

Workers Compensation Act 1951

A1951-2

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About this republication

The republished law

This is a republication of the *Workers Compensation Act 1951* (including any amendment made under the *Legislation Act 2001*, part 11.3 (Editorial changes)) as in force on 9 January 2023. It also includes any commencement, amendment, repeal or expiry affecting this republished law to 9 January 2023.

The legislation history and amendment history of the republished law are set out in endnotes 3 and 4.

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- authorised republications to which the Legislation Act 2001 applies
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Penalties

At the republication date, the value of a penalty unit for an offence against this law is \$160 for an individual and \$810 for a corporation (see *Legislation Act 2001*, s 133).



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Workers Compensation Act 1951

An Act relating to compensation to workers for injuries arising out of or in the course of their employment, and for other purposes

Chapter 1 Preliminary

Section 1

Chapter 1 Preliminary

1 Name of Act

This Act is the Workers Compensation Act 1951.

Chapter 2 Interpretation generally

2 Dictionary

The dictionary at the end of this Act is part of this Act.

Note 1 The dictionary at the end of this Act defines certain words and expressions used in this Act, and includes references (*signpost definitions*) to other words and expressions defined elsewhere in this Act or in other legislation.

For example, the signpost definition '*injury*—see section 4 (Meaning of *injury*).' means that injury is defined in that section.

Note 2 A definition in the dictionary (including a signpost definition) applies to the entire Act unless the definition, or another provision of the Act, provides otherwise or the contrary intention otherwise appears (see Legislation Act, s 155 and s 156 (1)).

3 Notes

A note included in this Act is explanatory and is not part of this Act.

Note See the Legislation Act, s 127 (1), (4) and (5) for the legal status of notes.

3A Offences against Act—application of Criminal Code etc

Other legislation applies in relation to offences against this Act.

Note 1 Criminal Code

The Criminal Code, ch 2 applies to all offences against this Act (see Code, pt 2.1).

The chapter sets out the general principles of criminal responsibility (including burdens of proof and general defences), and defines terms used for offences to which the Code applies (eg *conduct*, *intention*, *recklessness* and *strict liability*).

Note 2 Penalty units

The Legislation Act, s 133 deals with the meaning of offence penalties that are expressed in penalty units.

4 Meaning of *injury*

(1) In this Act:

injury means a physical or mental injury (including stress), and includes aggravation, acceleration or recurrence of a pre-existing injury.

(2) In this section:

mental injury (including stress) does not include a mental injury (including stress) completely or mostly caused by reasonable action taken, or proposed to be taken, by or on behalf of an employer in relation to the transfer, demotion, promotion, performance appraisal, discipline, retrenchment or dismissal of a worker or the provision of an employment benefit to a worker.

5 Meaning of employer

In this Act:

employer includes—

- (a) an entity; and
- (b) the legal personal representative of a dead employer; and
- (c) if the services of the worker are temporarily lent or let on hire to someone else (the *temporary employer*) by the person (the *original employer*) with whom the worker has entered into a contract of service or apprenticeship—the original employer is, for this Act, taken to continue to be the employer of the worker while the worker is working for the temporary employer.

6 Meaning of totally incapacitated

For this Act, an injured worker is totally incapacitated for work if—

- (a) there is no suitable paid employment reasonably available to the worker that the worker can do because of a functional impairment caused by the injury; or
- (b) the worker is taken, or declared, to be totally incapacitated under section 35 (When is a worker taken to be totally incapacitated?).

7 Meaning of partially incapacitated

For this Act, an injured worker is *partially incapacitated* for work if, because of a functional impairment caused by the injury, the worker—

- (a) cannot do all the work the worker could do before the injury; and
- (b) is not totally incapacitated.

7A Meaning of total wages

(1) In this Act:

total wages means total wages worked out as prescribed by regulation.

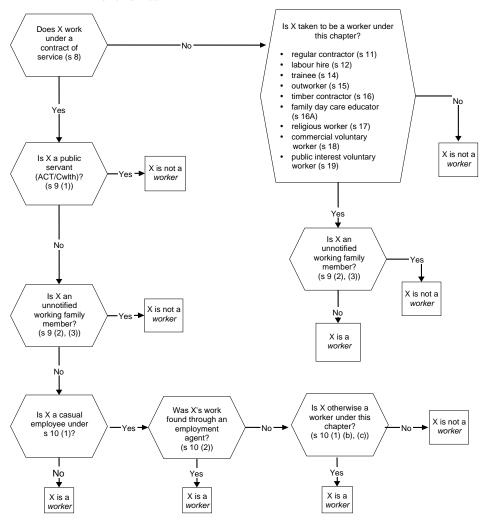
(2) The Legislation Act, section 47 (3) does not apply to a regulation under this section.

Chapter 3 Meaning of worker

Notes about ch 3

Note 1 Working out who is a worker

The following chart is a guide for working out if a person (X) is a worker for this Act.



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Note 2 Payment for work

Most people who are *workers* under this chapter are employed or engaged under a contract with someone else. At common law, a contract cannot exist unless there is a valuable exchange between the people on both sides of the contract, by which—

- the employee (or contractor) provides his or her labour to the employer (or principal); and
- the employer (or principal), in exchange, provides payment to the employee (or contractor), including non-monetary rewards (eg payment in kind).

The exceptions under this chapter are those who are taken to be *workers* under s 14 (Trainees), s 16A (Family day care educators), s 17 (Religious workers), s 18 (Commercial voluntary workers) and s 19 (Public interest voluntary workers). Trainees and religious workers may or may not be paid for their labour. Voluntary workers (under s 18 and s 19) are those that are paid only for expenses (if that).

Note 3 Subcontracting and labour hire (effect of s 13)

The Act applies in a special way to subcontracting arrangements, by which—

- a *worker* is engaged to work for a person who is the *employer* of the worker (under this chapter); and
- the employer has engaged the worker to fulfil a contract the employer has with someone else (in this note, a *principal*) to do work for the principal's trade or business.

Under s 13, the principal is liable to pay compensation to the worker if the worker is injured. The principal may, however, recover the compensation paid from the employer.

These situations may be complicated by the involvement of labour hirers, who may in some circumstances be taken to be the employer of workers engaged to do work for a principal (see s 12). Here are 3 illustrations of different subcontracting arrangements:

Arrangement 1 No labour hirer

A bricklayer's labourer (the *worker*) is employed by a bricklayer (the *employer*) to assist the bricklayer to fulfil a contract between the bricklayer and a builder (the *principal*).

The bricklayer is the labourer's employer.

Arrangement 2 Labour hirer as employer

A cleaner (the *worker*) is engaged by a labour hirer (the *employer*) to fulfil a contract between the labour hirer and the owner of a retail store (the *principal*) for the cleaning of the store. The labour hirer is taken (under s 12) to be the employer of the cleaner, because the cleaner has no contractual relationship with the owner of the store.

The labour hirer is the cleaner's employer.

Arrangement 3 Labour hirer as employment agent

A keyboard operator (the *worker*) is employed by an information technology consultant (the *employer*) to fulfil a contract between the consultant and a government agency (the *principal*). The consultant recruits the operator through a labour hirer acting as an employment agent.

The consultant is the operator's employer.

Under all of these arrangements, the worker may claim compensation from either the employer or the principal (see s 13 (2) and (4)). If the principal pays compensation to the worker, the principal may claim repayment from the employer (see s 13 (3)). But in the 3rd arrangement (*Labour hirer as employment agent*), the worker may not claim compensation from the labour hirer, and the principal may not seek repayment of compensation from the labour hirer.

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8 Who is a worker?

(1) In this Act (subject to this chapter):

worker means an individual who—

- (a) works under a contract of service, whether the contract is express or implied, oral or written; or
- (b) works under a contract, or at piecework rates, for labour only or substantially for labour only; or
- (c) works for another person under a contract (whether or not a contract of service) unless—
 - (i) the individual—
 - (A) is paid to achieve a stated outcome; and
 - (B) has to supply the plant and equipment or tools of trade needed to carry out the work; and
 - (C) is, or would be, liable for the cost of rectifying any defect in the work carried out; or
 - (ii) a personal services business determination is in effect for the person carrying out the work under the *Income Tax Assessment Act 1997* (Cwlth), section 87-60.
- (2) A reference in this Act to a *worker* after the date of an injury includes a reference to a former worker.
- (3) The Minister may determine categories of workers for the following provisions:
 - (a) section 155 (7), definition of *employer's estimate*, paragraphs (a) and (b) (Information for licensed insurers on application for issue or renewal of policies);
 - (b) section 190 (1) (b) (Provision of information to inspectors).

(4) A determination is a notifiable instrument.

Note A notifiable instrument must be notified under the Legislation Act.

9 Who is not a worker?

- (1) In this Act (despite anything else in this chapter), worker does not include—
 - (a) a public servant; or
 - (b) an employee within the meaning of the *Safety, Rehabilitation* and *Compensation Act 1988* (Cwlth).
- (2) In this Act (despite anything else in this chapter), *worker* does not include an individual who would, apart from this section, be a worker employed by an employer, if the individual is a member of the employer's family and lives in the employer's home.
- (3) However, subsection (2) does not apply to an individual if the employer tells the licensed insurer who insures the employer against liability under this Act the name, nature of employment and estimated wages of the individual—
 - (a) when the employment begins; and
 - (b) whenever the insurance is renewed.

10 Casuals not employed for trade or business

- (1) In this Act, *worker* does not include an individual (the *casual employee*) employed by someone (the *principal*) on a casual basis to perform work for the principal other than work that is for (or incidental to) the principal's trade or business unless the casual employee is taken to be a worker under any of the following provisions:
 - (a) subsection (2) (which deals with casual employment found through employment agencies);
 - (b) section 11 (Regular contractors and casuals);

- (c) section 17 (Religious workers).
- (2) If the casual employee's employment was found for the employee by a person who carries on the business of an employment agent, for this Act the casual employee is taken to be a *worker* employed by the employment agent.

Examples of casual employees who are not workers

- 1 A gardener irregularly employed by the occupier of residential premises to work in the garden of the premises (unless engaged through an employment agent—see example 4).
- A babysitter irregularly employed by the parents of young children (unless engaged through an employment agent—see example 4).

Examples of casual employees who are workers

- 3 A gardener regularly employed by the owner of a business to work on the grounds of the premises where the employer's business is carried on. The gardener is taken to be a *worker* employed to perform work incidental to the principal's business (see s (1)).
- A babysitter irregularly employed by the parents of young children who is engaged through an employment agent. The babysitter is taken to be a *worker* employed by the agent rather than the parents (see s (1) (a) and s (2)).
- A babysitter regularly and systematically employed (for example, once a week over a 6 month period) by the parents of young children. The babysitter is taken to be a *worker* employed by the parents under s 11 (Regular contractors and casuals)—see s (1) (b).

11 Regular contractors and casuals

- (1) This section applies to the engagement of an individual by a person (the *principal*) if—
 - (a) the individual has been engaged by the principal—
 - (i) under a contract for services to work for the principal (whether or not on a casual basis); or

- (ii) on a casual basis under a contract of service to perform work for the principal other than work that is for (or incidental to) the principal's trade or business (unless section 10 (2) applies, which deals with casual employment found through employment agencies); and
- (b) the individual personally does part or all of the work; and
- (c) if the principal is a corporation—the individual is not an executive officer of the corporation.

Note for par (a) (ii) Section 10 (2) provides that if a casual worker employed other than for the employer's trade or business is engaged through an employment agent, the casual worker is a *worker* employed by the agent.

- (2) For this Act, the individual is taken to be a *worker* employed by the principal if—
 - (a) the engagement, under the contract or similar contracts, has been on a regular and systematic basis; or
 - (b) the individual has (or, apart from any injury, would have had) a reasonable expectation of the engagement continuing on a regular and systematic basis (under the contract or similar contracts), even if the engagement has not been on a regular or systematic basis; or
 - (c) the engagement of the individual is under a contract or similar contracts prescribed by regulation, even if the engagement has not been on a regular or systematic basis.
- (3) To work out whether an engagement has been on a regular and systematic basis, or whether there is (or would have been) a reasonable expectation of an engagement continuing on that basis, relevant matters include (but are not limited to) the following:
 - (a) the terms of all relevant contracts:
 - (b) the working relationship between the principal and the individual and all associated circumstances;

- (c) the period of the engagement, or the periods of the engagement if it has not been continuous;
- (d) the frequency of work under the contract or similar contracts;
- (e) the number of hours worked under the contract or similar contracts;
- (f) the type of work;
- (g) normal arrangements for someone engaged to perform that type of work.

Examples of individuals who are workers

1 Payment by commission

A sales representative engaged under a 3 month contract for payment by commission that forms part of a regular and systematic pattern of similar contracts to work for a real estate agency, canvasser or retailer, even if there is no express or implied guarantee of continuing work.

2 IT consultant—engagement under indefinite retainer

An information technology consultant engaged on a retainer under which it is agreed that the consultant will be regularly and systematically available, on call by the principal, to offer advice or attend at short notice, even if the consultant was only recently engaged.

3 Owner-driver of a truck—regular engagement

An owner-driver of a truck engaged by a local ACT carrier for an overnight trip (leaving regularly on the same day each week), even if any (or all) of the following apply:

- there is occasionally no work for the driver;
- the driver also works (or is free to work) for other carriers;
- the driver was only recently engaged by the carrier.
- 4 Building contractor—exclusive engagement

A bricklayer engaged under contracts for services by a particular builder for some years, who has worked for almost no-one else over that time, even if there is no express or implied guarantee of continuing work.

5 Regular casual worker

A gardener engaged by a householder (under contracts of service or for services) on a regular and systematic basis over a number of years to work in the grounds of the house. The gardener's engagement may be found to be 'regular and systematic' even if any (or all) of the following apply:

- there is no express or implied guarantee of continuing work;
- the gardener also works (or is free to work) for other households;
- there have been occasional periods during which the gardener has not worked for the householder.

Examples of individuals who are not workers

6 Payment by commission—no guarantee of future work

A sales representative engaged under a 3 month contract for services with a real estate agency, canvasser or retailer, and who is paid by commission, if—

- the contract does not form part of a regular and systematic pattern of similar contracts; and
- there is no express or implied guarantee that any further similar contract will be offered, whether in a document or by inference from the working relationship between the principal and the individual.
- 7 IT consultant—occasional engagement

An information technology consultant who is occasionally engaged by a small business for a week or more at a time under a contract for services, but not on a regular basis.

8 Owner-driver of a truck—irregular engagement

An owner-driver of a truck engaged under contracts for services with a furniture retailer whenever available, who has made deliveries every day of the week at times (for example, just before Christmas), but at other times may go for months without working for the retailer.

9 Building contractor—irregular engagement

A bricklayer engaged under contracts for services by a particular builder several times a year, but who is not regularly engaged by the builder.

10 Irregular casual worker

A tree surgeon engaged by a householder on an irregular basis (under contracts of service or for services) to prune the trees around a house. The engagement may be found not to be 'regular and systematic' even if the tree surgeon has been occasionally engaged by the householder for many years. (However, if the tree surgeon is engaged through an employment agent, the tree surgeon is a *worker* employed by the agent (see s 10 (2).)

12 Labour hire arrangements

For this Act, an individual is taken to be a *worker* employed by a person (the *labour hirer*) if—

- (a) the individual has been engaged by the labour hirer under a contract for services to work for someone other than the labour hirer; and
- (b) there is no contract to perform the work between the individual and the person for whom the work is to be performed; and
- (c) the individual personally does part or all of the work; and
- (d) if the labour hirer is a corporation—the individual is not an executive officer of the corporation.
- Note 1 This section does not make an employment agent the employer of those for whom the agency finds work if the workers are engaged directly by the person for whom the work is to be performed. It makes the labour hirer the employer only if there is no contractual relationship between the worker and the person for whom the work is to be performed (see par (b)).
- Note 2 Under s 13 (Subcontracting), the person for whom the work is to be performed may be liable as 'principal' to pay compensation to the worker, as well as the labour hirer under this section. The 'principal' may then recover compensation from the labour hirer (see s 13 (3)). See also note 3 at the beginning of this chapter.

13 Liability of principal for uninsured contractor's injured worker

- (1) This section applies if—
 - (a) a person carrying on a business (the *principal*) enters into a contract with another person (the *contractor*) to carry out work that is part of the principal's business (the *contracted work*); and
 - (b) a worker employed by the contractor becomes an injured worker (the *injured worker*) while carrying out the contracted work; and
 - (c) the contractor is uninsured.
- (2) The principal is liable to pay to the injured worker any compensation that the principal would have been liable to pay if the worker was employed by the principal.
- (3) If this section is relied on to make a claim for compensation, or bring any other proceeding, against a principal, then, in the application of this Act to the claim or proceeding—
 - (a) a reference in this Act to an employer is taken to be a reference to the principal; but
 - (b) any calculation of the earnings of the injured worker must be based on the earnings paid or payable to the worker by the contractor that employed the worker.
- (4) If a principal is liable under this section to pay compensation to an injured worker, the principal is entitled to be indemnified by—
 - (a) if the principal is uninsured within the meaning of paragraph (a) of the definition of *uninsured*—any person, other than the DI fund manager, who would have been liable to pay compensation to the worker independently of this section; or

- (b) if the principal is uninsured within the meaning of paragraph (b) of the definition of *uninsured*—any person, including the DI fund manager, who would have been liable to pay compensation to the worker independently of this section.
- (5) Nothing in this section prevents a worker claiming compensation—
 - (a) against a contractor instead of a principal; or
 - (b) if both the contractor and principal are uninsured—against the DI fund.
- (6) In this section:

uninsured, in relation to a principal or a contractor, means the principal or contractor—

- (a) does not have a compulsory insurance policy in force that applies to an injured worker mentioned in subsection (1) in relation to an injury; or
- (b) has a compulsory insurance policy in force that applies to the injured worker in relation to the injury but the policy was issued by a licensed insurer that—
 - (i) cannot provide the indemnity required to be provided under the policy; or
 - (ii) has been wound up.

14 Trainees

- (1) For this Act, an individual is taken to be a *worker* employed by a person (the *principal*) if—
 - (a) the individual is engaged under an arrangement (whether or not under contract) by which training or on-the-job experience is provided to the individual; and
 - (b) the training or experience is in relation to work that is for (or incidental to) the principal's trade or business; and

- (c) the individual performs work that is for (or incidental to) the principal's trade or business while so engaged; and
- (d) if the principal is a corporation—the individual is not an executive officer of the corporation.
- (2) An individual may be taken to be a worker under subsection (1) even if the individual receives no payment for the engagement.
- (3) However, an individual is taken not to be a *worker* employed by the principal if—
 - (a) the engagement of the individual by the principal is arranged by an educational institution where the individual is enrolled; and
 - (b) the engagement is part of a work experience program (however described) run by the educational institution.

Example of work experience program

work placement program

- (4) An individual is also taken not to be a *worker* employed by the principal if—
 - (a) the individual is an adult with a disability; and
 - (b) the engagement of the individual by the principal is arranged by a specialist disability employment service provider; and
 - (c) the engagement is part of a work experience program (however described) organised by the provider to help adults with disabilities to work.

Example of work experience program

work placement program

(5) In this section:

adult with a disability means a person who—

- (a) is 16 years old or older; and
- (b) has a physical, intellectual or psychiatric disability; and

(c) is likely to suffer from the disability permanently or for an extended period.

educational institution means—

- (a) a school, college or other educational institution established or maintained on behalf of the Territory; or
- (b) a non-government school under the *Education Act 2004*; or
- (c) an educational institution established under a territory law or a law of the Commonwealth or a State.

specialist disability employment service provider means an organisation (whether or not the organisation is incorporated) that—

- (a) provides employment services for people with disabilities; and
- (b) is not carried on for the financial benefit of the organisation's members.

15 Outworkers

- (1) This section applies to an individual (the *outworker*) who is engaged by a person (the *principal*) under a contract for services to treat or manufacture articles or materials, or to perform other services—
 - (a) in the outworker's own home; or
 - (b) on other premises not under the control or management of the principal.
- (2) To remove doubt, the outworker is taken to be a *worker* employed by the principal if—
 - (a) the outworker is taken to be a worker employed by the principal under section 11 (Regular contractors and casuals); or

(b) the outworker is taken to be a worker employed by the principal under section 12 (Labour hire arrangements).

Example of an outworker

A keyboard operator engaged under a contract for services by an information technology firm to undertake data conversion for the firm (or for another firm) in the operator's home.

16 Timber contractors

- (1) This section applies to an individual (the *timber contractor*) who is engaged by a person (the *principal*) under a contract for services to do any of the following work:
 - (a) logging (including, for example, felling, crosscutting, snigging, loading, carting, bundling and debarking);
 - (b) felling or cutting trees for firewood;
 - (c) delivering timber or firewood;
 - (d) clearing timber, cutting scrub, preparing land for tree planting, planting trees, pruning trees or coppice cleaning.
- (2) The timber contractor is taken to be a *worker* employed by the principal if—
 - (a) the work is for (or incidental to) the principal's trade or business; and
 - (b) the timber contractor personally does part or all of the work; and
 - (c) if the principal is a corporation—the timber contractor is not an executive officer of the corporation.
- (3) This section applies whether the work is to be performed by the timber contractor—
 - (a) for the principal; or
 - (b) for someone (other than the principal) with whom the timber contractor has no contract to perform the work.

16A Family day care educators

- (1) An educator engaged by an approved family day care service is taken to be a worker of the service.
- (2) Also, the Minister may make a declaration for this section—
 - (a) if requested by an approved family day care service; or
 - (b) on the Minister's own initiative, if the Minister considers that people engaged by an approved family day care service should be treated as workers of the service.
- (3) For this Act—
 - (a) an individual included in a class of individuals declared by the Minister is taken to be a *worker* employed by the person stated in the declaration to be the employer of individuals in that class; and
 - (b) the individual's employment is taken to be as stated in the declaration for individuals in the class.
- (4) A declaration is a notifiable instrument.

Note A notifiable instrument must be notified under the Legislation Act.

(5) In this section:

approved family day care service—see the Education and Care Services National Law (ACT), section 5 (1).

educator—see the *Education and Care Services National Law (ACT)*, section 5 (1).

Note The Education and Care Services National Law (ACT) Act 2011, s 6 applies the Education and Care Services National Law set out in the Education and Care Services National Law Act 2010 (Vic), schedule as if it were an ACT law called the Education and Care Services National Law (ACT).

17 Religious workers

- (1) The Minister may make a declaration for this section in accordance with a request by—
 - (a) a religious organisation; or
 - (b) a person acting on behalf of a religious organisation.
- (2) For this Act—
 - (a) an individual included in a class of individuals declared by the Minister is taken to be a *worker* employed by the person stated in the declaration to be the employer of individuals in that class; and
 - (b) the individual's employment is taken to be as stated in the declaration for individuals in the class.
- (3) A declaration is a notifiable instrument.

Note A notifiable instrument must be notified under the Legislation Act.

17A Volunteers

To remove any doubt, an individual who is engaged to perform work for someone else, and who receives no payment for the work (apart from any payment for expenses), is taken not to be a *worker* unless the individual is taken to be a worker under any of the following sections:

- section 14 (Trainees)
- section 17 (Religious workers)
- section 18 (Commercial voluntary workers)
- section 19 (Public interest voluntary workers).

18 Commercial voluntary workers

- (1) This section applies if—
 - (a) an individual (a *commercial volunteer*) is engaged under an arrangement by which the commercial volunteer performs work that is for (or incidental to) an enterprise, trade or business carried on by someone else (the *principal*); and
 - (b) the principal carries on the enterprise, trade or business for—
 - (i) if the principal is an individual—the financial benefit of the principal; or
 - (ii) if the principal is a corporation—the financial benefit of the corporation's members; and
 - (c) the commercial volunteer receives no payment for the work (apart from any payment for expenses).

Examples

- 1 The Very Big Motocross Event Company (a corporation incorporated under the Corporations Act) promotes an event known as the 'Mega Motocross'. The corporation engages a number of motocross enthusiasts as marshals for the event, but the marshals are volunteers (they are not paid). The Mega Motocross is an 'enterprise, trade or business' carried on for the financial benefit of the corporation's members. The marshals are therefore commercial volunteers to whom this section applies.
- 2 The Motorboat and Jet-ski Club of Canberra Inc. (a not-for-profit body incorporated under the *Associations Incorporation Act 1991*) promotes an annual event known as the 'Big Splash'. The club engages a number of enthusiasts as marshals for the event, but the marshals are volunteers (they are not paid). The Big Splash is not an 'enterprise, trade or business' carried on for the financial benefit of the club's members. The marshals are therefore not commercial volunteers to whom this section applies.
- The Homeless Trust is an organisation incorporated under statute whose only object is to assist the homeless in Canberra. The trust runs an opportunity shop in Tuggeranong, which earns a small profit. The shop is staffed by unpaid volunteers. The shop's profits are used to assist the homeless. The shop is an 'enterprise, trade or business', but it is not carried on for the financial benefit of the trust's members. The volunteer staff of the shop are therefore not commercial volunteers to whom this section applies.

- 4 If the Homeless Trust described in example 3 were an unincorporated group of individuals (or a single individual), but carried on the same activities for the same single purpose, the shop concerned would be an 'enterprise, trade or business', but would not be carried on for the financial benefit of the individuals (or individual) by whom the trust is constituted (who would be the *principals*, or *principal*). The volunteer staff of the shop would therefore also not be commercial volunteers to whom this section applies.
- (2) A commercial volunteer is taken to be a *worker* employed by the principal, unless the principal is exempt from the application of this subsection in relation to the volunteer under a certificate given under subsection (3).
- (3) On application by the principal, the Minister may give the principal a certificate (a *volunteer exemption certificate*) exempting the principal from the application of subsection (2) in relation to the commercial volunteers mentioned in the certificate if the Minister considers it appropriate, having regard to the interests of the principal and the commercial volunteers mentioned.
- (4) A volunteer exemption certificate must state—
 - (a) which commercial volunteers (or class of commercial volunteers) it applies to; and
 - (b) the work it applies to; and
 - (c) the period, or the event, it applies to.
- (5) A volunteer exemption certificate is a notifiable instrument.

Note A notifiable instrument must be notified under the Legislation Act.

19 Public interest voluntary workers

(1) The Minister may make a declaration for this section in relation to work (*public interest voluntary work*) undertaken for a stated entity if the Minister considers that making the declaration is necessary or desirable in the public interest.

Example

As noted in section 18 (1), example 2, the volunteer marshals for the annual Big Splash event described in that example would not be 'commercial volunteers' to whom section 18 applies. Therefore, apart from section 19, they would not be taken to be workers for this Act (see s 17A (Volunteers)). The club promoting the event would therefore not normally be required to take out compulsory workers compensation insurance under this Act to cover the work of the marshals.

However, the Big Splash is potentially very dangerous for the volunteer marshals, as they must be present in their own boats on Lake Burley Griffin while the participants perform difficult stunts in motorboats and jet skis at high speed nearby. In previous years, volunteer marshals have been seriously injured at the event, and the Minister considers that the club did not take out adequate insurance cover for the work of the marshals.

Taking these matters into account, the Minister may consider that it is necessary or desirable in the public interest that the work of the volunteer marshals be declared to be public interest voluntary work for this section.

- (2) For this Act, an individual is taken to be a *worker* employed by the entity stated in the declaration, or a person (the *principal*) named in the declaration on behalf of the entity, if the individual—
 - (a) performs public interest voluntary work for the entity or the principal; and
 - (b) receives no payment for the work (apart from any payment for expenses).
- (3) A declaration under this section is a disallowable instrument.

Note A disallowable instrument must be notified and presented to the Legislative Assembly, under the Legislation Act.

Chapter 4 Entitlement to compensation

Part 4.1 Important concepts

20 Meaning of cpi indexed and awe indexed

(1) In this chapter:

awe indexed, for an amount, means the amount as adjusted in line with any adjustment in the AWE after the commencement of the provision in which the amount appears.

CPI means the All Groups Consumer Price Index (Canberra) issued by the Australian statistician.

Note In June 2001, this was series 6401.0.

cpi indexed, for an amount, means the amount as adjusted in line with any adjustment in the CPI since the commencement of the provision in which the amount appears.

Note AWE is defined in the dict.

- (2) However, if an amount to be awe indexed or cpi indexed would, if adjusted in line with the adjustment (the *negative adjustment*) to the AWE or CPI, become smaller, the amount is not reduced in line with the negative adjustment.
- (3) An amount that, in accordance with subsection (2), is not reduced may be increased in line with an adjustment in the AWE or CPI that would increase the amount only to the extent that the increase, or part of the increase, is not one that would cancel out the effect of the negative adjustment.

(4) Subsection (3) does not apply to a negative adjustment once the effect of the negative adjustment has been offset against an increase in line with an adjustment in the AWE or CPI.

Example of adjustments

An amount in a section is \$100 cpi indexed.

There is a 20% increase in the CPI after the section commences. The amount in the section becomes \$120 (100 + 20%).

There is then a 10% drop in the CPI. The amount does not change from \$120 (although if it had changed it would be \$108).

There is a 20% increase in the CPI. The 20% increase is not to the \$120, but to the \$108. \$108 + 20% = \$129.60. So the \$120 becomes \$129.60. This is the amount (\$120) increased by so much of the 20% increase that did not cancel out the effect of the adjustment down to \$108.

21 Working out average pre-incapacity weekly earnings for non-contractor

- (1) In working out average pre-incapacity weekly earnings for a worker who is not a contractor—
 - (a) if the worker was, immediately before the injury, employed by 2 or more employers—the worker's earnings from all employment must be taken into account; and
 - (b) the actual weekly earnings of the worker may be taken into account over—
 - (i) a period of 1 year before the injury; or
 - (ii) if the worker has not been employed for 1 year—the period of employment.

- (2) However, if it is not possible to work out fair average pre-incapacity weekly earnings for the worker under subsection (1) because the worker has only been employed for a short time, because of the terms of the worker's employment or for some other reason, the worker's average pre-incapacity weekly earnings may be worked out by reference to the average weekly amount being earned by—
 - (a) others in the same employment who perform similar work at the same grade as the worker; or
 - (b) if there is no-one mentioned in paragraph (a) in the same employment—others in the same class of employment as the worker, who perform similar work at the same grade as the worker.

Working out average pre-incapacity weekly earnings for contractor

In working out average pre-incapacity weekly earnings for a worker who is a contractor, the worker's average pre-incapacity weekly earnings are to be worked out—

- (a) as if the worker were an employee; and
- (b) if there is an award or industrial agreement applying to the class and grade of work in which the worker was engaged—by reference to the award or industrial agreement.

23 Working out average pre-incapacity weekly hours for non-contractor

- (1) In working out average pre-incapacity weekly hours for a worker who is not a contractor—
 - (a) if the worker was, immediately before the injury, employed by 2 or more employers—the worker's work hours from all employment must be taken into account; and

- (b) the actual weekly work hours of the worker over a period of up to 1 year before the injury may be taken into account.
- (2) However, if it is not possible to work out fair average pre-incapacity weekly hours for the worker under subsection (1) because the worker has only been employed for a short time, because of the terms of the worker's employment or for some other reason, the worker's average pre-incapacity weekly hours may be worked out by reference to the average weekly hours being worked by—
 - (a) others in the same employment who perform similar work at the same grade as the worker; or
 - (b) if there is no-one mentioned in paragraph (a) in the same employment—others in the same class of employment as the worker, who perform similar work at the same grade as the worker.

24 Working out average pre-incapacity weekly hours for contractor

In working out average pre-incapacity weekly hours for a worker who is a contractor, the worker's average pre-incapacity weekly hours are to be worked out as if the worker were an employee.

