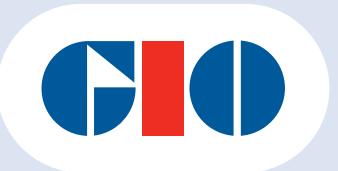


Personal Injury Claim Pack

A guide to your compulsory third party (CTP) insurance claim



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This booklet is intended as a general guide for how GIO can work with you to manage your Compulsory Third Party (CTP) Personal Injury claim*

If you are injured in a motor vehicle accident and you consider the owner or driver of any of the vehicles involved in the accident to be at fault (including the vehicle that you are travelling in if you are a passenger at the time of the incident), and that vehicle has GIO CTP insurance, then you may be entitled to compensation from GIO.

The compensation you may receive will depend on the type of injuries you suffered and your circumstances at the time of the accident. Compensation is aimed at returning you to the position that you were in before you were injured.

At GIO we are committed to working with you to resolve your claim, however, at any time you can speak to the Motor Accidents Authority (MAA) Claims Advisory Service on 1300 656 919 or you can choose to seek legal advice.

GIO is bound to follow guidelines developed by the Motor Accidents Authority (MAA). The MAA is the government body that regulates the NSW CTP Scheme. Copies of the MAA Guidelines are available from the MAA website, see <http://www.maa.nsw.gov.au> or call them on 1300 137 131. Alternatively, you are welcome to call GIO CTP Claims on 13 14 46 for further information.

* This pack doesn't constitute legal advice with regards to Compulsory Third Party claims. You may wish to seek legal advice to be aware of all your legal rights under CTP legislation.

Snapshot of the CTP claims process

The four headings which follow provide a snapshot of what happens in most claims.

Prior to lodging your claim

Accident occurs.

Seek treatment for injuries requiring immediate attention.

Report accident to police.

Lodgement of your claim

Depending on the severity of your injuries, either an Accident Notification Form (ANF) or Personal Injury Claim Form (commonly known as a Claim Form) is lodged.

GIO acknowledges receipt of your ANF or Claim Form and provides you with a claim number as well as contact details for the GIO Claims Representative looking after your claim.

Contact GIO or the MAA if you need a copy of an ANF or Claim Form mailed out to you. They can also be found on the GIO or MAA websites.

Processing your claim and treatment

For an ANF

You'll be notified within 10 working days of receipt of your ANF whether you:

- Can immediately claim up to \$5,000 for your treatment and past loss of earnings
- Need to lodge a Claim Form, for expenses in excess of \$5,000.

For a Claim Form

You have up to 6 months from the date of the accident to lodge a Claim Form (extensions on this timeframe may apply). Your claim is then assessed so as to confirm liability, or the driver at fault and their CTP insurance. During the period in which liability is determined, we request that you or your treating practitioner provide advice of all the treatment received since the accident. Within 3 months of receipt of the Claim Form GIO will notify you of whether your claim has been accepted. If your claim is accepted, you will receive reimbursement for and ongoing support with your rehabilitation.

If your claim is denied, you have the right to a further review via our Internal Dispute Resolution Service. You also have right of appeal via the Claim Assessment and Resolution Service (CARS) and the court system if litigation is commenced. You may want to consider seeking legal advice before deciding to do this.

Settlement

Once your injuries stabilise and a prognosis can be determined, we will work with you with an aim to agree on an appropriate monetary settlement amount. Your claim will then be finalised.

If we cannot agree on an appropriate monetary settlement amount, the claim may be finalised with the assistance of our Internal Dispute Resolution Service, the Claim Assessment Resolution Service (CARS) or via the court system if litigation is commenced. You may want to consider seeking legal advice before deciding to do this.

Prior to lodging your claim

What you need to do

Ensure the accident has been reported to the police

Prior to claim lodgment, the accident must have been reported to the police (in accordance with New South Wales (NSW) CTP legislation).

Seek treatment

This is the most important part of the claims process for you.

Your recovery is of primary importance to GIO. We encourage you to ensure that any injuries sustained in the accident are treated as soon as possible.

If you suffered an injury that requires immediate attention a medical professional should be consulted as soon as possible. The itemised receipt/account for the treatment, which includes the treating practitioner's contact details, must be retained and forwarded on to your Claims Representative (the person from GIO who is looking after your claim).

