GIO WORKERS COMPENSATION – NEW SOUTH WALES PAYMENT SCHEDULE – AMENDMENT CLAIMS

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Employer					Policy number			Clair	m number			
Worker name					Claim advisor			Cost	centre			
		1st Entitlement period		2nd entitlement period		Post 2nd Entitlement]				
		0 - 13 weeks		>13 - 130 weeks (Please note: PIAWE post 52 weeks excludes OTSA)		>130 weeks						
Period claimed		No work capacity	Current work capacity	No work capacity or current work capacity <15 hrs	Current work capacity > =15 hrs	Assessed with no work capacity	Assessed work capacity > =15 hrs and >\$155		Calculated	Earnings (E)	Deductible (D) for	Total
From	То	PIAWE x 95% - D (or MAX - D, whichever is lesser)	PIAWE x 95% - (E + D) (or MAX - D, whichever is lesser)	PIAWE x 80% - (E + D) (or MAX -	PIAWE x 95% - (E + D) (or MAX - (E + D), whichever is lesser)	PIAWE x 80% - D (or MAX - D, whichever is lesser)	PIAWE x 80% - (E + D) (or MAX - (E + D), whichever is lesser)	Hours:mins lost	weekly compensation benefit rate	for relevant payment period	relevant payment period	amount owing
/ /	/ /									\$		
/ /	/ /									\$		
/ /	/ /									\$		
/ /	/ /									\$		
/ /	/ /									\$		
Glossary of terms						Further comments						
BR - Base RateNP - Non Pecun	iarv Benefits											
OE – Ordinary Ea												
OT - Overtime						Signed by company representative Contact number						
SA - Shift Allowance E - Earnings for relevant payment period												
D – Deductable		nt period										
PIAWE – Pre-Injury Average Weekly Earnings (OE + OT + SA + D)						Date						
PIAWE (post 52 weeks) – after 52 weeks of entitlement, PIAWE* excludes OT and SA (i.e PIAWE* = OE) MAX – Maximum Weekly Amount as specified in the Act.						/	/					

AAI Limited ABN 48 005 297 807 trading as GIO – Agent for the Workers Compensation Nominal Insurer ABN 83 564 379 108/003 also known as icare workers insurance. 21647 01/05/19 A