25 Overtime—hours and wages

- (1) This section applies to a component of the worker's earnings or hours attributable to overtime.
- (2) The overtime is to be taken into account in working out average pre-incapacity weekly earnings or average pre-incapacity weekly hours only if—
 - (a) the worker worked overtime in accordance with a regular and established pattern; and

- (b) the pattern was substantially uniform as to the number of hours of overtime worked; and
- (c) the worker would have continued to work overtime in accordance with the established pattern if the worker had not been injured.

26 Gradual onset of incapacity

- (1) This section applies if, because of the gradual onset of a worker's injury, it appears that the level of the worker's average pre-incapacity weekly earnings, or average pre-incapacity weekly hours, have been affected.
- (2) The worker's average pre-incapacity weekly earnings, or average pre-incapacity weekly hours, must be set at an amount that fairly represents the weekly amount that the worker would have been earning or working if the level had not been affected.

27 Compensation for death or incapacity through disease

- (1) If—
 - (a) a worker contracts a disease or suffers an aggravation, acceleration or recurrence of a disease; and
 - (b) any employment of the worker by his or her employer was a substantial contributing factor to the contraction of the disease or the aggravation, acceleration or recurrence whether or not the disease was contracted or the aggravation, acceleration or recurrence was suffered in the course of that employment;

subsections (2) to (5) have effect.

- (2) If the worker dies or is totally or partially incapacitated for work as a result of the disease, or the worker received medical treatment in relation to the disease, then, for this Act, unless the contrary intention appears—
 - (a) the contraction of the disease, or the aggravation, acceleration or recurrence of the disease is a personal injury to the worker arising out of the employment of the worker by the worker's employer; and
 - (b) the date of the injury is the earliest of the following:
 - (i) the date of the death;
 - (ii) the date of the start of the incapacity;
 - (iii) the date when the medical treatment was first received.
- (3) If a liability of an employer in relation to a disease of a worker arises under this section, any other employer who, before that liability so arising, employed the worker in any employment that caused or contributed to the disease is, subject to subsection (4), liable to pay to the employer from whom compensation is recoverable the contribution that is, in default of agreement, settled by arbitration.
- (4) An employer is not liable under subsection (2) or (3) in relation to a disease if the worker, at the time of entering the employment of that employer, made a wilful and false representation that the worker did not suffer, or had not previously suffered, from that disease.
- (5) A claimant for compensation under this section in relation to a worker's disease must, if so required, give the employer who is liable to pay compensation to the claimant with the information about the names and addresses of the worker's other employers that the claimant possesses.

28 Employment-related diseases

Without limiting by implication the operation of section 27, if—

- (a) a worker has suffered, or is suffering from a disease, or the death of a worker results from a disease; and
- (b) the disease is a disease of a kind specified by regulation as a disease that is related to employment of a kind so specified; and
- (c) the worker was, at any time before symptoms of the disease first became apparent, engaged in employment of that kind;

then, for this Act, unless the contrary is established, the employment in which the worker was so engaged is taken to have been a substantial contributing factor to the disease.

29 Compensation for disease

(1) Any employment in which a worker who has contracted a disease was engaged at any time before symptoms of the disease first became apparent is, unless the contrary is established, taken for this Act to have been a substantial contributing factor to the worker's contracting the disease if the incidence of the disease among people who have engaged in that kind of employment is significantly greater than the incidence of the disease among people who have engaged in employment generally in the place where the worker was ordinarily employed.

- (2) Any employment in which a worker who has suffered an aggravation, acceleration or recurrence of a disease was engaged at any time before symptoms of the aggravation, acceleration or recurrence first became apparent is, unless the contrary is established, taken for this Act to have been a substantial contributing factor to the aggravation, acceleration or recurrence if the incidence of the aggravation, acceleration or recurrence of the disease among people suffering from the disease who have engaged in that kind of employment is significantly greater than the incidence of the aggravation, acceleration or recurrence of the disease among people suffering from the disease who have engaged in employment generally in the place where the worker was ordinarily employed.
- (3) The death of a worker is taken for this Act to have been substantially contributed to by a disease if, apart from that disease, the death of the worker would have happened at a significantly later time.
- (4) An incapacity for work or facial disfigurement of a worker is taken for this Act to have been substantially contributed to by a disease if, apart from the disease—
 - (a) the incapacity or disfigurement would not have happened; or
 - (b) the incapacity would have begun, or the disfigurement would have happened, at a significantly later time; or
 - (c) the extent of the incapacity or disfigurement would have been significantly less.
- (5) This section does not limit the operation of section 27.

Part 4.2 Compensation for personal injury

31 General entitlement to compensation for personal injury

- (1) An employer is liable to pay compensation under this Act if a worker of the employer suffers personal injury arising out of, or in the course of, the worker's employment.
- (2) However, if the injury is caused by a disease, the injury is taken to have arisen out of, or in the course of, the worker's employment only if the employment substantially contributes to the injury.
- (3) Also, an injury suffered by a worker partly or completely because the worker had any of the following pre-existing conditions is taken to have arisen out of, or in the course of, the worker's employment only if the employment substantially contributes to the injury:
 - (a) diseased heart valve;
 - (b) coronary artery disease;
 - (c) aortic aneurism;
 - (d) cerebral aneurism;
 - (e) any other condition prescribed by regulation for this section.
- (4) Further, this section is subject to the following provisions:
 - (a) part 4.2A (Employment connection with ACT or State);
 - (b) section 34 (Injury outside Australia);
 - (c) part 4.8 (Exceptions to entitlements to compensation);
 - (d) in relation to the entitlement to weekly compensation—
 - (i) section 37 (What if the worker is dead?);
 - (ii) section 113 (Compliance by workers).

32 Amounts of compensation under Act cumulative

An amount of compensation payable under a provision of this Act in relation to an injury is, unless otherwise expressly stated, in addition to any amount of compensation paid or payable under any other provision of this Act.

33 Payments to people with legal disabilities

- (1) If compensation under this Act is payable to someone with a legal disability, the Magistrates Court may make any order about the payment of the compensation that it considers appropriate to protect the person or the person's interests.
- (2) In this section:

person with a mental disability means a person who is not legally competent to conduct the person's legal affairs because of a mental disability whether or not a guardian has not been appointed for the person under the Guardianship and Management of Property Act 1991.

someone with a legal disability means someone who is—

- (a) a child; or
- (b) a person with a mental disability.

34 Injury outside Australia

Compensation is payable in relation to an injury to a territory worker suffered while the worker is outside Australia only if compensation would be payable in relation to the injury if the worker suffered the injury in Australia.

When is a worker taken to be totally incapacitated?

- (1) In this Act, a worker is taken to be totally incapacitated for work if—
 - (a) a doctor certifies that the worker is partially incapacitated for work; and

- (b) the partial incapacity prevents the worker from performing the duties the worker performed before becoming incapacitated; and
- (c) the employer cannot provide appropriate alternative employment; and
- (d) the worker cannot find appropriate alternative employment.
- (2) For subsection (1), the worker is taken to be totally incapacitated from the time when the worker became partially incapacitated until 1 of the following happens:
 - (a) the worker becomes totally incapacitated;
 - (b) the employer provides the worker with appropriate alternative employment;
 - (c) the worker finds appropriate alternative employment.

36 Journey claims

(1) A personal injury received by a worker on an employment-related journey is, for this Act, an injury arising out of, or in the course of, the worker's employment.

Note Compensation may be payable for an injury arising out of, or in the course of, employment under s 31 (General entitlements to compensation for personal injury).

- (2) The following are *employment-related journeys* for the worker:
 - (a) a journey between the worker's home and workplace;
 - (b) a journey between the worker's home and an educational institution that the worker is attending for an employment-related purpose;

- (c) a journey between the worker's home or workplace and another place if the purpose of the journey is to obtain 1 or more of the following in relation to a previous injury for which the worker is entitled to compensation under this Act:
 - (i) a medical certificate;
 - (ii) medical advice, attention or treatment;
 - (iii) compensation.
- (3) However, subsection (1) applies to an injury received during or after a non employment-related interruption of, or deviation from, an otherwise employment-related journey only if the risk of injury was not materially increased because of the interruption or deviation.
- (4) For this section—
 - (a) an employment-related journey to the worker's home is taken to end at the boundary of the premises where the worker's home is located; and
 - (b) an employment-related journey from the worker's home is taken to begin at the boundary of the premises where the worker's home is located.
- (5) In this section:

home, for a worker, means the place where the worker usually lives. *workplace*, for a worker, means the worker's place of employment.

Part 4.2A Employment connection with ACT or State

36A Meaning of Territory or State of connection etc

(1) In this Act:

Territory or State of connection, in relation to the employment of a worker, means—

- (a) the Territory or State with which the employment of the worker is connected, as determined under this part; and
- (b) if this Act mentions the *Territory or State of connection* determined under the law of a State for that employment—the State of connection for that employment, or the Territory or State of connection for that employment, within the meaning of the law of the State.

Note State includes the Northern Territory (see Legislation Act, dict, pt 1).

(2) In this part:

employer, in relation to a Territory or State, includes an employer within the meaning of the workers compensation law of the Territory or State.

employment, in relation to a Territory or State, includes employment within the meaning of the workers compensation law of the Territory or State.

worker, in relation to a Territory or State, includes a worker within the meaning of the workers compensation law of the Territory or State.

36B Employment connection test

- (1) Compensation under this Act is only payable if the ACT is the Territory or State of connection.
- (2) The fact that a worker is outside the ACT when injured does not prevent compensation being payable under this Act if the ACT is the Territory or State of connection.
- (3) A worker's employment is connected with—
 - (a) the Territory or State where the worker usually works in the employment; or
 - (b) if no Territory or State, or no single Territory or State, is identified by paragraph (a)—the Territory or State where the worker is usually based for the purposes of the employment; or
 - (c) if no Territory or State, or no single Territory or State, is identified by paragraph (a) or (b)—the Territory or State where the employer's principal place of business in Australia is located.
- (4) For a worker working on a ship, if no Territory or State, or no single Territory or State, is identified by subsection (3), the worker's employment is, while working on the ship, connected with—
 - (a) the Territory or State where the ship is registered; or
 - (b) if the ship is registered in more than 1 Territory or State—the Territory or State where the ship most recently became registered.

- (5) If no Territory or State is identified for a worker by subsection (3) or (4), the worker's employment is connected with the ACT if—
 - (a) the worker is in the ACT when injured; and
 - (b) the worker is not entitled to compensation in relation to the injury under the workers compensation law of an external Territory, or a place outside Australia.
- (6) In deciding whether a worker usually works in a Territory or State—
 - (a) regard must be had to the following:
 - (i) the worker's work history with the employer over the previous 12 months;
 - (ii) the worker's proposed future working arrangements;
 - (iii) the intentions of the worker and employer;
 - (iv) any period during which the worker worked in a Territory or State (a *relevant place*) or was in a relevant place for the purposes of employment, whether or not the worker is regarded as working or employed in the relevant place under the workers compensation law of the relevant place; but

(b) regard must not be had to any temporary arrangement under which the worker works in a Territory or State for a period of not longer than 6 months.

Example—worker usually works in a single jurisdiction

Emma is employed as an electrical trades assistant with a NSW-based employer. Emma performs all of her employment duties on worksites in the ACT, taking her own vehicle to work and providing her own tools and equipment. Emma does not attend her employer's premises in NSW in the course of her day-to-day duties and receives all of her instructions from the relevant project manager on sites in the ACT.

For s (3) (a), Emma usually performs work for her employer in the ACT and her Territory or State of connection is the ACT.

Example—worker usually works in more than one jurisdiction

An employer carries on business as an interstate bus operator from premises in the ACT. Ray is engaged by the employer as a bus driver, mainly driving buses between Canberra and Sydney, NSW, but also driving buses between Canberra and Melbourne, VIC. Occasionally Ray drives charter buses entirely within the ACT for the employer.

For s (3) (a), Ray usually works in the ACT, NSW and VIC. As s (3) (a) does not decide Ray's Territory or State of connection, s (3) (b) needs to be considered.

- (7) In deciding whether a worker is usually based in a Territory or State regard must be had to the following:
 - (a) if the employer provides a place from which the worker is expected to operate—that place;
 - (b) if a place is stated in the worker's contract of employment with the employer—that place;
 - (c) the place from which the worker routinely receives day-to-day instructions from the employer;
 - (d) the place where the worker attends to collect material for the purposes of their employment;

(e) the place where the worker reports for administrative, human resource and other issues related to the workers' employment with the employer.

Example—worker usually based in a single jurisdiction

Jenny is a sales representative for XYZ. Each morning Jenny is required to attend a warehouse in NSW to collect her employer's products, which she is then required to distribute to various retail outlets in NSW and the ACT. Jenny uses a vehicle supplied by her employer, which she garages at her home in NSW. At the end of each day Jenny is required to return any unsold merchandise to the warehouse in NSW.

Jenny works without day-to-day supervision. Jenny's immediate manager is located in XYZ's ACT office and is the person to whom she is required to send reports and time sheets and to whom she reports verbally by telephone from time to time.

Jenny sends all written correspondence to her manager via a facsimile located at her home in NSW. All invoice books which Jenny needs to carry out her duties are mailed to her home in NSW from where she prepared all documentation related to her employment.

For s (3) (b), Jenny is usually based in NSW for the purposes of her employment with XYZ. The employer's NSW warehouse is the place provided by XYZ that Jenny is expected to operate from.

Example—worker is usually based in more than one jurisdiction

Paul is employed by an interstate trucking company that transports textiles across Australia. Paul is supplied with a truck for the purposes of his employment and is permitted to garage it at his home in the ACT while not in use.

Paul transports goods between the ACT, NSW and QLD. His contract of employment states that he is employed to undertake transporting services across each of these jurisdictions.

Paul routinely receives instructions from each of the depots he stops at in the ACT, NSW and QLD and receives ad hoc instructions via radio while in transit.

For s (3) (b), Paul is not usually based in any single Territory or State. As s (3) (b) does not decide Paul's Territory or State of connection, s (3) (c) needs to be considered.

- (8) In deciding where the employer's principle place of business in Australia is located regard must be had to the following:
 - (a) the place where the employer conducts the main part or majority of its business;

- (b) the address registered on the Australian Business Register in connection with the employer's ABN;
- (c) if the employer is not registered for an ABN—the Territory or State registered by ASIC as the jurisdiction in which the employer's business or trade is carried out;
- (d) if the employer is not registered for an ABN or with ASIC—the employer's business mailing address.
- (9) Compensation under this Act is not payable in relation to the employment of a worker on a ship if the *Seafarers Rehabilitation and Compensation Act 1992* (Cwlth) applies to the worker's employment.
- (10) In this section:

ABN—see the A New Tax System (Australian Business Number) Act 1999 (Cwlth), section 41.

ASIC means the Australian Securities and Investments Commission under the Australian Securities and Investments Commission Act 2001 (Cwlth).

Australian Business Register—see the A New Tax System (Australian Business Number) Act 1999 (Cwlth), section 41.

ship means any kind of vessel used in navigation by water, however propelled or moved, and includes all of the following if used wholly or primarily in navigation by water:

- (a) a barge, lighter or other floating vessel;
- (b) an air-cushioned vehicle, or other similar craft.

Territory or State, in a geographical sense, includes a Territory's or State's relevant adjacent area as described in schedule 2.

36C Determination of Territory or State of connection in workers compensation proceedings

- (1) If the question of whether the ACT is the Territory or State of connection arises in a proceeding in a court in relation to a claim for compensation under this Act, the court must determine the Territory or State of connection in accordance with section 36B (Employment connection test).
- (2) Subsection (1) does not apply if there is a determination of the Territory or State of connection that is to be recognised under section 36E (Recognition of previous determinations of Territory or State of connection).

36D Determination of Territory or State of connection by Magistrates Court

- (1) If a claim for compensation under this Act has been made, a party to the claim may apply to the Magistrates Court for a determination of the question of which Territory or State is the Territory or State of connection.
- (2) The Magistrates Court must determine the Territory or State of connection in accordance with section 36B (Employment connection test).
- (3) However, an application may not be made or heard if there is a determination of the Territory or State of connection that is to be recognised under section 36E.

36E Recognition of previous determinations of Territory or State of connection

- (1) This section applies if a determination of the Territory or State of connection has been made by any of the following courts or tribunals:
 - (a) an ACT court under section 36C or 36D;

- (b) a court or tribunal of a State under a provision of a law of the State corresponding to section 36C or 36D;
- (c) an ACT court or a court of a State in a proceeding on a damages claim to which part 9.2 (Choice of law) applies, or to which provisions of a law of a State corresponding to part 9.2 apply.

Note State includes the Northern Territory (see Legislation Act, dict, pt 1).

- (2) The Territory or State determined as mentioned in subsection (1) is to be recognised for this Act as the Territory or State of connection.
- (3) This section does not prevent any appeal relating to a determination of a court.
- (4) If a determination is changed on appeal to a court, the changed determination is to be recognised under this section.

36F No ACT compensation if external compensation received

- (1) Compensation under this Act (*ACT compensation*) is not payable in relation to a worker's injury to the extent that compensation (*external compensation*) under the workers compensation law of an external Territory or a place outside Australia has been received in relation to the same injury.
- (2) If a person receives ACT compensation from an employer in relation to a worker's injury and later receives external compensation in relation to the same injury, the employer is entitled to recover from the person the recoverable amount.
- (3) For subsection (2), the lesser of the following amounts is the recoverable amount:
 - (a) the amount of ACT compensation;
 - (b) the amount of external compensation.

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- (4) If an amount of ACT compensation is paid in relation to a lump sum claim, subsection (3) (a) applies as if the reference to the *amount of ACT compensation* paid by the employer included a reference to any legal costs as between party and party that the employer is liable to pay in relation to the claim.
- (5) An employer cannot recover an amount under this section in relation to an injury if the employer has recovered an amount under section 184 (No compensation if damages received) in relation to the same injury.

Part 4.3 Weekly compensation

36G Definitions—pt 4.3

(1) In this part:

initial incapacity date, for a worker in relation to an injury that causes incapacity or death, means—

- (a) the date the worker first becomes incapacitated (whether totally or partially) for work because of the injury;
- (b) if the worker is dead and the death was not preceded by a period of incapacity for work—the date of the worker's death.

pension age has the meaning given by the Social Security Act 1991 (Cwlth), section 23 (5A), (5B), (5C) and (5D).

statutory floor means the national minimum wage set by a national minimum wage order in an annual wage review by Fair Work Australia under the *Fair Work Act* 2009 (Cwlth).

weekly compensation, for a worker, means compensation to which the worker is entitled under section 39 (Entitlement to weekly compensation for first 26 weeks of incapacity) or section 40 (Entitlement to weekly compensation after first 26 weeks of incapacity).

(2) In this section:

annual wage review—see the Fair Work Act 2009 (Cwlth), section 12.

Fair Work Australia—see the Fair Work Act 2009 (Cwlth), section 12.

national minimum wage order—see the Fair Work Act 2009 (Cwlth), section 12.

37 What if the worker is dead?

- (1) A worker is not entitled to weekly compensation if the worker is dead.
- (2) However, this section does not affect an entitlement to weekly compensation that accrued before the worker's death.

38 When do weekly compensation payments begin etc?

- (1) If the worker is or may be entitled to compensation for a compensable injury—
 - (a) the payment of weekly compensation must begin when the worker gives notice of the injury to the employer; and
 - (b) the worker is or may be entitled to weekly compensation from the date of the injury.

Note An employer is liable to pay compensation if the employer's worker suffers personal injury arising out of, or in the course of, the worker's employment (see s 31 (1)).

- (2) However, if, at the end of 7 days after the date of the injury, the worker has not made a claim for compensation—
 - (a) payment of weekly compensation ends; and
 - (b) the worker is not entitled to weekly compensation for the injury for the period—
 - (i) beginning on the day 8 days after the date of the injury; and
 - (ii) ending on the day before the day the worker makes a claim for the injury.
- (3) Subsection (2) does not apply in relation to the worker if—
 - (a) the worker cannot make a claim before the end of the 7-day period because of the injury; and
 - (b) the worker makes the claim not later than 7 days after the day the worker is first able to make the claim.

- (4) An employer commits an offence if the employer—
 - (a) is required under subsection (1) to begin the payment of workers compensation to a worker; and
 - (b) fails to comply with the requirement.

Maximum penalty: 10 penalty units.

(5) An offence against this section is a strict liability offence.

39 Entitlement to weekly compensation for first 26 weeks of incapacity

- (1) This section applies if a worker is incapacitated (whether totally or partially) because of a compensable injury.
- (2) The worker is entitled to receive weekly compensation under this section for any period on or after the initial incapacity date that the worker is incapacitated because of the injury.
- (3) However, the worker is not entitled to weekly compensation under this section for the injury—
 - (a) for a period of longer than, or for periods (whether or not continuous) totalling more than, 26 weeks; or
 - (b) if the worker was, on the initial incapacity date for the injury, younger than the pension age by more than 2 years—for any period after the worker reaches pension age; or
 - (c) if the worker was, on the initial incapacity date for the injury, younger than the pension age by 2 years or less—for any period more than 2 years after the initial incapacity date; or
 - (d) if the worker was, on the initial incapacity date for the injury, pension age or older—for any period more than 2 years after the initial incapacity date.

- (4) The worker's entitlement under this section is worked out as follows:
 - (a) for any period during which the person is totally incapacitated during the period of entitlement—the worker's average pre-incapacity weekly earnings;
 - (b) for any period during which the person is partially incapacitated during the period of entitlement—the difference between—
 - (i) the worker's average pre-incapacity weekly earnings; and
 - (ii) the average weekly amount that the worker is being paid for working or could earn in reasonably available suitable employment.
- (5) For this section, in working out the average weekly amount the worker could earn, consideration may be given to the following:
 - (a) suitable employment that the worker unreasonably rejects;
 - (b) suitable employment that the worker obtains but unreasonably discontinues.

40 Entitlement to weekly compensation after first 26 weeks of incapacity

- (1) This section applies if—
 - (a) a worker is incapacitated (whether totally or partially) because of a compensable injury; and
 - (b) the worker has received weekly compensation under section 39 for the injury for a period of, or periods (whether or not continuous) totalling, 26 weeks.
- (2) The worker is entitled to receive weekly compensation under section 41 (Entitlement to weekly compensation after 26 weeks of total incapacity) for any period after the 26-week period when the worker is totally incapacitated.

- (3) The worker is entitled to receive weekly compensation under section 42 (Entitlement to weekly compensation after 26 weeks of partial incapacity) for any period after the 26-week period when the worker is partially incapacitated.
- (4) However, the worker is not entitled to weekly compensation for the injury—
 - (a) if the worker was, on the initial incapacity date for the injury, younger than the pension age by more than 2 years—for any period after the worker reaches pension age; or
 - (b) if the worker was, on the initial incapacity date for the injury, younger than the pension age by 2 years or less—for any period more than 2 years after the initial incapacity date; or
 - (c) if the worker was, on the initial incapacity date for the injury, pension age or older—for any period more than 2 years after the initial incapacity date.

41 Entitlement to weekly compensation after 26 weeks of total incapacity

- (1) If a worker is entitled to receive weekly compensation under this section for a period, the worker is entitled to receive weekly compensation equal to—
 - (a) if 100% of the worker's average pre-incapacity weekly earnings is less than the pre-incapacity floor for the worker—100% of the worker's average pre-incapacity weekly earnings; or
 - (b) if 100% of the worker's average pre-incapacity weekly earnings is more, but 65% of those earnings is less, than the pre-incapacity floor for the worker—the statutory floor; or

- (c) if 65% of the worker's average pre-incapacity weekly earnings is more than the pre-incapacity floor for the worker—whichever of the following is (at the time of payment) more:
 - (i) 65% of the worker's average pre-incapacity weekly earnings;
 - (ii) the statutory floor.

Example for par (c)

Jim is injured at work and totally incapacitated for 14 weeks. After unsuccessfully attempting a return to work for 3 days, Jim is totally incapacitated for another 18 weeks. Jim is entitled under section 39 to compensation equal to his average pre-incapacity weekly earnings for the 14 weeks and the next 12 weeks of his total incapacity (making a total of 26 weeks not including the 3 days return to work). He is then entitled to be paid 65% of his pre-incapacity weekly earnings (or the statutory floor, if more at the time of payment) for the remaining period (6 weeks) he is totally incapacitated.

(2) In this section:

pre-incapacity floor, for a worker, means the statutory floor that applied immediately before the initial incapacity date for the worker in relation to the injury.

42 Entitlement to weekly compensation after 26 weeks of partial incapacity

- (1) If a worker is entitled to receive weekly compensation under this section for a period, the worker is entitled to receive weekly compensation equal to the difference between the weekly amount the worker is being paid for working or could earn in reasonably available suitable employment and—
 - (a) if 100% of the worker's average pre-incapacity weekly earnings is less than the statutory floor—100% of the worker's average pre-incapacity weekly earnings; or

- (b) if the relevant percentage of the worker's average pre-incapacity weekly earnings is less than the statutory floor—the statutory floor; or
- (c) if the relevant percentage of the worker's average pre-incapacity weekly earnings is more than the statutory ceiling—the statutory ceiling; or
- (d) in any other case—the relevant percentage of the worker's average pre-incapacity weekly earnings.
- (2) For this section, the *relevant percentage* is—
 - (a) if the worker is not working or works 25% of the worker's average pre-incapacity weekly hours or less—65%; or
 - (b) if the worker is working more than 25% of the worker's average pre-incapacity weekly hours but not more than 50%—75%; or
 - (c) if the worker is working more than 50% of the worker's average pre-incapacity weekly hours but not more than 75%—85%; or
 - (d) if the worker is working more than 75% of the worker's average pre-incapacity weekly hours but not more than 85%—95%; or
 - (e) if the worker is working more than 85% of the worker's average pre-incapacity weekly hours—100%.

Examples

- Bronwyn injures herself at work in her full-time job. Bronwyn's injury causes her to become partially incapacitated and prevents her from fulfilling her normal duties over normal work hours for 28 weeks. In those 28 weeks, Bronwyn works, on average, 50% of her pre-incapacity weekly hours. Bronwyn returns to normal duties for 4 weeks but suffers from a relapse, becoming partially incapacitated again and staying that way for a further 7 weeks. Bronwyn's employer is required to pay Bronwyn her wage for the time she has worked during the 35 weeks of partial incapacity. Bronwyn is also entitled to the following weekly compensation:
 - (a) weekly compensation equal to the amount she has lost in wages for the first 26 weeks of reduced hours work;

- (b) weekly compensation for the remaining 9 weeks of working on reduced hours equal to the difference between the weekly amount Bronwyn is being paid for working and the statutory ceiling (because Bronwyn is earning more than 150% of AWE at the time the compensation is being paid).
- Nicholas works full time in a job that pays him an amount equivalent to the statutory floor. Nicholas injures himself at work and is totally incapacitated for 6 weeks and partially incapacitated for 26 weeks. Nicholas is advised he could work on light duties for 3 weeks of the partial incapacity period. However, suitable employment is not provided for this period. Nicholas' condition improves to the point where he returns to work on a part-time basis and works 20% of his average pre-incapacity hours for 10 weeks. Nicholas' condition further improves to the point where he works on average 60% of his pre-incapacity weekly hours for the last 13 weeks of partial incapacity. Nicholas' entitlements are as follows:
 - (a) the following amounts for wages (paid to Nicholas by his employer) for the time he has worked during the 35 weeks of partial incapacity:
 - (i) for the first 3 weeks when Nicolas suffers from partial incapacity but is capable of undertaking suitable work and is not provided with it—nothing;
 - (ii) 20% of his normal pre-incapacity earnings for the next 10 weeks of partial incapacity;
 - (iii) 60% of his normal pre-incapacity earnings for the last 13 weeks of partial incapacity;
 - (b) the following amounts for weekly compensation:
 - (i) for the initial 6 weeks he is totally incapacitated—compensation equal to his average pre-incapacity weekly earnings;
 - (ii) for the first 3 weeks of partial incapacity when he is capable of undertaking suitable work but is not provided with it—100% of his normal pre-incapacity earnings;
 - (iii) for the next 17 weeks of partial incapacity—the difference between the average weekly amount that Nicholas is paid for working and his pre-incapacity earnings;
 - (iv) for the remaining 6 weeks—the difference between the statutory floor (because Nicholas is paid at the same rate as the statutory floor) and the amount that Nicholas is paid for working.

- (3) For this section, in working out the average weekly amount the worker could earn, consideration may be given to the following:
 - (a) suitable employment that the worker unreasonably rejects;
 - (b) suitable employment that the worker obtains but unreasonably discontinues.
- (4) In this section:

statutory ceiling, in relation to an amount, means 150% of AWE at the time the amount is to be paid.

43 Stopping payments for total incapacity

- (1) A worker stops being entitled to weekly compensation for total incapacity for a compensable injury at the earliest of the following times:
 - (a) when the worker stops being totally incapacitated because of the injury;
 - (b) when the worker returns to work;
 - (c) when the worker dies.
- (2) However, if the worker stops being entitled to weekly compensation under subsection (1) (a) or (b), the worker may again become entitled to weekly compensation for the compensable injury if the worker again becomes totally or partially incapacitated because of the injury.

43A Stopping payments for partial incapacity

- (1) A worker stops being entitled to weekly compensation for partial incapacity for a compensable injury at the earliest of the following times:
 - (a) when the worker stops being partially incapacitated because of the injury;
 - (b) when the worker dies.

(2) However, if the worker stops being entitled to weekly compensation under subsection (1) (a), the worker may again become entitled to weekly compensation if the worker again becomes totally or partially incapacitated because of the compensable injury.

43B Effect on payment period of loss of entitlement to weekly compensation

- (1) This section applies if a worker would be entitled to weekly compensation under section 39 (Entitlement to weekly compensation for first 26 weeks of incapacity) or section 40 (Entitlement to weekly compensation after first 26 weeks incapacity) if payment of the compensation had not been stopped under section 83 (No compensation while imprisoned) or section 113 (Compliance by workers).
- (2) The period when the worker's entitlement is stopped is counted as part of the 26-week period mentioned in section 39 and section 40 as if payment of compensation had not been stopped.

44 Living outside Australia

- (1) A worker who is otherwise entitled to receive weekly compensation is not entitled to the compensation if the worker stops living in Australia.
- (2) Subsection (1) does not apply to the worker if a medical referee certifies that—
 - (a) the incapacity resulting from the injury is likely to be permanent;
 - (b) the worker's absence from Australia is likely to help the worker recuperate.

45 Effect of living outside Australia if compensation still payable

- (1) This section applies if the worker lives outside Australia but is, apart from this section, still entitled to weekly compensation.
 - *Note* A worker living outside Australia is still entitled to compensation if s 44 (2) applies to the worker.
- (2) The worker is not entitled to weekly compensation, but is entitled to receive quarterly the amount of the weekly compensation payable during the previous quarter.
- (3) However, the worker is entitled to receive quarterly payment of compensation only if the worker proves the worker's identity and that the worker continues to be incapacitated by the incapacity in relation to which the weekly compensation is payable.

46 Effect of payment of weekly compensation on other benefits etc

This part is not intended to affect an entitlement that, apart from this Act, the worker has to a benefit or payment except so far as a law in force in the ACT otherwise applies.

Examples of benefits not affected

- 1 accrual of long service leave
- 2 accrual of annual leave

47 No assignment etc of weekly compensation

Weekly compensation (including compensation payable under section 45 (Effect of living outside Australia if compensation still payable)) may not—

- (a) be assigned, charged or attached; and
- (b) pass to anyone else by operation of law; and
- (c) have a claim set off against it.