Based on the nature of your injuries, ongoing consultations may be required. It is important for your recovery and for the resolution of your claim that GIO keep in regular contact with you. If you are advised that you will need additional treatment, please let GIO know. This is a safeguard for you to ensure that GIO is in a position to cover your treatment costs.

Retain receipts

If your claim is accepted, you will be reimbursed for all reasonable and necessary medical treatment and rehabilitation expenses, as well as supplementary costs such as those for travel. To receive this reimbursement, you must be able to supply:

- An original receipt for payment/reimbursement
- Evidence of travel expenses (e.g. a valid receipt or logbook entry detailing kilometres travelled)

If you require any reply-paid envelopes to be sent out to you please do not hesitate to contact GIO CTP Claims on 13 14 46.

What we will do

Help you to commence your claim

We are committed to providing you with fair and timely service. Contact us if you require assistance initiating a claim (full GIO contact details are provided at the end of this brochure).

We may take down some brief details from you, with an aim to confirm that a GIO policy existed for the vehicle whose driver you say caused the accident. In this way we are able to confirm that GIO is the correct insurer for your CTP claim and therein prevent any unnecessary delay in getting your CTP claim underway.

Lodgement of your claim

What you need to do

Based on the nature of your injuries, you will most likely have considered the amount of compensation you require. This will impact on what type of form you lodge with GIO.

If you lodge an Accident Notification Form (ANF), you may be able to seek up to \$5,000 for your treatment and past loss of earnings.

To seek coverage of medical expenses and past loss of earnings in excess of \$5,000, you will need to lodge a Claim Form.

See below for more information about these forms and the lodgement deadlines.

Accident Notification Form (ANF)

By lodging an ANF you may be able to claim up to \$5,000 for your treatment and past loss of earnings, without having to lodge a Claim Form. The treatment expenses can be claimed immediately after you have successfully lodged the ANF.

You must lodge an ANF within 28 days of the accident. Your GP will need to complete the medical certificate that is part of the form.

Please contact GIO CTP Claims on 13 14 46 or visit our website <http://www.gio.com.au> to obtain a copy of an ANF. Alternatively, you may obtain one from the MAA. You can visit their website (<http://www.maa.nsw.gov.au>) or contact them on 1300 656 919.

Claim form

You should lodge a claim form if it is likely that:

- Your treatment costs and past loss of earnings will be greater than \$5,000
- You are not able to lodge an ANF within 28 days of your accident
- You will need treatment or have past loss of earnings of more than 6 months' duration, or
- You wish to claim compensation other than treatment expenses and past loss of earnings, e.g. future loss of earnings.

A claim form must be lodged within six months of the accident. You will need to ensure your GP completes the medical certificate attached to the form.

Please contact GIO CTP Claims or visit our website <http://www.gio.com.au> to obtain a copy of a claim form. Alternatively, you may obtain one from the MAA. You can visit their website (<http://www.maa.nsw.gov.au>) or contact them on 1300 656 919.

Processing your claim and treatment

What you need to do

Receive treatment and retain receipts

Medical evidence strongly suggests that with early intervention, injuries will respond more quickly to treatment than if there is delay in seeking treatment. Therefore, GIO asks that you make every reasonable attempt to recover from your injuries by:

- Receiving medical treatment as soon as you can
- Participating in an appropriate rehabilitation program
- Looking for alternative job opportunities (if unable to continue in your previous job)
- Returning to work as soon as you are medically able to

Be sure to keep the receipts for any treatment/rehabilitation received. Also retain travel receipts or maintain a logbook to show kilometres travelled when seeking treatment.

If you have any questions about this process, please contact your Claims Representative during regular business hours.

Work with GIO so we can help each other

GIO will assign a Claims Representative to assist you with the claims management process.

You should make all reasonable efforts to assist us with processing your claim. This may include providing us with regular advice about your treatment/rehabilitation. Providing this advice helps us to ensure that we are in a position to cover your treatment costs.

Please rest assured that whenever you are contacted by us, it is with the dual aim of getting you on the road to recovery and moving your claim towards resolution.

What we will do

In addition to liaising with you and/or your treating practitioner/s, GIO is responsible for processing your ANF or Claim Form.

Processing your ANF

Within 10 working days of us receiving your ANF, GIO is required to advise whether you are entitled to up to \$5,000 compensation for your treatment costs and past loss of earnings. These costs must be:

- Reasonable and necessary
- Related to the injury caused by the motor accident in accordance with any relevant medical reports
- Evidenced by appropriate receipts or employment/loss of earnings confirmation

In most cases GIO will admit liability on a "provisional" basis. Provisional liability means that GIO will be responsible for your treatment costs and past loss of earnings up to \$5,000.

