**Lifetime Care and Support Guidelines: Disputes Guidelines and new draft Travel Guideline**

This document is to explain the proposed changes to the draft Guidelines for disputes since the previous versions were circulated in December 2017. This document is to be read in conjunction with the draft parts. Similar changes have been made to the disputes guidelines so have been grouped together. The extent of changes and reordering unfortunately means that we cannot send a marked-up version of the guidelines which includes the proposed changes.

Lifetime Care has also drafted a new Guideline about payment of travel expenses, for or in connection with assessed treatment and care needs. This Guideline is based on Lifetime Care’s existing Participant Travel Policy. The purpose of this guideline is to clarify the travel expenses that Lifetime Care is able to fund.

Lifetime Care welcomes feedback on these draft guidelines.

**Disputes guidelines (Parts 2 and 4)**

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| **Sections and headings** | **Key Changes** |
| Part 3: Guidelines for disputes about motor accident injury | The existing Part 3: Guidelines for disputes about motor accident injury, requires revision as a result of the changes to the CTP scheme in December 2017. Lifetime Care has also recognised that there may be questions of statutory power to issue a guideline relating to disputes referred to the Principal Claims Assessor, appointed under different legislation to Lifetime Care’s governing legislation, and prescribing the processes undertaken by the Principal Claims Assessor to convene a panel and resolve the dispute.  Lifetime Care proposes to convert the current Part 3 guideline into a practice note available on its website. Lifetime Care will work with the Principal Claims Assessor and the Dispute Resolution Services division of the State Insurance Regulatory Authority (SIRA) to finalise the practice note. |
| References to time frames and calendar days | Lifetime Care has included references to calendar days and working days where these apply, for clarity. This is also in recognition of the timeframe prescribed by the legislation for disputes about treatment and care needs. |
| Privacy/ publication of decisions | Lifetime Care has considered whether it would be in the interests of injured persons, participants and the Lifetime Care and Support Scheme to publish de-identified certificates or summaries on its website. Lifetime Care is committed to openness and transparency, however it is likely that participants and injured persons may inadvertently be identified, even after a certificate is de-identified. Accordingly, de-identified certificates will not be published on the website and Lifetime Care has not changed the current wording about publication of decisions. |
| Reallocation of a dispute assessor or panel  (Part 2, 6 and 16, and Part 4, 6 and 16) | Lifetime Care has made changes to the wording about reallocating a dispute to a different assessor or panel, after the dispute was originally allocated. This is in the event of illness or if the assessor or panel is unable to assess the dispute in a reasonable timeframe. This is in attempt to resolve disputes as quickly as possible. |
| Assessment Panel or Review Panel’s initial meeting  (Part 2, 7.2 and 8.5) | Lifetime Care has added a clause that an Assessment or Review Panel’s initial meeting will occur in the absence of the parties (7.2) and that they are not obliged to conduct a conference with all or any of the parties (8.5). This reflects current practice for disputes about eligibility where Panels usually contact the parties to a dispute in writing and do not need to conduct a hearing.  However, all Assessment Panels and Review Panels can determine their own procedure for assessment and are required to consider procedural fairness. This includes situations where the Panel may decide (for example) to hold a conference with any or all parties to a dispute. |
| Applications for review- increased powers to dismiss applications that can otherwise be resolved  (Part 2: 14 and Part 4: 14) | Lifetime Care will review the application for review to ensure that it meets the procedural requirements in the guidelines. For some reviews, this means that the matter could be resolved in a different way, such as by a new application to the Scheme.  These proposed changes are consistent with Lifetime Care’s proposed powers to dismiss disputes where a new application to the Scheme could be made instead in circumstances where the injured person is not currently a participant.  In disputes about treatment and care needs, Lifetime Care proposes to make a new assessment of the participant’s needs, in attempt to resolve disputes informally and at an early stage or minimise the issues in dispute. This is purely optional for the participant and will not preclude a participant’s right to continue with a dispute.  If intending to dismiss a review application, Lifetime Care would seek the parties’ submissions on requiring them to take another action such as lodge another application to the Scheme.  This may mean that review applications referred to a Panel could be those matters which are potentially reviewable on legal grounds and cannot otherwise be resolved, such as those not made in accordance with the Guidelines or that are demonstrably incorrect in a material respect. Again, this is in attempt to resolve ongoing disputes as quickly as possible. |
| Determination as to whether a review application meets the grounds in the legislation – removal of “reasonable cause to suspect” test  (Part 2: 13.9 and Part 4: 13.12) | Lifetime Care proposes to remove the current requirement for a determination as to whether there is “reasonable cause to suspect” that a review application meets the grounds in the legislation. In practice, this will mean that review applications that comply with the procedures in the Guidelines are referred to a Review Panel. It will be the role of the Panel to determine whether the grounds for review are met, and to confirm or revoke the previous determination. If the grounds for review are not met, the Panel must confirm the previous determination.  Review applications that are procedurally non-compliant with the Guidelines will not be referred to a panel. |
| Factors considered in convening a Review Panel  (Part 2: 15.2 and Part 4: 15.2) | Lifetime Care proposes to add that it will consider which grounds for review are the subject of the review application when convening a panel. This is, for example, so that highly experienced dispute assessors can be selected for complex disputes. |
| Review applications lodged by Lifetime Care  (Part 2: 13 and Part 4: 15) | Lifetime Care has included some draft provisions to address the process for when Lifetime Care applies for a review. This has never occurred in the history of the Scheme, but is permitted by the legislation. In the interests of transparency, these draft provisions include when Lifetime Care is obligated to apply for a review, including an obligation to advise the other parties in writing prior to the submission of any application for review. Lifetime Care has also included provisions that enable the other parties to the dispute to select dispute assessors for the review panel when it has lodged the review application. |
| Submissions by Lifetime Care in review applications made by other parties to a dispute  (Part 2: 13.7 and Part 4: 13.10) | Lifetime Care has included a clause that obligates it to provide submissions if it concurs with any of the applicant’s stated grounds for review. |
| Provision of administrative support to the Assessment or Review Panel  (Part 2: 8.4 and 18.7 and Part 4: 7.6 and 18.5) | For transparency, Lifetime Care has included the provision of administrative support provided by a person or team that has not been involved in the decision that is the subject of the dispute. This is Lifetime Care’s current practice however has not previously been stated in the Guidelines. |

**Part X: Payment of travel expenses**

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| **Sections and headings** | **Key Changes** |
| *Reasonable and necessary travel for or in connection with an assessed treatment and care need* | This aims to clarify that Lifetime Care will fund reasonable and necessary travel for or in connection with an assessed treatment and care need. Lifetime Care has used and expanded the existing Participant Travel Policy when drafting this guideline. |
| *Rate of reimbursement* | Lifetime Care will apply the *Motor Accidents Compensation Regulation 2015* to rates of reimbursement, which is $0.55 per kilometre.  Lifetime Care had previously adopted the earlier version of the same regulation. |
| *Special circumstances relating to reimbursement of travel expenses to a family member or friend assisting a participant to attend an appointment* | Lifetime Care recognises that in some special circumstances, it is appropriate to reimburse a person (such as a family member) who assists a participant to attend a medical appointment. These provisions in the draft guideline aim to explain when this would be considered to be appropriate by Lifetime Care, and the conditions that would apply in order for reimbursement to be made. |