Part 4.4 Compensation for permanent injuries

48 Meaning of *loss*

In this chapter:

loss, in relation to a thing—

- (a) means—
 - (i) the loss of the thing; or
 - (ii) the permanent loss of the use, or efficient use, of the thing; and
- (b) includes the following:
 - (i) permanent musculoskeletal impairment, or another permanent impairment;
 - (ii) a loss, damage, impairment, disfigurement or disease mentioned in schedule 1 (Compensation for permanent injuries).

49 Meaning of single loss amount

In this part:

single loss amount means \$100 000 cpi indexed.

50 Meaning of maximum loss amount

In this part:

maximum loss amount means \$150 000 cpi indexed.

51 Compensation for permanent injuries generally

- (1) A worker who has suffered a loss mentioned in an item of schedule 1 as the result of a compensable injury is entitled to receive from the worker's employer, as compensation for the loss, the percentage of the single loss amount mentioned in that item.
- (2) For this section, the loss is to be worked out when the last of the following happens:
 - (a) the worker's employer became liable to pay compensation;
 - (b) it is unlikely that there will be an improvement or further improvement in the use, or efficient use, of the injured part of the body.
- (3) If a payment of compensation under this part has been made in relation to an injury, nothing prevents a further payment of compensation under this part from being made in relation to the same injury if there is an increase in the loss of the efficient use of the injured part of the body.

Example of loss of efficient use of injured part of body

a loss, or further loss, of sight in an injured eye

53 Compensation for 2 or more losses

A worker who has suffered 2 or more losses mentioned in schedule 1 (Compensation for permanent injuries) because of an injury is not entitled to receive as compensation under this part more than the maximum loss amount for the losses.

54 Compensation and left-handedness

If a worker's left arm or hand is the worker's dominant limb, in working out the loss for the worker—

(a) the loss of the worker's left arm, left hand or fingers of left hand is to be compensated as if it is the loss of the worker's right arm, right hand or fingers of right hand; and

(b) the loss of the worker's right arm, right hand or fingers of right hand is to be compensated as if it is the loss of the worker's left arm, left hand or fingers of left hand.

55 Compensation for combination of items

If a loss (other than the impairment of the back, neck or pelvis) may be compensated by a combination of items in schedule 1 (Compensation for permanent injuries) or by a proportionate loss of a single item, the loss is to be compensated by a proportionate loss of the single item.

Examples

- 1 Loss of 2 or more fingers is to be compensated as a proportionate loss of the hand.
- 2 Loss of a hand includes the loss of the thumb and other fingers of the hand and is to be compensated as a loss, or proportionate loss, of the hand.
- 3 Loss of an arm at or above the elbow includes the loss of the arm below the elbow and loss of the hand and is to be compensated as a loss, or a proportionate loss, of the arm at or above the elbow.
- Loss of a leg at or above the knee includes the loss of the leg below the knee and loss of the foot and is to be compensated as a loss, or a proportionate loss, of the leg at or above the knee.
- 5 Loss of a leg below the knee includes the loss of the foot and is to be compensated as a loss, or a proportionate loss, of the leg below the knee.

56 Compensation for only arm, leg, hand or foot

Loss of an only arm, leg, hand or foot is treated under schedule 1 as the loss of both arms, legs, hands or feet.

57 Compensation for loss of sexual organs

The following percentages of the single loss amount are payable for the loss of sexual organs (subject to the maximum percentage of 47% and without limiting compensation for the loss of another sexual organ):

(a) the percentage payable for loss of the penis is 47%;

- (b) the percentage payable for loss of 1 testicle is 10%;
- (c) the percentage payable for loss of 2 testicles or an only testicle is 47%.

58 Loss of bowel function

To work out whether and to what extent a worker has suffered permanent loss of bowel function—

- (a) the bowel is taken to include the anal sphincter; and
- (b) permanent ileostomy and permanent colostomy are each taken to constitute permanent loss of bowel function for which the maximum percentage is payable.

59 Proportionate loss of use

- (1) If a loss suffered by a worker consists of the loss of a proportion, but not all, of a thing mentioned in schedule 1 (Compensation for permanent injuries), a percentage of the compensation payable for the total loss of the thing equal to the percentage lost by the worker is payable as compensation under section 51 (Compensation for permanent injuries generally).
- (2) In working out the extent of the loss of the thing, the extent to which the loss, or the effect of the loss, may be reduced or limited by an external removable aid or appliance is not to be taken into account.
- (3) The amount of compensation payable for a particular case must, unless decided by agreement, be worked out by conciliation or arbitration under this Act.

60 Special provisions for HIV/AIDS

(1) Compensation is not payable under section 51 (Compensation for permanent injuries generally) for a loss that is related to HIV infection or AIDS if the HIV or AIDS was contracted during voluntary sexual activity or illicit drug use.

- (2) Section 59 does not apply to a loss that is HIV infection or AIDS.
- (3) In this section:

AIDS means Acquired Immune Deficiency Syndrome.

HIV infection means an infection by the Human Immunodeficiency Virus.

61 Deduction for previous injury or pre-existing condition

- (1) In working out the compensation payable under this part for a loss (the *initial loss*), an amount must be deducted from the compensation (the *deductible proportion*) for any proportion of the loss attributable to—
 - (a) a previous injury (whether or not it is an injury for which compensation has been paid, or is payable, under this part); or
 - (b) a pre-existing condition or abnormality.
- (2) In subsection (1), it does not matter whether the initial loss is a total or partial loss.
- (3) If there is a deductible proportion for a loss but the extent of the deductible proportion (or a part of it) will be difficult or costly to work out, it is to be assumed that the deductible proportion for the loss (or the relevant part of the loss) is 10% of the loss, unless this assumption is contrary to the available evidence.

Example

If this subsection requires it to be assumed that the deductible proportion in relation to a particular loss is 10% and the loss is 30% of the loss of the use of the right arm, the deductible proportion for the loss is 3% (that is, 10% of 30%).

(4) However, section 63 must be used to work out how much (if any) of a worker's hearing loss is caused by age.

62 Further loss and deductible proportions

- (1) This section applies in working out the compensation payable for a further loss (the *further loss*) resulting from an initial loss.
- (2) An amount proportionate to the deductible proportion of the initial loss must be deducted from the compensation payable for the further loss.
- (3) A deduction under subsection (2) in relation to a further loss is in addition to, not in substitution for, any deductible proportion for the further loss.

63 Loss of hearing because of age

- (1) This section applies in working out the percentage of the decrease of hearing in relation to boilermakers deafness of a worker who is the prescribed age or older, but does not apply to total hearing loss in either of the worker's ears.
- (2) For this part, it is to be conclusively presumed that the worker's loss of hearing to be attributed to loss of hearing because of age is 0.5 decibels for each complete year of the worker's age over the prescribed age.
- (3) In this section:

prescribed age means—

- (a) for a male—55 years old; or
- (b) for a female—65 years old.

No compensation for less than 6% hearing loss

(1) A worker is not entitled to compensation under section 51 (Compensation for permanent injuries generally) for a loss of hearing because of boilermakers deafness (the *hearing loss*) if the worker's total hearing loss is less than 6%.

(2) However, the worker is entitled to compensation for the hearing loss if the total hearing loss reaches 6% or more.

Example

Assume all hearing losses mentioned in this example are because of boilermakers deafness.

A worker suffers a hearing loss of 3% (the first hearing loss that the worker has suffered). No compensation is payable under section 51 for the loss because it is less than 6%, although notice of injury may be given or a claim may be made for the hearing loss.

The worker suffers a further hearing loss of 6%, bringing the total loss to 9%. The total loss has now passed the 6% threshold and compensation is payable for the full 9%. Compensation for the initial 3% hearing loss will be payable by the earlier employer if the worker made a claim or gave notice of injury for the initial hearing loss.

The worker suffers a further hearing loss of 6%. The worker is entitled in the usual way to compensation for the 6% further loss because the 6% threshold has already been passed (the total loss is now 15%).

Note Pt 5.3 (Obligations on injury) and ch 6 (Claims) apply to a hearing loss even if it is not immediately compensable because of this section.

- (3) In working out the percentage hearing loss because of boilermakers deafness, the loss of hearing is to be worked out as a proportionate loss of hearing of both ears, even if the loss is in 1 ear only.
- (4) A lawyer or agent who acts for a worker on a claim for compensation for loss of hearing because of boilermakers deafness is not entitled to recover costs from the worker or the employer in relation to the claim if no compensation is payable on the claim because the worker's total hearing loss is less than 6%.
- (5) In this section:

total hearing loss means the total of the present loss and all previous losses of hearing because of boilermakers deafness.

Presumption to be drawn from refusal to submit to hearing examination

- (1) This section applies to a worker with a claim for which no compensation is payable because of section 64.
- (2) If the worker fails to allow himself or herself to be examined as required under the worker's personal injury plan, or obstructs the examination, it is presumed in the absence of evidence to the contrary that the worker has no hearing loss because of boilermakers deafness.

66 Employer's responsibility to pay for hearing loss tests

- (1) If an employer would, apart from section 64 (No compensation for less than 6% hearing loss), be liable to pay compensation under section 51 (Compensation for permanent injuries generally) for a worker's hearing, the employer is liable under this chapter to pay the cost of only the following hearing tests for the loss:
 - (a) a test carried out at least 3 years after any previous test that the employer has paid for;
 - (b) a test that finds that the worker has suffered a total hearing loss because of boilermakers deafness of 6% or more:
 - (c) a test carried out after the worker has left the worker's employment with the employer if the hearing loss is attributable to the employment;
 - (d) a test carried out by a doctor, or audiologist, using an audiogram to work out the level of hearing loss.
- (2) The cost of a hearing test for the worker is the cost of obtaining a medical certificate, and any examination required for the certificate, about the extent of the worker's hearing loss.
- (3) This section does not require payment by an employer for the cost of obtaining a hearing test that the employer would not otherwise be liable to pay for under this chapter.

(4) In this section:

total hearing loss means the total of the present loss and all previous losses of hearing because of boilermakers deafness.

67 Reimbursement for costs of medical certificate and examination

- (1) Obtaining a medical certificate, and any examination required for the certificate, is taken to be medical or related treatment for this chapter if the worker gives the employer a copy of the certificate.
- (2) In this section:

medical certificate means a report or certificate, from a doctor, that complies with the requirements for medical assessments prescribed by regulation and that certifies—

- (a) that a worker has suffered a loss mentioned in schedule 1 (Compensation for permanent injuries); or
- (b) the extent of the loss to allow the amount of compensation payable for the loss to be worked out.

68 Limited entitlement if death happens within 3 months

- (1) This section applies if—
 - (a) a worker has received a compensable injury; and
 - (b) the worker dies within 3 months after receiving the compensable injury because of the compensable injury or another injury received at the same time.
- (2) The worker is not entitled to receive compensation for the compensable injury under the following items of schedule 1 (Compensation for permanent injuries):
 - (a) item 2 (loss of sense of taste or smell);
 - (b) item 3 (loss of senses of taste and smell);

- (c) item 41 (loss of sexual organs);
- (d) item 42 (loss of both breasts);
- (e) item 43 (loss of 1 breast);
- (f) item 44 (permanent and total loss of capacity to engage in sexual intercourse);
- (g) item 49 (severe facial disfigurement);
- (h) item 50 (severe bodily disfigurement).

Part 4.5 Compensation for medical treatment, damage and other costs

69 Application—pt 4.5

This part applies if—

- (a) compensation under this Act is payable by an employer to, or in relation to, a worker in relation to an injury; or
- (b) the operation of section 64 (No compensation for less than 6% hearing loss) means no compensation is payable by an employer to, or in relation to, a worker in relation to an injury; or
- (c) compensation would be payable by an employer to, or in relation to, a worker in relation to an injury except that—
 - (i) the worker is not incapacitated for work; or
 - (ii) the worker is imprisoned (see section 83); or
 - (iii) weekly compensation has been suspended under section 113 (Compliance by workers); or
 - (iv) the worker has contravened this Act.

Note A reference to an Act includes a reference to the statutory instruments made or in force under the Act, including any regulation (see Legislation Act, s 104).

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70 Employer liability for medical treatment etc

- (1) The employer is liable to pay—
 - (a) in relation to the cost of medical treatment reasonably received in relation to the injury—an amount of compensation appropriate for the provision of the medical treatment, having regard to the charges customarily made for similar medical treatment where the treatment is received; and
 - (b) in relation to the cost of alteration to the worker's place of residence—the cost of the alteration if—
 - (i) the worker has an impairment as a result of the injury; and
 - (ii) the worker has received, or is receiving, medical treatment in relation to the injury; and
 - (iii) the alteration is reasonably required by the worker in relation to the worker's impairment; and

Note See also s 73A and s 73B.

- (c) in relation to the cost of rehabilitation services received by the worker in relation to the injury under the worker's personal injury plan—the cost of the services in accordance with the plan; and
- (d) in relation to any damage to, or loss of, the worker's clothing sustained in association with the injury—compensation of a reasonable amount for the repair or replacement of the damaged or lost clothing.
- Note 1 Rehabilitation services include training and retraining services—see the dictionary, def *rehabilitation services*.
- *Note 2* Ch 5 deals with personal injury plans.

- (2) However, the total amount payable under subsection (1) for each of the following must not be more than the maximum amount:
 - (a) for the cost of medical treatment consisting of the repair or replacement of a worker's contact lenses, crutches, prosthesis, spectacles or other artificial aid;
 - (b) for damage to or loss of a worker's clothing.
- (3) Despite subsection (1) (a), (b) and (c), the employer is not liable to pay the costs of any treatment and care needs, or excluded treatment and care, of the worker—
 - (a) if the worker is a participant in the LTCS scheme—
 - (i) that relate to the injury for which the worker is a participant in the scheme; and
 - (ii) that arise while the worker is a participant in the scheme; or
 - (b) if the worker receives a lump sum under a lump sum agreement with the LTCS commissioner in relation to the injury for which the worker was a participant in the scheme—
 - (i) that relate to the injury; and
 - (ii) either—
 - (A) arose while the worker was a participant in the LTCS scheme; or

(B) arise after the worker receives the lump sum under the lump sum agreement.

Note Excluded treatment and care—see the LTCS Act, s 9.

LTCS Act—see the dictionary.

LTCS commissioner—see the dictionary.

LTCS scheme—see the LTCS Act, dictionary.

Participant, in the LTCS scheme—see the LTCS Act, dictionary.

Treatment and care needs, of a participant in the LTCS scheme—see the LTCS Act, s 9.

- (4) Subsection (3) applies—
 - (a) whether or not the treatment and care are assessed treatment and care needs under the LTCS Act; and
 - (b) whether or not the LTCS commissioner is required to make a payment in relation to the treatment and care needs; and
 - (c) whether or not the treatment, care, support or services provided in connection with the treatment and care needs is provided without charge.

Note LTCS Act—see the dictionary.

LTCS commissioner—see the LTCS Act, dictionary.

- (5) To remove any doubt, the employer is liable to pay the costs of any treatment and care needs, or excluded treatment and care, of a worker under subsection (1)—
 - (a) until the worker is accepted as a participant in the LTCS scheme in relation to the injury; and
 - (b) if the worker—
 - (i) ceases to be a participant in the LTCS scheme; and
 - (ii) does not receive a lump sum under a lump sum agreement with the LTCS commissioner.

(6) In subsection (2):

maximum amount, for medical treatment, damage or loss, means—

- (a) if an amount has been agreed between the worker and employer—that amount; or
- (b) in any other case—\$500 cpi indexed.
- (7) For this section, the cost of medical treatment or rehabilitation services is taken to include—
 - (a) the amount of wages lost by the worker because of the worker's attendance at a place (the *relevant place*) to receive the treatment or services; and
 - (b) the cost of taking the worker (whether the worker or someone else does the taking) to and from the relevant place worked out under either—
 - (i) section 74 (Transport costs other than private car); or
 - (ii) section 75 (Working out transport costs for private cars); and
 - (c) the cost of any accommodation (including the cost of meals required by the worker because of the worker's attendance at the relevant place worked out under section 76 (Costs of accommodation and meals).
- (8) In this section:

lump sum agreement—see the LTCS Act, section 30B.

71 Claim for compensation for pt 4.5

- (1) The worker may make a claim for compensation under this part for the cost of medical treatment or in relation to damage to, or loss of, the worker's clothing only if the worker has given the employer written notice stating—
 - (a) the amount of compensation sought; and

- (b) reasonable details of the expenses for which compensation is sought.
- (2) However, a failure to give notice, or a defect or inaccuracy in the notice, does not affect a claim for compensation under this part if it is found in the proceeding on the claim that—
 - (a) if a notice or amended notice were then given and the hearing postponed, the employer's defence is not, or would not be, prejudiced by the failure, defect or inaccuracy; or
 - (b) the failure, defect or inaccuracy was caused by mistake or other reasonable cause.

72 Second assessments

- (1) This section applies if the worker receives medical treatment and claims the cost of it from the employer under this part.
- (2) The employer may, in consultation with the doctor or other person providing the treatment, and before making a payment under this part, require the worker to be assessed by a doctor, or other person, chosen by the employer.

73 Payments for medical treatment received from hospital

- (1) This section applies if the employer is liable under this part to pay an amount in relation to medical treatment received by the worker from a hospital.
- (2) The employer must pay the amount, less any amount previously paid by the worker in relation to the treatment, on demand—
 - (a) for a private hospital—to the proprietor of the hospital; or
 - (b) for any other hospital—to the person authorised in writing by the governing entity in charge of the hospital to receive payments payable to the hospital.

73A Working out costs of alterations to residences

The following matters must be considered when working out the amount of compensation payable in relation to a worker under section 70 (1) (b):

- (a) the likely period for which the alteration will be required;
- (b) any difficulty faced by the worker in gaining access to, or enjoying reasonable freedom of movement in the worker's place of residence;
- (c) if the worker previously received compensation under section 70 (1) (b) in relation to an alteration to the worker's place of residence and later disposed of the place—whether the value of that place increased as a result of the alteration.

73B Payments for costs of alterations to residences

For section 70 (1) (b), a regulation may prescribe—

- (a) what is or is not included in the cost of an alteration; and
- (b) when an alteration is or is not reasonably required by a worker in relation to the worker's impairment.

74 Transport costs other than private car

- (1) This section sets out how the costs of taking an injured worker to and from a place (other than by private motor vehicle) to receive medical treatment or rehabilitation services must be worked out.
- (2) If the worker cannot be taken in a motor vehicle (other than an ambulance) because of the worker's injury, the transport cost is the actual cost of the transport by ambulance.

- (3) The transport cost is the actual cost of the public transport if the worker is taken by public transport because, although the worker can be taken in a private motor vehicle—
 - (a) the worker is prohibited by law from taking himself or herself in a private motor vehicle and no-one else is available to take the worker in a private motor vehicle; or
 - (b) no private motor vehicle is available.
- (4) The transport cost is the reasonable cost of transport if a private motor vehicle or public transport is not reasonably available, or reasonably appropriate, to transport the worker in the circumstances.
- (5) In this section:

public passenger vehicle—see the Road Transport (Public Passenger Services) Act 2001, dictionary.

public transport means travel in a public passenger vehicle.

75 Working out transport costs for private cars

- (1) The costs of taking an injured worker by private motor vehicle (the *car*) to and from a place to receive medical treatment or rehabilitation services must be worked out in accordance with this section.
- (2) The transport cost is the cost worked out by multiplying the number of kilometres travelled to and from the place by the per kilometre cost for the car.
- (3) The per kilometre cost for the car is the amount determined by the commissioner of taxation under the *Income Tax Assessment Act 1997* (Cwlth), section 28-25 (4) for the financial year in which the cost was incurred.

76 Costs of accommodation and meals

- (1) The cost of accommodation for the worker is the relevant amount set out in a public ruling by the Commonwealth Commissioner of Taxation in relation to reasonable allowance amounts for the year in which the costs were incurred.
- (2) The relevant amount, for accommodation, is the amount that would be allowed for an employee on the lowest salary for which allowances are given for the place where the employee was accommodated.
- (3) The worker is not entitled to payment for a meal unless the meal is eaten while the worker—
 - (a) is travelling to or from a place to receive medical treatment or rehabilitation services for which compensation is payable; or
 - (b) is at a place to receive medical treatment or rehabilitation services for which compensation is payable; or
 - (c) is staying at accommodation for which compensation is payable under this part.

(4) In this section:

accommodation, for a worker, includes meals for the worker, other than a meal to which the worker is not entitled to payment because of subsection (3).

public ruling—see the *Taxation Administration Act 1953* (Cwlth), schedule 1, section 358-5 (What is a public ruling?).

Part 4.6 Compensation for death

77 Death benefits

- (1) This section applies to the death of a worker for which compensation is payable under this Act.
- (2) The dependants of the worker are entitled to the following:
 - (a) a single lump sum payment of \$539 002.37 wpi indexed to be divided between the dependants;
 - (b) for each dependant who is a child—weekly compensation of \$148.23 wpi indexed;
 - (c) the funeral expenses of the worker to a maximum of \$11 828.87 cpi indexed.
- (3) In working out for this Act whether or not a child is, or was, dependent on the earnings of the worker, any family tax benefit within the meaning of the *A New Tax System (Family Assistance) Act 1999* (Cwlth), section 3 (definitions) in relation to the child must be disregarded.
- (4) To remove any doubt, the payment under subsection (2) (a) need not be divided equally between the dependants, but may be divided between them as the Magistrates Court considers appropriate.
- (5) Compensation under subsection (2) (b) is payable only while the person receiving it is a child.
- (6) If the worker did not have dependents, the personal representative of the worker is entitled to a maximum of \$11 828.87 cpi indexed for the funeral expenses of the worker.

(7) In this section:

WPI means the Wage Price Index number published by the Australian Statistician.

wpi indexed, for an amount, means the amount as adjusted in line with any adjustment in the WPI since the commencement of the provision in which the amount appears.

78 Payment into court of lump sum death benefits

- (1) A payment mentioned in section 77 (2) (a) (the *lump sum*) must be paid into the Magistrates Court, unless the court otherwise orders.
- (2) The Magistrates Court must, until the lump sum is paid to the person entitled to it—
 - (a) invest, apply or otherwise deal with the lump sum payment in the way the court considers appropriate for the benefit of the person entitled to it under this Act; or
 - (b) deal with it under the *Public Trustee and Guardian Act 1985*, section 25 (Payment of money etc to public trustee and guardian on behalf of person under disability).
- (3) The receipt of the registrar of the Magistrates Court is a sufficient discharge for the amount paid in.

Part 4.7 Registration of agreements for compensation

79 Registration of agreements for compensation

- (1) If the worker agrees to receive an amount of compensation under section 51 (Compensation for permanent injuries generally) for a loss or under section 137 (How worker may commute rights) for the commutation of a right, a party to the agreement may apply to the Magistrates Court for registration of the agreement.
- (2) The Magistrates Court may refuse to register the agreement if the court considers that the agreement is inaccurate or that the agreed amount of compensation is manifestly inadequate.
- (3) The Magistrates Court must refuse to register the agreement unless satisfied that the worker received independent legal advice about the agreement before entering into it.
- (4) However, subsection (3) does not apply to an agreement of a worker to receive an amount of compensation under section 51 (Compensation for permanent injuries generally) for an imminently fatal asbestos-related disease.
- (5) An agreement may deal with the payment of costs.

80 Effect of registration of agreements

- (1) A worker with a registered agreement in relation to a loss or the commutation of a right is not entitled to receive any additional compensation for the loss or commutation of the right under an award of the Magistrates Court.
- (2) However, the Magistrates Court may award additional compensation if satisfied that—
 - (a) the agreement was obtained by fraud or undue influence; or
 - (b) the agreed amount of compensation was manifestly inadequate.

(3) This section does not limit an award of additional compensation for a further loss suffered after the loss to which the agreement relates.

81 Cancellation or amendment of registered agreements

- (1) On application by a party to a registered agreement, the Magistrates Court may amend the registered agreement or cancel the registration of the agreement.
- (2) The Magistrates Court may act under subsection (1) only if—
 - (a) a party becomes aware of evidence that was not available to the party when the agreement was made; and
 - (b) the court considers that, if the party had been aware of the evidence, the agreement would not have been made, or would not have been made as registered.

Part 4.8 Exceptions to entitlements to compensation

When is compensation under Act generally not payable?

- (1) This section applies if, apart from this section, compensation in relation to an injury to a worker is payable under this Act.
- (2) Compensation is not payable if the injury to, or death of, the worker is caused by an intentionally self-inflicted injury.
- (3) Compensation is not payable if it is proved that the injury to the worker is attributable to the worker's serious and wilful misconduct, unless the injury results in death or serious and permanent disablement.
- (4) In subsection (3), the personal injury received by the worker is attributable to the serious and wilful misconduct of the worker if—
 - (a) at the time of the injury, the worker was under the influence of alcohol or a prescribed drug, unless the alcohol or prescribed drug did not contribute to the injury or was not consumed or taken voluntarily; or
 - (b) the injury was otherwise attributable to the serious and wilful misconduct of the worker.

(5) In this section:

prescribed drug—see the Road Transport (Alcohol and Drugs) Act 1977, dictionary.

- Note 1 The LTCS Act applies to an injury to a worker arising out of, or in the course of, the worker's employment, including an injury that is attributable to the worker's serious and wilful misconduct (see LTCS Act, s 6 (4) (b)).
- Note 2 LTCS Act—see the dictionary.

 LTCS scheme—see the LTCS Act, dictionary.

83 No compensation while imprisoned

A worker who is otherwise entitled to compensation under this Act is not entitled to compensation for a period when the worker is imprisoned because the worker has been convicted of an offence against a law of the Territory, a State, the Commonwealth or another Territory.

- Note 1 A worker with an injury to which the LTCS Act applies is eligible to participate in the LTCS scheme even though the worker is imprisoned (see LTCS Act, s 15 (3)).
- Note 2 LTCS Act—see the dictionary.

 LTCS scheme—see the LTCS Act, dictionary.

84 Compensation for sporting injuries

A person is not entitled to receive compensation for an injury sustained as a result of the person's engagement in professional sporting activity.

Chapter 5 Injury management process

Part 5.1 Object and definitions for ch 5

85 Object—ch 5

The object of this chapter is to establish a system the aim of which is to achieve the best results for the timely, safe and durable return to work of workers following workplace injuries.

85A Meaning of injured worker and personal injury plan—Act

In this Act:

injured worker means a worker who has received a workplace injury.

personal injury plan, for a worker, means a plan for coordinating and managing the aspects of injury management that relate to medical treatment and rehabilitation services for the worker to achieve a timely, safe and durable return to work for the worker.

86 Definitions—ch 5

In this chapter:

employer—see section 87.

injury management means a process that consists of activities and procedures that are carried out or established to achieve a timely, safe and durable return to work for injured workers.

injury management program means a coordinated and managed program that integrates all aspects of injury management (including medical treatment, rehabilitation services, claims management and employment management practices) to achieve the best results for a timely, safe and durable return to work of injured workers.

injury notice—see section 93 (2) (Early notification of workplace injury).

insurer—see section 86A and section 87.

nominated treating doctor, for an injured worker, means the doctor or medical practice nominated under section 102 (Nomination of doctor for personal injury plan).

workplace injury means an injury in relation to which compensation is or may be payable under this Act.

86A Meaning of *insurer* for ch 5

(1) In this chapter:

insurer means—

- (a) a licensed insurer; or
- (b) a licensed self-insurer; or
- (c) for an injured worker's injury if the licensed insurer that issued a compulsory insurance policy that covers the worker in relation to the injury cannot provide the indemnity required to be provided under the policy—the DI fund; or
- (d) for an injured worker's injury if there is no compulsory insurance policy that covers the worker in relation to the injury and the worker's employer is not a licensed self-insurer—the DI fund.

Note The DI fund manager must act as if the DI fund were the licensed insurer in other situations (see s 112 (3)).

- (2) However, in applying this chapter to the DI fund as insurer—
 - (a) a requirement that the licensed insurer do or not do something is taken to be a requirement that the DI fund manager do or not do the thing; and
 - (b) the manager is not required to comply with section 88 (Insurer to establish etc injury management program) or section 89 (Insurer to give effect to injury management program); and

- Note Also, s 128 (1) (b) does not apply to the DI fund (see s 128 (2)).
- (c) although otherwise required to comply with this chapter, the manager is not liable to be prosecuted for an offence against this chapter.

87 Meaning of *employer* and *insurer* if more than 1

- (1) This section applies if 2 or more employers are or may be liable to pay compensation to an injured worker but the employers do not all still employ the worker.
- (2) In this chapter:

employer, of the injured worker, means the employer that last employed the worker.

insurer means the employer's insurer.

Part 5.2 General obligations

88 Insurer to establish etc injury management program

(1) An insurer must establish and maintain an injury management program.

Note The DI fund manager is not required to comply with this section (see s 86A (2) (b)).

- (2) An insurer must review the effectiveness of its injury management program at least once every 2 years and revise the program in accordance with the results of the review.
- (3) An insurer must give a copy of its injury management program, and any revised injury management program, to the Minister.

89 Insurer to give effect to injury management program

(1) An insurer must give effect to its injury management program, in particular by complying with the obligations imposed on the insurer under the program.

Note The DI fund manager is not required to comply with this section (see s 86A (2) (b)).

(2) An insurer must take appropriate steps to ensure that each employer who is insured by the insurer is aware of the employer's obligations under this chapter and is aware of the requirements of the insurer's injury management program.

Note An employer may have obligations under the following provisions of this part:

- under s 91 to comply with the obligations imposed on the employer under the injury management program
- under s 93 (2) to give notice of injury to the insurer
- under s 100 to take part and cooperate in establishing a personal injury plan for a worker, and to comply with the plan
- under s 105 and s 106 to provide suitable work for an injured worker
- under s 109 to establish a return-to-work program.

(3) Subsection (2) does not apply to a licensed self-insurer.

90 Insurer's obligation of prompt payment

- (1) An insurer commits an offence if—
 - (a) the insurer receives written notice requiring payment for the provision of a service; and
 - (b) the insurer is required under this Act to pay for the service; and
 - (c) the insurer fails to pay the person who provided the service (the *service provider*) for the service not later than 30 days after the day the insurer receives the notice.

Maximum penalty: 10 penalty units.

- (2) Subsection (1) does not apply if—
 - (a) the insurer does not pay for the service because the insurer has reasonable grounds to believe that the service has not been provided, or has not been properly provided; and
 - (b) the insurer has told the service provider, in writing, why the insurer has not paid for the service.
- (3) An offence against this section is a strict liability offence.

91 Employer's obligations for injury management programs

(1) An employer must comply with the reasonable obligations imposed on the employer by the employer's insurer under the insurer's injury management program.

Maximum penalty: 10 penalty units.

- (2) This section does not apply to a non-business employer.
- (3) An offence against this section is a strict liability offence.

92 Register of injuries

- (1) This section applies to a mine, quarry, factory, workshop, office or shop (the *workplace*).
- (2) A register of injuries (the *register*) is to be kept at the workplace in a place that is readily accessible to workers at the workplace.
- (3) The manager of the mine or quarry, or the occupier of the factory, workshop, office or shop, must ensure the register is kept in accordance with subsection (2).
 - Maximum penalty: 50 penalty units.
- (4) A person must not change, damage, deface, remove or otherwise interfere with the register.
 - Maximum penalty: 20 penalty units.
- (5) A worker employed at the workplace, or a person acting on the worker's behalf, may enter in the register details of an injury received by the worker.
- (6) If details of the injury are entered in the register as soon as possible after the injury happens, the entry is taken to be notice of the injury given to the employer by the injured worker for this Act.
- (7) An offence against this section is a strict liability offence.
- (8) This section does not prevent the alteration of the register to correct an error of fact.