For accidents that occurred on or after 1 April 2010, if you were the driver of the car that was considered to be at fault and you sustained injuries in an accident, you may lodge an ANF against your CTP Insurer.

If you have any questions about this process, contact your Claims Representative during regular business hours. You can also contact GIO CTP Claims on 13 14 46 (full GIO contact details are provided at the end of this brochure).

Processing your Claim Form

When we receive your Claim Form, we will send you an acknowledgment letter that includes your claim number and the contact details for the member of our team who will be assisting you through the rehabilitation and claims process. This is your Claims Representative. You need to quote the claim number whenever communicating with us about your claim.

After assessing the claim GIO will advise you within 3 months (from the date your form was lodged) whether or not the claim has been accepted. The correspondence which communicates this determination is called a Section 81 Notice.

If your claim is accepted, we will reimburse you for your reasonable treatment expenses and you will be contacted regularly to assist you in the claims process. Our Rehabilitation Team will also be in contact to offer assistance with your recovery.

If your claim is denied and you do not agree with the decision, you are entitled to have the decision reviewed (at no cost to you) by our Internal Dispute Resolution Unit. The unit will respond to you within five working days of receiving your phone call, letter or email.

See the end of the brochure for full contact details for our Group Customer Relations Unit and see the "Resolving disputes" section on the final page of the brochure for further steps you can take such as seeking legal advice or contacting the Claims Advisory Service at the MAA.

Settlement

CTP Claims are not ongoing. At some point in time a settlement must be reached to finalise your claim.

Settlement occurs once your injuries have stabilised and a prognosis can be determined by your treatment providers and any non-treating specialist to whom we may refer you. Depending on the nature of your injury, this could be a matter of weeks to a number of years.

Our experienced and dedicated claims team will assist you as much as possible during the settlement stage.

What you need to do

Please keep GIO informed and attend a medical assessment, if we request it

You need to advise us when your injuries, as advised by your medical practitioner/s, have stabilised.

Upon receipt of this advice, we may require you to attend an assessment with a non-treating medical specialist. We will consult you before arranging the appointment. We also cover the consultation costs and any reasonable expenses incurred in attending the assessment. This doctor will not provide you with medical advice; they will provide GIO with a report outlining the nature and impact of your injuries.

Read and consider settlement paperwork

We will always contact you by telephone to discuss the finalisation of your claim. If you would prefer, you may choose to visit us at our offices for a face-to-face discussion with regard to settlement.

We will provide you with an "Offer of Settlement" that specifies a settlement amount. This amount will be calculated by us to cover your losses, with the aim of placing you back into the position you were in before your accident.

Our settlement offer may include amounts for such things as:

- Any reasonable and necessary ongoing treatment/rehabilitation expenses
- Past and future loss of earnings as a result of your injury
- The cost of modifying your home or car should your injuries be severe enough to warrant this. You will need to be able to supply evidence in support of this
- Care provided to you that you have either paid for or which has been provided at no cost by a friend or relative (for unpaid care there are certain timeframes that have to be met before it is compensable).

In the case of severe injuries you may also be entitled to an additional amount for pain and suffering (non-economic loss). Under NSW law you will need to have a greater than 10% whole person impairment to be compensated for non-economic loss. Whether your injuries are this severe depends upon the medical assessments made by appropriate specialists.

If we cannot agree about the level of permanent impairment you are entitled to lodge a claim with the MAA's Medical Assessment Service (MAS) or you can seek legal advice (please see the final page of this brochure).

You will need to review the Offer of Settlement document and decide whether or not to accept the settlement amount. Please see the 'Frequently Asked Questions' section for further information on what you may be able to be compensated for.

Acceptance of offer

If you accept the offer, GIO will send you additional settlement documentation. Please read and consider this settlement documentation as we cannot process your settlement payment until it has been signed and returned. If you have any questions about the documentation, please contact your Claims Representative.

We will need to obtain statements from statutory bodies regarding any post-accident payments made to you, or made on your behalf. These payments may have been made by:

- Centrelink for lost income
- A workers' compensation insurer if your accident was work-related
- Medicare Australia for treatment costs through the public health system.

