



# Guideline for CTP insurers: Contacting legally represented claimants for rehabilitation and treatment

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## Purpose

This guideline has been developed to assist compulsory third party (CTP) insurers when contacting legally represented claimants regarding the provision, establishment and review of reasonable and appropriate rehabilitation and treatment in Queensland's CTP insurance scheme. It is intended to be read in conjunction with the *Rehabilitation standards for CTP insurers*. It provides a framework for promoting and encouraging the rehabilitation of claimants and early intervention, and outlines the limited circumstance upon which direct claimant contact may be made.

## Background

This guideline recognises that claimants may engage legal representatives to communicate with insurers on their behalf and may choose how much direct communication they have with insurers. It also recognises that insurers may make rehabilitation services available to claimants on their own initiative or at the claimant's request.

## Guiding principles

As a guiding principle, all communication should be directed to the claimant's legal representative and not directly to the claimant. However, the insurer may contact legally represented claimants in order to facilitate the efficient and effective provision of rehabilitation and treatment. In doing so, the insurer is expected to adopt processes consistent with this guideline.

All communication is to be conducted in a professional manner that demonstrates respect for all parties, especially the claimant. For the purposes of this guideline, *communication* includes, but is not limited to, emails, letters, phone calls, video conferencing, information brochures, surveys and any other medium to impart, request or exchange information.

Guiding questions	Key considerations
1. <b>Have you given notice to the legal representative?</b>	The CTP insurer has advised the claimant's legal representative in writing of the intended communication before the first communication is made.
2. <b>Is the content to be communicated generic information about rehabilitation?</b>	The content of the communication is generic information about the importance of rehabilitation, how to access funding for rehabilitation services, or the responsibilities of the CTP insurer and the claimant (for example, providing a copy of the <i>Road to recovery</i> brochure).
3. <b>Is the content of the communication only in relation rehabilitation and treatment?</b>	The content of the communication is information and assistance regarding the provision, establishment and review of reasonable and appropriate rehabilitation and treatment. In addition, or alternatively, the communication is considered necessary to ascertain the effectiveness and progress of ongoing rehabilitation or treatment.

Guiding questions	Key considerations
<p><b>4. Who is making communication by phone or video conference?</b></p>	<p>Direct communication with claimants by phone or video conference is conducted by appropriately qualified and trained staff, for example rehabilitation or injury management advisors.</p>
<p><b>5. When must communication stop?</b></p>	<p>If, at any time after the insurer makes the first communication, either the claimant or their legal representative communicates to the insurer that the claimant no longer wishes to engage in direct contact, the insurer must revert to communicating with the claimant's legal representative.</p>
<p><b>6. What documents must be provided to the claimant's legal representative?</b></p>	<p>In all circumstances, the insurer must provide the claimant's legal representative with a copy of:</p> <ul style="list-style-type: none"> <li>(a) any written communication between the claimant and the insurer</li> <li>(b) a record of any oral conversation with the claimant.</li> </ul> <p>Items (a) and (b) must be provided as soon as practicable and no later than one (1) month from the date of the direct communication with the claimant.</p> <p><i>A record of an oral conversation</i> includes a file note, digital recording, phone recording, transcript of a digital recording or other document which sets out the oral communication between the insurer and the claimant. This record forms part of the insurer's claim file for that claimant.</p>

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