Part 5.3 Obligations on injury

93 Early notification of workplace injury

- (1) The injured worker must tell the employer that the worker has received a workplace injury as soon as possible after being injured.
 - *Note* An injured worker may give notice of an injury by making an entry in a register of injuries (see s 92).
- (2) The employer must give the insurer notice of the injury (an *injury notice*) under section 94 within 48 hours after becoming aware that the worker has received a workplace injury.
- (3) Subsection (2) does not apply if the insurer is a licensed self-insurer.

94 Injury notice

- (1) An injury notice must state—
 - (a) the name and address of the injured worker; and
 - (b) the cause of the injury (in ordinary language); and
 - (c) the date and time the injury happened; and
 - (d) the name and address of the employer; and
 - (e) the name and address of the nominated treating doctor or, if there is no treating doctor, a doctor who has treated the worker for the injury.
- (2) The employer may give the notice orally, in writing or in electronic form.
- (3) However, if the employer gives the notice orally, the employer must give the notice in writing or in electronic form within 3 days after giving the notice orally.
- (4) If the worker has more than 1 employer, the notice must be given to the employer responsible for the workplace where the injury happened.

- (5) The notice of injury is taken to have been given to an employer—
 - (a) if it is given to a person designated for the purpose by the employer; or
 - (b) if it is given to a person under whose supervision the worker is employed.

94A Uninsured employer to give DI fund manager injury notice etc

- (1) An employer (other than a licensed self-insurer) commits an offence if—
 - (a) the employer is given an injury notice for an injured worker; and
 - (b) the employer does not have a compulsory insurance policy that applies to the worker in relation to the injury; and
 - (c) the employer does not, within 48 hours after receiving the injury notice—
 - (i) give the DI fund manager a copy of the injury notice; and
 - (ii) tell the manager, in writing, that the employer does not have a compulsory insurance policy that applies to the worker in relation to the injury.

Maximum penalty: 50 penalty units.

(2) An offence against this section is a strict liability offence.

94B Liquidator to give DI fund manager injury notice etc

- (1) The liquidator of an insurer (other than an insurer that has been wound up under the Corporations Act) commits an offence if—
 - (a) the liquidator is given an injury notice; and
 - (b) the injury notice is for an injury of an injured worker of an employer; and

- (c) the employer holds or held a compulsory insurance policy with the insurer that requires or required indemnity to be provided for the injured worker's injury; and
- (d) the insurer cannot provide the indemnity required to be provided under the policy; and
- (e) the liquidator does not, within 48 hours after receiving the injury notice—
 - (i) give the DI fund manager a copy of the injury notice; and
 - (ii) tell the manager, in writing, that the employer holds or held a compulsory insurance policy with the insurer that requires or required indemnity for the injury to be provided.

Maximum penalty: 50 penalty units.

- (2) The liquidator of a licensed insurer that has been wound up under the Corporations Act commits an offence if—
 - (a) the liquidator is given an injury notice; and
 - (b) the injury notice is for an injury of an injured worker of an employer; and
 - (c) the employer held a compulsory insurance policy with the insurer that required indemnity for the injured worker's injury to be provided; and
 - (d) the liquidator does not, within 48 hours after the liquidator receives the notice—
 - (i) return the injury notice to the injured worker; and
 - (ii) tell the worker, in writing, to give the injury notice to the DI fund manager.

Maximum penalty: 50 penalty units.

(3) An offence against this section is a strict liability offence.

94C Injured workers of uninsured employers may give DI fund manager injury notice

An injured worker may give the DI fund manager a copy of the injured worker's injury notice if—

- (a) the injured worker's employer—
 - (i) is required to give the notice to the fund manager under section 94A (Uninsured employer to give DI fund manager injury notice etc); but
 - (ii) has not given the notice as required; or
- (b) the injured worker's employer is required to give the notice to the fund manager under section 94A but the injured worker suspects that the employer may not have given the notice to the fund manager; or
- (c) a liquidator—
 - (i) tells the injured worker to give the worker's injury notice to the fund manager under section 94B (Liquidator to give DI fund manager injury notice etc); or
 - (ii) is required under section 94B to tell the injured worker to give the worker's injury notice to the fund manager, but does not tell the injured worker as required; or
- (d) the injured worker was employed by an employer who held a compulsory insurance policy under which the insurer was required to provide indemnity for the worker's injury, but the insurer cannot provide the indemnity required to be provided under the policy; or
- (e) the injured worker was employed by an employer who was a licensed self-insurer and the injured worker believes, on reasonable grounds, that the employer is unable to pay compensation in relation to the injury; or
- (f) the injured worker's employer no longer exists.

95 What if employer does not give notice of injury within time?

- (1) This section applies if an employer (other than a licensed self-insurer) is given an injury notice for an injured worker, but does not give the insurer the injury notice within the time mentioned in section 93 (2) (Early notification of workplace injury).
- (2) The employer is liable to pay the worker weekly compensation from the date of injury until the employer gives the insurer the injury notice.
- (3) The employer must not be indemnified by the insurer for a payment mentioned in subsection (2).

96 Obligations of insurer on being notified of injury

(1) Within 3 business days after the day an insurer receives an injury notice, the insurer must take action under the insurer's injury management program.

Maximum penalty: 10 penalty units.

- (2) Within 3 business days after the day an insurer receives an injury notice, if there are reasonable grounds for the insurer to believe that the injury is a significant injury, the insurer must make contact under the insurer's injury management program with each of the following people:
 - (a) the injured worker;
 - (b) the employer (unless the employer is a licensed self-insurer);
 - (c) the worker's nominated treating doctor (if appropriate and practical).

Maximum penalty: 30 penalty units.

- (3) If a workplace injury results in the worker being incapacitated for work for a continuous period of longer than 7 days, within 3 business days after the day the 1st continuous period of 7 days incapacity ends, the insurer must make contact under the insurer's injury management program with each of the following people:
 - (a) the injured worker;
 - (b) the employer (unless the employer is a licensed self-insurer);
 - (c) the worker's nominated treating doctor (if appropriate and practical).

Maximum penalty: 30 penalty units.

- (4) An offence against this section is a strict liability offence.
- (5) In this section:

continuous period, in relation to a worker's incapacity—a period is a continuous period—

- (a) whether or not any of the days in the period are business days; and
- (b) whether or not the incapacity is total or partial or a combination of both.

significant injury means a workplace injury that is likely to result in the worker being incapacitated for work for a continuous period of longer than 7 days.

Part 5.4 Obligations in relation to personal injury plans

96A Application—pt 5.4

(1) This part does not apply in relation to an injured worker who is a participant in the LTCS scheme.

Note LTCS scheme—see the LTCS Act, dictionary.

Participant, in the LTCS scheme—see the LTCS Act, dictionary.

(2) To remove any doubt, this part does apply in relation to an injured worker who ceases to be a participant in the LTCS scheme.

Example

an injured worker who is an interim participant in the LTCS scheme who is not accepted as a lifetime participant in the scheme

97 Personal injury plan for worker with significant injury

(1) If it appears to an insurer who is, or may be, liable to pay compensation to an injured worker on behalf of the worker's employer that the workplace injury is a significant injury, the insurer must establish a personal injury plan for the worker.

Note This section does not apply if the injured worker is a participant in the LTCS scheme (see s 96A (1)).

- (2) The personal injury plan must be established in agreement with the employer (unless the employer is a licensed self-insurer or a non-business employer) and the injured worker, to the maximum extent that their cooperation and participation allow.
- (3) The insurer must give effect to the personal injury plan established for the injured worker and, for that purpose, must comply with the obligations imposed on the insurer under the plan.

(4) In this section:

significant injury means a workplace injury that is likely to result in the worker being incapacitated for work for a continuous period of longer than 7 days, whether or not any of those days are business days and whether or not the incapacity is total or partial or a combination of both.

98 Provision of information about personal injury plan

(1) The insurer must give both the employer and the injured worker information about the personal injury plan.

Note This section does not apply if the injured worker is a participant in the LTCS scheme (see s 96A (1)).

- (2) The information must include a statement to the effect that the worker's entitlement to weekly compensation may stop if the worker unreasonably fails to comply with the requirements of this chapter after being asked to do so by the insurer.
- (3) The insurer must keep the employer informed of significant steps taken, or proposed to be taken, under the personal injury plan for the worker, unless the employer is a licensed self-insurer.

99 Vocational rehabilitation

The insurer must ensure, as far as possible, that vocational rehabilitation provided or arranged for the injured worker under the personal injury plan is of a kind that may reasonably be thought likely to lead to a real prospect of employment or a real increase in earnings for the injured worker.

99A Appointment of approved rehabilitation provider under personal injury plan

- (1) The insurer may appoint an approved rehabilitation provider for an injured worker as part of the worker's personal injury plan.
- (2) However, the insurer must appoint an approved rehabilitation provider for the injured worker as part of the personal injury plan if the worker has not returned to the worker's pre-injury duties and pre-injury working hours, within 4 weeks after the day the worker gave notice of the injury.

100 Employer's personal injury plan obligations

- (1) The employer must take part and cooperate in the establishment of a personal injury plan for the injured worker.
 - Maximum penalty: 10 penalty units.
- (2) The employer must comply with the reasonable obligations imposed on the employer under the personal injury plan.
 - Maximum penalty: 10 penalty units.
- (3) This section does not apply if the employer is a licensed self-insurer.
- (4) An offence against this section is a strict liability offence.

101 Worker's personal injury plan obligations

- (1) The injured worker must take part and cooperate in the establishment of a personal injury plan for the worker.
 - Note If the injured worker does not take part and cooperate in the establishment of the worker's personal injury plan, the worker's weekly compensation may be stopped while time for payment of weekly compensation continues to run against the worker (see s 113).
- (2) The injured worker must comply with reasonable obligations imposed on the worker under the worker's personal injury plan, including any obligation to receive medical treatment or rehabilitation services.

102 Nomination of doctor for personal injury plan

- (1) The worker must nominate a doctor, or medical practice, as the worker's treating doctor for the worker's personal injury plan.
- (2) The worker may only nominate a doctor, or medical practice, that is prepared to take part in the development of, and in the arrangements under, the worker's personal injury plan.
- (3) The nomination of a medical practice as treating doctor for the worker's personal injury plan is the nomination of the members of the practice who treat the worker from time to time.
- (4) The worker must authorise the worker's nominated treating doctor to provide relevant information to—
 - (a) the insurer or employer for the worker's personal injury plan; or
 - (b) a person who requires the information in relation to the management of the worker's claim for compensation; or
 - (c) the regulator in relation to the performance of an approved rehabilitation provider.
- (5) The worker's personal injury plan must provide a way for the worker to change the worker's nominated treating doctor.

103 Subsequent medical certificates under personal injury plan

A medical certificate required under a personal injury plan in relation to a claim for ongoing compensation under this Act must be from a doctor.

Part 5.4A Return-to-work coordinators

103A Definitions—pt 5.4A

In this part:

annual premium, for an employer, means the amount paid by the employer for the employer's compulsory insurance policy for 1 year.

return-to-work coordinator means a return-to-work coordinator appointed under section 103C.

103B Application—pt 5.4A

This part applies to an employer that—

- (a) pays an annual premium of \$200 000 or more; or
- (b) is a licensed self-insurer.

103C Appointment

- (1) An employer must appoint a return-to-work coordinator.
- (2) If a return-to-work coordinator's position becomes vacant, the employer must appoint another person to the position within 3 months after the position becomes vacant.
- (3) A person commits an offence if—
 - (a) the person is an employer; and
 - (b) the employer fails to comply with a requirement under subsections (1) or (2).

Maximum penalty: 50 penalty units.

(4) An offence against subsection (3) is a strict liability offence.

103D Functions

A return-to-work coordinator has the following functions:

- (a) to assist injured workers to remain at work, or return to work as soon as practicable following an injury;
- (b) if the return-to-work coordinator's employer is not a licensed self-insurer—to assist the employer's insurer to prepare and implement the return to work plan or personal injury plan for an injured worker;
- (c) to identify suitable duties for injured workers;
- (d) to liaise with people involved in the provision of medical treatment or rehabilitation services to an injured worker in relation to the worker's return to work;
- (e) to monitor an injured worker's progress towards the worker's return to work:
- (f) as far as practicable, to take steps to prevent an aggravation, acceleration or recurrence of an injured worker's injury when the worker returns to work;
- (g) to promote injury management strategies.

Note The collection and disclosure of personal health information is subject to the *Health Records (Privacy and Access) Act 1997*.

103E Employer's obligations

- (1) An employer must—
 - (a) provide the facilities and assistance that are reasonably necessary to enable a return-to-work coordinator to exercise the coordinator's functions; and

- (b) not appoint a person as a return-to-work coordinator unless the person—
 - (i) has completed training determined by the Minister as prerequisite training for a return-to-work coordinator for this Act; or
 - (ii) has experience of the kind determined by the Minister as prerequisite experience for a return-to-work coordinator for this Act; and
- (c) comply with the Minister's guidelines about an employer's responsibilities in relation to return-to-work coordinators; and
- (d) notify the Minister in writing about the contact details for each of the employer's return-to-work coordinators not later than 30 days after the day the coordinator is appointed.
- (2) Each of the following is a notifiable instrument:
 - (a) a determination under subsection (1) (b);
 - (b) a guideline under subsection (1) (c).

Note A notifiable instrument must be notified under the Legislation Act.

- (3) A person commits an offence if—
 - (a) the person is an employer; and
 - (b) the employer fails to comply with a requirement under subsection (1).

Maximum penalty: 50 penalty units.

(4) An offence against subsection (3) is a strict liability offence.

(5) It is a defence to a prosecution for an offence against this section, for a failure to comply with a requirement under subsection (1) (a), if the defendant proves that the defendant believed on reasonable grounds that the defendant provided the facilities and assistance that were reasonably necessary to enable a return-to-work coordinator to exercise the coordinator's functions.

103F Register of return-to-work coordinators

- (1) The work health and safety commissioner must maintain a register of return-to-work coordinators.
- (2) The register must include the following information about a return-to-work coordinator:
 - (a) name;
 - (b) employer;
 - (c) position held with employer;
 - (d) workplace address;
 - (e) workplace telephone number;
 - (f) workplace email address.
- (3) The register may be kept in any form, including electronically, that the work health and safety commissioner decides.
- (4) The work health and safety commissioner must make information about an employer's return-to-work coordinator held in the register available to—
 - (a) an inspector; and
 - (b) an employee of the employer; and
 - (c) the employer's workers compensation insurer.

Part 5.5 Other obligations

104 Injured worker's obligation to return to work

The injured worker must make all reasonable efforts to return to work with the worker's pre-incapacity employer (that is, the employer liable to pay compensation to the worker) as soon as possible, considering the nature of the injury.

105 Employer must provide suitable work for full-time, parttime and casual workers

- (1) This section applies if—
 - (a) a full-time, part-time or casual worker has been totally or partially incapacitated for work because of an injury; and
 - (b) the worker can return to work, whether on a full-time or parttime basis, and whether or not to the worker's previous employment; and
 - (c) within 6 months after the day the worker became entitled to weekly compensation, the worker asks the employer liable to pay the compensation to provide employment for the worker.
- (2) The employer must provide employment to the worker that is—
 - (a) so far as reasonably practical, the same as, or equivalent to, the employment in which the worker was employed at the time of the injury; and
 - (b) otherwise suitable employment for the worker.

Maximum penalty: 10 penalty units.

(3) An offence against this section is a strict liability offence.

- (4) This section does not apply if—
 - (a) the worker voluntarily left the employment of the employer after the injury happened (whether before or after the beginning of the incapacity for work); or
 - (b) the employer ended the worker's employment after the injury happened, for a reason other than because the worker was not fit for employment because of the injury; or
 - (c) the employer is a non-business employer; or
 - (d) the employer cannot provide suitable employment.

106 Employer must provide suitable work for contract workers

- (1) This section applies if—
 - (a) a contract worker has been totally or partially incapacitated for work because of an injury; and
 - (b) the worker can return to work, whether on a full-time or parttime basis, and whether or not to the worker's previous employment; and
 - (c) within the defined period, the worker asks the employer liable to pay the compensation to provide employment for the worker.
- (2) The employer must provide employment to the worker that is—
 - (a) so far as reasonably practical, the same as, or equivalent to, the employment in which the worker was employed at the time of the injury; and
 - (b) otherwise suitable employment for the worker.

Maximum penalty: 10 penalty units.

(3) An offence against this section is a strict liability offence.

- (4) This section does not apply if—
 - (a) the worker voluntarily left the employment of the employer after the injury happened (whether before or after the beginning of the incapacity for work); or
 - (b) the employer ended the worker's employment after the injury happened for a reason other than because the worker was not fit for employment because of the injury; or
 - (c) the employer is a non-business employer; or
 - (d) the employer cannot provide suitable employment.

(5) In this section:

contract period includes the period of any reasonably expected extension or renewal of the contract.

defined period, for a contract worker who is entitled to weekly compensation, means the period beginning on the day the worker becomes entitled to weekly compensation and ending—

- (a) if the contract period ends, or would end, before the end of 6 months after the day the worker becomes entitled to weekly compensation—at the end of the contract period; or
- (b) in any other case—6 months after the day the worker becomes entitled to weekly compensation.

107 Payment of cost of medical treatment and rehabilitation services for injured worker

- (1) The worker's personal injury plan may provide for the insurer to pay the following costs:
 - (a) the cost of any medical treatment for the workplace injury provided to the worker by the nominated treating doctor if the nominated treating doctor is prepared to take part in the arrangements under the plan;

- (b) the cost of other medical treatment described in the plan that is provided to the worker for the workplace injury;
- (c) the cost of any rehabilitation services (including, if necessary, vocational rehabilitation) provided to the worker under the plan.

Examples of other medical treatment for par (b)

Treatment may be identified by reference to factors like the kind of medical treatment, the identity of the health care professional who provides the medical treatment, and the circumstances in which the medical treatment is provided.

- (2) For a payment under subsection (1), it does not matter that the worker has not made a claim for compensation, that the insurer has not accepted liability for the injury or if the insurer disputes liability for the injury.
- (3) If the insurer makes the payments in relation to the injury and another insurer (the *other insurer*) or another employer (the *other employer*) accepts liability to pay compensation to the worker in relation to the injury, the insurer is entitled to recover the costs (to the extent that compensation is payable under this Act in relation to the costs) as a debt from the other insurer or other employer.
- (4) An amount recoverable under subsection (3) is taken to be payable by the other insurer or other employer as compensation to the injured worker.

108 Second injury arrangements

(1) Arrangements may be entered into under this section to encourage the employment of injured workers by providing financial incentives to their employers in relation to insurance liabilities arising from further injuries to the workers.

- (2) An insurer who is liable to pay compensation to an injured worker may enter into an arrangement with a new employer (the *new employer*) of the injured worker providing for either or both of the following:
 - (a) for the insurer to indemnify the new employer in relation to the employer's liability to pay compensation to the injured worker under this Act;
 - (b) for the insurer to pay a wage subsidy to the new employer in relation to the worker's employment.
- (3) An arrangement under this section—
 - (a) applies for 6 months or, if a period is stated in the arrangement, that period; and
 - (b) if it provides for an indemnity—applies to all injuries or only to the injuries stated in the indemnity arrangement; and
 - (c) is subject to the conditions the insurer decides and the new employer agrees to.
- (4) A claim for compensation for an injury to the worker to which an indemnity under this section applies is excluded from the claims experience of the new employer in working out the premium payable by the new employer for an insurance policy.
- (5) This section applies only in relation to licensed insurers.

109 Workplace rehabilitation

(1) An employer must establish and maintain a return-to-work program that complies with subsection (3).

Maximum penalty: 10 penalty units.

- (2) An employer must display or notify a return-to-work program that complies with subsection (3) at each place of work of the workers to whom the program relates or may relate.
 - Maximum penalty: 10 penalty units.
- (3) A return-to-work program must—
 - (a) provide policies and procedures for the rehabilitation (including, if necessary, vocational rehabilitation) of injured workers of the employer; and
 - (b) be consistent with the injury management program of the employer's insurer; and
 - (c) be established in accordance with any guidelines issued by the Minister under section 110; and
 - (d) be developed in consultation with—
 - (i) the workers to whom it relates, or may relate; and
 - (ii) any industrial union of workers representing the workers; and
 - (iii) an approved rehabilitation provider.
- (4) To remove any doubt, subsection (3) (d) does not limit the people the employer may consult when developing the return-to-work program.
- (5) Subsection (1) does not apply if—
 - (a) the employer is part of a group of employers that has jointly established a single return-to-work program for each member of the group; and
 - (c) the employers are authorised in writing to do this by the Minister; and
 - (b) the return-to-work program complies with subsection (3).

- (6) This section does not apply to a non-business employer.
- (7) An offence against this section is a strict liability offence.

110 Return-to-work guidelines

- (1) The Minister may issue guidelines for the establishment of return-to-work programs.
- (2) Guidelines are a disallowable instrument.
 - *Note* A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.
- (3) In deciding guidelines for this section, the Minister may consult with the entities the Minister considers appropriate.

Part 5.5A Obligations in relation to LTCS participants

110A LTCS participants—provision of information about assessment of treatment and care needs

- (1) This section applies if—
 - (a) an injured worker is a participant in the LTCS scheme in relation to a workplace injury for which an insurer is, or may be, liable to pay compensation; and
 - (b) the LTCS commissioner gives the insurer a copy of the assessment of the injured worker's treatment and care needs for the workplace injury under the LTCS Act, section 23 (Assessment of participant's treatment and care needs).

Note LTCS Act—see the dictionary.

LTCS scheme—see the LTCS Act, dictionary.

Participant, in the LTCS scheme—see the LTCS Act, dictionary.

- (2) The insurer must give the employer and injured worker a statement to the effect that the worker's entitlement to weekly compensation may stop if the worker unreasonably fails to comply with the requirements of the assessment under the LTCS Act, section 23.
 - Note 1 The injured worker also has an obligation to comply with any reasonable request the LTCS commissioner makes in relation to an assessment of the injured worker's treatment and care needs, including a request that the injured worker undergo an examination by a health practitioner (see LTCS Act, s 26).
 - Note 2 The LTCS commission may exchange information about a LTCS participant's treatment and care needs with the participant's employer in certain circumstances (see LTCS Act, s 94).

Part 5.6 Compliance with ch 5

111 Obligation of Minister

The Minister must monitor compliance by insurers with the requirements of this chapter.

112 Compliance by insurers, including DI fund

- (1) It is a condition of an insurer's approval that the insurer must comply with the requirements of this chapter.
- (2) If, for this chapter, the insurer in relation to an injured worker's injury is the DI fund, the DI fund manager must comply with the requirements of this chapter applying to the fund.
- (3) Without limiting subsection (2), the DI fund manager must comply with the requirements of this chapter applying to the DI fund as insurer in relation to an injured worker's injury if the manager—
 - (a) receives a copy of the injury notice for the worker in relation to the injury under section 94A (Uninsured employer to give DI fund manager injury notice etc), section 94B (Liquidator to give DI fund manager injury notice etc) or section 94C (Injured workers of uninsured employers may give DI fund manager injury notice); or
 - (b) is otherwise satisfied that it is reasonably likely that there is no compulsory insurance policy in force that applies to the worker in relation to the injury.

Example

Melissa suffers a workplace injury while working for Joe. Joe does not have a compulsory insurance policy and gives the DI fund manager a copy of the injury notice. The DI fund manager must comply with the requirements of an insurer under this chapter in relation to Melissa's injury.

113 Compliance by workers

- (1) A worker is not entitled to weekly compensation for a period when the worker unreasonably—
 - (a) contravenes a requirement under this chapter (including under the worker's personal injury plan) after being asked in writing by the insurer to comply with the requirement; or
 - (b) fails to take part in or make a reasonable effort to take part in vocational rehabilitation or a return-to-work program; or
 - (c) fails to attend an assessment of the worker's employment prospects; or
 - (d) fails to attend a medical assessment of the worker's injury; or
 - (e) fails to undertake suitable alternative duties (if any) provided by the employer; or
 - (f) fails to take up an offer of suitable work for which the worker is qualified and that the worker can perform.
- (2) A worker's entitlement to weekly compensation does not stop under this section until 2 weeks after the day, or latest day, the insurer gives written notice to the worker and to the regulator that the compensation will stop.
- (3) The notice must be accompanied by a statement of the reasons for the entitlement stopping and the action that the insurer considers the worker must take to be entitled to the continuation, or resumption, of weekly compensation.
- (4) The resumption of weekly compensation does not entitle the worker to weekly compensation for the period when the worker had no entitlement to weekly compensation.

114 Unreasonableness in stopping payment

- (1) This section applies if an insurer gives the worker and regulator notice under section 113 and stops the worker's weekly compensation.
- (2) If the regulator considers that stopping the weekly compensation may have been unreasonable, the regulator may do either or both of the following:
 - (a) ask the insurer, in writing, for further information about the stoppage;
 - (b) direct the insurer, in writing, not to stop paying the weekly compensation, or to continue to pay the weekly compensation, for a stated time that is not longer than 1 month.
- (3) If the regulator considers that stopping payment of the weekly compensation is unreasonable, the regulator may—
 - (a) tell the insurer so in writing; and
 - (b) direct the insurer, in writing, not to stop paying the weekly compensation, or to continue to pay the weekly compensation until the regulator otherwise directs or the claim is settled or decided.
- (4) The insurer must not contravene a direction under this section.

Maximum penalty: 10 penalty units.

(5) An offence against this section is a strict liability offence.

115 Liability not affected

None of the following things done by an insurer or employer is an admission of liability by the insurer or employer under this Act or independently of this Act:

(a) anything done under or for an injury management program or personal injury plan;

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Injury management process Compliance with ch 5

Section 115

(b) anything done in relation to the assessment of an injured worker for rehabilitation services or employment or the provision or arrangement of services or other measures for the rehabilitation or suitable employment of injured workers (whether done under a return-to-work program or otherwise).

Chapter 6 Claims

Part 6.1 Making claims

116 Making claim for compensation

- (1) A worker may claim compensation under this Act.
- (2) A claim for weekly compensation must be accompanied by a medical certificate from—
 - (a) for a claim that relates to an imminently fatal asbestos-related disease—a doctor prescribed by regulation; or
 - (b) for any other claim—a doctor.
- (3) Failure to make a claim under this Act does not prevent the recovery of compensation if it is found that the failure was caused by ignorance, mistake or other reasonable cause.

117 Claim for property loss or damage

- (1) This section applies to the loss of, or damage to, property because of a compensable injury.
- (2) The details required to be given in the claim in relation to the loss or damage are details that adequately identify the property and how it was lost or damaged.

118 Medical certificates and claims for compensation

(1) To the extent that information or material has been given in the course of the making of a claim for compensation for an injury, it is not necessary to give the information or material when making any further claim for compensation in relation to the same injury.

- (2) A medical certificate required to accompany a claim for weekly compensation must—
 - (a) comply with the requirements for medical assessments prescribed by regulation; and
 - (b) include a statement of the doctor's assessment of whether the worker's condition is consistent with the worker's employment being a substantial contributing factor to the injury.

119 No compliant certificate with claim

- (1) This section applies if a claim is deficient because section 118 (2) has not been complied with.
- (2) If the insurer (or licensed self-insurer) tells the worker in writing about the deficiency (including details of what is required to comply with section 118 (2)) as soon as possible (but in any case within 72 hours) after receiving the claim, the claim is not considered to have been made until section 118 (2) is complied with.
- (3) However, if the insurer (or licensed self-insurer) does not tell the worker in writing about the deficiency (including details of what is required to comply with section 118 (2)) within 72 hours after receiving the claim, the claim is taken to comply with section 118 (2).
- (4) Subsection (2) does not apply if the insurer (or licensed self-insurer) waives the requirement for the claim to comply with section 118 (2).
- (5) In this section:

insurer, in relation to a claim, means—

- (a) for a claim that relates to an imminently fatal asbestos-related disease—the DI fund; or
- (b) for any other claim—the licensed insurer liable to indemnify the employer for the claim.

120 Time for taking proceedings generally

- (1) A proceeding for the recovery of compensation for an injury may continue only if—
 - (a) notice of the injury (an *injury notice*) was given as soon as practicable after the injury happened, and before the worker voluntarily left the employment in which the worker was injured; and
 - (b) the claim for compensation was made—
 - (i) within 3 years after the injury happened; or
 - (ii) if the worker was not aware of the injury when it happened—within 3 years after the worker became aware of the injury; or
 - (iii) if the worker dies—within 3 years after the claimant became aware of the death.
- (2) However, a proceeding for the recovery of compensation for an injury may also continue if—
 - (a) the Magistrates Court allows the proceeding to be maintained under section 120A (Proceedings on late claims); or
 - (b) the proceeding may be maintained under section 124 (No notice or defective or inaccurate notice).

Note An injured worker may give notice of an injury by making an entry in a register of injuries (see s 92).

120A Proceedings on late claims

(1) A person may apply to the Magistrates Court to allow a proceeding for the recovery of compensation to be maintained.

Note Section 120 (2) allows the proceeding to be continued even if the claim was made after the end of the time periods set out in s 120 (1), if the Magistrates Court allows it to be maintained under this section.

- (2) The Magistrates Court may allow the application if the court considers that it is just and reasonable to allow the proceeding to be maintained.
- (3) Before making a decision about whether to allow the application, the Magistrates Court may hear anyone likely to be affected by the proceeding if the court considers it appropriate.
- (4) In considering whether to allow the application, the Magistrates Court must have regard to all the circumstances of the case, including the following:
 - (a) the length of and reasons for the delay in making the claim;
 - (b) the extent to which, having regard to the delay, there is or is likely to be prejudice to the employer;
 - (c) the conduct of the employer and the employer's licensed insurer after the cause of action accrued to the claimant, including any steps taken by the employer or the employer's insurer to make available to the claimant ways of working out facts that were or might have been relevant to the cause of action;
 - (d) the duration of any disability of the worker arising at the time of or after the injury giving rise to the claim;
 - (e) the extent to which the claimant acted promptly and reasonably once the claimant knew that the injury to, or death of, the worker could be capable at that time of giving rise to a claim for compensation;
 - (f) any steps taken by the claimant to obtain medical, legal or other expert advice and the nature of any advice received.

(5) In this section:

claimant, if the claim is made by a person other than the worker, includes the worker.

121 Time for making claim under pt 4.4

- (1) A claim for compensation payable under part 4.4 (Compensation for permanent injuries) in relation to an injury may not be made earlier than 2 years after the injury.
- (2) However, the claim may be made earlier than 2 years after the injury if—
 - (a) the injury is an imminently fatal asbestos-related disease; or
 - (b) the injury has stabilised; or
 - (c) in any other case—the Magistrates Court allows the claim to be made.
- (3) The Magistrates Court may allow the claim to be made earlier than 2 years after the injury only if satisfied that an early application is justified by the severity of the injury or the prospect of the worker's imminent death.
- (4) The worker's injury is taken to have stabilised if—
 - (a) the worker has returned to work for the worker's pre-incapacity weekly hours (the *previous work hours*) or longer; and
 - (b) the worker has been working at least the previous work hours for at least 3 months.
- (5) However, the worker's injury may have stabilised even if the worker has not returned to work.

122 When is a claim made?

- (1) A claim is made on the day the claim is given to—
 - (a) for a claim that relates to an imminently fatal asbestos-related disease—the insurer; or
 - (b) for any other claim—the employer or the insurer.

Note Payment of weekly compensation begins when the worker gives notice of the injury to the employer (see s 38).

- (2) If a claim mentioned in subsection (1) (b) is given to the employer and insurer on different days, the claim is made on the day the claim is given to the first of them.
- (3) In this section:

insurer, in relation to a claim, means—

- (a) for a claim that relates to an imminently fatal asbestos-related disease—the DI fund; or
- (b) for any other claim—the licensed insurer liable to indemnify the employer for the claim.

