



Supporting you in
your recovery

CTP INSURANCE
REGULATOR

Information for people seriously injured in a vehicle accident

Being seriously injured in a road crash is truly devastating for both the person injured and their loved ones. While your recovery is the key priority, understandably you and your family are likely to be anxious about your financial situation when you are unable to work and meet household expenses.

The information in this section will help answer some initial questions you may have about immediate cover, care and payments. The remainder of this booklet will explain the two insurance schemes in South Australia that may cover you for your injuries.

Is there insurance available to me?

There are two insurance schemes that may cover you if you have been seriously injured in a crash:

- 1.** The Compulsory Third Party (CTP) insurance scheme, for which policies of insurance are provided by four private CTP insurance providers – AAMI, Allianz Australia Insurance Limited, QBE Insurance (Australia) Limited, and SGIC. The CTP Insurance Regulator will assist in the circumstance where a claim needs to be made against the Nominal Defendant where an uninsured or unidentified motor vehicle is involved.
- 2.** The Lifetime Support Scheme (LSS) run by the Lifetime Support Authority (LSA).

This booklet will explain what both of these schemes are, the situations when they will cover you, and how you can make a claim. You can find out about making a CTP Claim on page 8, and information about whether you will be eligible for participation in the LSS can be found on page 13.

Who will pay my medical and pharmacy costs?

In South Australia, people injured in a crash are generally only entitled to claim compensation if they are not entirely at fault for the crash or causing their own injuries. However, while an inpatient in a public hospital immediately following the crash, your medical treatment and pharmacy costs will be paid by the approved insurer managing your claim regardless of liability for the crash.

Further information about payment of treatment costs after you leave hospital is contained in this booklet. Alternatively, you can contact the approved insurer managing your claim or your claims consultant (if you have lodged a CTP Claim) for more information.

If your injuries mean you are eligible for participation in the Lifetime Support Scheme, your necessary and reasonable treatment, care and support will be covered by the Lifetime Support Authority once your application is accepted.

Who will look after me when I get home from hospital?

You may require specialist personal care and/or home support services when you return home from hospital. There are agencies that offer these services for people injured in crashes. Please discuss your requirements with the approved insurer managing your claim, your claims consultant or if relevant, the LSS.

Please be aware that the approved insurer managing your claim will need to confirm who was at fault in the crash before they are able to fund any treatment or care expenses required after you are discharged from hospital. The approved insurer may need to obtain evidence from medical specialists to assist in identifying the support you may need.

If you are a participant in the Lifetime Support Scheme (see page 13 for more information), you will be covered for necessary and reasonable treatment, care and support regardless of who is at fault.

Are you experiencing financial hardship?

Please advise the approved insurer managing your claim or your claims consultant if you are experiencing financial hardship. You may be eligible to receive an 'interim payment' from the approved insurer to assist you with day-to-day expenses. Before providing an interim payment, the approved insurer will need to confirm who was at fault in the crash and may obtain copies of such documents as your household expenses and your pre-crash income via payslips or financial statements. Please feel free to contact the approved insurer for more information about interim payments.

Do I need legal advice?

Should you require legal advice and need a referral to an appropriate solicitor, the Law Society of South Australia has a Legal Referral Service. You can visit their website www.lawsociety.sa.asn.au or phone (08) 8229 0222.

What is CTP insurance?

Compulsory Third Party (CTP) Insurance is paid at the same time as you pay your motor vehicle registration. Just as registration of your vehicle is compulsory, so is CTP Insurance.

Importantly, CTP Insurance provides compensation in respect of death or bodily injury caused by or arising out of the use of a motor vehicle where the driver or owner of a South Australian registered vehicle is at fault.

By paying your CTP premium you are protecting yourself from potentially being liable for damages if you cause injury or death to other road users.

Serious injuries can cost many hundreds of thousands in rehabilitation and medical costs so it is important that you as a driver or owner are protected from having to personally cover these expenses.

The scheme does not:

- Provide full compensation to persons who contribute to their injuries, for example, by not wearing a seatbelt.
- Compensate the injured driver who is entirely at fault.
- Cover damage to vehicles.

To make a claim for compensation, you will need to provide evidence that:

- a. You were injured in a crash (via medical evidence); and
- b. A South Australian registered motor vehicle was at fault (completely or partly) and caused your injuries;
- c. In the case of an unknown or uninsured motor vehicle, the motor vehicle was at fault, the crash occurred in SA and you have made all attempts to try and identify the at fault motor vehicle; and/or
- d. If your child is under the age of 16 that the crash occurred in South Australia.



