than 30 days	Total
Delay in determining liability	109	147	1378	455	94	10	2193
Delay in payment	93	143	1022	308	98	7	1671
Denial of liability	190	53	303	107	21	1	675
IME/IMC	26	22	141	61	5	1	256
Weekly Benefits	84	44	590	314	124	10	1166
Work Capacity Decision	58	19	159	85	39	6	366
Request for Documents	31	60	331	52	13	1	488
Employer Complaint					1		1
General Case Management	124	41	303	119	12	2	601
Workplace Injury Management	36	17	146	50	12		261
Non-Insurer Complaint	93	14	36	14			157
Total		560	4409	1565	419	38	7835

Table 5: Complaints outcomes

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
Communication (secondary issue only)		1				1
Complaint Declined – Out of jurisdiction		2				2
Complaint Declined, Premature, Refer to Insurer		4				4
Delay in determining liability	13	1437	248	148	306	2152
Medical treatment		5		1	1	7
Insurer inside timeframes ND		1				1
Insurer outside timeframes ND		3		1	1	5
Liability determined outside timeframes		1				1
Recurrence / Whole claim	3	203	37	21	33	297
Insurer not on risk	1	11	1		1	14
Liability determined inside timeframes		1				1
Liability determined outside timeframes		1				1
Request not received		14	2		3	19
Claim accepted outside timeframes	1	38	2	7	3	51
No decision and inside timeframes		49	11	8	10	78

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
No decision and outside timeframes	1	16	7		5	29
Claim denied outside timeframes		29	3	2	4	38
Claim denied inside timeframes		21	7	3	3	34
Claim accepted inside timeframes		19	4	1	3	27
Recurrence not determined		4			1	5
Weekly Benefits / Medical Treatment	7	945	157	95	187	1391
Insurer not on risk		20	1	1	4	26
Request not received	1	80	16	12	20	129
Claim accepted outside timeframes	2	265	36	32	52	387
No decision and inside timeframes		138	16	16	30	200
No decision and outside timeframes	1	90	15	10	19	135
Claim denied outside timeframes	2	171	23	12	29	237
Claim denied inside timeframes		59	22	4	9	94
Claim accepted inside timeframes	1	122	28	8	24	183
Section 66	1	84	16	9	24	134
Insurer not on risk		7			1	8
Request not received		7	4	1	1	13
Claim accepted outside timeframes		14	2		3	19
No decision and inside timeframes	1	14	1	3	4	23
No decision and outside timeframes		12	6	3	8	29
Claim denied outside timeframes		10	1	1	3	15
Claim denied inside timeframes		5	1	1	1	8
Claim accepted inside timeframes		12	1		2	15
Claim not duly made		3			1	4
Initial Notification	2	80	22	14	15	133
Reasonable excuse applied in time		36	9	10	9	64
Provisional liability inside timeframes		14	5			19
Initial notification not received	1	4	5	1	1	12
Reasonable excuse defective		5	1	3		9
Provisional liability outside timeframes		11	1		1	13
No response provided and outside timeframes	1	8	1		4	14
Initial notification incomplete		2				2
Domestic Assistance		102	12	6	33	153
ADL approved		34	1	3	11	49
Declined after PI		17	4	1	3	25
Accepted after PI		37	4	1	12	54
Entitlement exhausted		5	1		3	9
Claim not made in accordance with 60AA		9	2	1	4	16
Section 287A		18	4	2	13	37
Insurer not on risk		1				1