123 Injury notice

- (1) An injury notice must contain—
 - (a) the name and address of the injured worker; and
 - (b) the cause of the injury (in ordinary language); and
 - (c) the date and time the injury happened.
- (2) The notice must be served on—
 - (a) if the notice relates to an imminently fatal asbestos-related disease—the DI fund manager; or
 - (b) if the notice relates to any other injury—the employer or, if the worker has more than 1 employer, the employer responsible for the workplace where the injury happened.

124 No notice or defective or inaccurate notice

- (1) This section applies to a claim in relation to which—
 - (a) an injury notice has not been given; or
 - (b) the injury notice given was defective or inaccurate.

- (2) A proceeding may be maintained in relation to the claim if the Magistrates Court or arbitrator finds, in the proceeding for the claim, that—
 - (a) the employer's defence is not, or would not be, prejudiced by the lack of notice, or defect or inaccuracy in the notice, if a notice or amended notice were given and the hearing postponed; or
 - (b) the lack of notice, or defect or inaccuracy in the notice, was caused by ignorance, mistake or another reasonable cause.

125 Admissibility of statements by injured workers

- (1) A written statement in relation to a worker's injury given by the worker to the employer is admissible in evidence on behalf of the employer in a proceeding under this Act only if the employer gives the worker a copy of the statement at least 14 days before the proceeding is heard.
- (2) In this section:

employer includes the employer's insurer.

insurer means—

- (a) a licensed insurer; or
- (b) the DI fund.

126 Action by employer in relation to claims

(1) If an employer receives a claim for compensation or another document in relation to a claim, the employer must, within 7 days after the day the employer receives the claim or document, forward it to the liable insurer

Maximum penalty: 50 penalty units.

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- (2) If the employer receives a written request from the liable insurer for further stated information in relation to the claim or document, the employer must, within 7 days after the day the employer receives the request—
 - (a) give the insurer the requested information; or
 - (b) if the information is not in the employer's possession and is not reasonably obtainable by the employer—tell the insurer that in writing.

Maximum penalty: 50 penalty units.

(3) If an employer has received an amount of compensation under this Act from an insurer, the employer must immediately pay the amount to the person entitled to the compensation.

Maximum penalty: 50 penalty units.

- (4) This section does not apply to an employer who is a licensed self-insurer.
- (5) An offence against this section is a strict liability offence.
- (6) In this section:

liable insurer, in relation to a claim for compensation or another document in relation to a claim, means—

- (a) for a claim that relates to an imminently fatal asbestos-related disease—the DI fund; or
- (b) for any other claim—the insurer liable to indemnify the employer for the claim.

126A Lump sum claims—notice by licensed insurers about double compensation etc

- (1) This section applies if a licensed insurer is given notice by an employer of a lump sum claim, and the insurer is liable to indemnify the employer for the claim.
- (2) After the licensed insurer is given notice of the claim, the insurer must give the claimant information explaining the requirements of the following sections for the repayment of compensation together with the employer's legal costs as between party and party:
 - section 36F (No ACT compensation if external compensation received)
 - section 183 (Remedies against employer and stranger)
 - section 184 (No compensation if damages received)
 - section 185 (Dependants recovering damages and not claiming compensation).

Maximum penalty: 50 penalty units.

Note If a form is approved under s 222 for information to be given by a licensed insurer under this provision, the form must be used.

(3) An offence against this section is a strict liability offence.

Part 6.2 Time for accepting or rejecting claims

127 Meaning of *insurer* and *given* to insurer for pt 6.2

(1) In this part:

insurer, in relation to a claim against an employer, means—

- (a) the licensed insurer with whom the employer has or had a compulsory insurance policy that applies to the claim; or
- (b) if the employer was a licensed self-insurer when the injury happened—the employer; or
- (c) the DI fund, if—
 - (i) when the injury happened, the employer was not a licensed self-insurer, and the employer has or had no compulsory insurance policy that applies to the claim; or
 - (ii) when the injury happened, the employer was not a licensed self-insurer, and the employer has or had a compulsory insurance policy that applies to the claim but the policy was issued by a licensed insurer that has been wound up or is being wound up; or
 - (iii) the claim relates to an imminently fatal asbestos-related disease.
- (2) For this part, a claim is *given* to the insurer if the claim is given to the licensed insurer or the licensed insurer is given notice of the claim by the employer or worker.

128 Claim—injury other than imminently fatal asbestos-related disease

- (1) This section applies to a claim for compensation in relation to an injury, other than an imminently fatal asbestos-related disease.
- (2) If, at the end of 28 days after the day the insurer receives the claim, the insurer has not decided to reject the claim—
 - (a) the insurer is taken to have accepted the claim; and
 - (b) any payment made by the insurer in relation to the claim is not recoverable.
- (3) However, subsection (2) (b) does not apply to a payment made by the DI fund.

128A Claim—imminently fatal asbestos-related disease

- (1) This section applies to a claim for compensation in relation to an imminently fatal asbestos-related disease.
- (2) If, at the end of 28 days after the day the insurer receives the claim, the insurer has not decided to reject the claim, the insurer must tell the worker—
 - (a) that the claim is still being considered by the insurer; and
 - (b) the reason why the claim is still under consideration.

129 Rejecting claims generally

- (1) An insurer rejects a claim for compensation under this Act by written notice given to the worker and, unless the insurer is a licensed self-insurer, the employer.
- (2) The claim is taken to be rejected when the notice is received by the worker and, unless the insurer is a licensed self-insurer, the employer.

- (3) If the worker and employer do not receive the notice on the same day, the notice is taken to have been given on the day the notice is received by the last of them.
- (4) The notice must include the reason the insurer is rejecting the claim.
- (5) If the insurer rejects the claim 28 days or later after the claim is given to the insurer, the notice must include a statement explaining why the insurer is rejecting the claim.

Note It is an offence to make a false or misleading statement, give false or misleading information or produce a false or misleading document (see Criminal Code, pt 3.4).

(6) For this section, a notice is taken not to contain the reason the insurer is rejecting the claim if it simply says the claim is being rejected for medical reasons without including the medical reasons.

130 Rejecting claim within 28 days

- (1) If the insurer rejects the worker's claim within 28 days after the claim is given to the insurer, the insurer may—
 - (a) stop weekly compensation to the worker 2 weeks after the insurer rejects the claim; and
 - (b) stop payment of compensation mentioned under part 4.5 (Compensation for medical treatment, damage and other costs) for costs incurred 2 weeks or later after the insurer rejects the claim.

Note For how a claim is rejected, see s 129.

(2) However, the insurer is not entitled to reject the worker's claim within 28 days after the claim is given to the insurer only on the ground that the insurer has not had time to adequately assess the claim.

131 Rejecting claims after 28 days but within 1 year

If the insurer rejects the worker's claim 28 days or later, but not later than 1 year, after the claim is given to the insurer, the insurer may—

- (a) stop weekly compensation to the worker 8 weeks after the insurer rejects the claim; and
- (b) stop payment of compensation mentioned under part 4.5 (Compensation for medical treatment, damage and other costs) for costs incurred 8 weeks or later after the claim is rejected.

Note For how a claim is rejected, see s 129.

132 Rejecting claims from 1 year

- (1) An insurer may reject a worker's claim for compensation 1 year or later after the claim is given to the insurer only with the leave of the Magistrates Court.
- (2) If the Magistrates Court gives leave to the insurer to reject the worker's claim for compensation—
 - (a) the insurer need not give the worker notice of the rejection if the worker, or the worker's lawyer, is present when the court gives leave for the insurer to reject the claim; and
 - (b) the insurer may stop paying weekly compensation—
 - (i) on the day stated by the court in the order giving leave to the insurer to reject the claim; or
 - (ii) 8 weeks after the worker gets notice of the rejection if no day is stated in the order.

Chapter 6 Part 6.2 Claims

Time for accepting or rejecting claims

Section 132

- (3) For this section, the worker gets notice of the rejection—
 - (a) if the worker is present when the court gives leave to the insurer to reject the claim—on the day the court gives leave; or
 - (b) when the worker receives notice of the rejection from the insurer.

Note Court approved termination is dealt with under the regulations.

Part 6.3 Liability on claims

133 Without prejudice payments

A licensed insurer may, when making a payment in relation to a claim, state that the payment is not an admission of liability for the injury in relation to which it is made.

134 Liability on claim not accepted or rejected

- (1) If a worker makes a claim in relation to an injury for which compensation is payable under this Act, the licensed insurer is liable to pay weekly compensation and compensation for costs in relation to the injury until the insurer rejects or settles the claim.
- (2) A payment under this section may not be recovered by the licensed insurer.
- (3) However, the licensed insurer is not liable to pay, and may recover from the employer, an amount that the employer is liable to pay under section 95 (What if employer does not give notice of injury within time?).
- (4) Subsection (3) does not affect a licensed self-insurer's liability in relation to the claim.
- (5) In this section:

compensation for costs, for a worker, means compensation to which the worker is entitled under part 4.5 (Compensation for medical treatment, damage and other costs).

135 Order for refund of overpayments of compensation

(1) This section applies to a payment to a person (an *overpayment*), purportedly made because of an obligation arising under this Act, to which the person is not entitled under this Act.

- (2) However, this section only applies if the court before which a proceeding for a Criminal Code offence is taken against the person is satisfied on the balance of probabilities that the person has received an overpayment as a result or partly as a result of the act or omission that is alleged to constitute the offence.
- (3) The court may, on the application of the employer or licensed insurer (whether or not the person is convicted of the offence), order the person to refund the amount of the overpayment to the person who made the payment.
- (4) Unless the compensation is payable under an award of a court, the refund may be deducted from future payments of compensation in accordance with the terms of the court's order.
- (5) Subsection (3) applies even if the compensation is weekly compensation that is payable under a direction of a conciliator.
- (6) This section does not limit any other right of recovery that a person may have against someone else in relation to an overpayment to the other person.
- (7) In this section:

Criminal Code offence means an offence against the Criminal Code that relates to—

- (a) completing, keeping or giving a document under or in relation to this Act; or
- (b) a requirement that a document be completed, kept or given, under or in relation to this Act.

Part 6.4 Settlement of claims

136 Contracting out

- (1) A provision of an agreement or other document is void if it purports to exclude, or limit in any way—
 - (a) a right given to a worker under this Act; or
 - (b) a liability imposed on an employer under this Act.
- (2) However, this section does not apply to an agreement by a worker to commute an existing right to compensation for a compensable injury under this part.

137 How worker may commute rights

- (1) A worker may commute, in writing, an existing right to compensation for a compensable injury on payment of an amount by the licensed insurer (the *settlement*).
- (2) The settlement may include a payout of 1 or more of the following:
 - (a) the worker's entitlement to weekly compensation under part 4.3;
 - (b) the worker's entitlement to compensation for permanent injuries under part 4.4;
 - (c) the worker's entitlement to compensation for medical treatment, damage and other costs under part 4.5;
 - (d) an entitlement of the worker to compensation apart from this Act;
 - (e) any other amount.

(3) However, if the worker is eligible to participate in the LTCS scheme, before the worker commutes an existing right to compensation under subsection (1), the worker must apply under the LTCS Act to participate in the LTCS scheme.

Note LTCS Act—see the dictionary.

LTCS scheme—see the LTCS Act, dictionary.

138 No assignment etc of payout of weekly compensation

A payout of weekly compensation may not—

- (a) be assigned, charged or attached; and
- (b) pass to anyone else by operation of law; and
- (c) have a claim set off against it.

Chapter 7 Vocational rehabilitation

139 Meaning of approved rehabilitation provider etc

(1) In this Act:

approved rehabilitation provider means a person approved by the Minister to provide vocational rehabilitation for this Act.

- (2) A regulation may make provision about the approval of rehabilitation providers, including—
 - (a) the criteria for approving rehabilitation providers; and
 - (b) the conditions that may be imposed on the approval of rehabilitation providers; and
 - (c) how and why the approval of an approved rehabilitation provider may be revoked or suspended.
- (3) The regulations may also make provision about the role of approved rehabilitation providers under this Act.
- (4) The Legislation Act, section 47 (3) does not apply to a regulation under this section.

140 Meaning of vocational rehabilitation

(1) In this chapter:

vocational rehabilitation, for the injured worker, means—

- (a) the assessment of the needs of the worker for paragraph (b); and
- (b) the provision of appropriate, adequate and timely services for the worker aimed at maintaining the worker in suitable employment or returning the worker to suitable employment.
- (2) For the definition of *vocational rehabilitation*, services are taken to be appropriate, adequate and timely if they are in accordance with a relevant protocol.

141 Meaning of *protocol* in ch 7 etc

(1) In this chapter:

protocol means a protocol about vocational rehabilitation approved under a regulation.

(2) A regulation may allow the Minister to approve a protocol about vocational rehabilitation.

142 Vocational rehabilitation

- (1) If the worker has a compensable injury, the employer must provide the worker with vocational rehabilitation in accordance with this Act.
 - Maximum penalty: 50 penalty units.
- (2) The provision of vocational rehabilitation to the worker is not taken to be an admission of liability for the worker's claim for compensation.
- (3) This section does not apply to a non-business employer.
- (4) Also, this section does not apply if the worker is a participant in the LTCS scheme.

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Note LTCS scheme—see the LTCS Act, dictionary.

Participant, in the LTCS scheme—see the LTCS Act, dictionary.
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- (5) A regulation may exempt employers from subsection (1), either completely or in prescribed circumstances.
- (6) An offence against this section is a strict liability offence.

142A Vocational rehabilitation—LTCS participants

- (1) An employer commits an offence if—
 - (a) a worker engaged by the employer is a participant in the LTCS scheme in relation to a workplace injury; and

- (b) the LTCS commissioner gives the employer a copy of the assessment of the worker's treatment and care needs for the workplace injury under the LTCS Act, section 23 (Assessment of participant's treatment and care needs); and
- (c) under the assessment, the employer is required to provide a service to assist the worker's return to work; and
- (d) the employer fails to provide the service.

Maximum penalty: 50 penalty units.

Note Assessed treatment and care needs—see the LTCS Act, s 29.

LTCS scheme—see the LTCS Act, dictionary.

Participant, in the LTCS scheme—see the LTCS Act, dictionary.

(2) It is a defence to a prosecution for an offence against subsection (1) (d) if the defendant proves that the defendant had a reasonable excuse for failing to provide the service.

Note The defendant has a legal burden in relation to the matters mentioned in s (2) (see Criminal Code, s 59).

143 False representation of approval

A person must not pretend to be an approved rehabilitation provider.

Maximum penalty: 30 penalty units.

Insurance Insurance—general Interpretation

Section 143A

Chapter 8 Insurance

Part 8.1 Insurance—general

Division 8.1.1 Interpretation

143A Definitions

In this Act:

insurance service—an insurer provides an *insurance service* if, in the course of carrying on a business, the insurer indemnifies an employer for any liability of the employer, in relation to the employer's workers, under this Act.

insurer licence means a licence issued under section 145D.

licensed insurer means an insurer who holds an insurer licence.

licensed self-insurer means an employer who holds a self-insurer licence.

self-insurer licence means a licence issued under section 1450.

144 Meaning of compulsory insurance policy

(1) In this Act:

compulsory insurance policy, for the employer, means an insurance policy—

(a) for an unlimited amount for any liability of the employer under this Act, or independently of this Act (other than liability for assessed treatment and care needs of participants in the LTCS scheme), for an injury to, or the death of, each territory worker employed by the employer; and

- (b) that complies with this Act.
- *Note 1* If a form is approved under s 222 (Approved forms) for a compulsory insurance policy, the form must be used.
- Note 2 LTCS scheme—see the LTCS Act, dictionary.

 Participant, in the LTCS scheme—see the LTCS Act, dictionary.
- (2) Subject to section 147A (8) (Compulsory insurance—offences) and section 154 (Cover notes), a cover note may be a compulsory insurance policy.

Division 8.1.2 Licences—insurers

145 Requirement to hold insurer licence

An insurer must not provide an insurance service unless the insurer holds an insurer licence.

Note Section 145H makes it an offence to provide an insurance service without a licence.

145A Application for insurer licence

- (1) An insurer may apply to the regulator for an insurer licence.
- (2) The application must—
 - (a) be in writing; and
 - (b) comply with the requirements for the application.
 - Note 1 A regulation may prescribe how an insurer may apply for an insurer licence (see s 145J (a)).
 - Note 2 It is an offence to make a false or misleading statement, give false or misleading information or produce a false or misleading document (see Criminal Code, pt 3.4).

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Insurance Insurance—general Licences—insurers

Section 145B

145B Regulator may request more information

- (1) The regulator may, by written notice, require an applicant for an insurer licence to give the regulator information that the regulator reasonably needs to decide the application, within a stated time, at a stated place.
- (2) If the applicant does not comply with a requirement in the notice, the regulator may refuse to consider the application further.

145C Change of information must be provided

- (1) This section applies if the information in an application for an insurer licence changes before the application is decided.
- (2) The applicant must give the regulator written notice of the details of the change as soon as practicable.

145D Issue of insurer licence

- (1) If an insurer applies for an insurer licence, the regulator must, within a reasonable period—
 - (a) issue the licence; or
 - (b) refuse to issue the licence.
 - Note 1 A decision to refuse to issue a licence is a reviewable decision (see ch 12 and *Workers Compensation Regulation 2002*, sch 3, pt 3.1).
 - Note 2 A licence may be issued with a condition (see s 145E).
- (2) The regulator may issue the licence to the applicant, only if the regulator is satisfied that the applicant meets the criteria for issuing an insurer licence.
 - Note A regulation may prescribe the criteria for issuing an insurer licence (see s 145J (b)).

145E Insurer licence—conditions

- (1) An insurer licence includes—
 - (a) a condition that the licensee must comply with this Act; and
 - (b) a condition that the licensee must not contravene a protocol that relates to licensed insurers; and
 - (c) a condition that the licensee notify the regulator of any regulatory action taken against the licensee under a workers compensation law; and
 - (d) a regulator condition, if any; and
 - (e) any other condition prescribed by regulation.
- (2) A regulator condition may be included, in writing, on an insurer licence—
 - (a) when the licence is issued; or
 - (b) by amending the licence at any time.
- (3) The regulator may, at any time, amend or revoke a regulator condition included on an insurer licence.

Note A decision by the regulator under s (2) or (3) is a reviewable decision (see ch 12 and Workers Compensation Regulation 2002, sch 3, pt 3.1).

(4) If the regulator amends a licensed insurer's licence under subsection (2) or (3), the regulator must tell the licensed insurer about the amendment as soon as practicable, but not later than 30 days after the day the regulator decides the amendment.

145F Insurer licence—period

An insurer licence—

- (a) takes effect on the day stated in the licence; and
- (b) continues in force until it is cancelled or surrendered.

Insurance Insurance—general Licences—insurers

Section 145G

145G Insurer licence—surrender

- (1) A licensed insurer may surrender its insurer licence by giving written notice (a *surrender notice*) of the surrender to the regulator.
- (2) The surrender notice must be accompanied by—
 - (a) the insurer licence; or
 - (b) if the insurer licence has been lost, stolen or destroyed—a statement verifying that the licence has been lost, stolen or destroyed.
- (3) An insurer licence is taken to be cancelled if the licence is surrendered under this section.

145H Providing insurance services without insurer licence

- (1) A person commits an offence if the person—
 - (a) provides an insurance service; and
 - (b) does not hold an insurer licence.

Maximum penalty: 100 penalty units.

(2) A person commits an offence if the person falsely represents that the person holds an insurer licence.

Maximum penalty: 100 penalty units.

145I Breach of insurer licence condition

A person commits an offence if—

- (a) the person holds an insurer licence; and
- (b) the licence is subject to a condition; and
- (c) the person fails to comply with the condition.

Maximum penalty: 100 penalty units.

145J Regulations about insurer licences

A regulation may prescribe the following in relation to insurer licences:

- (a) how an insurer may apply for an insurer licence;
- (b) the criteria for issuing an insurer licence;
- (c) the conditions that may be imposed on an insurer licence;
- (d) the records to be kept by licensed insurers, to whom the records must be provided and the way to provide the records;
- (e) how insurance premium calculations by licensed insurers may be reviewed:
- (f) how licensed insurers' performance may be monitored and reviewed;
- (g) what and when licensed insurers must report to the regulator;
- (h) how and why an insurer licence may be suspended or cancelled.

Division 8.1.3 Licences—self-insurers

145K Requirement to hold self-insurer licence

An employer must hold a self-insurer licence unless the employer holds a compulsory insurance policy with a licensed insurer.

Note Section 145S makes it an offence to fail to hold a self-insurer licence if the employer does not hold a compulsory insurance policy with a licensed insurer.

145L Application for self-insurer licence

- (1) An employer may apply to the regulator for a self-insurer licence.
- (2) The application must—
 - (a) be in writing; and

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Insurance—general Licences—self-insurers

Section 145M

- (b) comply with the requirements for the application.
- Note 1 A regulation may prescribe how an employer may apply for a self-insurer licence (see s 145U (a)).
- Note 2 It is an offence to make a false or misleading statement, give false or misleading information or produce a false or misleading document (see Criminal Code, pt 3.4).

145M Regulator may request more information

- (1) The regulator may, by written notice, require an applicant for a self-insurer licence to give the regulator information that the regulator reasonably needs to decide the application, within a stated time, at a stated place.
- (2) If the applicant does not comply with a requirement in the notice, the regulator may refuse to consider the application further.

145N Change of information must be provided

- (1) This section applies if the information in an application for a self-insurer licence changes before the application is decided.
- (2) The applicant must give the regulator written notice of the details of the change as soon as practicable.

1450 Issue of self-insurer licence

- (1) If an employer applies for a self-insurer licence, the regulator must, within a reasonable period—
 - (a) issue the licence; or
 - (b) refuse to issue the licence.
 - Note 1 A decision to refuse to issue a self-insurer licence is a reviewable decision (see ch 12 and *Workers Compensation Regulation 2002*, sch 3, pt 3.1).
 - *Note 2* A licence may be issued with a condition (see s 145P).

(2) The regulator may issue the licence to the applicant, only if the regulator is satisfied that the applicant meets the criteria for issuing a self-insurer licence.

Note A regulation may prescribe the criteria for issuing a self-insurer licence (see s 145U (b)).

145P Self-insurer licence—conditions

- (1) A self-insurer licence includes—
 - (a) a condition that the licensee must comply with this Act; and
 - (b) a condition that the licensee must not contravene a protocol that relates to licensed self-insurers; and
 - (c) a condition that the licensee notify the regulator of any regulatory action taken against the licensee under a workers compensation law; and
 - (d) a regulator condition, if any; and
 - (e) any other condition prescribed by regulation.
- (2) A regulator condition may be included, in writing, on a self-insurer licence—
 - (a) when the licence is issued; or
 - (b) by amending the licence at any time.
- (3) The regulator may, at any time, amend or revoke a regulator condition included on a self-insurer licence.

Note A decision by the regulator under s (2) or (3) is a reviewable decision (see ch 12 and Workers Compensation Regulation 2002, sch 3, pt 3.1).

(4) If the regulator amends a licensed self-insurer's licence under subsection (2) or (3), the regulator must tell the licensed self-insurer about the amendment as soon as practicable, but not later than 30 days after the day the regulator decides the amendment.

Insurance

Insurance—general Licences—self-insurers

Section 145Q

145Q Self-insurer licence—period

A self-insurer licence—

- (a) takes effect on the day stated in the licence; and
- (b) continues in force until it is cancelled or surrendered.

145R Self-insurer licence—surrender

- (1) A licensed self-insurer may surrender its self-insurer licence by giving written notice (a *surrender notice*) of the surrender to the regulator.
- (2) The surrender notice must be accompanied by—
 - (a) the self-insurer licence; or
 - (b) if the self-insurer licence has been lost, stolen or destroyed—a statement verifying that the licence has been lost, stolen or destroyed.
- (3) A self-insurer licence is taken to be cancelled if the licence is surrendered under this section.

145S Failing to hold a self-insurer licence

- (1) A person commits an offence if the person—
 - (a) is an employer; and
 - (b) does not hold a compulsory insurance policy with a licensed insurer; and
 - (c) fails to hold a self-insurer licence.

Maximum penalty: 100 penalty units.

Note Section 147A requires an employer to maintain a compulsory insurance policy with a licensed insurer unless the employer is a licensed self-insurer.

- (2) A person commits an offence if the person—
 - (a) is an employer; and
 - (b) the person falsely represents that the person holds a self-insurer licence.

Maximum penalty: 100 penalty units.

145T Breach of self-insurer licence condition

A person commits an offence if—

- (a) the person is an employer; and
- (b) the person holds a self-insurer licence; and
- (c) the licence is subject to a condition; and
- (d) the person fails to comply with the condition.

Maximum penalty: 100 penalty units.

145U Regulations about self-insurer licences

A regulation may prescribe the following in relation to self-insurer licences:

- (a) how an employer may apply for a self-insurer licence;
- (b) the criteria to be considered by the regulator when deciding whether to issue a self-insurer licence to an employer;
- (c) the conditions that may be imposed on a self-insurer licence;
- (d) the records to be kept by licensed self-insurers, to whom the records must be provided and the way to provide the records;
- (e) how licensed self-insurers' performance may be monitored and reviewed;

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Licences—compliance and other requirements

Section 146

- (f) what and when licensed self-insurers must report to the regulator;
- (g) the suspension and cancellation of self-insurer licences.

Division 8.1.4 Licences—compliance and other requirements

146 Effect of cancellation or suspension of insurer licence

- (1) If the insurer licence of a licensed insurer is cancelled or suspended, section 147 (1) (which requires an employer to have a compulsory insurance policy) applies in relation to an insurance policy (a *pre-cancellation policy*) issued by the insurer when the insurer was licensed, or the licence was not suspended, as if the insurer were still licensed or the licence not suspended.
- (2) The cancellation or suspension of the licence of an insurer does not—
 - (a) annul a pre-cancellation policy; or
 - (b) affect the liability of the insurer under a pre-cancellation policy; or
 - (c) affect the liability of the insurer under section 168A (Contributions to DI fund by licensed insurers and licensed self-insurers).
- (3) However, a regulation may prescribe circumstances in which (and when) a pre-cancellation policy issued by an insurer whose licence has been cancelled stops being a compulsory insurance policy.

146A Effect of cancellation or suspension of self-insurer licence

(1) The regulator may assign any rights, obligations and liabilities acquired, accrued or incurred by a former self-insurer, in relation to an injured worker, to the DI fund.

- (2) The DI fund is taken to be the licensed insurer for the former self-insurer in relation to a claim by an injured worker.
- (3) Unless otherwise directed by the regulator, if an assignment is made, the former self-insurer must not fail to provide the DI fund with copies of all documents relating to a claim by an injured worker.

Maximum penalty: 50 penalty units.

(4) In this section:

former self-insurer means a licensed self-insurer whose self-insurer licence, is cancelled or suspended, or ends.

147 Compulsory insurance—employers

- (1) This section applies if an employer does not hold a compulsory insurance policy issued by a licensed insurer.
- (2) However, this section does not apply to an employer if—
 - (a) the employer is a licensed self-insurer; or
 - (b) liability to pay compensation to a worker would be shared between the employer and either another employer or other employers and any of the other employers maintains a joint compulsory insurance policy for the joint liability of all the employers; or
 - (c) the employer provides evidence that a State was the Territory or State of connection for the employment under the law of a State corresponding to part 4.2A (Employment connection with ACT or State); or
 - (d) the employer had insurance, or was registered, as required under the law of the State in relation to liability for workers compensation under the law of the State.

Note State includes the Northern Territory (see Legislation Act, dict, pt 1).

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Licences—compliance and other requirements

Section 147A

- (3) The regulator may give the employer a notice (a *default notice*) requiring the employer to obtain a compulsory insurance policy within 10 business days after the day the notice is given to the employer (the *compliance period*).
- (4) If, at the end of the compliance period, the employer does not hold a compulsory insurance policy issued by a licensed insurer, the regulator may give the employer another notice (a **2nd default notice**) requiring the employer to obtain a compulsory insurance policy within 10 business days after the day the notice is given to the employer (the **2nd compliance period**).
- (5) If, at the end of the 2nd compliance period, the employer does not hold a compulsory insurance policy issued by a licensed insurer, the regulator may give the employer a notice (a *cease business notice*) directing the employer to stop conducting the employer's business.
- (6) A cease business notice takes effect 5 business days after the day the notice is given to the employer.

147A Compulsory insurance—offences

- (1) This section applies to an employer to whom section 147 applies.
- (2) An employer commits an offence if the employer fails to maintain a compulsory insurance policy with a licensed insurer.

Maximum penalty: 50 penalty units.

- (3) An employer commits an offence if—
 - (a) the employer is given a default notice; and
 - (b) at the end of the compliance period, the employer does not hold a compulsory insurance policy issued by a licensed insurer.

Maximum penalty: 50 penalty units.

- (4) An employer commits an offence if—
 - (a) the employer is given a 2nd default notice; and
 - (b) at the end of the 2nd compliance period, the employer does not hold a compulsory insurance policy issued by a licensed insurer.

Maximum penalty: 250 penalty units.

- (5) An employer commits an offence if—
 - (a) the employer is given a cease business order; and
 - (b) the employer does not cease to conduct the employer's business.

Maximum penalty: 250 penalty units.

- (6) An offence against subsection (2) or (3) is a strict liability offence.
- (7) Subsections (3), (4) and (5) do not apply to a non-business employer.
- (8) A cover note may be a compulsory insurance policy only if it is in force for not longer than 30 days and—
 - (a) the employer maintained a compulsory insurance policy (other than a cover note) immediately before maintaining the cover note; or
 - (b) the employer was not an employer immediately before beginning to maintain the cover note; or
 - (c) the employer was a licensed self-insurer immediately before beginning to maintain the cover note.
- (9) In this section:

2nd compliance period—see section 147 (4).

2nd default notice—see section 147 (4).

cease business notice—see section 147 (5).

compliance period—see section 147 (3).

default notice—see section 147 (3).

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Insurance—general

Licences—compliance and other requirements

Section 147B

147B Compulsory insurance policy—minimum premium following default notice

- (1) This section applies if an employer—
 - (a) receives a default notice, or a 2nd default notice, under section 147; and
 - (b) subsequently obtains a compulsory insurance policy issued by a licensed insurer.
- (2) The employer must pay to the licensed insurer at least 30% of the premium payable for the policy at the time the policy is issued.

148 Effect of failure to maintain compulsory insurance on other insurance etc for this Act

- (1) This section applies if—
 - (a) an employer, other than a licensed self-insurer, fails to maintain a compulsory insurance policy; but
 - (b) the employer maintains an insurance policy (the *other policy*) for a liability under this Act.
- (2) The failure to maintain a compulsory insurance policy does not—
 - (a) annul the other policy; or
 - (b) affect the liability of the insurer under the other policy; or
 - (c) affect the liability of the insurer under section 168A (Contributions to DI fund by licensed insurers and licensed self-insurers).

149 Failure to maintain compulsory insurance policy— regulator entitled to recovery amount

- (1) This section applies if an employer fails to maintain a compulsory insurance policy with a licensed insurer.
- (2) However, this section does not apply if—
 - (a) the employer provides evidence that a State was the Territory or State of connection for the employment under the law of a State corresponding to part 4.2A (Employment connection with ACT or State); or
 - (b) the employer had insurance, or was registered, as required under a law of the State in relation to liability for workers compensation under the law of the State.

Note State includes the Northern Territory (see Legislation Act, dict, pt 1).