I have been injured in a crash. Can I make a CTP claim?

If you or your child have been injured in a crash where a South Australian registered motor vehicle was at fault, the South Australian CTP Insurance scheme provides compensation to you for your injuries (subject to eligibility criteria being met).

Passenger or driver?

If you were injured as a passenger in a crash that involved only the motor vehicle you were travelling in (or 'on' in the case of a motorcycle or scooter), then you may be entitled to make a claim if the driver/rider was at fault. That driver or rider may be entitled to make a claim against the CTP Insurance scheme if they were not entirely at fault.

Unknown or uninsured vehicle

If the motor vehicle involved in the crash is unknown or uninsured for CTP Insurance purposes, you may have a claim against the Nominal Defendant Scheme. There are certain criteria that must be met to qualify for this compensation, so please talk to the CTP Insurance Regulator for more information.

Support for injured children

The CTP Insurance scheme also provides coverage for the necessary and reasonable treatment, care and support needs of children under the age of 16 injured in a crash which occurred in South Australia on or after 1 July 2013. That coverage is available regardless of whether the child, a South Australian registered motor vehicle or an interstate registered vehicle was at fault. If an unknown or uninsured vehicle was involved, the Nominal Defendant Scheme will be liable for those expenses.

Lifetime Support Scheme for serious injuries

If you sustained very serious injuries in a motor vehicle accident, which occurred in South Australia on or after 1 July 2014 you may be entitled to necessary and reasonable treatment, care and support under the Lifetime Support Scheme (LSS). Eligibility is determined by your injury, regardless of whether you or a South Australian registered motor vehicle were at fault and regardless of your age. Your application for LSS support will be dealt with by the Lifetime Support Authority and is not part of your CTP Insurance claim.

More information on the LSS can be found on page 13.

How do I make a CTP claim?

If you were injured as a result of a crash, the first thing you should do is report it to the Police.

Approved insurer

If you are unaware of who the approved insurer of the vehicle you consider was at fault is please phone the South Australian CTP Insurance Personal Injury helpline on **1300 303 558**. The CTP Insurance Regulator will provide you with details of the insurer.

Once you have lodged a claim form with the approved insurer or the CTP Insurance Regulator, a claims consultant from the approved insurer that will be managing the claim will then make contact with you to talk about your claim and ask you for any more information that may be needed.

Under the *Motor Vehicles Act 1959*, as part of your Injury Claim Form or Fatality Claim Form, the forms include authorisation of the insurer to obtain documentary information relevant to your claim.

The approved insurer or claims agent must provide you with a copy of any documents that they obtain within 21 days of receipt.

Timeframes also apply when making a CTP Insurance claim. You must lodge an Injury Claim Form (or Fatality Claim Form in the event that your claim relates to the death of a person in a motor vehicle accident):

- As soon as reasonably practicable if the motor vehicle that caused the crash is unknown or uninsured.
- Within six months of the motor vehicle accident in any other circumstance.

If you have not complied with these timeframes please contact the CTP Insurance Regulator to discuss your circumstances.

If you have not received these forms already, they are available at the CTP Insurance website (www.ctp.sa.gov.au) or you can have them posted to you by phoning **1300 303 558**.

Medical assistance

If you have long term or serious injuries, it is important to continue seeing your doctor or specialist so:

- Your recovery is optimised
- The insurer handling your claim can obtain medical reports about your progress
- The insurer handling your claim can consider the ongoing approval and payment for your treatment.



What information am I required to give as part of the CTP claim process?

The more information you can supply, the easier it will be for the insurer handling your claim to process your CTP Insurance claim.

The information you are required to provide will depend on the compensation you are seeking. As a starting point, you are required to complete an Injury Claim Form or Fatality Claim Form.

Required information

Some of the information the Injury Claim Form and the Fatality Claim Form will ask you to provide includes:

- Proof of identity.
- The facts of the crash.
- Details of the vehicles you think caused the accident
- The time and place at which it occurred.
- The circumstances of the crash.
- The name, date of birth and address of the driver of the motor vehicle at the time of the crash.
- The name and address of any person killed or injured in the crash, if known.
- The details of any witnesses of the crash, if known.
- A medical certificate or opinion as to the nature and probable cause of your injuries.
- The relevant police report number for any report provided to a police officer in connection with the crash.
- Evidence of income and/or copies of treatment accounts, if relevant.