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
Request not received		2	1	1		4
Claim accepted outside timeframes			1	1	1	3
No decision and inside timeframes		5			1	6
No decision and outside timeframes		5			3	8
Claim denied outside timeframes		2	1		5	8
Claim denied inside timeframes		3	1		2	6
Claim accepted inside timeframes					1	1
Delay in payment	19	1181	144	84	221	1649
Medical/Travel	5	301	50	20	72	448
Claim disputed		28	1	2	3	34
Claim not received		26	5	1	8	40
Correct amount paid after PI	3	149	24	9	37	222
Insurer not on risk	2	4	1		2	9
Claim already paid		29	5	1	7	42
Insurer within timeframes		19	2	3	3	27
Insufficient information / Invoices not provided		46	12	4	12	74
Weekly benefits	1	703	48	45	75	872
Insurer admin error		234	23	27	31	315
Employer error where insurer takes over payments		44	1	2		47
Irregular payments		82	4	3	8	97
No EFT/TFN details		24			6	30
Employer error making payments		136	9	8	9	162
No COC	1	68	5	1	4	79
PID Certificate - no entitlement		16		1	1	18
No apparent error with payments		99	6	3	16	124
COD / Settlement	13	177	46	19	74	329
Correct amount paid after PI	1	48	14	7	28	98
Insurer admin error	6	28	7	6	10	57
Interest Obtained		5	1			6
Lawyer hasn't provided all documents required	1	21	4	1	4	31
Interpretation of terms dispute		10	5	2	4	21
Centrelink and/or Medicare delay	4	56	12	3	26	101
Insurer within timeframes and not paid	1	6	1		1	9
Decision being appealed		3	1			4
Leave re-credited			1		1	2
Denial of liability	4	442	76	35	101	658
Incorrect notice given		1	1		1	3
Insurer maintain denial on review	3	99	17	4	23	146
Insurer overturns decision after PI		50	8	4	7	69

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
Defective form changed and reissued		3	1	2		6
Matter referred for review or legal	1	282	49	25	69	426
Defective form withdrawn		7			1	8
IME/IMC		162	23	8	62	255
Inconvenient location			1			1
Appointment rescheduled		41	10	4	10	65
Travel organised		7			1	8
Appointment cancelled - information from treating doctors received		8			8	16
Appointment maintained		84	11	4	31	130
Appointment cancelled-referral procedure not followed		9	1		7	17
Choice of 3 IMEs provided after PI		9			3	12
Location changed		4			2	6
RTW			1			1
Suitable Employment			1			1
S/duties provided			1			1
S126		2				2
Documents not provided		2				2
Weekly Benefits	4	852	87	49	164	1156
Correct amount paid after PI		5		1		6
Delayed payment		5				5
Payments stopped	2	364	35	27	66	494
Insurer admin error		69	8	4	8	89
Employer not passing on weekly payments	1	58	5	4	8	76
Weekly benefits declined		39	7	2	5	53
Employer error where insurer takes over payments		14			6	20
Section 39 limit applied	1	26	5		12	44
Correct rate applied		35		4	4	43
Section 52 retirement age applied		15			1	16
Section 48A / 57 suspension applied		11	2	5	4	22
Non-attendance at IME		5		1	1	7
No apparent error with payments		57	5	3	6	71
Leave paid		3	1		1	5
WCD or Section 40 assessment		6	1	1	6	14
Section 48A / 57 suspension overturned		14		3	1	18
Section 39 overturned		2	1			3
Section 52 retirement age overturned		4			2	6
Section 119 non-attendance IME overturned		1				1

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
Section 119 non-attendance IME applied		5			1	6
Payments changed	2	409	48	18	83	560
Change of entitlement period		49	2	2	12	65
Legislative reduction in PIAWE		18	3		3	24
Indexation applied after PI	1	23	2		11	37
Payments increased after PI (stat rate or 95%)		44	2	1	3	50
No apparent error with payments	1	148	27	6	35	217
Employer not passing on correct payment		116	12	9	17	154
WCD or Section 40 assessment		11			2	13
Overpayment		69	4	3	15	91
Insurer or employer presses with recovery		35	1	3	9	48
Insurer stops recovery		34	3		6	43
Work Capacity Decision	1	280	23	14	45	363
Work Capacity Decisions (non-PIAWE)		89	8	5	12	114
Stay not applied		4			1	5
Incorrect notice provided		2	1		1	4
WCD withdrawn		6	1	1	2	10
IW referred to ALSP		60	4	4	6	74
WCD under review		11	2		2	15
New WCD issued		6				6
PIAWE	1	191	15	9	33	249
PIAWE increased and back payment provided	1	69	3	3	17	93
Insurer maintains decision		71	9	3	10	93
PIAWE reduced where notice period not applied		3	1			4
Not obvious error referred for review		43	1	3	6	53
PIAWE reduced where notice provided		5	1			6
Non-insurer complaints	3	96	12	5	26	142
ILARS Lawyer Complaint	1	31	2		2	36
Refer worker to the OLSC	1	22	1		2	26
Updated the WIRO Principal Lawyer		9	1			10
Employer Complaint	1	37	6	3	14	61
Referred to Fair Work or IRC		13	2	1	6	22
Referred to Other	1	15	3	1	5	25
Referred to SIRA/Safework		9	1	1	3	14
Service Provider	1	24	3	2	7	37
Referred to Other	1	18	3	2	7	31
Referred to SIRA		6				6