- (3) The regulator must determine the amount of the premium (the *avoided premium*) that would have been payable to a licensed insurer if the employer had maintained a compulsory insurance policy for the period that the employer was not insured (up to a maximum of 5 years).
- (4) The regulator may determine an amount (a *recovery amount*) for the employer equal to—
 - (a) double the avoided premium; or
 - (b) an amount less than double the avoided premium, having regard to the following:
 - (i) whether payment of the recovery amount would cause the employer financial hardship;
 - (ii) whether payment of the recovery amount would cause the employer to stop conducting the employer's business in the ACT;
 - (iii) whether the regulator is likely to recover the amount;

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- (iv) the employer's history of compliance with its obligations under this Act;
- (v) whether the employer's failure to maintain a compulsory insurance policy was based on independent advice;
- (vi) steps the employer has taken to obtain a compulsory insurance policy;
- (vii) any other material provided by the employer;
- (viii) any other relevant factor.

Note The regulator's determination under s (4) is an internally reviewable decision (see *Workers Compensation Regulation 2002*, sch 3, pt 3.2).

- (5) If the regulator determines a recovery amount for an employer, the regulator must give the employer written notice of—
 - (a) the avoided premium; and
 - (b) the recovery amount.
- (6) The regulator may recover the recovery amount as a debt owing by the employer to the DI fund.
- (7) In this section:

employer does not include a licensed self-insurer or non-business employer.

150 Evidence of maintenance of compulsory insurance policy

A statement in an information against an employer that there was no compulsory insurance policy issued by a licensed insurer in favour of the employer in force on a stated date, or during a stated period, is evidence of the matter.

152 Compulsory insurance—licensed insurers

(1) A licensed insurer must not refuse to issue a compulsory insurance policy required by an employer for section 147A (2) (Compulsory insurance—offences).

Maximum penalty: 100 penalty units.

(2) A licensed insurer must not issue an insurance policy required by an employer for section 147A (2) that is not a compulsory insurance policy.

Maximum penalty: 100 penalty units.

- (3) Subsection (1) does not apply in relation to a compulsory insurance policy if—
 - (a) the employer has not paid for the policy; or
 - (b) the employer has not given the insurer information reasonably requested by the licensed insurer in relation to the policy.
- (4) An offence against this section is a strict liability offence.

153 Cancellation

(1) A licensed insurer must not cancel a compulsory insurance policy otherwise than in accordance with a protocol about cancellation.

Maximum penalty: 50 penalty units.

(2) An offence against this section is a strict liability offence.

154 Cover notes

(1) A licensed insurer must not issue a cover note that is a compulsory insurance policy for longer than 30 days.

Maximum penalty: 10 penalty units.

(2) An offence against this section is a strict liability offence.

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Section 155

(3) A licensed insurer may recover a premium from an employer for a period for which a cover note from the licensed insurer was in force in relation to the employer if, at the end of the cover note, the employer does not obtain a policy of insurance from the licensed insurer.

155 Information for licensed insurers on application for issue or renewal of policies

- (1) This section applies if an employer applies to a licensed insurer for the issue or renewal of a compulsory insurance policy for a particular period (the *proposed insurance period*).
- (2) The employer must give the licensed insurer, with the application, a statement of the employer's estimate for the proposed insurance period.

Maximum penalty: 250 penalty units, imprisonment for 2 years or both.

Note One or more fault elements apply to this offence (see Criminal Code, s 22).

(3) The employer must give the licensed insurer, with the application, a statement of the employer's estimate for the proposed insurance period.

Maximum penalty: 50 penalty units.

- (4) A statement of the employer's estimate may be signed for the employer by any of the following:
 - (a) if the employer is a corporation—an officer of the corporation authorised to sign the statement;
 - (b) in any other case—an owner of the employer's business.
- (5) An offence against subsection (3) is a strict liability offence.
- (6) This section does not apply to a non-business employer.

(7) In this section:

employer's estimate, for a proposed insurance period, means the employer's estimate of the following:

- (a) the number of territory workers in each determined category to be employed by the employer in the period;
- (b) the total wages to be paid to territory workers in each determined category in the period;
- (c) the number of paid and unpaid workers who will work for the employer in the period;
- (d) the approximate amount of time each paid and unpaid worker will work for the employer in the period.

155A Employer must notify licensed insurer of certain corrected information

- (1) This section applies if an employer has provided an employer's estimate under section 155 to a licensed insurer for a particular period.
- (2) If the employer's estimate of total wages understates the correct amount by more than \$500 000 for the period, the employer must tell the licensed insurer that information provided in the employer's estimate is incorrect.
- (3) The employer must—
 - (a) tell the licensed insurer about the incorrect information mentioned in subsection (2)—
 - (i) in writing; and
 - (ii) within 30 days after the day the employer becomes aware of the incorrect information; and
 - (b) include in the written notice to the licensed insurer details of the correct estimate of the amount of total wages for the particular period.

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Insurance—general

Licences—compliance and other requirements

Section 156

- (4) The notice required under subsection (3) may be signed for the employer by any of the following:
 - (a) if the employer is a corporation—an officer of the corporation authorised to sign the statement;
 - (b) in any other case—an owner of the employer's business.
- (5) A person commits an offence if the person—
 - (a) is an employer; and
 - (b) is required under this section to tell a licensed insurer about incorrect information; and
 - (c) fails to tell the licensed insurer about the incorrect information within 30 days after the day the employer becomes aware of the incorrect information.

Maximum penalty: 50 penalty units.

(6) An offence against subsection (5) is a strict liability offence.

156 Information for licensed insurers after renewal of policies

- (1) This section applies if a compulsory insurance policy taken out by an employer is renewed.
- (2) Within 30 days after the day the policy is renewed, the employer must give the licensed insurer a statement of the total wages paid by the employer to territory workers in the period from the day the policy was issued or (if it had already been renewed) last renewed to the day before the latest renewal.

Maximum penalty: 250 penalty units, imprisonment for 2 years or both.

Note One or more fault elements apply to this offence (see Criminal Code, s 22).

(3) Within 30 days after the day the policy is renewed, the employer must give the licensed insurer a statement of the total wages paid by the employer to territory workers in the period from the day the policy was issued or (if it had already been renewed) last renewed to the day before the latest renewal.

Maximum penalty: 50 penalty units.

- (4) A statement made under this section may be signed for the employer by any of the following:
 - (a) if the employer is a corporation—an officer of the corporation authorised to sign the statement;
 - (b) in any other case—an owner of the employer's business.
- (5) An offence against subsection (3) is a strict liability offence.
- (6) This section does not apply to a non-business employer.

157 Information for licensed insurers after end or cancellation of policies

- (1) This section applies if a compulsory insurance policy taken out by an employer ends or is cancelled, and the policy is not renewed.
- (2) Within 30 days after the day the policy ends or is cancelled, the employer must give the licensed insurer a statement of the total wages paid by the employer to territory workers in the period during which the policy was in force from the day it was issued or (if it had been renewed) last renewed.

Maximum penalty: 50 penalty units.

- (3) A statement made under this section may be signed for the employer by any of the following:
 - (a) if the employer is a corporation—an officer of the corporation authorised to sign the statement;
 - (b) in any other case—an owner of the employer's business.

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Insurance—general

Licences—compliance and other requirements

Section 157

- (4) An offence against this section is a strict liability offence.
- (5) This section does not apply to a non-business employer.

158 Information for new licensed insurers after change of licensed insurers

- (1) This section applies if—
 - (a) a licensed insurer (the *current insurer*) issues a compulsory insurance policy (the *current policy*) to an employer; and
 - (b) immediately before the issue of the current policy, the employer was covered by a compulsory insurance policy (the *previous policy*) issued by a different licensed insurer.
- (2) Within 30 days after the day the current policy is issued, the employer must give the current insurer a copy of the statement mentioned in section 157 (2) in relation to the period from the day the previous policy was issued or (if it had been renewed) last renewed to the day before the current policy was issued.

Maximum penalty: 250 penalty units, imprisonment for 2 years or both.

Note One or more fault elements apply to this offence (see Criminal Code, s 22).

(3) Within 30 days after the day the current policy is issued, the employer must give the current insurer a copy of the statement mentioned in section 157 (2) in relation to the period from the day the previous policy was issued or (if it had been renewed) last renewed, to the day before the current policy was issued.

Maximum penalty: 50 penalty units.

- (4) An offence against subsection (3) is a strict liability offence.
- (5) This section does not apply to a non-business employer.

Section 160

160 Certificate of currency

- (1) This section applies if an employer asks a licensed insurer, in writing, for a certificate (a *certificate of currency*) for a compulsory insurance policy held by the employer with the insurer.
- (2) Not later than 5 business days after the day the licensed insurer receives the request, the insurer must give the employer a certificate of currency if—
 - (a) the employer has not been given a certificate of currency for the policy within the last 6 months; or
 - (b) the employer has been given a certificate of currency for the policy within the last 6 months, but either—
 - (i) the details of the risk covered by the policy have changed since the certificate was issued; or
 - (ii) the employer reasonably requires another certificate.

Example of reasonably requiring another certificate

the previous certificate has been destroyed in a fire

- (3) The certificate of currency must—
 - (a) state the details given by the employer to the licensed insurer under section 155 (Information for licensed insurers on application for issue or renewal of policies); and
 - (b) state the period for which the employer is insured under the policy; and
 - (c) state the period of up to 12 months for which the certificate is current.
- (4) However, the licensed insurer need not give the employer a certificate of currency if—
 - (a) the employer is in default under the insurance policy held by the employer with the insurer; and

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(b) the insurer has told the employer, or tells the employer not later than 5 business days after the day the employer asks for the certificate, that the employer is in default under the policy.

161 Requirement to produce certificate of currency

- (1) An employer commits an offence if—
 - (a) the employer holds a compulsory insurance policy with a licensed insurer; and
 - (b) an authorised person asks to see a certificate of currency for the policy; and
 - (c) the employer does not produce a certificate of currency for the policy for inspection.

Maximum penalty: 50 penalty units.

- (2) It is a defence to a prosecution for an offence against subsection (1) if—
 - (a) the defendant has a reasonable excuse for failing to produce the certificate of currency when required to; and
 - (b) either—
 - (i) not later than 7 business days after the day (the *request day*) the defendant is required to produce the certificate, the defendant produces the certificate for inspection at a place prescribed by regulation for this subsection or at a place directed in writing by the authorised person; or
 - (ii) the defendant establishes that the defendant took reasonable steps to produce the certificate to the authorised person not later than 7 business days after the request day.
- (3) An offence against this section is a strict liability offence.

(4) In this section:

authorised person, in relation to a certificate of currency for a compulsory insurance policy, means—

- (a) an inspector; or
- (b) the principal of a worker who is, is to be, or could reasonably be expected to be, covered by the policy; or
- (c) an industrial union of workers representing a worker employed by the employer.

certificate of currency—see section 160.

principal, of a worker—if the worker is employed to fulfil a contract the employer has with someone else to do work in the other person's trade or business, the other person is the *principal* of the worker.

162 False information causing lower premium

- (1) An employer commits an offence if—
 - (a) the employer gives information in a relevant statement to a licensed insurer; and
 - (b) the employer does so knowing that the information—
 - (i) is false or misleading; or
 - (ii) omits anything without which the information is misleading.

Maximum penalty: 100 penalty units, imprisonment for 1 year or both.

- (2) An employer commits an offence if—
 - (a) the employer gives information in a relevant statement to a licensed insurer; and

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- (b) the employer does so knowing that the information—
 - (i) is false or misleading; or
 - (ii) omits anything without which the information is misleading; and
- (c) the licensed insurer relies on the information to work out the premium for a compulsory insurance policy for the person; and
- (d) the premium worked out by the licensed insurer for the policy is less than the premium would be if the person gave the correct information.

Maximum penalty: 100 penalty units, imprisonment for 1 year or both.

(3) In this section:

relevant statement means a statement provided by an employer for any of the following provisions:

- (a) section 155 (2) (Information for licensed insurers on application for issue or renewal of policies);
- (b) section 156 (2) and (3) (Information for licensed insurers after renewal of policies);
- (c) section 157 (2) (Information for licensed insurers after end or cancellation of policies).

162A Avoiding payment of premium—regulator entitled to recovery amount

- (1) This section applies if—
 - (a) an employer has given a licensed insurer a relevant statement for a period, stating an amount of wages the employer has paid for the period; and
 - (b) the amount of wages the employer has paid for the period is at least 10% more than the amount stated in the relevant statement.

Section 162A

- (2) The regulator must determine the amount of the avoided premium for each period of insurance to which a relevant statement mentioned in subsection (1) applies (up to a maximum of 5 years).
- (3) The regulator may determine an amount (a *recovery amount*) for the employer equal to—
 - (a) double the avoided premium; or
 - (b) an amount less than double the avoided premium, having regard to the following:
 - (i) whether payment of the recovery amount would cause the employer financial hardship;
 - (ii) whether payment of the recovery amount would cause the employer to stop conducting the employer's business in the ACT;
 - (iii) whether the regulator is likely to recover the recovery amount;
 - (iv) the employer's history of compliance with its obligations under this Act;
 - (v) whether the employer's behaviour in completing the relevant statement was based on independent advice;
 - (vi) steps the employer has taken to obtain a compulsory insurance policy;
 - (vii) any other material provided by the employer;
 - (viii) any other relevant factor.

Note The regulator's determination under s (3) is an internally reviewable decision (see *Workers Compensation Regulation 2002*, sch 3, pt 3.2).

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- (4) If the regulator determines a recovery amount for an employer, the regulator must give the employer written notice of—
 - (a) the avoided premium; and
 - (b) the recovery amount.
- (5) The regulator may recover the recovery amount as a debt owing by the employer to the DI fund.
- (6) In this section:

avoided premium, for a period of insurance, means an amount equal to the difference between—

- (a) the premium worked out for the period using the information given by the person; and
- (b) the premium worked out for the period using the correct information.

relevant statement means a statement provided by an employer for any of the following provisions:

- (a) section 156 (2) and (3) (Information for licensed insurers after renewal of policies);
- (b) section 157 (2) (Information for licensed insurers after end or cancellation of policies).

162B Cease business order

- (1) This section applies if—
 - (a) a court or tribunal has entered a judgment in favour of the regulator against an employer for an amount under section 149 (Failure to maintain compulsory insurance policy—regulator entitled to recovery amount) or section 162A (Avoiding payment of premium—regulator entitled to recovery amount); and

- (b) the employer has not paid the judgment debt within 28 days after the day the judgment is entered.
- (2) The regulator may, in addition to any other right to enforce the judgment, apply to the court or tribunal for an order (a *cease business order*) directing the employer to cease conducting the employer's business until the judgment is paid.
- (3) A cease business order takes effect 5 business days after the day the order is made.

163 Employment after 2nd offence

- (1) For this section, an employer has been *convicted of an offence* if the employer has been convicted of a 2nd or subsequent offence against any of the following sections:
 - section 147A (Compulsory insurance—offences)
 - section 155 (Information for licensed insurers on application for issue or renewal of policies)
 - section 156 (Information for licensed insurers after renewal of policies)
 - section 157 (Information for licensed insurers after end or cancellation of policies)
 - section 158 (Information for new licensed insurers after change of insurers)
 - section 203 (Criminal liability of executive officers).
- (2) Subsection (1) only applies to an offence against section 203 if the offence relates to the contravention by a corporation of another section mentioned in subsection (1).
- (3) An employer who has been convicted of an offence within the last 5 years must not employ a territory worker.

Maximum penalty: imprisonment for 5 years.

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164 Provision of information to Minister

- (1) This section applies to the following:
 - (a) a licensed insurer;
 - (b) a licensed self-insurer;
 - (c) if a licensed insurer or a licensed self-insurer is a corporation—an executive officer of the corporation.
- (2) The Minister may, by written notice given to a person to whom this section applies, require the person to give to the Minister, within the reasonable time stated in the notice—
 - (a) details of the number of injuries for which compensation has been paid during the period stated in the notice and the total compensation paid during that period; and
 - (b) any other details relating to the operation of this Act stated in the notice.
- (3) The notice must set out details of the applicable offences and penalties for the offences.
- (4) A person is not excused from giving particulars in accordance with a requirement under subsection (2) on the ground that giving those particulars would incriminate, or would tend to incriminate, the person or would tend to expose that person to a proceeding for an offence against a law in force in Australia or elsewhere.
- (5) If a person is required to give details under subsection (2), the details given, or any information, document or thing obtained as a direct or indirect consequence of giving those details, is not admissible in evidence against the person in any civil or criminal proceedings in any court other than a proceeding for perjury or for an applicable offence.
- (6) A person to whom a notice is given must comply with the notice.Maximum penalty: 50 penalty units.

- (7) An offence against this section is a strict liability offence.
- (8) In this section:

applicable offence means—

- (a) an offence against this section; or
- (b) an offence against the Criminal Code, section 338 (which is about giving false or misleading information) or section 339 (which is about producing false or misleading documents) in relation to a notice that relates to—
 - (i) completing, keeping or giving a document under or in relation to this Act; or
 - (ii) a requirement that a document be completed, kept or given under or in relation to this Act.

Division 8.1.5 Regulatory action

164A Meaning of regulatory action—div 8.1.5

In this division:

licence means an insurer licence or a self-insurer licence.

licensee means a licensed insurer or a licensed self-insurer.

regulatory action, against a licensee, means any of the following actions:

- (a) including, amending, or revoking, a regulator condition on the licence;
- (b) suspending the licence for either a fixed period or until a particular event happens;
- (c) disqualifying the licensee from applying for another licence for a fixed period or until a particular event happens;
- (d) cancelling the licence.

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164B When regulatory action may be taken

The regulator may take regulatory action against a licensee only if satisfied on reasonable grounds that the licensee—

- (a) used false or misleading information to obtain the licence; or
- (b) contravened a condition of the licence; or
- (c) failed to give the Minister information requested under section 164 (2); or
- (d) failed to comply with a provision of this Act; or
- (e) no longer meets the criteria under section 145D (Issue of insurer licence) or section 145O (Issue of self-insurer licence) to hold the licence; or
- (f) has contravened—
 - (i) a workers compensation law; or
 - (ii) a law prescribed by regulation.

164C Notification of proposed regulatory action

- (1) Before the regulator takes regulatory action against a licensee, the regulator must give the licensee a written notice (a *show cause notice*) stating—
 - (a) the grounds on which, under section 164B, the regulator considers regulatory action may be taken; and
 - (b) details of the proposed regulatory action; and
 - (c) that the licensee may, not later than 14 days after the day the licensee is given the notice, give a written submission to the regulator about the proposed regulatory action.
- (2) The regulator must consider any written submission received by the regulator in response to the show cause notice when making a decision to take regulatory action against the licensee.

164D Taking regulatory action

- (1) This section applies if the regulator, after complying with section 164C, is satisfied on reasonable grounds that it is appropriate to take the regulatory action.
- (2) The regulator may—
 - (a) if the proposed regulatory action is including, amending or revoking a condition on a licence—include, amend or revoke the condition; or
 - (b) if the proposed regulatory action is suspending a licence—take any of the following action:
 - (i) the action mentioned in paragraph (a);
 - (ii) suspend the licence for a period; or
 - (c) if the proposed regulatory action is disqualifying a licensee from applying for a further licence—take any of the following action:
 - (i) the action mentioned in paragraph (b);
 - (ii) disqualify the licensee from applying for a further licence for a period; or
 - (d) if the proposed regulatory action is cancelling a licence—take any of the following action:
 - (i) the action mentioned in paragraph (c);
 - (ii) cancel the licence.

Note A decision under s (2) is a reviewable decision (see ch 12 and Workers Compensation Regulation 2002, sch 3, pt 3.1).

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- (3) Before taking regulatory action against a licensee under this section, the regulator must tell the licensee, by written notice (a *notice of regulatory action*)—
 - (a) the regulatory action that will be taken; and
 - (b) the day on which the regulatory action takes effect.
- (4) Regulatory action against the licensee takes effect on the day stated in the notice of regulatory action.
- (5) In this section:

proposed regulatory action, in relation to a licensee, means regulatory action mentioned in a show cause notice given to the person under section 164C (1).

164E Not taking regulatory action

- (1) This section applies if, after considering a submission under section 164C (2) received from a licensee, the regulator is satisfied on reasonable grounds that regulatory action against the licensee—
 - (a) may not be taken; or
 - (b) may be taken, but it is not appropriate to take the action.
- (2) The regulator must give the licensee written notice telling the licensee that regulatory action will not be taken against the licensee in relation to the matters stated in the show cause notice.

164F Regulatory action in another jurisdiction

- (1) This section applies if—
 - (a) a licensee holds a licence under another workers compensation law; and
 - (b) regulatory action is taken, or is proposed to be taken, against the licensee in relation to that licence.

- (2) The licensee must, as soon as possible after the licensee becomes aware of the regulatory action, tell the regulator—
 - (a) the proposed regulatory action or regulatory action taken; and
 - (b) the day on which the regulatory action takes effect.

Note It is also a condition of a licence under s 145E and s 145P that the licensee notify the regulator of any regulatory action taken against the licensee under a workers compensation law.

164G Effect of suspension

If the regulator suspends a licence, the licensee is taken not to hold the licence during the period of suspension.

Part 8.2 Default insurance fund

Division 8.2.1 Definitions for pt 8.2

165 Definitions—pt 8.2

In this part:

claim for payment—see section 170.

claims manager means an entity engaged as claims manager under section 166F.

Division 8.2.2 Establishment etc of DI fund

166 Establishment of DI fund

- (1) The Default Insurance Fund (the *DI fund*) is established.
- (2) The DI fund consists of—
 - (a) amounts received or recovered by or on behalf of the DI fund manager under this Act; and
 - (b) income from the investment of amounts of the fund; and
 - (c) amounts borrowed by the Territory for the fund; and
 - (d) other amounts lawfully paid into the fund.
- (3) The DI fund is to be managed by the DI fund manager and money paid into it is taken to be trust money under the *Financial Management Act 1996*.

166A Purpose of DI fund

- (1) This section sets out the objects of the DI fund so far as this Act allows.
- (2) The DI fund must meet the cost of compensation to an injured worker if the employer of the injured worker does not have a compulsory insurance policy to cover the worker for the claim.

Note An injured worker who was a director of the employer at the time of the injury may not make a claim against the fund (see s 170 (2)).

- (3) The DI fund must meet the cost of compensation by indemnifying an employer for compensation payable by the employer to an injured worker only if—
 - (a) the employer has a compulsory insurance policy in force that applies to the injured worker for the injury forming the basis of the claim but the policy was issued by a licensed insurer that—
 - (i) cannot provide the indemnity required to be provided under the policy; or
 - (ii) has been wound up; or
 - (b) the employer is a licensed self-insurer and the employer is unable to pay the injured worker's compensation.
- (4) The DI fund must meet the cost of an employer's liability that arises independently of this Act in relation to an injury to, or the death of, a territory worker of the employer if the employer of the worker does not have a compulsory insurance policy to cover the liability, by paying an amount that satisfies or discharges the liability to a person entitled to that amount.

Note An injured worker who was a director of the employer at the time of the injury may not make a claim against the fund (see s 170 (2)).

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Default insurance fund Establishment etc of DI fund

Section 166AA

- (5) The DI fund must meet the cost of an employer's liability arising independently of this Act in relation to an injury to, or the death of, a territory worker of the employer by indemnifying the employer, only if—
 - (a) the employer has a compulsory insurance policy to cover the liability but the policy was issued by a licensed insurer that—
 - (i) cannot provide the indemnity required to be provided under the policy; or
 - (ii) has been wound up; or
 - (b) the employer is a licensed self-insurer and the employer is unable to cover the liability.

Note Section 170F, s 170G, s 170H and s 170HB deal with claims for payment against the DI fund for employers' liability, arising independently of this Act, in relation to injury or death of a territory worker.

166AA DI fund—compensation for imminently fatal asbestos-related disease

- (1) The DI fund must meet the cost of compensation payable to an injured worker for an injury that is an imminently fatal asbestos-related disease.
- (2) If the DI fund pays compensation to an injured worker for an injury that is an imminently fatal asbestos-related disease the DI fund is entitled to recover a recoverable amount from any of the following (a *liable party*) whether located in or outside the ACT:
 - (a) a current or former employer of the injured worker if the disease was contracted, aggravated, accelerated, or the disease recurred, when the worker was engaged by the employer;
 - (b) an entity liable in tort for the injury;
 - (c) an insurer for an employer mentioned in paragraph (a) or an entity mentioned in paragraph (b).

- (3) For subsection (2), the recoverable amount is the proportion of the total amount the DI Fund has paid to the injured worker as compensation for the injury for which the liable party is responsible, determined by—
 - (a) written agreement between the DI fund manager and the liable party; or
 - (b) arbitration.
- (4) A recoverable amount payable by a liable party is a debt owing by the liable party to the DI fund.

Note An amount owing under a law may be recovered as a debt in a court of competent jurisdiction or the ACAT (see Legislation Act, s 177).

166B Payments out of DI fund

- (1) The DI fund manager may pay out of the fund—
 - (a) amounts required by this Act to be paid in settlement of a claim made under this Act; and
 - (b) the amount of any costs or fees payable under this Act to the liquidator of a licensed insurer; and
 - (c) costs and expenses incurred by a DI fund claims manager in the settlement of claims made under this Act; and
 - (d) repayments of, and interest on, any amount borrowed for, or contributed by the Territory to, the fund; and
 - (e) the amount of any fees, costs and expenses incurred in, or in relation to, the administration of the fund; and
 - (f) any other amount that may be paid out of the fund under a territory law.
- (2) The DI fund manager must pay out of the fund any amount the Minister directs be transferred to the terrorism cover temporary reinsurance fund under part 8.3 (Acts of terrorism).

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Default insurance fund Establishment etc of DI fund

Section 166C

166C Appointment of DI fund manager

The director-general may appoint a public servant as the DI fund manager (the *DI fund manager*) for this Act.

- Note 1 For the making of appointments (including acting appointments), see the Legislation Act, pt 19.3.
- *Note* 2 In particular, an appointment may be made by naming a person or nominating the occupant of a position (see Legislation Act, s 207).

166D DI fund manager's functions etc

- (1) The DI fund manager manages the DI fund.
- (2) The DI fund manager also exercises any other function given to the manager under this Act or any other territory law.
 - Note 1 A reference to an Act includes a reference to the statutory instruments made or in force under the Act, including any regulation (see Legislation Act, s 104).
 - Note 2 A provision of a law that gives an entity (including a person) a function also gives the entity powers necessary and convenient to exercise the function (see Legislation Act, s 196 and dict, pt 1, def *entity*).
- (3) Anything done in the name of, or for, the DI fund by the DI fund manager in exercising a function of the fund is taken to have been done for, and binds, the fund.

166F DI fund manager may engage consultants including claims manager

- (1) The DI fund manager may engage consultants.
- (2) Without limiting subsection (1), the DI fund manager may engage an entity (a *claims manager*) to manage injuries in relation to which claims may be, or have been, made against the DI fund.

Note The DI fund manager must engage an actuary (see s 166H).

- (3) However, the DI fund manager must not engage an entity under subsection (2) unless satisfied that the entity has the experience and expertise necessary to exercise the functions of a claims manager.
- (4) The conditions of a consultant's engagement are the conditions agreed between the DI fund manager and the consultant.
- (5) To remove any doubt, this section does not give the DI fund manager the power to enter into a contract of employment.

166G Claims manager's functions

- (1) This section applies if the DI fund manager engages a claims manager.
- (2) A claims manager may do the following in relation to a claim that the claims manager was engaged to manage:
 - (a) investigate the claim;
 - (b) negotiate the terms of settlement of the claim, either by payment of a lump sum or by weekly payments in accordance with this Act:
 - (c) if the injured worker was covered at the time of injury by a compulsory insurance policy issued by a licensed insurer—exercise any right of the insurer arising from or in relation to the policy;
 - (d) anything prescribed by regulation.
- (3) Subsection (2) does not authorise a claims manager to—
 - (a) pay an amount to satisfy a claim; or
 - (b) recover an amount owed to a licensed insurer against whom a claim is made under this Act.

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Default insurance fund Administration of DI fund

Section 166H

- (4) A claims manager may also exercise any other function given to the claims manager under this Act or any other territory law.
 - Note 1 A reference to an Act includes a reference to the statutory instruments made or in force under the Act, including any regulation (see Legislation Act, s 104).
 - Note 2 A provision of a law that gives an entity (including a person) a function also gives the entity powers necessary and convenient to exercise the function (see Legislation Act, s 196 and dict, pt 1, def *entity*).

166H Engagement of DI fund actuary

- (1) The DI fund manager must engage an actuary as the DI fund actuary.
- (2) However, the DI fund manager must not engage a person under subsection (1) unless satisfied that the person has the experience and expertise necessary to exercise the functions of the DI fund actuary.
- (3) The conditions of the DI fund actuary's engagement are the conditions agreed between the DI fund manager and the actuary.

166I Delegation by DI fund manager

The DI fund manager may delegate the manager's functions under this Act or any other territory law to a public servant or a consultant engaged under this Act (including a claims manager and the DI fund actuary).

Note For the making of delegations and the exercise of delegated functions, see the Legislation Act, pt 19.4.

Division 8.2.3 Administration of DI fund

167 Accounts for DI fund

- (1) The DI fund manager must keep a separate account in the DI fund for—
 - (a) claims made against employers without compulsory insurance policies; and

- (b) a licensed insurer if—
 - (i) a claim is, or has been, made against a compulsory insurance policy issued by the insurer; and
 - (ii) the insurer cannot provide the indemnity required to be provided under the policy.
- (2) The DI fund manager must keep accounts for—
 - (a) amounts paid into the DI fund under division 8.2.4 (Contributions to DI fund); and
 - (b) amounts withdrawn from the fund.
- (3) Accounts kept of amounts withdrawn from the fund must show the reason why each amount is withdrawn.

167A Investments of amounts of DI fund

The DI fund manager must invest amounts of the DI fund that are, in the manager's opinion, not immediately needed to make payments out of the fund under this Act.

167B Borrowing for DI fund

- (1) The Treasurer may, on the conditions the Treasurer considers appropriate—
 - (a) borrow money for the DI fund; or
 - (b) lend public money to the DI fund.
- (2) The Treasurer may borrow money for the DI fund or lend money to the DI fund to meet the costs of claims against the DI fund only if—
 - (a) the costs, or the amount of the costs, are unexpected; and
 - (b) either—
 - (i) the costs cannot be met through the apportionment of liability under section 168A or section 168AA; or

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Section 167C

- (ii) the Treasurer is satisfied that it is not appropriate to meet the costs through the apportionment of liability under section 168A or section 168AA.
- (3) Borrowing for the DI fund may be secured by the DI fund's assets that are approved in writing by the Treasurer.
- (4) The DI fund manager may only arrange an overdraft or credit facility for the DI fund with the Treasurer's written approval.
- (5) A loan under subsection (1) (b) may be made only from—
 - (a) money appropriated for the loan; or
 - (b) money appropriated for purposes that include making the loan.

167C Audit of DI fund

- (1) The DI fund manager must have the accounts for the DI fund for a financial year audited by a recognised auditor as soon as practicable after the end of the financial year.
- (2) The DI fund manager must give the recognised auditor's report and the audited accounts to the director-general as soon as practicable after the end of the financial year to which the report relates.
- (3) In this section:

recognised auditor, for the DI fund, means an auditor who is not employed or engaged by the DI fund.