Any payments made by those bodies will be deducted from your overall settlement sum. However, your offer may include reasonable amounts for past economic losses such as lost wages and treatment costs.

Once we have processed your documentation and you have received your cheque, your claim is considered fully finalised. We will pay you within 20 days of the settlement date or within 20 days of receipt of any notices from statutory bodies, whichever is the later date.

Non-acceptance of offer

If you believe our offer is not adequate, your Claims Representative will be happy to discuss with you any counter-proposal you wish to make.

If we cannot negotiate successfully so as to agree on a settlement amount, you or GIO can either refer the claim to the MAA's Claims Assessment and Resolution Service (CARS). Your Claims Representative can discuss this option with you in more detail.

Please read the 'Frequently Asked Questions' section in this booklet for information on obtaining legal advice before agreeing to any settlement.

What we will do

Preparation of settlement documentation

Once you accept the Offer of Settlement (discussed above), GIO prepares the following settlement documentation:

- Deed of Release – an official agreement between you and GIO of the agreed settlement amount
- Medicare Notice of Settlement and Judgment – an official notice to Medicare advising that your claim has been settled.

Payment of settlement cheque

Upon receipt of the completed settlement documentation and appropriate clearances from all statutory bodies (such as Centrelink), GIO will ensure payment of your settlement cheque within specified settlement timeframes. Speak to the experienced person at GIO assigned to manage your claim for further information about these timeframes.

Other types of CTP claims

Interstate claims

If you are involved in an accident whilst interstate (outside NSW) and you are injured, you will need to lodge your claim with the insurer of the vehicle at fault in that state.

If you live interstate (outside NSW) and the accident occurs in the state in which you live and you are injured and the accident was caused by a vehicle insured by GIO, you can lodge a claim form with GIO (see lodgement of your claim featured earlier in this booklet).

Some aspects of the NSW CTP Legislation will not apply to you because the accident occurred interstate (outside NSW) however, our claims representative will lead you through this process and inform you of the differences.

If you live interstate (outside NSW) and you are involved in an accident whilst in NSW and you are injured and the accident was caused by a vehicle insured by GIO, you can lodge a claim form with GIO (see lodgement of your claim featured earlier in this booklet).

If you have any questions about these processes please contact GIO CTP Claims on 13 14 46 (full GIO contact details are provided at the end of this brochure).

Claims arising out of the death to a relative

If you are the close relative (or the executor or administrator of the estate) of a person who died in a motor vehicle accident in NSW caused by the fault of the driver of a GIO insured vehicle, there are a number of circumstances under which you may be eligible to claim compensation for funeral expenses and for the financial losses you and other close relatives may have suffered as a result of the death of that person.

For the purposes of making a claim a close relative is a wife, husband, de facto partner, brother, sister, half-brother, half-sister, parent or child of the person who died.

A Compensation to Relatives claim is made by one person on behalf of all dependants of the deceased. In filling out the Compensation to Relatives Claim Form it is necessary to not only include any claim you have for loss of dependency (financial support or loss of services) but also the claims of anyone else who was dependent on the deceased. The entitlements of all dependants are dealt with at the same time and as part of the same claim.

Nominal defendant claims

The Nominal Defendant receives claims where the motor vehicle you consider caused the accident cannot be identified or is uninsured, and when the accident occurred in NSW.

Before sending the claim you must take action to find out the registration number of the motor vehicle or the name of the person you consider caused the accident. For example, by putting an advertisement in the newspaper or attempting to talk to witnesses.

If you cannot find out the registration number or if the motor vehicle is unregistered and not covered by CTP insurance, send your claim to the Nominal Defendant at Level 25, 580 George Street, Sydney NSW 2000, (DX 1517 Sydney). If you need more information about the Nominal Defendant call 1300 137 131 or visit www.maa.nsw.gov.au

Special benefit for children in accidents from 1 October 2006

From 1 October 2006, if the person who was injured (or who died) was under 16 years of age and lived in NSW at the time of the accident, you may still make a claim for the children's special benefit even if the accident was not caused by the owner or driver of a motor vehicle (i.e. the accident was caused by the child). The special benefit provides for reasonable treatment, rehabilitation and care expenses (or, in the case of death, funeral or cremation expenses). If the accident was caused, wholly or in part, by the driver or owner of a motor vehicle other compensation entitlements may apply.