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
Privacy/Surveillance		4	1		3	8
Referred to Other		2	1		3	6
Referred to IPC		2				2
Request for Documents	6	330	54	36	64	490
Liability Accepted	3	242	38	22	48	353
Request not received		22	4	2	5	33
Docs provided after PI	2	184	26	15	32	259
Docs provided to third party	1	10	1	1	6	19
Docs not provided		26	7	4	5	42
Liability Disputed	3	88	16	14	16	137
Docs provided after PI	2	75	10	11	14	112
Docs provided to third party only		6	1	2	1	10
Docs not provided	1	5	5	1	1	13
Privilege Claimed		2				2
Workplace Injury Management	1	152	27	14	59	253
IMP	1	13	4		4	22
No current IMP	1	5				6
IMP amended after PI		2	1		3	6
IW not compliant		5	1		1	7
Insurer not compliant		1	1			2
NTD changed			1			1
Rehabilitation		75	5	5	19	104
Case conference cancelled		3			1	4
Rehab provider changed		33	2	4	3	42
Rehab not required		21			4	25
Rehab provided s41A		4		1	4	9
Referred to IMC		1			3	4
Case conference organised		13	3		4	20
Return to Work		63	18	9	36	126
Duties not suitable		7	2	1	8	18
Workplace assessment required		8	1	1	1	11
RTW plan amended		10	1		9	20
Duties not provided by employer		23	5	2	9	39
Vocational Program Approved		8	3	1	1	13
Duties provided by employer after PI		1	3	2	6	12
Rehabilitation Allocated		6	3	2	2	13
Complaint Rejected	3	72	8	7	17	107
General Case Management	3	400	38	19	112	572
Referred to SIRA, Icare or other	1	70	6	2	18	97
Insurer notified of complaint	1	215	22	13	61	312
Referred to insurer	1	115	10	4	33	163

Outcome	Other Insurer incl. Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
Total	58	5414	741	419	1177	7809

Table 6: Number and type of complaints finalised after 30 June 2020

Issue	Number of cases
Delay in determining liability	44
Delay in payment	26
Denial of liability	6
Employer Complaint	1
General Case Management	11
IME/IMC	5
Non-Insurer Complaint	1
Request for Documents	8
Weekly Benefits	32
Work Capacity Decision	13
Workplace Injury Management	5
Total	152

Grants of Legal Funding

Table 7: Amounts paid

Payment Type	Total amount	Number of payments	% of disbursements	Average amount
Professional fees	\$40,689,588	12,567		\$3,238
Medico-legal	\$15,973,111	12,865	64.3%	\$1,242
Barrister Fees	\$3,094,085	1,945	12.5%	\$1,591
Clinical Notes	\$2,331,816	21,874	9.4%	\$107
Service Fee	\$1,251,044	16,085	5.0%	\$78
Treating Specialist Report	\$665,621	1,521	2.7%	\$438
Travel	\$489,579	2,128	2.0%	\$230
Interpreter	\$308,624	778	1.2%	\$397
NTD Report	\$262,915	874	1.1%	\$301
Barrister Country Loading	\$173,389	279	0.7%	\$621
Other *	\$130,519	561	0.5%	\$233
Non-attendance fee	\$78,004	191	0.3%	\$408
Solicitor Loading	\$56,147	88	0.2%	\$638
Meal Allowance	\$7,742	161	0.0%	\$48
Total	\$65,512,184	71,944		
Total Professional Fees	\$36,990,535		62%	
Total Disbursements	\$24,822,595		38%	

Note : * Other includes Court filing fees, ancillary expenses associated with court proceedings or unregulated expenses

Table 8: Types of Body System for ILARS Grants

Injury location	Percentage
Cardiovascular system	0%
Chronic Pain	0%
Digestive systems	0%
Ear, nose, throat and related structures	1%
Haematopoietic system	0%
Hearing	13%
Lower extremity	14%
Nervous system	0%
Psychiatric and psychological disorders	19%
Respiratory system	0%
The endocrine system	0%
The skin	1%
The spine	24%
The visual system	1%
Upper extremity	21%
Urinary and reproductive systems	0%
Not Recorded	5%
Total	100%