167D Information and assistance by employer to DI fund manager

- (1) The DI fund manager may, by written notice given to an employer, require the employer to do 1 or more of the following:
 - (a) give the manager stated information and assistance that the manager reasonably considers necessary for the exercise of the manager's functions;

- (b) give the manager stated documents in the employer's possession or control that the manager reasonably considers necessary for the exercise of the manager's functions;
- (c) execute stated documents that the manager reasonably considers necessary for the employer to execute for the exercise of the manager's functions;
- (d) allow the manager or a person authorised by the manager, at a stated reasonable time, to inspect any plant, works, machinery and appliances used in the employer's business that the manager reasonably considers necessary for the exercise of the manager's functions.
- (2) An employer must take all reasonable steps to comply with a requirement of the DI fund manager under subsection (1).

Maximum penalty: 50 penalty units.

The Legislation Act, s 170 deals with the application of the privilege Note against self-incrimination.

(3) An offence against this section is a strict liability offence.

167E Assessment of financial position

- (1) Each year, the DI fund manager must assess the DI fund's financial position.
- (2) In assessing the DI fund's financial position, the DI fund manager—
 - (a) must take into account—
 - (i) the written advice of the DI fund actuary about existing and expected liabilities of the fund; and
 - (ii) the assets of the fund; and
 - (b) may take into account any other information which, in the opinion of the DI fund manager, is relevant to an assessment of the DI fund's financial position.

167F Determination that policy in force despite absence of record

The DI fund manager may determine that an employer has a compulsory insurance policy in force that applies to an injured worker for an injury forming the basis of a claim for compensation if—

- (a) the employer cannot produce a record of the policy; and
- (b) the DI fund manager is satisfied that it is reasonably likely that the employer has the policy.

Division 8.2.4 Contributions to DI fund

168 Licensed insurers and licensed self-insurers must give information

- (1) The DI fund manager may, by written notice given to a licensed insurer, require the insurer to give the manager, within a stated reasonable time, the following:
 - (a) a written statement of the licensed insurer's gross written premiums for a stated period;
 - (b) any other stated information in relation to the amounts paid or earned by the licensed insurer in relation to compulsory insurance policies.
- (2) The licensed insurer must comply with the notice under subsection (1).
- (3) The DI fund manager may, by written notice given to a licensed self-insurer, require the self-insurer to give the manager, within a stated reasonable time, the following:
 - (a) a written statement of the licensed self-insurer's total wages for a stated period;
 - (b) any other stated information in relation to the amounts paid under this Act in relation to an injured worker.

(4) The licensed self-insurer must comply with the notice under subsection (3).

168A Contributions to DI fund by licensed insurers and licensed self-insurers

- (1) Each year, the DI fund manager must determine the yearly contribution (the *annual insurer contribution*) licensed insurers and licensed self-insurers must make to the DI fund based on the following:
 - (a) the DI fund manager's assessment of the DI fund's—
 - (i) existing and expected liabilities; and
 - (ii) assets:
 - (b) the total of the following amounts for the last completed policy period:
 - (i) the gross written premiums for each licensed insurer;
 - (ii) the notional gross written premium for each licensed self-insurer:
 - (c) the amount required to be paid into the DI fund to ensure the sustainable functioning of the fund.
- (2) The DI fund manager may—
 - (a) apportion liability for the annual insurer contribution among licensed insurers and licensed self-insurers; and
 - (b) determine whether a licensed insurer's or licensed self-insurer's apportioned liability must be paid—
 - (i) quarterly; or
 - (ii) if the DI fund manager considers it necessary for the sustainable functioning of the DI fund—within a time stated by the DI fund manager.

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- (3) The DI fund manager must state the apportioned liability of the annual insurer contribution as a percentage of—
 - (a) for a licensed insurer—the gross written premiums for the insurer; or
 - (b) for a licensed self-insurer—the notional gross written premium for the self-insurer.
- (4) If the DI fund manager makes an apportionment for a period, the manager must give each licensed insurer and licensed self-insurer a written notice that—
 - (a) sets out details of the apportionment; and
 - (b) requires the insurer or self-insurer to pay to the DI fund the amount apportioned to the insurer or self-insurer within the time for payment stated in the notice.

Note A licenced insurer issuing a compulsory insurance policy to an employer must include information about the proportion of the premium that is to offset an amount paid by the insurer to the DI fund for the policy (see *Workers Compensation Regulation 2002*, s 62A).

- (5) The time stated for payment in the notice must not be shorter than 30 days after the day the licensed insurer or licensed self-insurer receives the notice.
- (6) The DI fund manager may amend or revoke a notice given under this section.
- (7) If an amount apportioned to the licensed insurer or licensed self-insurer is not paid within the time stated for payment in the notice, the amount is a debt owing to the DI fund by the insurer or self-insurer.

Note An amount owing under a law may be recovered as a debt in a court of competent jurisdiction or the ACAT (see Legislation Act, s 177).

(8) The DI fund manager must pay into the DI fund each amount received or recovered under this section from a licensed insurer or licensed self-insurer.

(9) In this section:

policy period means the period beginning on 1 July in a year and ending on 30 June in the following year.

168AA Supplementary contributions to DI fund by licensed insurers and licensed self-insurers

- (1) This section applies if—
 - (a) the DI fund manager has made a determination of the annual insurer contribution for a year under section 168A (1); and
 - (b) after the determination was made an unusual claim or class of claim (an *unexpected claim*) that was not reasonably foreseeable at the time the determination was made—
 - (i) is brought against the DI fund in the year; and
 - (ii) is, in the opinion of the DI fund manager, a claim that will be settled in the year; and
 - (c) the DI fund manager is of the opinion that the DI fund cannot meet the cost of the unexpected claim.
- (2) The DI fund manager must determine and apportion a supplementary annual insurer contribution that licensed insurers and licensed self-insurers must make to the DI fund to allow the fund to meet the cost of the unexpected claim for the year.
- (3) Section 168A (2), (3) and (4) apply to the apportionment of a supplementary annual insurer contribution under this section as if the contribution were an annual insurer contribution.

Chapter 8 Part 8.2 Insurance

Default insurance fund

Division 8.2.5

DI fund's relationship with liquidators of licensed insurers

Section 169

Division 8.2.5 DI fund's relationship with liquidators of licensed insurers

169 Displacement of liquidator's Corporations Act obligation

- (1) The recovery of amounts by the DI fund from liquidators of licensed insurers is declared to be an excluded matter for the purposes of the Corporations Act, section 5F in relation to the Corporations Act, section 477, other than to the extent stated in subsection (2), section 169A and section 169B.
 - Note The Corporations Act, s 5F provides that, if a law of a State or Territory declares a matter to be an excluded matter for the purposes of that section in relation to all or part of the Corporations legislation of the Commonwealth, the provisions that are the subject of the declaration will not apply in relation to that matter in the State or Territory that made the declaration.
- (2) The liquidator of a licensed insurer may exercise the liquidator's powers under the Corporations Act, section 477 in relation to a claim, judgment, order or award arising out of or in relation to a compulsory insurance policy issued by the insurer, subject to the following changes:
 - (a) the reference in section 477 to the approval of the court or the committee of inspection or of a resolution of the creditors is taken to be a reference to the approval of the DI fund manager;
 - (b) the words 'subject to the provisions of section 556,' is taken to be omitted from subsection (1) (b);
 - (c) any other necessary changes are taken to have been made;
 - (d) any other changes prescribed by regulation are taken to have been made.

169A Payment to DI fund of amounts recovered by liquidator from reinsurer

- (1) This section applies if—
 - (a) a licensed insurer is, under a contract of reinsurance, insured against liability in relation to compulsory insurance policies issued by the insurer and liability in relation to them is incurred by the insurer; and
 - (b) any part of the liability is met by an amount paid out of the DI fund under this Act; and
 - (c) an amount in relation to that part of the liability of the insurer is received by a liquidator of the insurer from the reinsurer.
- (2) The liquidator must pay the amount to the DI fund, in priority to all payments in relation to debts mentioned in the Corporations Act, section 556.
- (3) However, the liquidator may deduct from the amount the reasonable expenses of or incidental to recovering the amount.
- (4) This section has effect despite any agreement to the contrary.

169B Payment to DI fund of amounts recovered by liquidator using fund amounts

- (1) This section applies if—
 - (a) the liquidator of a licensed insurer recovers an amount owed to the insurer; and
 - (b) the amount is recovered because of the payment of an amount out of the DI fund of part of a claim, judgment, order or award arising out of or in relation to a compulsory insurance policy issued by the insurer.
- (2) The liquidator must pay the amount to the DI fund, in priority to all payments in relation to debts mentioned in the Corporations Act, section 556.

Chapter 8 Part 8.2 Insurance

Default insurance fund

Division 8.2.5

DI fund's relationship with liquidators of licensed insurers

Section 169C

- (3) However, the liquidator may deduct from the amount the reasonable expenses of or incidental to recovering the amount.
- (4) This section has effect despite any agreement to the contrary.

169C Rights of DI fund manager against licensed insurer

- (1) This section applies if—
 - (a) a licensed insurer cannot provide to an employer the indemnity required to be provided by a compulsory insurance policy issued by the insurer to the employer; and
 - (b) any part of the employer's liability is met by an amount paid out of the DI fund under this Act; and
 - (c) all or part of the amount (the *unrecovered amount*) is not recovered by the DI fund manager under section 169A or section 169B.
- (2) The DI fund manager has the same rights against the insurer as the employer in relation to the unrecovered amount.

169D Liquidator to notify DI fund manager of dissolution

If the liquidator of a licensed insurer applies to a court for an order that the insurer be dissolved under the Corporations Act, the liquidator must as soon as practicable—

- (a) tell the DI fund manager in writing about the application; and
- (b) give the fund manager a copy of any order made by the court on the application.

Division 8.2.6 Making claims for payment

170 Who may make claim for payment

- (1) A person may make a claim for payment against the DI fund (a *claim for payment*) if the person—
 - (a) is—
 - (i) an injured worker (the *injured worker*) who sustained an injury (the *injury*) that forms the basis of the claim for payment; or
 - (ii) a person appointed to represent the injured worker; or
 - (iii) if the injured worker has died leaving a dependent—a dependent of the injured worker; or
 - (iv) if the injured worker has died leaving no dependents—a person acting on behalf of the estate of the injured worker; and
 - (b) cannot make a claim against a person other than the employer of the injured worker for—
 - (i) payment of compensation for the injury under this Act; or
 - (ii) damages for the injury arising independently of this Act; and
 - (c) is eligible to make a claim for payment under any of the following provisions:
 - (i) section 170E (Claim for payment if employer to pay and liability not covered by compulsory insurance policy etc);
 - (ii) section 170F (Claim for payment if final judgment etc and liability not covered by compulsory insurance policy);
 - (iii) section 170G (Claim for payment if agreement to discharge liability at common law and liability not covered by compulsory insurance policy);

- (iv) section 170H (Claim for payment if final judgment etc and liability covered by compulsory insurance policy);
- (v) section 170HA (Claim for payment if entitlement to claim compensation and licensed self-insurer unable to pay compensation);
- (vi) section 170HB (Claim for payment if final judgment etc and licensed self-insurer unable to cover liability);
- (vii) section 170I (Claim for payment if entitlement to claim compensation and liability covered by compulsory insurance policy).
- (2) A person may also make a claim for payment if the person is—
 - (a) an injured worker (the *injured worker*) who has sustained an injury that is an imminently fatal asbestos-related disease (the *injury*) that forms the basis of the claim for payment; or
 - (b) a person appointed to represent the injured worker.
- (3) However, a person may not make a claim for payment if, at the time of the injury—
 - (a) the injured worker was a director of the worker's employer; and
 - (b) the employer did not hold a compulsory insurance policy that applies to the injured worker for the injury.

170A When must claim for payment be made

A claim for payment by a person must be made not later than—

- (a) 1 month after the day the person becomes eligible to make the claim; or
- (b) any further time that the DI fund manager, on application, allows.

170B How claim for payment made if no licensed insurer

- (1) This section applies to a claim for payment in relation to a workers compensation liability if—
 - (a) the claim is made against the employer; and
 - (b) the liability of the employer to pay the compensation is not covered by a compulsory insurance policy; and
 - (c) either—
 - (i) the employer has been wound up; or
 - (ii) a liquidator has been appointed for the employer but the employer has not been wound up; or
 - (iii) the liability of the employer to pay the compensation remains unpaid for at least 1 month.
- (2) The claim for payment must be—
 - (a) in writing; and
 - (b) given to the DI fund manager with a copy of any judgment, order or award relating to the claim.

Note If a form is approved under s 222 for this provision, the form must be used.

170C How claim for payment made if licensed insurer not wound up

- (1) This section applies to a claim for payment in relation to a workers compensation liability if—
 - (a) the claim is made against the employer; and
 - (b) the liability of the employer to pay the compensation is covered by a compulsory insurance policy; and
 - (c) a liquidator has been appointed for the licensed insurer but the insurer has not been wound up.

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Default insurance fund Making claims for payment

Section 170D

- (2) The claim for payment must be—
 - (a) in writing; and
 - (b) given to the liquidator of the licensed insurer, with a copy of any judgment, order or award relating to the claim.

Note If a form is approved under s 222 for this provision, the form must be used.

170D How claim for payment made if licensed insurer wound up

- (1) This section applies to a claim for payment in relation to a workers compensation liability if—
 - (a) the claim is made against the employer; and
 - (b) the liability of the employer to pay the compensation is covered by a compulsory insurance policy; and
 - (c) the licensed insurer has been wound up.
- (2) The claim for payment must be—
 - (a) in writing; and
 - (b) given to the DI fund manager with a copy of any judgment, order or award relating to the claim.

Note If a form is approved under s 222 for this provision, the form must be used

170E Claim for payment if employer to pay and liability not covered by compulsory insurance policy etc

- (1) This section applies if—
 - (a) a person has made a claim against an employer for compensation under this Act; and
 - (b) the employer is not a licensed self-insurer; and

- (c) either—
 - (i) the employer has agreed to pay compensation; or
 - (ii) the liability of the employer to pay compensation has been established; and
- (d) the liability of the employer to pay the compensation is not covered by a compulsory insurance policy; and
- (e) at the end of 1 month after the day the compensation becomes payable, the compensation (or any part of it) has not been paid to the person.
- (2) The person is eligible to make a claim for payment against the DI fund for payment of the amount of the compensation that remains unpaid.
- (3) In this section:

compensation includes—

- (a) an amount in settlement of a claim for compensation; and
- (b) costs payable to a worker by an employer in relation to a claim for compensation.

170F Claim for payment if final judgment etc and liability not covered by compulsory insurance policy

- (1) This section applies if—
 - (a) a person has obtained a final judgment against an employer; and
 - (b) the employer is not a licensed self-insurer; and
 - (c) the judgment relates to the employer's liability independently of this Act in relation to an injury to, or the death of, a territory worker of the employer; and
 - (d) execution of the judgment has not been stayed; and

Insurance

Default insurance fund Making claims for payment

Section 170G

- (e) the liability of the employer under the judgment, order or award is not covered by a compulsory insurance policy; and
- (f) the judgment has remained completely or partly unsatisfied for at least 1 month.
- (2) The person is eligible to make a claim for payment against the DI fund of the amount of the judgment that remains unsatisfied.

Note See s 170 for def claim for payment.

170G Claim for payment if agreement to discharge liability at common law and liability not covered by compulsory insurance policy

- (1) This section applies if—
 - (a) an employer has agreed with a person to pay an amount to discharge the employer's liability independently of this Act in relation to an injury to, or the death of, a territory worker of the employer; and
 - (b) the employer is not a licensed self-insurer; and
 - (c) the liability of the employer under the agreement is not covered, or is not completely covered, by a compulsory insurance policy; and
 - (d) at the end of 1 month after the day the amount is payable, the amount (or any part of it) has not been paid to the person.
- (2) The person is eligible to make a claim for payment against the DI fund of the amount that remains unpaid.

170H Claim for payment if final judgment etc and liability covered by compulsory insurance policy

- (1) This section applies if—
 - (a) a person has obtained a final judgment, or an order or award has been made against an employer; and
 - (b) the judgment, order or award relates to the employer's liability independently of this Act in relation to, or the death of, a territory worker of the employer; and
 - (c) the liability of the employer under the judgment, order or award is covered by a compulsory insurance policy; and
 - (d) the licensed insurer is wound up or cannot provide the indemnity required by the policy to be provided.
- (2) The person is eligible to make a claim for payment against the DI fund of the amount of the judgment, order or award that remains unsatisfied.

170HA Claim for payment if entitlement to claim compensation and licensed self-insurer unable to pay compensation

- (1) This section applies if—
 - (a) a person has made a claim against an employer for compensation in relation to a territory worker employed by the employer; and
 - (b) the employer is a licensed self-insurer; and
 - (c) either—
 - (i) the employer has agreed to pay compensation; or
 - (ii) the liability of the employer to pay compensation has been established; and
 - (d) the employer is unable to pay the amount of compensation.

Insurance

Default insurance fund Making claims for payment

Section 170HB

(2) The person is eligible to make a claim for payment against the DI fund for payment of the amount of compensation.

170HB Claim for payment if final judgment etc and licensed self-insurer unable to cover liability

- (1) This section applies if—
 - (a) a person has obtained a final judgment, or an order or award has been made against an employer; and
 - (b) the employer is a licensed self-insurer; and
 - (c) the judgment, order or award relates to the employer's liability independently of this Act in relation to an injury to, or the death of, a territory worker of the employer; and
 - (d) the employer is unable to cover the liability.
- (2) The person is eligible to make a claim for payment against the DI fund of the amount of the judgment, order or award that remains unsatisfied.

170I Claim for payment if entitlement to claim compensation and liability covered by compulsory insurance policy

- (1) This section applies if—
 - (a) a person is entitled to claim against an employer for compensation under this Act for an injury to, or the death of, a territory worker employed by the employer; and
 - (b) the liability of the employer to pay the compensation is covered by a compulsory insurance policy; and
 - (c) the licensed insurer is wound up or cannot provide the indemnity required by the policy to be provided.
- (2) The person is eligible to make a claim for payment against the DI fund of the amount.

170J Liquidator to forward claims to DI fund manager

The liquidator of a licensed insurer who receives a claim for payment must—

- (a) give a copy of the claim to the DI fund manager; and
- (b) give the manager all the information, and a copy of all the documents (including a copy of any judgment, order or award) that the liquidator has relating to the claim.

170K Power of Supreme Court to set aside agreements

- (1) If a claim for payment is made against the DI fund by someone eligible to make the claim under section 170G (Claim for payment if agreement to discharge liability at common law and liability not covered by compulsory insurance policy), the DI fund manager may apply to the Supreme Court for an order setting aside the agreement to which the claim relates.
- (2) The Supreme Court may set aside the agreement if satisfied that there are reasonable grounds for believing that the employer has not honestly tried to protect the employer's own interests and taken all reasonable steps to protect the employer's own interests.
- (3) If the Supreme Court sets the agreement aside, the costs of the respondent in relation to the application are to be paid by the DI fund, unless the Supreme Court orders otherwise.
- (4) The Supreme Court may make an order about costs under subsection (3) only if satisfied that it is appropriate to make the order because of the special circumstances surrounding the making of the agreement.

Chapter 8 Part 8.2 Division 8.2.6 Insurance

Default insurance fund Making claims for payment

Section 170L

170L Treatment of set aside agreement

- (1) If an agreement is set aside under section 170K—
 - (a) the agreement is taken never to have had effect for the purpose of any proceeding in a court; and
 - (b) evidence of a statement or communication, or a part of a statement or communication, tending to establish the existence of the agreement is not admissible in any proceeding in a court, unless the Supreme Court orders otherwise.
- (2) The Supreme Court may make an order under subsection (1) (b) only if satisfied that the admission of the evidence is necessary to avoid injustice to a party to the proceeding.

170M Time-barred rights after agreement set aside

- (1) This section applies if—
 - (a) an agreement is set aside under section 170K; and
 - (b) apart from this section, a proceeding by a party to the agreement to recover damages in relation to a liability to which the agreement related would be barred when the agreement is set aside, or would become barred not later than 3 months after the day the agreement is set aside, by the *Limitation Act 1985* or another territory law (the *limitations law*).
- (2) The proceeding may be started at any time not later than 3 months after the day the agreement was set aside, despite the limitations law.

170N Proceeding after agreement set aside

- (1) A person commits an offence if—
 - (a) an agreement is set aside under section 170K; and
 - (b) the person was a party to the agreement; and

- (c) the person brings a proceeding to recover damages in relation to a liability under the agreement; and
- (d) at the end of 7 days after the day the proceeding is started, the person has not given the DI fund manager written notice of the proceeding.

Maximum penalty: 5 penalty units.

- (2) An offence against this section is a strict liability offence.
- (3) If notice is given to the DI fund manager under subsection (1) (d), the fund manager—
 - (a) may, on behalf of the employer sued in the proceeding, conduct the defence of the proceeding in the name of the employer and in the way the fund manager considers appropriate; and
 - (b) must indemnify the employer against all costs and expenses in relation to the proceeding.

Division 8.2.7 Payment of claims

171 Payments out of DI fund

- (1) A claim for payment, other than a claim for payment for an injury that is an imminently fatal asbestos-related disease, may only be paid if the terms of settlement of the claim are approved.
- (2) The terms of settlement of a claim for payment may be approved by—
 - (a) if they provide for payment of a lump sum to the claimant for an injury that is not an imminently fatal asbestos-related disease—the Magistrates Court; or
 - (b) in any other case—the DI fund manager.

Chapter 8 Part 8.2 Division 8.2.7 Insurance

Default insurance fund Payment of claims

Section 171A

171A Reopening of agreements and awards

- (1) This section applies if a claim for payment is made against the DI fund under section 170E (Claim for payment if employer to pay and liability not covered by compulsory insurance policy etc).
- (2) The DI fund manager may apply to the Magistrates Court for an order directing that the agreement or award under which the compensation under the claim is payable be reopened on the ground that—
 - (a) there is reason to believe that the employer has not honestly endeavoured to protect the employer's own interests; and
 - (b) the employer has not taken all reasonable steps to protect the employer's own interests.
- (3) The Magistrates Court may order that the agreement or award be reopened.

171B Deciding or re-deciding claim

- (1) If the Magistrates Court makes an order under section 171A, the court must decide or re-decide the claim for compensation by arbitration.
- (2) The DI fund manager is a party to the arbitration.
- (3) In an award made by the Magistrates Court under this section, the court may set aside the previous agreement or award.
- (4) An agreement by a person to accept, in settlement of a claim for payment against the DI fund, an amount less than the amount payable according to an agreement or award has no effect unless approved by the Magistrates Court.

171C Approval of terms of settlement by court

- (1) This section applies if proposed terms of settlement of a claim for payment provide for payment of a lump sum to the claimant.
- (2) The DI fund manager may apply to the Magistrates Court for approval of the terms of settlement.

(3) The Magistrates Court may approve the terms of settlement if satisfied that they are just.

171D DI fund paying claims for payment if liability not completely covered by a compulsory insurance policy and settlement approved

- (1) This section applies to a claim for payment if—
 - (a) the claim was made by a person who—
 - (i) is mentioned in section 170 (1) (a); and
 - (ii) is eligible to make a claim for payment under section 170E, section 170F or section 170G; and

Note Under s 170E, s 170F and s 170G, the employer's liability is not covered by a compulsory insurance policy.

- (b) the terms of settlement of the claim are approved by the Magistrates Court or DI fund manager under this division.
- (2) The DI fund manager must pay the claimant out of the DI fund the amount necessary to satisfy the claim in accordance with the terms of settlement.

171E DI fund paying claims for payment against licensed insurers and licensed self-insurers if settlement approved

- (1) This section applies to a claim for payment if—
 - (a) the claim was made by a person who—
 - (i) is mentioned in section 170 (1) (a); and

- (ii) is eligible to make a claim for payment under section 170H, section 170I, section 170HA or section 170HB; and
- Note Under s 170H and s 170I, the employer's liability is covered by a compulsory insurance policy but the licensed insurer has been wound up or cannot provide the indemnity required to be provided under the policy. Under s 170HA and s 170HB the employer is a licensed self-insurer unable to cover liability.
- (b) the terms of settlement of the claim are approved by the Magistrates Court or DI fund manager under this division.
- (2) The DI fund manager must—
 - (a) pay the liquidator out of the DI fund—
 - (i) the amount necessary for the liquidator to satisfy the claim in accordance with the terms of settlement; and
 - (ii) any further amount agreed to between the manager and liquidator for the liquidator's costs in satisfying the claim; and
 - (b) give the liquidator copies of all documents the fund manager has that relate to the claim.
- (3) The liquidator must pay the amount mentioned in subsection (2) (a) (i) to the claimant in satisfaction of the claim in accordance with the terms of settlement.
- (4) However, if the licensed insurer has been wound up under the Corporations Act before the DI fund manager makes a payment to the liquidator under subsection (2), the fund manager may directly pay the claimant the amount necessary to satisfy the claim in accordance with the terms of settlement.

171F Liquidators to account to DI fund manager

- (1) This section applies if a liquidator receives an amount (the *settlement amount*) under section 171E (2) (a) (i).
- (2) For each prescribed period, the liquidator must give the DI fund manager a written statement setting out the payments made by the liquidator out of the settlement amount during the period.
- (3) A statement under subsection (2) must—
 - (a) be given to the DI fund manager not later than 2 weeks after the end of the prescribed period to which it relates; and
 - (b) be certified as correct by an auditor.
- (4) In this section:

prescribed period, in relation to a settlement amount, means—

- (a) the period of 3 months starting the day after the settlement amount is received; and
- (b) each following period of 3 months, ending at the end of the 3-month period when the liquidator pays the last amount to the claimant out of the settlement amount.

171G Intervention by DI fund manager

- (1) A person commits an offence if—
 - (a) a claim for compensation has been made against the person; and
 - (b) the person is not a licensed self-insurer; and
 - (c) the person's liability to pay compensation is not covered by a compulsory insurance policy; and
 - (d) the person does not give the DI fund manager a copy of the claim within 48 hours after the claim is made.

Maximum penalty: 10 penalty units.

Chapter 8 Part 8.2 Division 8.2.7 Insurance

Default insurance fund Payment of claims

Section 171H

- (2) A person commits an offence if—
 - (a) a claim for compensation has been made against the person; and
 - (b) the person is not a licensed self-insurer; and
 - (c) the person's liability to pay compensation is not covered by a compulsory insurance policy; and
 - (d) the person makes an agreement or admission in relation to the claim.

Maximum penalty: 20 penalty units.

- (3) Subsection (2) does not apply to an admission or agreement if the DI fund manager consents to the admission or agreement.
- (4) The DI fund manager is entitled to intervene in any arbitration proceeding on the claim as a party.
- (5) The DI fund manager has the same right of objection to arbitration by a committee as the employer has under the regulations.
- (6) An offence against this section is a strict liability offence.

171H DI fund manager may act

(1) This section applies to a claim for payment if the claim was made by a person eligible to make the claim under section 170E, section 170F or section 170G.

Note Under s 170E, s 170F and s 170G, the employer's liability is not covered by a compulsory insurance policy.

- (2) The DI fund manager may treat the claim for payment as having been made against the DI fund if—
 - (a) the manager receives a copy of the claim under section 171G; or
 - (b) the manager is otherwise satisfied that it is reasonably likely that there is no compulsory insurance policy in force that applies to the claim.

1711 Effect of payment of claims

- (1) If an amount is paid to a claimant under this division in settlement of a claim made under this Act in relation to a liability of an employer—
 - (a) the payment operates to discharge the liability of the DI fund in relation to the claim; and
 - (b) the payment operates to discharge the liability of the employer; and
 - (c) an amount equal to 3 times the amount of the payment is a debt owing by the employer to the DI fund; and
 - Note An amount owing under a law may be recovered as a debt in a court of competent jurisdiction or the ACAT (see Legislation Act, s 177).
 - (d) the DI fund has the right of subrogation for any right that the employer has against anyone in relation to the matter that is the subject of the claim that caused the liability of the employer.
- (2) However, subsection (1) (c) does not apply if—
 - (a) the employer is a non-business employer; or
 - (b) the claim was for payment for an injury that is an imminently fatal asbestos-related disease.

Division 8.2.8 Default insurance fund—miscellaneous

172 Proceedings to be in the name of 'Workers Compensation Default Insurance Fund Manager'

Any proceeding by or against the DI fund may be taken in the name of 'Workers Compensation Default Insurance Fund Manager'.

Chapter 8 Part 8.2 Division 8.2.8 Insurance

Default insurance fund

Default insurance fund—miscellaneous

Section 172A

172A DI fund manager may consent to judgment etc

- (1) This section applies if the DI fund manager conducts the defence of a proceeding against an employer for—
 - (a) a claim for compensation under this Act; or
 - (b) liability independent of this Act in relation to an injury to, or the death of, a territory worker of the employer.
- (2) The DI fund manager may, without the employer's agreement—
 - (a) make a decision affecting the interests of the employer in the proceeding; or
 - (b) consent to judgment against the employer in the proceeding.
- (3) However, the DI fund manager must—
 - (a) tell the employer about the manager's intention to act under subsection (2) (a) or (b); and
 - (b) take into account the views (if any) of the employer.
- (4) Subsection (3) does not apply if the DI fund manager—
 - (a) has taken reasonable steps to contact the employer; and
 - (b) is unable to contact the employer.

173 DI fund manager not personally liable

- (1) The DI fund manager is not personally liable to pay an amount payable in satisfaction of any claim made or judgment obtained against the DI fund manager or the amount of any costs or expenses of the DI fund manager in relation to such a claim or judgment.
- (2) An amount mentioned in subsection (1) is to be paid by the DI fund manager out of the DI fund.

176 Premiums—maximum rates

(1) A licensed insurer must not charge, or accept, a premium for a compulsory insurance policy that is greater than the premium worked out in accordance with the maximum rate of premium prescribed by regulation.

Maximum penalty: 50 penalty units.

(2) An offence against this section is a strict liability offence.

177 Premiums—remuneration for professional sporting activity

An employer is not liable to pay any part of a premium for a compulsory insurance policy calculated by reference to the remuneration payable to an employee for engaging in professional sporting activity.

178 Workers' rights to information

- (1) If a territory worker who is or has been employed by an employer asks the employer for the name and address of the person who was the employer's licensed insurer on a stated date, the employer must—
 - (a) if the employer was not a licensed self-insurer on that date—tell the worker the name and address of the approved insurer, or each approved insurer, who issued a compulsory insurance policy to the employer that was current on that date; or
 - (b) if the employer was a licensed self-insurer on that date—tell the worker that fact.

Maximum penalty: 20 penalty units.

Chapter 8 **Part 8.2** Division 8.2.8 Insurance

Default insurance fund

Default insurance fund—miscellaneous

Section 179

- (2) An employer must keep displayed, in accordance with subsection (3), a notice containing a summary of the requirements of this Act for making compensation claims, in the form approved by the Minister under section 222 (Approved forms) for the notice, and stating—
 - (a) that claim forms for compensation are available from the employer on request and free of charge; and
 - (b) if the employer is a party to a compulsory insurance policy—the licensed insurer's name and address; and
 - (c) if the employer is a licensed self-insurer—that the employer is exempt from the requirement to obtain insurance under this Act.

Maximum penalty: 10 penalty units.

- (3) The employer must display the notice in a conspicuous place so that it can be conveniently read by each territory worker employed by the employer.
- (4) An employer must ensure that claim forms approved by the Minister under section 222 (Approved forms) are available during business hours to each territory worker who is or has been employed by the worker on request and free of charge.

Maximum penalty: 10 penalty units.

(5) An offence against this section is a strict liability offence.

179 Regulations to allow Minister to authorise people

A regulation may—

- (a) allow the Minister to authorise people with accounting or auditing skills to examine records of wage estimates, evidence supporting wage estimates and records of wages paid; and
- (b) prescribe the circumstances in which the people authorised may enter premises to examine the records.