Note: If you are the owner, person in charge or the driver of a motor vehicle involved in a crash, the law requires you to co-operate fully with the approved insurer managing the claim in providing the information required to process any claim. Penalties apply if this is not done (Section 124 of the *Motor Vehicles Act 1959*).

Who is unable to make a CTP claim?

You are unable to make a CTP Insurance claim in South Australia if:

- You were not injured in the crash and want to claim for motor vehicle damage (please contact your relevant car insurance company).
- The motor vehicle you were driving was the only motor vehicle involved in the crash and no one else was at fault (unless you meet the requirements stated above for children or for the Lifetime Support Scheme).
- You were injured in a crash and the motor vehicle at fault was registered and insured by the CTP Insurance insurer of another state – even if the crash occurred in South Australia (unless you meet the requirements stated above for children). You may be able to make a claim with the relevant CTP Insurance scheme in the State where the motor vehicle at fault is registered.

Alternatively, you may qualify for the Lifetime Support Scheme.

What will CTP compensation cover me for?

The Scheme provides compensation for necessary and reasonable hospital, medical and other treatment costs. These include (but are not limited to) the following costs:

- Medical treatment.
- Medications.
- Ambulance.
- Hospital.
- Physiotherapy.
- Chiropractic.

Treatment requirements

Please note that not all types of health care, therapy and support services are covered by the CTP Insurance scheme. It is best to contact the approved insurer managing your claim and discuss your treatment requirements with your claims consultant before undertaking alternative treatments. Generally, all providers of medical and allied health services must be appropriately qualified for your expenses to be covered by the CTP Insurance scheme.

Compensation

In addition to immediate health care and treatment costs, compensation may also cover the items listed below.

- Loss of earning capacity (past and future), excluding the first week's loss.
- Future treatment and care requirements.
- An allowance for any non-economic loss (pain and suffering) experienced by you as a result of your injuries.
- Travel expenses to and from treatment.
- An allowance for any homecare and personal care services you may require as a result of your injuries (e.g. cleaning and gardening).

These payments are only made for claims in certain circumstances where fault has been established on the part of a South Australian registered motor vehicle or where you qualify for compensation under the Nominal Defendant Scheme. There are a number of legal requirements that must be met before these payments are made, which include satisfying certain thresholds determined by the seriousness of your injury.



What is the Lifetime Support Scheme?



The Lifetime Support Scheme (LSS) is a no fault scheme which provides necessary and reasonable treatment, care and support for people who sustain very serious injuries in a crash such as brain injuries or spinal cord injuries. The Lifetime Support Authority (LSA) administers the LSS.

The LSS applies to crashes that occur in South Australia on or after 1 July 2014.

As a no fault scheme, the LSS is able to support people with very serious injuries, who were previously only eligible to seek compensation if there was someone else at fault in the crash.

It means that drivers who sustain lifelong disabilities in single motor vehicle crashes can now receive necessary and reasonable treatment, care and support, which was previously not available to them.

Who is eligible for the LSS?

If you have sustained very serious, lifelong injuries in a motor vehicle accident, you may qualify for support under the LSS. Types of very serious injuries include paraplegia and quadriplegia, brain injury, severe burns, amputations and blindness. The eligibility criteria to assess whether lifetime support is required are outlined in the LSS Rules which can be found at www.lifetimesupport.sa.gov.au.

What support is provided to LSS participants?

A range of support will be available to maximise your recovery and help you achieve and maintain your health and quality of life.

The type of support available could include medical treatment, pharmaceuticals, dental treatment, rehabilitation, ambulance transportation, respite care, personal care and support services, aids and appliances like wheelchairs, hoists and prostheses, educational and vocational training and home, motor vehicle and workplace modifications.

People with serious lifelong disabilities or injuries often need help with daily tasks like bathing, household chores and shopping. Personal care and support services can assist you in these activities and more.

What support is not covered by the LSS?

The LSS will not provide income support to participants, or pay damages for non-economic loss (pain and suffering).

What about children?

Children under the age of 16 who are injured in a crash in South Australia on or after 1 July 2013 are entitled to necessary and reasonable treatment, care and support under the CTP insurance scheme regardless of whether they or a South Australian registered motor vehicle was at fault.