Table 10: Types of Injury for ILARS Grants

Injury location	Percentage
Psychological system	19%
Back	17%
Ear	14%
Multiple -Trunk and limbs	7%
Shoulder	6%
Knee	6%
Multiple -Neck and shoulder	4%
Other body location	3%
Hand, fingers and thumb	3%
Upper limb - multiple locations	3%
Other head	3%
Other leg	2%
Neck	2%
Ankle	2%
Wrist	1%
Death	1%
Foot and toes	1%
Trunk - multiple locations	1%
Other arm	1%
Internal Body System	1%
Abdomen and pelvic region	1%
Elbow	1%
Hip	1%
Total	100%

Table 11: Nature of Injury

Nature of Injury	Percentage
A. Intracranial injuries	1%
B. Fractures	2%
C. Wounds, lacerations, amputations and internal organ damage	3%
D. Burn	0%
E. Injury to nerves and spinal cord	20%
F1. Trauma to joints and ligaments	20%
F2. Trauma to muscles and tendons	16%
G. Other injuries, Poisoning, Electrocutation, heat stress etc	0%
H1. Joint diseases (arthropathies) and other articular cartilage diseases	0%
H2. Spinal vertebrae and intervertebral disc diseases	1%
H3. Diseases involving the synovium and related tissue	0%
H4. Diseases of muscle, tendon and related tissue	0%
H5. Other soft tissue diseases	0%
I. Mental disorders	19%
J. Digestive system diseases	0%
K. Skin and subcutaneous tissue diseases	0%
L. Nervous system and sense organ diseases	14%
M. Respiratory system diseases	0%
N. Circulatory system diseases	0%
O. Infectious and parasitic diseases	0%
P. Neoplasms (cancer)	0%
Q. Other diseases	0%
R. Other claims	0%
S. Death	1%
Total	100%

Table 12: ILARS Outcomes

Outcome	Outcome not achieved	Grant achieved outcome
ILARS Funding Withdrawn	396	
Not eligible for funding - (e.g worker determined to be exempt worker)	48	
No Response to ILARS Follow Up		
Old Costs provisions apply		
Administrative reason	86	
Not eligible for funding		
Duplicate grant	91	
Consolidated with other grant	115	
Lawyer request	44	
Matter resolved in other jurisdiction	12	
Not proceeding after preliminary grant	3033	1254
Instructions withdrawn	545	
Worker retained new Lawyer	564	
Medical evidence not supportive	300	
Worker does not reach WPI threshold	767	
Worker instructions	461	
Below Threshold (Threshold issue)	124	
Not MMI		69
Lawyer Advice to Worker		1180
Lost contact with Worker	229	
Commutation negotiations failed	7	
Other not specified reason	36	5
Resolved after ILARS referral to complaints		5
Resolved prior to WCC	20	3775
Resolved by complying agreement after claim made		2259
S39 - Advice given		1
S39 - Over threshold by agreement		7
Insurer Accepts Claim		1184
Resolved after WIRO enquiry or Internal Review.		155
Resolved after internal review/insurer accepts Claim		26
Over threshold by agreement		29
Advice given not to proceed	20	
Insurer withdraws Notice		67
Agreement with Insurer		47
Resolved in WCC	407	3134
Resolved TC - settled by consent		714
Closed Period		33
Medicals		138
Weeklies		45
Weeklies & Medicals		109
WPI		274
WPI & Medicals		36
WPI & Weeklies		13
WPI, Weeklies & Medicals		25
Wrap Up		23
Death Benefits		18
Resolved at Conciliation - settled by consent		811
Closed Period		64
Medicals		105
Weeklies		37

