

Rural Health Workforce Incentives Scheme

Factsheet: Workers Compensation

About workers compensation

Workers compensation (WC) provides support for workers with a work related injury. WC assists with the costs of weekly benefits, medical and hospital expenses, and a range of other benefits to help the health worker recover and return to work.

WC in NSW government agencies is administered by icare who provides insurance and care services to workers with injuries under various compensation schemes. NSW Health WC issues are governed under various policy directives.

The following information has been provided to address the application of NSW Health Rural Health Workforce Incentives Scheme (RHWIS) incentives and benefits to a health worker who is covered under WC.

How workers compensation payments are determined

Payment of weekly benefits for workers compensation are calculated based on pre-injury average weekly earnings (PIAWE) for non-exempt workers, or the current weekly wage rate (CWWR) or average weekly earnings (AWE) for exempt workers (including paramedics).

More information on PIAWE and its inclusion in workers compensation payments can be found [here](#). More information on payments for exempt workers can be found [here](#).

New workers compensation cases and incentivised health workers

Incentives and benefits that are generally monetary in nature may be considered and included in the assessment of the health worker's PIAWE or AWE. This will be determined and specified as part of legislative assessment criteria.

Health organisations are responsible for providing accurate information of all incentives that a health worker is receiving to their Claims Service Provider, to ensure the injured employee's payments are calculated correctly.

Where a health worker continues to receive the incentive or benefit post any WC injury, the monetary value of these incentives will not be included in the calculation of PIAWE or AWE. If the health worker does not continue to receive the incentive or benefit post any WC injury, then the monetary value of these incentives will be included in the calculation of PIAWE or AWE.

Whilst PIAWE and AWE is determined at the initial outset of the claim, if the health worker initially

retains the use of the benefit or incentive, and this is not included in PIAWE or AWE, but at any point during the life of the WC claim, the incentive or benefit is removed from the health worker, the Claim Service Provider will need to be immediately informed to ensure that the PIAWE or AWE can be updated accordingly.

Existing workers compensation cases and non-incentivised health workers

Health workers may be undergoing a WC assessment or currently receiving WC payments. These health workers may still be offered the opportunity to accept an RHWIS incentives package. Incentives and benefits offered from these packages may impact existing and future WC payments.

When health workers undergoing a WC assessment or who are currently receiving WC payments accept a RHWIS incentives package, the incentives and benefits offered must be submitted to the Claims Service Provider to determine if there is an impact to existing or future WC payments.

Where a health worker continues to receive the incentive or benefit post any WC injury, the monetary value of these incentives will not be included in the calculation of PIAWE or AWE. If the health worker does not continue to receive the incentive or benefit post any WC injury, then the monetary value of these incentives will be included in the calculation of PIAWE or AWE.

Whilst PIAWE and AWE is determined at the initial outset of the claim, if the health worker initially retains the use of the benefit or incentive, and this is not included in PIAWE or AWE, but at any point during the life of the WC claim, the incentive or benefit is removed from the health worker, the Claim Service Provider will need to be immediately informed to ensure that the PIAWE or AWE can be updated accordingly.

Considerations for incentivised health workers returning to work

- If the health worker can complete the primary responsibilities and outcomes or are on alternate or restricted duties for a temporary period (e.g., for recovery), and are no longer receiving WC payments, any suspended incentives and benefits can recommence from the date of first return to work.
 - If the health worker can complete the primary responsibilities or are on alternate or restricted duties for a temporary period (e.g., for recovery), and are still receiving WC payments, incentives and benefits included in the WC payments will remain suspended. All other agreed incentives and benefits should still be offered by the health organisation.
 - If the health worker can no longer complete the primary responsibilities and outcomes and are being redeployed or terminated, then incentive payments should be ceased.
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Disputes by the health worker and complex cases

A health worker's PIAWE or AWE and weekly payment for WC is determined by the Claims Service Provider (insurer). Any concern or dispute should be raised and assessed on a case-by-case basis with relevant case assessors and/or icare.

The health organisation's primary obligation in a dispute is to assist icare with the process and provide accurate information relating to the health worker. Provided that the obligation is met, the

Claims Service Provider carries the liability for defending against any disputes on PIAWE, AWE or WC payments. Relevant guidance and advice should be sought from the Claims Service Provider and its authorised representatives prior to any information or advice being given to the health worker.