Blameless accidents from 1 October 2007

If the accident occurred on or after 1 October 2007 you may be able to make a claim for compensation even if the accident in which you were injured was a blameless motor accident. Examples of blameless motor accidents could include accidents resulting from the sudden illness of a driver, such as heart attack or stroke or vehicle failure such as a tyre blow-out.

If you were a passenger, pedestrian, cyclist, pillion passenger, driver or motorcycle rider you can make a claim. However, special rules apply to drivers and motorcycle riders in blameless accidents. You may not be entitled to make a claim if you were involved in a single vehicle accident or if you were driving or riding the vehicle that caused the accident (i.e if you are the driver that suffered a medical condition which resulted in the motor accident).

A compensation to relatives claim can also be made for "blameless motor accidents" occurring on or after 1 October 2007.

For more information about the special rules that apply to drivers and motorcycle riders in blameless accidents, contact your Claims Representative.

Frequently asked questions

What happens when a claim is assessed?

GIO may contact the other parties to the accident and will also request a Police Report. You may be required to give us specific information (including photos, documents, records etc.) to help us with the assessment.

If the circumstances of the accident are not straightforward, GIO may need to use the services of an investigator to ascertain the circumstances of the accident, for example, to take witness statements.

Why does it take 3 months to accept or deny my claim?

Although this may seem like a long period, it takes all insurers several weeks to receive the relevant documentation needed to make a decision on fault. We will endeavour to give you a decision as soon as possible.

Will I have to go to "an insurance doctor"?

GIO primarily relies on information from your treating practitioner/s. We may ask you to attend an assessment with a non-treating medical specialist. GIO covers consultation costs and pays for any reasonable costs incurred in attending the assessment. This doctor will provide us with a report commenting on the nature and affect of your injuries.

Will GIO request copies of my medical records?

Who will have access to my medical information?

We need to obtain copies of your medical records to assist us in determining what treatment is required now and what treatment you may require in the future.

The Statutory Declaration on the ANF and/or Claim Form authorises us to request copies of your medical records that are relevant to the claim. GIO will provide you with a copy of this report, unless the doctor advises that we cannot provide a copy of the report to you.

GIO's Privacy Policy protects information provided to us. Your information will not be provided to a third party unless you authorise the release or we are legally obliged to release the information.

Do I need a lawyer?

The choice of whether or not you appoint a lawyer at any stage of the process is yours. The CTP scheme has been developed to resolve claims easily and fairly. We are happy to work with you directly and equally happy to work with the representatives you appoint.

If you do choose to be legally represented, there are some cost considerations to take into account. GIO may, at some stage, be required to pay some of your legal costs. However, you should not assume that GIO will necessarily cover all legal costs you incur. This is a discussion you may wish to have with a legal representative should you decide to appoint one.

Frequently asked questions (continued)

If you are receiving this kit from your lawyer, please be advised that out of courtesy to your representation we will not contact you directly, except in relation to rehabilitation services which we are obliged to do to ensure your optimal health outcomes. The only exception to this rule is that we will contact you when we are unable to obtain a response from your representatives within an appropriate timeframe. You are, of course, able to contact us at any time should you wish to seek information directly.

What am I entitled to claim?

If your claim is accepted, you will be covered for all reasonable and necessary medical treatment and rehabilitation expenses for injuries sustained in the motor vehicle accident.

Reasonable and necessary treatment/rehabilitation:

- Specifically treats the injuries sustained in the accident
- Is medically proven to support your ongoing recovery.

Depending on the nature of your claim and the injuries sustained, you may also be able to claim:

- Loss of earnings, reimbursement for the required use of holiday or sick leave, or loss of superannuation benefits (your loss will be assessed and included in your settlement subject to verification from your employer and/or tax returns)
- The cost of care services for which you have paid or which have been provided to you free of charge by a friend/relative. For unpaid care there are certain timeframes that have to be met before it is compensable
- Travel to and from medical or rehabilitation appointments
- Home or car modifications
- Permanent medical impairment

The above payments may be capped or limited depending on your circumstances and are not an exhaustive list of what you may be able to claim.

Please contact either your Claims Representative or the MAA's Claims Advisory Service for further information.

Am I entitled to payment for pain and suffering?

In accordance with the NSW CTP legislation, compensation for non-economic loss (pain and suffering) is only made to injured people who have received a serious and permanent impairment. Please see the Glossary at the back of this brochure.

For more information you can speak to your Claims Representative or contact the Claims Advisory Service at the MAA .

