

REHABILITATION AND COMPENSATION

Internal dispute resolution process - for all approved insurers

The [Northern Territory Workers Compensation Best Practice Guidelines](#) require that approved insurers and self insurers should have an internal process for resolving a dispute between the injured worker and the approved insurer or self insurer, or its representatives. This process should be readily accessible by injured workers without any charges imposed by the insurer or self insurer. The internal process should provide a fair and timely method of handling disputes.

The Best Practice Guidelines set out that the time line for the Internal Dispute Resolution Process (IDRP) is 5 working days.

As part of this process it is necessary for the insurer or self insurer to establish its own procedures for the monitoring of such disputes and to have the ability to report annually to NT WorkSafe.

What is a Dispute?

For the purpose of the IDRP, a dispute will have the same meaning as given in section 103B of the *Workers Rehabilitation and Compensation Act*.

A dispute arises where a claimant is aggrieved by the decision of an employer –

- a) to dispute liability for compensation claimed
- b) to cancel or reduce compensation being paid
- c) relating to any matter or question incidental to or arising out of the claim for compensation

A worker is aggrieved when they express dissatisfaction or disagreement with the insurer's decision. The worker may have a belief that they have been treated unfairly or unjustly and may express dissatisfaction in those terms.

Insurers must have a documented IDRP

Approved insurers and self insurers are required to have a fully documented internal procedure for resolving a dispute between the worker and the insurer or self insurer. The internal process should provide a fair and timely method for handling disputes. The insurer or self insurer is to establish procedures for monitoring disputes proceeding through IDRP.

What a Worker can expect following Notification of a Dispute to an Insurer

From the time of receiving a request for review, insurers or self insurers should complete the Internal Dispute Resolution Process in a maximum of 5 working days.

The process will involve the insurer or self insurer arranging for an internal review by a Senior Review Officer. This officer will not have made the original decision.

The process is the Senior Review Officer will:

- Review the decision;
- Review the material relied upon to make the decision;
- Consider any other material already on the claim file; and
- Contact the worker and the employer and request any further material that may be relevant.

Following this review, the Senior Review Officer will:

- Maintain the original decision; or
- Have the decision withdrawn; or
- Vary the decision.

The Senior Review Officer should in every case inform the worker of the decision in writing. However to speed up the process, the Senior Review Officer should, where possible, convey the decision by phone or email, in addition to the letter being sent.

If the decision by the insurer or self insurer is to maintain or vary the original decision it should be explained to the worker that if they remain dissatisfied with the decision from the review process, that they should apply to NT WorkSafe for mediation.

Insurers to keep records of IDRPs

The Insurer or self insurer should retain all IDRPs records in a central register and a copy of each decision on the relevant claims file. These records are to be made available to NT WorkSafe on request.

On an annual basis NT WorkSafe will require details of the number of matters that went to IDRPs, the number where the decision was withdrawn, the number where the decision was varied and the number where the decision was maintained.

Insurers Obligation to notify workers of IDRPs

An insurer's or self insurer's procedures should require that they inform a worker of the existence of its IDRPs when it issues a Notice of Decision and Rights of Appeal.

Information about its IDRPs should be given in a covering letter or a dedicated information brochure.

The following suggested wording has been developed:

In accordance with the Best Practice Guidelines developed between Insurers and NT WorkSafe, ##### provides you with a free service for internally reviewing our own decision on disputed claims. The ##### Internal Dispute Resolution Officers are independent officers who, on request, will research the circumstances of the dispute and within 5 working days endeavour to resolve the dispute. The Internal Dispute Resolution Officer will provide a written response detailing the outcome of their findings.

The enclosed information explains how to access our Internal Dispute Resolution Process.

Please note you are not obligated to use #####'s Internal Dispute Resolution Process and choosing to do so does not in any way affect your right to request mediation through NT WorkSafe. It is important to note that if you wish to apply for mediation you must do so within 90 days of receiving the Notice of Decision and Rights of Appeal. Please also see the enclosed NT WorkSafe Bulletins which provide valuable information about your workers compensation entitlements and obligations.

General information to Workers about IDRPs

NT WorkSafe does not require insurers or self insurers to advise of IDRPs as part of the decision making process on day to day claims management. A dispute arises when a worker is aggrieved by a decision and insurers and self insurers are not expected to anticipate which decisions are likely to become disputes. The only exception is when an insurer issues a *Notice of Decision or Rights of Appeal*.

However insurers are encouraged to make general information available to workers about the existence of IDRPs either as part of any information package supplied to workers or when it is deemed appropriate as a result of discussions over the claims management.

For further information please contact NT WorkSafe on 1800 250 713