The severity of the injuries and the child's ongoing disabilities will determine if their entitlement to treatment, care and support is managed through the LSS or the CTP insurance scheme.

The support that is provided to children does not replace the usual care and supervision that would normally be provided or paid for by a parent such as child care services and costs, out of school hours care and vacation care.

Can I make a CTP claim if I have an LSS claim?

Being accepted into the LSS does not stop you from seeking compensation for non-economic loss (pain and suffering) and loss of earning capacity if there is someone else at fault for the crash. If you are a participant in the LSS and your treatment, care and support needs are covered by the LSA, you are not able to seek financial compensation under the CTP Scheme for those same costs and/or services.

How do I make an application for the LSS?

You, someone acting on your behalf, or an approved insurer for a vehicle involved in the motor vehicle accident, can make an application to the LSA to be accepted as a participant in the Lifetime Support Scheme. The LSA works closely with hospital treating teams and emergency departments to ensure its service planners are contacted when someone sustains the type of injuries that may be covered by the LSS.

Service planners will work with medical, health and disability staff to make sure you, your family and your carers are given as much information as possible, as soon as possible.

The LSA will need to obtain information and documents related to your injury, the crash, hospital records, doctors' reports and other information in order to process your application.

LSA service planners will maintain regular contact with you, your family and your carers and be available to provide advice during the application process.

If you are unsure about whether you may be eligible for participation in the LSS, ask your treating team at the hospital, or contact the LSA at lifetime.support@sa.gov.au or phone 1300 880 849.

What happens once an LSS application is accepted?

Once your application is accepted by the LSA, you will become an interim participant in the LSS for up to three years. This allows time for your injuries to stabilise, so that your ongoing support can be considered.

LSA service planners will work with you, your family and your carers to ensure you receive the right care and services from approved service providers.

What happens if an LSS application is not accepted?

If you are seriously injured in a crash but do not qualify for support under the LSS, you will still be entitled to compensation for your injuries under the CTP insurance scheme if you are able to establish a South Australian registered motor vehicle was at fault for the crash or you are able to make a claim against the Nominal Defendant Scheme – see page 2.

More information about the CTP insurance scheme is available in the previous section of this booklet.



Useful contacts

CTP Insurance Personal Injury helpline

Phone: 1300 303 558

Web: www.ctp.sa.gov.au

Lifetime Support Authority

Phone: 1300 880 849

Web: www.lifetimesupport.sa.gov.au

AAMI

Phone: 13 22 44

Web:

www.aami.com.au/ctp-insurance/sa.html

Allianz Australia Ltd

Phone: 1300 686 725

Web:

www.allianz.com.au/ctp-insurance/sa/

QBE Insurance (Australia) Limited

Phone: 1300 429 528

Web: www.qbe.com.au/sa-ctp

SGIC

Phone: 1800 633 176

Web:

www.sgic.com.au/claims/ctp-insurance

Medicare

Phone: 132 011

Web: www.medicare.gov.au

Department for Communities and Social Inclusion

Web: www.dsci.sa.gov.au

Domiciliary Care

Domiciliary Care provides a range of services to people aged over 18 with reduced ability to care for themselves due to age, injury or illness. Their open hours are 8:30am-5:00pm Monday to Friday.

Phone: 1300 295 673

For more information

The CTP Insurance Support Helpline (CTP Insurance Regulator)

Phone: 1300 303 558 **Fax:** 1300 617 531

Postal Address: GPO Box 1095 Adelaide SA 5001

Email: ctp@sa.gov.au

Website: www.ctp.sa.gov.au

Office Hours: 8:30am to 5:00pm Monday to Friday

The contents of this document are for general information only and not intended to constitute professional advice or be used as a legal document. Its aim is to set out, in simple form, a summary of the Compulsory Third Party Insurance Scheme in South Australia and should not be taken as precise legal interpretations of the law. While the CTP Insurance Regulator has taken all reasonable care in the production of this brochure, no warranty is made as to the accuracy, currency or completeness of its contents and no liability is accepted for any loss, expense or liability, however arising, as a result of use of or reliance upon the contents at any time.

Privacy: The CTP Insurance Regulator and approved insurers take all reasonable steps to protect personal information and confidential information for all persons involved in motor vehicle accidents. Privacy Statements are available on the CTP Insurance Regulator website www.ctp.sa.gov.au.

Notes

1300 303 558
ctp.sa.gov.au