What about items in my car? Are they covered?

CTP Insurance covers personal injury only. It does not cover items within the motor vehicle or personal items such as clothing. You should check your other insurance policies to see if they cover the items in your car.

Does compensation affect social security payments made by Centrelink?

Compensation may affect your social security payments. It may also affect access to the full range of employment assistance services from Centrelink and other providers. If you receive a Centrelink payment, further information regarding your circumstance should be obtained from Centrelink.

What happens if additional expenses are found/incurred when we are in the process of settling the claim?

You should provide us with original invoices and receipts immediately. We will work with you to resolve the outstanding expenses.

What if additional expenses are found/incurred after the settlement has taken place?

Settlement of your claim is full and final, which is why it is important to notify us as you incur expenses and whether you are advised by anyone that you will need to incur any in the future.

If these additional expenses were not a part of the signed Deed of Release then it is your responsibility to pay for them.

Frequently asked questions (continued)

What if I am not happy with the amount offered by GIO?

If you would like to make a counter-proposal to an offer we have made to you, please contact your Claims Representative. We are committed to resolving your claim as quickly and as fairly as possible.

How does Medicare affect my settlement payment?

NSW CTP legislation requires GIO to reimburse Medicare Australia for medical services provided to you that are related to the accident.

For claims that settle up to \$5,000 there is no requirement to make a payment to Medicare for expenses related to the accident.

For claims that settle at an amount greater than \$5,000 Medicare is entitled to be refunded for all consultations that relate to the claim. In this event, Medicare will provide you with a statement of all Medicare claims from the date of accident to the date of the statement. You must indicate which consultations on the statement relate to the accident and return full details to Medicare. A charge will then be generated (i.e. the amount to be refunded against your settlement amount).

Why do expenses paid get deducted from my settlement?

Expenses which are paid by GIO throughout the life of the claim are a benefit to you. In settlement of the claim this benefit amount is deducted as it has already been paid to you or on your behalf to your treatment providers.

Is my settlement taxable?

In accordance with legislation, settlement of a personal injury compensation claim is not taxable. However, this question and any other queries related to tax implications should be directed to a tax specialist.

What if I disagree with GIO at any stage of the process?

All of our staff at GIO are committed to serving customers in an understanding, efficient and helpful manner.

If you disagree with any of our decisions please contact the person who made the initial decision. If your complaint is not resolved to your satisfaction or you do not wish to contact the people who provided your initial service, you can contact us or escalate your complaint using the following methods:

Nature of complaint ...	To seek resolution ...
General dissatisfaction with the level of service provided	See the GIO's Internal Dispute Resolution Brochure, "Comments, Compliments, Complaints & External Dispute Resolution Schemes".
Dispute related to a medical treatment issue	See the "Resolving Medical Disputes" brochure.
Dispute related to denial of claim form	In the first instance, contact GIO's Group Customer Relations Unit by phone, letter or email. You can contact an agency within the MAA called the Claim Assessment and Resolution Service (CARS) (see Contact Details section).
Dispute related to the settlement amount	Contact CARS.

Contact details

Finding out about the status of your claim

You can contact your Claims Representative as follows:

Phone 1800 795 277

Address GPO Box 4091 Sydney 2001

Useful information is also available on the MAA website <http://www.maa.nsw.gov.au>.

Getting legal Advice

If you would like to retain a lawyer you can contact the NSW Law Society as follows:

Address 170 Phillip St, Sydney

Phone 02 9926 0333

Website <http://www.lawsociety.com.au>

Resolving disputes

Complaints are an important part of maintaining and improving our standards. If you have any complaints regarding service or decisions we have made, please contact the people who provided your initial service. If your complaint is not resolved to your satisfaction or you do not wish to contact the people who provided your initial service, you can contact us using the following methods:

- GIO's Group Customer Relations Unit can be contacted on 1800 689 762.

Also see our website: <http://www.gio.com.au>

- The MAA's Claims Assessment and Resolution Service (CARS) is contactable on 1300 656 919.