Outcome	Outcome not achieved	Grant achieved outcome
Weeklies & Medicals		266
WPI		108
WPI & Medicals		37
WPI & Weeklies		16
WPI, Weeklies & Medicals		70
Wrap Up		50
Death Benefits		58
Resolved at settlement during Arbitration		112
Medicals		20
Weeklies		8
Weeklies & Medicals		36
WPI		17
WPI & Medicals		3
WPI & Weeklies		2
WPI, Weeklies & Medicals		19
Death Benefits		7
Resolved at Arbitration by Arbitrator - Employer	45	
Resolved at Arbitration by Arbitrator - Worker		332
Medicals		106
Weeklies		27
Weeklies & Medicals		77
WPI		52
WPI & Medicals		11
WPI & Weeklies		2
WPI, Weeklies & Medicals		22
Death Benefits		35
Expedited Assessment	4	84
Consent Direction		39
Direction made by WCC		35
Direction not made by WCC	2	
Recommendation made		10
Recommendation not made	2	
Resolved WIM Dispute		3
In favour of worker		3
Medical Assessment	358	1054
Not Recorded		2
Discontinued post MAC no COD	13	
Discontinued pre MAC no COD	1	
COD s66 WPI		898
COD s66 TOD		74
Not reached threshold (threshold issue)	69	
Not MMI MAC (threshold issue)		27
Not MMI MAC refused (threshold issue)	12	
Not MMI MAC (s66 claim)	8	
S39 - Not MMI		5
MAC Below Threshold Hearing Aids only	53	
s66 - Not reached threshold	188	
S39 - Not reached threshold	11	
S39 - Not MMI MAC refused	2	
Above threshold		32
S39 - Above threshold		9
Treatment reasonably necessary		7

Outcome	Outcome not achieved	Grant achieved outcome
Treatment not reasonably necessary	1	
Commutations registered		22
Resolved following PD on question of Law		2
Discontinued from WCC - No result	132	
Appeals	106	142
Resolved after appeal from decision of Arbitrator to President	12	22
By the employer in favour of Employer	3	
By the employer in favour of Worker		15
By the worker in favour of Employer	9	
By the worker in favour of Worker		7
Resolved after appeal to Supreme Court	4	6
By the employer in favour of Employer	1	
By the employer in favour of Worker		2
By the worker in favour of Employer	3	
By the worker in favour of Worker		4
Resolved after Medical Appeal Panel	89	112
By the employer in favour of Employer	27	
By the employer in favour of Worker		51
By the worker in favour of Employer	62	
By the worker in favour of Worker		61
Resolved after appeal to Court of Appeal	1	2
By the employer in favour of Worker		2
By the worker in favour of Employer	1	
Resolved in common law claim		36
Total	4094	8346

Table 13: No Response to Claim (NRTC)

Outcome	Other Insurer including Not Provided	Scheme agent	Self-insured	Specialised insurer	TMF	Total
S287A		60	42	23	23	148
Claim accepted after enquiry		11	4	2	3	20
Claim accepted before enquiry			1		1	2
Claim denied after enquiry		21	22	10	10	63
Claim denied before enquiry		11	8	7	8	34
Insurer inside timeframes		1	3			4
Insurer outside timeframes		12	4	2		18
Request not received		4		2	1	7
S60/ Weekly Benefits	7	145	27	10	27	216
Claim accepted after enquiry	2	34	10	1	9	56
Claim accepted before enquiry	1	11	1		1	14
Claim denied after enquiry	1	38	6	4	7	56
Claim denied before enquiry	1	22	3	2	5	33
Insurer inside timeframes		4			1	5
Insurer outside timeframes	1	28	5	3	3	40
Request not received	1	8	2		1	12
S66	8	420	64	29	90	611
Claim accepted after enquiry	1	41	7		21	70
Claim accepted before enquiry	1	6				7
Claim denied after enquiry	2	114	21	9	15	161
Claim denied before enquiry	1	25	2	3	3	34
Counteroffer issued after enquiry		52	4	4	13	73
Counteroffer issued before enquiry		25	2	1	2	30
Insurer inside timeframes		66	10	4	13	93
Insurer not on risk		9			1	10
Insurer outside timeframes	3	52	11	4	13	83
Request not received		30	7	4	9	50
Total	15	625	133	62	140	975

NB: No Response to Claim (NRTC) matters are claims where the insurer has not responded within the required time frame.

Insurer data

Table 14: Matters received by Insurer

Insurer	Complaint	Enquiry	ILARS	No Response to Claim	Total
Scheme agent	5438	5025	11672	626	22135
Allianz 701			3		3
Allianz Australia Workers Compensation (NSW) Ltd	331	285	675	31	1291
CGU Workers Compensation	2	8	37		47
EML 701	1382	1652	2796	80	5830
EML 702	849	438	1398	166	2685
Employers Mutual NSW Limited	1101	1218	2238	108	4557
Gallagher Bassett Services Pty Ltd		3	15		18
GIO 701			1		1
GIO General Limited	1697	1347	3443	232	6487
Icare-Workers Care	16	14	711		741
Insurance and Care NSW (Icare)	7	15	102	2	124
QBE Workers Compensation	2	2	232	2	236
Uninsured Liabilities	51	43	18	5	112
Xchanging			3		3
Self-insured	745	676	1486	132	2907
3M Australia Pty Ltd		1	1	1	2
Aldi Stores		1	4		5
ANZ Banking Group Limited	1	5	12	2	18
Ausgrid Management Pty Ltd	13	19	36	3	68
Blacktown City Council	9	12	30	1	51
Bluescope Steel Ltd	3	15	54	6	72
BOC Limited	1	5	4		10
Boral Limited	6	3	35	4	44
Brambles Industries Limited	3	3	5		11
Brickworks Ltd		1	4		5
Broadspectrum (Australia) Pty Ltd	34	36	40	4	110
Campbelltown City Council	3	3	30		36
Canterbury Bankstown Council	1	5	6		12
Central Coast Council	5	11	14		30
City of Sydney Council	6	4	15	3	25
Coca-Cola Amatil	2	1			3
Coles Group Ltd	109	76	126	26	311
Colin Joss & Co Pty Limited	2	2	5		9
Commonwealth Steel	1	1			2
CSR Limited	5	6	10		21
DAC Finance Pty Ltd	5	1	1		7
Endeavour Energy	10	7	20	2	37
Fairfield City Council	1		5		6
Hawkesbury City Council	1	2	2	1	5
Healius Limited	10	9	17		36
Holcim (Aust) Holdings Pty	12	3	8	5	23
Inghams Enterprises Pty Ltd	7	2	11	2	20
ISS Facility Services		3	5		8
ISS Property Services Pty Ltd	8	4	16	1	28

Insurer	Complaint	Enquiry	ILARS	No Response to Claim	Total
JELD-WEN Australia Pty Ltd	3	2	7		12
Lake Macquarie City Council	1	1	13	1	15
Liverpool City Council	3		9	2	12
MARS Australia Pty Ltd	1				1
McDonald's Australia Holdings	6	3	8	2	17
Myer Holdings Ltd	2	3	4		9
Newcastle City Council	1	1	12		14
Northern Beaches Council	3	6	3		12
Northern Co-Operative Meat Company Limited	4	4	13		21
NSW Trains	18	14	6	1	38
OneSteel Trading Pty Ltd (Moly-Cop)	3	5	6	1	14
Pacific National (NSW) Pty Ltd		1	6		7
Persol Australia Pty Ltd	28	26	11	5	65
Qantas Airways Limited	36	31	90	2	157
Rail Corporation NSW		9	7	1	16
Randstad	1		1		2
RGF Staffing Melbourne One Pty	4	1	1		6
Shoalhaven City Council	1	7	7	1	15
Southern Meats Pty Ltd.			1		1
Sutherland Shire Council			7		7
Sydney Trains	24	43	17	1	84
The Star Entertainment Group Ltd	7	5	13	1	25
Toll Holdings Ltd	65	43	77	12	185
Transport for NSW Workers Compensation Services	28	17	121	14	166
Transport Service of NSW (State Transit Group)	21	14	34	2	69
Unilever Australia (Holdings)	5	7	11	1	23
University of New South Wales	3	6	8		17
University of Wollongong		4	6		10
Veolia Environmental Services	1	1	6	1	8
Wesfarmers	17	19	93	1	129
Westpac Banking Corporation Ltd	24	33	44	4	101
Wollongong City Council	2	3	18	2	23
Woolworths Group Ltd	175	126	310	15	611
Specialised insurer	424	306	660	62	1390
Catholic Church Insurance Limited	187	92	163	26	442
Coal Mines Insurance Pty Limited	16	32	6		54
Guild Insurance Ltd	38	30	35	1	103
Hospitality Employers Mutual	84	82	113	15	279
Racing NSW Insurance Fund	38	10	64	6	112
StateCover Mutual Ltd	61	60	279	14	400
TMF	1169	1193	1513	142	3875
Allianz TMF	320	378	385	46	1083
Employers Mutual NSW Ltd - TMF	360	370	525	21	1255
QBE TMF	489	445	603	75	1537
Other Insurer including Not Provided	118	4363	4431	27	8912
Total	7835	10355	17551	976	35741