Glossary

ANF	Accident Notification Form. This form is used to immediately claim up to \$5,000 in treatment expenses and past loss of earnings within the first six months after the accident. We can provide you with a copy or you can obtain it from the Motor Accidents Authority (see below).
Claims Representative	The experienced member of our claims team assigned to work with you to achieve a fair and timely resolution of your claim.
CARS	Claims Assessment & Resolution Service. This is an independent service. All disputed claims must be referred to CARS before a claim can be proceed through the court system. Either GIO or you can refer a dispute to CARS, which is contactable by ringing the MAA's Claim Advisory Service or going to the MAA website.
CAS	Claims Advisory Service. A part of the MAA. Its staff can be contacted on 1300 656 919. They do not give legal advice, rather, they can help you to: <ul style="list-style-type: none"> ➢ Make a claim ➢ Communicate with an insurer such as GIO ➢ Help resolve disputes with an insurer ➢ Answer questions to assist with preparing applications to CARS and MAS.
Claim Form	The form you will need to complete to commence your claim if you: <ul style="list-style-type: none"> ➢ Will have medical expenses or past loss of earnings worth more than \$5,000 ➢ Could not complete an ANF within 28 days of your accident ➢ Will require treatment or time off work of more than 6 months' duration, from the date of your accident ➢ Are claiming compensation in addition to medical expenses and past loss of earnings, for example, future loss of earnings. <p>If you wish to claim loss of income you will also need to complete a Certificate of Earnings. We can assist you in completing this and other documents.</p>
Compensation	This is money aimed at placing you back into the position you were in before the accident. It can cover economic losses, for example: <ul style="list-style-type: none"> ➢ Medical expenses ➢ Loss of earnings ➢ Loss of superannuation benefits ➢ Home and/or car modifications required because of your injury ➢ Care services provided to you. <p>It can also cover non-economic loss (note definition below).</p>
CTP Insurance	Compulsory Third Party insurance exists to provide compensation for people injured in motor vehicle accidents that are the fault of another person.
Dispute	Where we cannot agree on one or more aspects of your claim. There are bodies who can assist in resolving a dispute, those being: <ul style="list-style-type: none"> ➢ GIO's Group Customer Relations Unit, contactable on 1800 689 762 ➢ MAA's Medical Assessment Service (for medical issues) and Claims Assessment & Resolution Service ➢ The court system.
Liability	If GIO accepts liability this means that we accept that our policy holder was responsible, or at fault, for the accident that caused your injuries.
MAA	The Motor Accidents Authority. This is the government body that oversees the CTP personal injury scheme in NSW. It is funded by a levy on CTP premiums paid by motorists. Its role is to manage a scheme that is affordable, fair and accessible. All insurers including GIO operate under MAA Guidelines to ensure that we handle claims fairly and equitably. Their general contact number is 1300 137 131. The MAA's Claims Advisory Service is contactable on 1300 656 919, or view the MAA website at http://www.maa.nsw.gov.au

MAS	<p>Medical Assessment Service. This deals with any medical dispute you and GIO may have regarding:</p> <ul style="list-style-type: none"> ➢ Whether medical treatment/care was reasonable and necessary ➢ Whether the need for your treatment/care was caused by the accident ➢ Whether you have suffered more than 10% permanent whole person impairment because of the accident. <p>You can speak to either GIO or CAS on 1300 656 919 regarding how to go about lodging an application with MAS.</p>
Non-economic loss	<p>Compensation for this type of loss is to cover the impact your injuries have had on your day-to-day life. It compensates you for any:</p> <ul style="list-style-type: none"> ➢ Pain and suffering ➢ Loss of amenities, or the quality, of life ➢ Loss of life expectancy ➢ Disfigurement. <p>Under NSW law you will only be entitled to this type of compensation if your injuries are severe enough to have resulted in you having a permanent whole person impairment of greater than 10%.</p>
Rehabilitation	<p>Rehabilitation aims to restore an injured person, as far as possible, to the lifestyle they had before they were injured. Where this is not possible, the aim is to acquire new skills. (See the "Rehabilitation and the NSW Motor Accidents Scheme' brochure</p>
Settlement	<p>The finalisation of your claim by way of payment of compensation. It will involve signing documents setting out the basis for the settlement. It is "full and final", which means that any expenses you incur that were not part of the settlement will be your responsibility.</p>
Whole person impairment (WPI)	<p>WPI is an alteration to a person's health status. Permanent means your condition is stable and is not likely to change. It is a medical issue. Opinions on the extent or amount of impairment are obtained from doctors, e.g. your treating specialists or a non-treating doctor to whom we may refer you. A doctor who provides a WPI assessment will do so based on guidelines issued by both the American Medical Association and the MAA.</p>