Part 8.3 Acts of terrorism

179A Application of pt 8.3 to insurers

- (1) This part applies to an insurer if—
 - (a) the insurer has acted honestly and taken all proper and businesslike steps to obtain reinsurance for the insurer's liability to pay compensation for injuries or deaths (or both) caused by acts of terrorism; and
 - (b) the insurer accepts liability for claims for compensation for injuries or deaths (or both) caused by the act of terrorism; and
 - (c) the insurer has acted honestly and taken all proper and businesslike steps to demand the maximum amounts the insurer may demand under the reinsurance contracts held by the insurer that apply in relation to the claims; and
 - (d) the total amount paid by the insurer for the claims, after the deduction of the maximum amounts the insurer may receive under the reinsurance contracts, is more than the temporary fund threshold amount that applies to the insurer.
- (2) For this part, the *temporary fund threshold amount* that applies to an insurer is the amount worked out using the following formula:

insurer's market share × relevant premium pool amount.

(3) In this section:

insurer's market share means the proportion (expressed as a percentage) of the administrative costs of the Act apportioned by the Minister to the insurer under section 210 (1) (Apportioning cost of administering workers compensation and safety legislation) in relation to the financial year before the act of terror happens.

premium pool means the total amount of—

- (a) the premium income received by each licensed insurer in relation to compulsory insurance policies in the financial year before the act of terror happens; and
- (b) the premium that would have been payable by each licensed self-insurer if the licensed self-insurer had obtained a compulsory insurance policy for the financial year (or the part of the financial year for which the licensed self-insurer was a licensed self-insurer).

relevant premium pool amount means 5% of the premium pool.

179B Definitions—pt 8.3

In this part:

act of terrorism—see section 179C.

insurer means a licensed insurer or a licensed self-insurer.

temporary fund—see section 179D (1).

temporary fund threshold amount—see section 179A (2).

179C Meaning of act of terrorism for pt 8.3

(1) In this part:

act of terrorism means the use or threat of action if—

- (a) the action falls within subsection (2); and
- (b) the use or threat is designed to influence a government or to intimidate the public or a section of the public; and
- (c) the use or threat is made for the purpose of advancing a political, religious or ideological cause.
- (2) Action falls within this subsection if it—
 - (a) involves serious violence against a person; or

- (b) involves serious damage to property; or
- (c) endangers a person's life, other than that of the person committing the action; or
- (d) creates a serious risk to the health or safety of the public or a section of the public; or
- (e) is designed seriously to interfere with or seriously to disrupt an electronic system.
- (3) The use or threat of action falling within subsection (2) that involves the use of firearms or explosives is terrorism whether or not subsection (1) (b) is satisfied.
- (4) In this section:

action includes action outside the ACT or Australia.

government includes the government of another Australian jurisdiction or a foreign country.

person means a person anywhere, whether in or outside the ACT or Australia.

property means property located anywhere, whether in or outside the ACT or Australia.

public includes the public of a place outside the ACT or Australia.

179D Terrorism cover temporary reinsurance fund

- (1) If this part applies to an insurer, the terrorism cover temporary reinsurance fund (the *temporary fund*) is established.
- (2) The temporary fund consists of—
 - (a) the amounts of levies paid by insurers under this part; and
 - (b) amounts borrowed by the Territory for the fund; and
 - (c) any contributions made by the Territory to the fund; and

- (d) any amount paid to the fund by the DI fund manager under section 166B (2); and
- (e) income from the investment of amounts in the fund; and
- (f) any other amounts that may lawfully be paid into the fund.
- (3) The temporary fund is to be managed by the Territory and money paid into it is taken to be trust money under the *Financial Management Act* 1996.
- (4) However, the *Financial Management Act 1996*, section 53A (Unclaimed trust money) does not apply to the temporary fund.

179E Entitlement of insurers to reimbursement from temporary fund

- (1) If this part applies to an insurer because of an act of terrorism, the insurer is entitled to be reimbursed from the temporary fund the insurer's uninsured liability for the act of terrorism less the temporary fund threshold amount that applies to the insurer in relation to the act of terrorism.
- (2) However, the insurer is entitled to be fully reimbursed from the temporary fund the insurer's uninsured liability for another act of terrorism that happens not later than 1 year after the day the act of terrorism mentioned in subsection (1) happens.
- (3) Subsection (2) applies only if the insurer has acted honestly and taken all proper and business-like steps to—
 - (a) obtain reinsurance for the insurer's liability to pay compensation for injuries or deaths (or both) caused by the later act of terrorism; and
 - (b) demand the maximum amounts the insurer may demand under the reinsurance contracts held by the insurer that apply in relation to the later act of terrorism.

(4) In this section:

insurer's uninsured liability, for an act of terrorism, means the total of the amounts paid by the insurer for claims for compensation for injuries or deaths (or both) caused by the act of terrorism less all amounts that are recoverable (or to the extent that they are recoverable) by the insurer under the reinsurance contracts held by the insurer that apply in relation to the claims.

179F Payments out of temporary fund

The temporary fund may be used to—

- (a) pay any amount required under this part to be paid from the fund; and
- (b) repay any amount borrowed for, or contributed by the Territory to, the fund; and
- (c) pay interest on an amount mentioned in paragraph (b).

179G Regulations about temporary fund

- (1) A regulation may make provision in relation to the temporary fund, including—
 - (a) the imposition of levies on insurers for the fund; and
 - (b) payments from the fund.
- (2) In particular, a regulation may make provision in relation to—
 - (a) levies for the fund, including their rate; and
 - (b) payments to the fund, including contributions by the Territory to the fund; and
 - (c) payments from the fund, including the information insurers claiming an entitlement to reimbursement from the fund must give to the fund's manager.

- (3) However, a regulation must not impose a levy for a period that is—
 - (a) for a licensed insurer—more than 10% of the premiums received by the insurer in relation to compulsory insurance policies issued by the insurer that begin during the period; and
 - (b) for a licensed self-insurer—more than 10% of the estimated premium that would have been payable by the licensed self-insurer for a compulsory insurance policy obtained by the licensed self-insurer that began at the beginning of the period.

179H Exclusion of Corporations legislation

(1) The temporary fund is declared to be an excluded matter for the purposes of the Corporations Act, section 5F in relation to the whole of the Corporations legislation to which the Corporations Act, part 1.1A (Interaction between Corporations Legislation and State and Territory laws) applies.

Note The Corporations Act, s 5F provides that if a law of a State or Territory declares a matter to be an excluded matter for the purposes of that section in relation to all or part of the Corporations legislation to which the Corporations Act, pt 1.1A applies (see s 5D), the provisions that are the subject of the declaration will not apply in relation to that matter in the State or Territory that made the declaration.

(2) Without limiting subsection (1) and to remove any doubt, an act or omission by an entity in relation to the fund is declared to be an excluded matter for the purposes of the Corporations Act, section 5F in relation to the whole of the Corporations legislation to which the Corporations Act, part 1.1A applies.

179I Review of payments out of temporary fund

- (1) This section applies if the temporary fund is established under section 179D (1).
- (2) The Minister must review the following not later than 10 years after the day the temporary fund is established:
 - (a) the operation of section 179F (Payments out of temporary fund);
 - (b) the operation of any regulation made under section 179G (1) (b) (Regulations about temporary fund).
- (3) The Minister must present a report of the review to the Legislative Assembly within 6 months after the day the review is started.

Chapter 9 Common law damages

Part 9.1 Interpretation and application— ch 9

180 Definitions—ch 9

In this chapter:

damages includes an amount paid under a compromise or settlement of a claim for damages, whether or not a legal proceeding had been started, but does not include an amount paid for costs incurred in relation to a proceeding in a court.

injury, in relation to a worker, includes damage to the worker's contact lenses, crutches, prosthesis, spectacles or other artificial aid.

181 References to person who recovers damage etc

- (1) If damages are recovered by a person on someone else's behalf, a reference in this chapter to a person who recovers damages is a reference to the person on whose behalf damages are recovered.
- (2) If compensation is paid or payable to a person for the benefit of someone else, a reference in this part to a person to whom compensation is paid or payable is a reference to the person for whose benefit the compensation is paid or payable.

182 Payments by DI fund manager

- (1) If the DI fund manager pays compensation in relation to an injury to a worker, this chapter applies as if a reference to the worker's employer were a reference to the DI fund.
- (2) If the DI fund manager and an employer both pay compensation in relation to an injury suffered by a worker, the rights of the DI fund under this chapter in relation to the payment have priority over the rights of the employer.

Part 9.2 Choice of law

182A Definitions—pt 9.2

(1) In this part:

damages claim—see section 182C.

employer, in relation to a Territory or State, includes an employer within the meaning of the workers compensation law of the Territory or State.

substantive law—see section 182B.

worker, in relation to a Territory or State, includes a worker within the meaning of the workers compensation law of the Territory or State.

- (2) For this part, a *work-related injury* is an injury to a worker for which compensation is payable (whether or not it has been paid) under the workers compensation law of a Territory or State.
- (3) Also, a *work-related injury* includes an injury to a worker for which compensation under a workers compensation law of a Territory or State—
 - (a) would have been payable apart from a provision of the law that excludes the worker's right to compensation because the injury is attributable to any conduct or failure of the worker stated in the provision; or
 - (b) would have been payable if a claim for the compensation had been properly made, and (if applicable) an election to claim compensation (instead of damages) had been properly made.

182B Meaning of substantive law

- (1) For this part, *substantive law* includes each of the following, whether or not it would otherwise be regarded as procedural in nature:
 - (a) a law that establishes, modifies or extinguishes a cause of action or a defence to a cause of action;
 - (b) a law prescribing the time within which an action must be brought (including a law providing for the extension or shortening of that time);
 - (c) a law that provides for the limitation or exclusion of liability or the barring of a right of action if a proceeding on, or arbitration of, a claim is not begun within a stated time;
 - (d) a law that limits the kinds of injury, loss or damage for which damages or workers compensation may be recovered;
 - (e) a law that prevents the recovery of damages or compensation or limits the amount of damages or compensation that can be recovered;
 - (f) a law expressed as a presumption, or rule of evidence, that affects substantive rights;
 - (g) a provision of this chapter, and any other provision of this Act for the interpretation of this chapter;
 - (h) a provision of the law of another Territory or a State about damages for work-related injuries that is prescribed for this section by regulation.
 - Note State includes the Northern Territory (see Legislation Act, dict, pt 1).
- (2) However, *substantive law* does not include a law prescribing rules for choice of law.

182C Meaning of damages claim

- (1) For this part, *damages claim* means a claim for damages in relation to a work-related injury to a worker caused, or claimed to have been caused by—
 - (a) the negligence or other tort of the employer or a person for whose acts the employer is vicariously liable; or
 - (b) a breach of contract by the employer.
- (2) Also, *damages claim* includes a claim for damages in relation to an injury caused, or claimed to have been caused, by negligence or another tort even if the damages are claimed in an action for breach of contract or other action.

182D Applicable substantive law for damages claims

The substantive law of the Territory or State of connection governs—

- (a) whether or not a damages claim can be made in relation to a work-related injury to a worker; and
- (b) if a damages claim can be made—the determination of the damages claim.

182E Claims to which pt 9.2 applies

This part applies only to a damages claim against 1 or more of the following people:

- (a) the employer;
- (b) a person who is vicariously liable for the acts of the employer;
- (c) a person for whose acts the employer is vicariously liable.

Part 9.3 Compensation and common law damages

182EA Application to participate in LTCS scheme

- (1) This section applies if—
 - (a) a worker is proposing to make a claim for damages in relation to an injury for which a claim for compensation has been made, or may be made, under this Act or under the statutory workers compensation scheme of a place outside the ACT; and
 - (b) the worker is eligible to participate in the LTCS scheme in relation to the injury.
- (2) Before the worker brings a court proceeding based on the claim against a respondent for the claim, the worker must apply under the LTCS Act to participate in the LTCS scheme.

Note LTCS Act—see the dictionary.

LTCS scheme—see the LTCS Act, dictionary.

182F Lump sum claims—notice by lawyers to clients about repayment requirements

- (1) This section applies if a person proposes to engage a lawyer to act for the person in a claim for damages in relation to an injury for which a claim for compensation has been made, or may be made, under this Act or under the statutory workers compensation scheme of a place outside the ACT.
- (2) Before accepting the engagement, the lawyer must give the person information explaining the requirements of the following sections for the repayment of compensation together with the employer's legal costs as between party and party:
 - section 36F (No ACT compensation if external compensation received)
 - section 183 (Remedies against employer and stranger)

- section 184 (No compensation if damages received)
- section 185 (Dependants recovering damages and not claiming compensation).

Maximum penalty: 50 penalty units.

Note If a form is approved under s 222 for information to be given by a lawyer under this provision, the form must be used.

(3) Before accepting the engagement, the lawyer must tell the person the likely costs and consequences in relation to the payment of costs if the person pursues the claim for damages.

Maximum penalty: 50 penalty units.

(4) An offence against this section is a strict liability offence.

183 Remedies against employer and stranger

- (1) If an injury in relation to which compensation is payable under this Act is caused under circumstances that appear to create a legal liability in a person other than the employer to pay damages in relation to the injury—
 - (a) the worker may take a proceeding against the person to recover damages and may also make a claim against the employer under this Act; and
 - (b) if the worker receives both amounts under this Act and damages from the other person—the worker must repay to the employer so much of the amounts as does not exceed the amount of the damages received from the person; and
 - (c) on notice to the other person, the employer has a first charge on money payable by the person to the worker to the extent of any amounts that the employer has paid to the worker under this Act; and

- (d) if the worker has received amounts under this Act, but no damages or less than the full amount of the damages to which the worker is entitled—the person liable to pay the damages must indemnify the employer against so much of the amounts paid to the worker as does not exceed the damages for which that person is liable; and
- (e) payment of money by the other person to the employer under paragraph (c) or (d) is, to the extent of the amount paid, a satisfaction of the liability of that person to the worker.
- (2) If an amount of compensation is paid in relation to a lump sum claim, this section applies as if a reference to amounts paid under this Act by an employer to a worker included a reference to any legal costs as between party and party that the employer is liable to pay in relation to the claim.

184 No compensation if damages received

- (1) Compensation under this Act (ACT compensation) is not payable in relation to a worker's injury or the death of a worker to the extent that, independently of this Act, a judgment or agreement for damages (independent damages) has been obtained in relation to the injury or death.
- (2) If a person receives ACT compensation from an employer in relation to a worker's injury or the death of a worker and later receives independent damages in relation to the injury or death, the employer is entitled to recover from the person the recoverable amount.
- (3) For subsection (2), the lesser of the following amounts is the recoverable amount:
 - (a) the amount of ACT compensation;
 - (b) the amount of the independent damages.

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- (4) If an amount of ACT compensation is paid in relation to a lump sum claim, subsection (3) (a) applies as if the reference to the *amount of ACT compensation* paid by the employer included a reference to any legal costs as between party and party that the employer is liable to pay in relation to the claim.
- (5) An employer cannot recover an amount under this section in relation to an injury if the employer has recovered an amount under section 36F (No ACT compensation if external compensation received) in relation to the same injury.

Dependants recovering damages and not claiming compensation

- (1) This section applies if—
 - (a) an employer pays compensation to a dependant of a deceased worker in relation to an injury that resulted in the death of a worker; and
 - (b) damages in relation to the injury have been recovered from the employer or any other person by another dependant of the deceased worker (a *non-claiming dependant*); and
 - (c) no claim for compensation in relation to the injury has been made by or on behalf of the non-claiming dependant.
- (2) If there is only 1 non-claiming dependant, he or she is liable to pay to the employer—
 - (a) if the amount of the damages recovered by the non-claiming dependant is less than the total amount of compensation paid to the dependants of the worker in relation to the worker's injury—the amount of the damages; or
 - (b) in any other case—the total amount of compensation paid to the dependants of the worker in relation to the worker's injury.

- (3) If there is more than 1 non-claiming dependant, each non-claiming dependant is liable to pay to the employer—
 - (a) an amount calculated in accordance with the formula—

$$C \times \frac{D}{TD}$$

where:

C means the total amount of compensation paid to the dependants of the worker in relation to the worker's injury.

D means the amount of damages recovered by the non-claiming dependant in relation to the injury to the worker.

TD means the total of the amounts of damages recovered by all the non-claiming dependants; or

- (b) if the amount of the damages recovered by the non-claiming dependant is less than the amount calculated in accordance with the formula in paragraph (a)—the amount of the damages.
- (4) For subsections (2) and (3), the amount of the compensation paid by the employer in relation to the worker's injury does not include—
 - (a) any amount paid to a dependant of the worker who is not entitled to recover damages in relation to the worker's injury; or
 - (b) any amount paid under this Act, because of the worker's death, for the benefit of a child who was a dependant of the worker.
- (5) If an amount of compensation was paid (or is payable) to the worker in relation to a lump sum claim, subsections (2) and (3) apply as if a reference to *the total amount of compensation* paid by the employer included a reference to any legal costs as between party and party that the employer is liable to pay in relation to the claim.

186 Discharge of liability out of payments into court

- (1) This section applies if—
 - (a) a worker or a dependant of a deceased worker is liable under section 183 (Remedies both against the employer and a stranger) or section 185 (Dependants recovering damages and not claiming compensation) to pay an amount to the worker's employer; and
 - (b) the Magistrates Court or a person appointed by the Magistrates Court for the purpose holds on behalf of the worker or dependant—
 - (i) an amount (a *relevant amount*) of compensation payable for the benefit of, or of damages awarded to, the worker or dependant; or
 - (ii) investments (*relevant investments*) acquired out of a relevant amount.
- (2) If the Magistrates Court or person holds a relevant amount, the court or person must—
 - (a) deduct from the relevant amount an amount not exceeding the amount that the worker or dependant is liable to pay the employer; and
 - (b) pay the amount deducted to the employer.
- (3) If the Magistrates Court or person holds relevant investments, the court or person must—
 - (a) realise some or all of the investments; and
 - (b) deduct from the proceeds of the realisation an amount not exceeding the amount that the worker or dependant is liable to pay the employer; and
 - (c) pay the amount deducted to the employer.

- (4) The payment of an amount under subsection (2) or (3) is a discharge, to the extent of the amount paid, of the liability of—
 - (a) the worker or dependant to the employer; and
 - (b) the Magistrates Court or other person to the worker or dependant.

Part 9.4 LTCS scheme participants

186A LTCS scheme participant—no damages etc for treatment, care and support

(1) This section applies to a person who is a participant in the LTCS scheme in relation to a workplace injury.

Note LTCS scheme—see the LTCS Act, dictionary.

Participant, in the LTCS scheme—see the LTCS Act, dictionary.

- (2) An award of damages or offer of settlement made to the person in relation to the workplace injury must not include an amount for the person's treatment and care needs, or any excluded treatment and care, that—
 - (a) relate to the workplace injury; and
 - (b) arise while the person is a participant in the LTCS scheme.

Note Excluded treatment and care—see the LTCS Act, s 9.

Treatment and care needs, of a participant in the LTCS scheme—see the LTCS Act, s 9.

- (3) This section applies—
 - (a) whether or not the treatment and care needs are assessed treatment and care needs under the LTCS Act; and
 - (b) whether or not the LTCS commissioner is required to make a payment in relation to the treatment and care needs; and
 - (c) whether or not the treatment, care, support or services provided in connection with the treatment and care needs is provided without charge on a gratuitous basis.

Note LTCS Act—see the dictionary.

LTCS commissioner—see the LTCS Act, dictionary.

(4) In this section:

workplace injury—see section 86.

186B Effect of payments under LTCS Act on limitation period

- (1) To remove any doubt, a payment made by the LTCS commissioner under the LTCS Act does not, for the *Limitation Act 1985*, section 32 (Confirmation), confirm a cause of action under this Act.
- (2) In this section:

payment, by the LTCS commissioner, means a payment that is made voluntarily or in accordance with a requirement under the LTCS Act.

Chapter 10 Inspection

187 Definitions—ch 10

In this chapter:

connected—a thing is connected with an offence if—

- (a) the offence has been committed in relation to it; or
- (b) it will provide evidence of the commission of the offence; or
- (c) it was used, or it is intended to be used, to commit the offence.

occupier, of premises, means a person believed by an inspector, on reasonable grounds, to be the occupier of, or in charge of, the premises.

offence includes an offence that there are reasonable grounds for believing has been, or will be, committed.

premises includes—

- (a) a structure, building, aircraft, vehicle or vessel; and
- (b) a place (whether enclosed or built on or not); and
- (c) a part of premises (including premises mentioned in paragraph (a) or (b)).

188 Inspectors

- (1) The regulator may appoint 1 or more inspectors for this Act or a provision of this Act.
 - Note 1 For the making of appointments (including acting appointments), see Legislation Act, div 19.3.
 - Note 2 In particular, a person may be appointed for a particular provision of a law (see Legislation Act, s 7 (3)) and an appointment may be made by naming a person or nominating the occupant of a position (see s 207).
- (2) A person must not be appointed under subsection (1) unless—

- (a) the person is an Australian citizen or a permanent resident of Australia; and
- (b) the regulator has certified in writing that, after appropriate inquiry, the regulator is satisfied that the person is a suitable person to be appointed, having regard in particular to—
 - (i) whether the person has any criminal convictions; and
 - (ii) the person's employment record; and
- (c) the person has satisfactorily completed adequate training to exercise the powers of an inspector proposed to be given to the person.

189 Identity cards

- (1) The regulator must give an inspector an identity card stating the person's name and that the person is an inspector.
- (2) The identity card must show—
 - (a) a recent photograph of the person; and
 - (b) the card's date of issue and expiry; and
 - (c) anything else prescribed by regulation.
- (3) A person commits an offence if—
 - (a) the person stops being an inspector; and
 - (b) the person does not return the person's identity card to the regulator as soon as practicable, but no later than 7 days after the day the person stops being an inspector.

Maximum penalty: 1 penalty unit.

(4) An offence against this section is a strict liability offence.

190 Provision of information to inspectors

- (1) An inspector may, by written notice given to an employer, require the employer to give to the inspector, not later than 3 days after the day the notice is given to the employer—
 - (a) a statement of the total wages paid, in the period stated in the notice, by the employer to territory workers employed by the employer; and
 - (b) a statement setting out—
 - (i) the number of territory workers in each determined category employed by the employer in the period; and
 - (ii) the total wages paid to territory workers in each determined category in the reporting period.
- (2) An inspector may, by written notice given to an employer, require the employer, not later than 3 days after the day the notice is given to the employer—
 - (a) to produce for inspection any compulsory insurance policy to which the employer is a party; and
 - (b) to provide the related information (if any) that the inspector requires in the notice.
- (3) An employer must comply with a notice given to the employer under subsection (1) or (2).
 - Maximum penalty: 50 penalty units.
- (4) A statement made under this section may be signed for the employer by any of the following:
 - (a) if the employer is a corporation—an officer of the corporation authorised to sign the statement;
 - (b) in any other case—an owner of the employer's business.
- (5) An offence against this section is a strict liability offence.

(6) In this section:

employer includes a person whom an inspector believes, on reasonable grounds, is or has been an employer.

certificate of currency—see section 160.

related information includes any of the following records:

- (a) an injury notice under section 93;
- (b) a statement of the employer's estimate under section 155;
- (c) a statement of total wages under section 156;
- (d) a statement of total wages under section 157;
- (e) a statement of total wages under section 158;
- (f) a certificate of currency issued by a licensed insurer to the employer;
- (g) wages and earnings paid by the employer;
- (h) invoices and information related to the invoices given to the employer by an sub-contractor;
- (i) a certificate of currency in relation to a contractor;
- (j) material used by the employer to work out the wages for a statement of total wages;
- (k) business records including business activity statements, minutes of board meetings, financial statements and agreements made with entities related to the employer;
- (l) any record the employer is required to maintain under this Act.

191 Powers of entry

(1) An inspector may at any time enter premises that are, or that the inspector reasonably suspects are, a workplace.

- (2) An entry may be made under subsection (1) with, or without, the consent of the occupier of the premises.
- (3) If an inspector enters premises under subsection (1) that are not a workplace, the inspector must leave the place immediately.
- (4) An inspector may enter any premises if the entry is authorised by a search warrant.

192 Notification of entry

- (1) An inspector may enter a workplace or a suspected workplace under section 191 without prior notice to any person.
- (2) An inspector must, as soon as practicable after entry to the workplace or suspected workplace, take all reasonable steps to notify the following people of the entry and the purpose of the entry:
 - (a) the occupier of the premises;
 - (b) an employer who is on the premises.
- (3) However, an inspector is not required to notify any person if to do so would defeat the purpose for which the place was entered or cause unreasonable delay.

192A General powers on entry

- (1) An inspector who enters premises under section 191 may—
 - (a) require any person on the premises to produce for inspection any document or thing relating to the employment of workers by the employer using the premises; and
 - (b) make copies of, or take extracts from a document mentioned in this subsection; and
 - (c) require anyone on the premises to produce information relating to a document or thing mentioned in this subsection, or information relating generally to the employment of workers by the employer using the premises; and

- (d) require information from—
 - (i) the occupier of the premises; or
 - (ii) an employer who is on the premises; or
 - (iii) a person whom the inspector believes on reasonable grounds is an employer and who is on the premises.
- (2) For subsection (1) (d), *information* means—
 - (a) the person's name and address; and
 - (b) the name under which the business carried on at the premises operates.
- (3) An inspector who enters premises in accordance with this section must, if asked by the occupier of the premises or the employer who is on the premises, show the identity card issued to the inspector under section 189.
- (4) If the inspector does not show the identity card to the occupier or employer when asked, the inspector must leave the premises immediately.
- (5) A person must not contravene a requirement under this section.

Maximum penalty: 50 penalty units.

(6) An offence against subsection (5) is a strict liability offence.

192B Premises used for residential purposes

An inspector's powers to enter premises are not exercisable in relation to a part of premises that is used only for residential purposes except—

- (a) with the consent of the occupier of the premises; or
- (b) under a search warrant; or
- (c) for gaining access to a suspected workplace, but only—

- (i) if the inspector reasonably believes that no reasonable alternative access is available; and
- (ii) at a reasonable time taking into account the times at which the inspector believes work is being carried out at the place to which access is sought.

193 Search warrants

- (1) If an information on oath is laid before a magistrate alleging that there are reasonable grounds for suspecting that there may be, in or on any premises any thing of a particular kind connected with a particular offence against this Act, and the information sets out those grounds, the magistrate may issue a search warrant authorising an inspector named in the warrant, with the assistance and by the force that is necessary and reasonable—
 - (a) to enter the premises; and
 - (b) to search the premises for things of that kind; and
 - (c) to exercise the powers of an inspector under section 191 (3) in relation to the premises or place.
- (2) A magistrate must not issue a warrant unless—
 - (a) the informant or another person has given the magistrate, either orally or by affidavit, any further information that the magistrate requires about the grounds on which the issue of the warrant is being sought; and
 - (b) the magistrate is satisfied that there are reasonable grounds for issuing the warrant.
- (3) A warrant must—
 - (a) state the purpose for which it is issued; and
 - (b) specify the nature of the offence (if any) in relation to which the entry and search are authorised; and

- (c) specify particular hours when the entry is authorised, or state that the entry is authorised at any time of the day or night; and
- (d) include a description of the kinds of things in relation to which the powers under section 191 (3) may be exercised; and
- (e) specify the date, not later than 1 month after the date of issue of the warrant, when the warrant ceases to have effect.

Chapter 11 Procedure for payment of compensation

195 Conciliation and arbitration

All matters and questions (other than prosecutions for offences) arising under this Act must, if no other provision is made in this Act, in the absence of agreement, be settled by conciliation or arbitration in accordance with the regulations.

196 Admissibility of statements by injured workers

- (1) A written statement in relation to a worker's injury that is given by the worker to the worker's employer or to the employer's insurer is not to be admitted in evidence on behalf of the employer or insurer in any proceeding under this Act unless the employer or insurer has, not later than 14 days before the proceeding is heard, given to the worker, or his or her lawyer or agent, a copy of the statement.
- (2) In this section:

insurer means—

- (a) a licensed insurer; or
- (b) the DI fund.

197 Appeals

(1) If a committee or the Magistrates Court gives a decision or makes an order or award in relation to any matter that may be or is required to be settled by arbitration under this Act, any party to the arbitration may appeal from the decision, order or award to the Supreme Court.

- (2) The *Magistrates Court Act 1930*, part 4.5 (Civil appeals) applies in relation to an appeal under subsection (1) as if—
 - (a) it were an appeal from a judgment or order of a kind mentioned in that Act, section 274 (2) (Cases in which appeal may be brought); and
 - (b) for an appeal from a decision, order or award of a committee the decision, order or award were a decision, order or award of the Magistrates Court; and
 - (c) any necessary changes, and any changes prescribed by regulation, were made.

Chapter 12 Notification and review of decisions

198 Definitions—ch 12

In this chapter:

decision-maker—see section 199A (1).

internally reviewable decision—see section 199B (1).

internal reviewer—see section 199B (3).

reviewable decision—see section 199.

199 Application—ch 12

This chapter applies to a decision (a reviewable decision)—

- (a) made by the Minister or regulator under this Act; and
- (b) prescribed by regulation to be a reviewable decision.

199A Notice of reviewable decisions

- (1) If the Minister or regulator (the *decision-maker*) makes a reviewable decision, the decision-maker must give written notice of the decision to each entity prescribed by regulation for the decision.
 - Note 1 The decision-maker must also take reasonable steps to give a reviewable decision notice to any other person whose interests are affected by the decision (see ACT Civil and Administrative Tribunal Act 2008, s 67A).
 - Note 2 The requirements for reviewable decision notices are prescribed under the ACT Civil and Administrative Tribunal Act 2008.
- (2) In particular, the notice must tell the person—
 - (a) whether the person has the right to apply for internal review of the decision or the right to apply to the ACAT for review of the decision, and how the application must be made; and

- (b) if the person has the right to apply for internal review of the decision—that the person has the right to apply to the ACAT for review of the internal review decision if the person is dissatisfied with that decision; and
- (c) about the options available under other ACT laws to have the decision reviewed by a court or the ombudsman.

199B Internal review of certain decisions

- (1) This section applies if a regulation declares that a reviewable decision is a decision that is subject to internal review (an *internally reviewable decision*).
- (2) A person whose interests are affected by an internally reviewable decision may apply in writing to the regulator for internal review of the decision.
- (3) The regulator must arrange for someone else (the *internal reviewer*) to review the decision.
- (4) However, this section does not apply to a reviewable decision made personally by the Minister or the regulator.

Note Section 199E (b) provides for review of decisions exempt from internal review by the ACAT.

199C Applications for internal review

- (1) An application for internal review under section 199B must be made within—
 - (a) 28 days after the day the applicant receives written notice of the decision under section 199A; or
 - (b) any longer period allowed by the internal reviewer, whether before or after the end of the 28-day period.
- (2) The application must set out the grounds on which internal review of the decision is sought.

(3) The making of the application for internal review of the decision does not affect the operation of the decision.

199D Internal review

- (1) The internal reviewer must review the internally reviewable decision, and confirm, vary or revoke the decision, within 28 days after the decision-maker receives the application for internal review of the decision.
- (2) If the decision is not varied or revoked within the 28-day period, the decision is taken to have been confirmed by the internal reviewer.
- (3) As soon as practicable after reviewing the decision, the internal reviewer must give written notice of the decision on the internal review to the applicant.

199E Review of decisions by ACAT

A person may apply to the ACAT for review of—

- (a) a decision made by an internal reviewer; or
- (b) a reviewable decision that is not an internally reviewable decision.

Chapter 13 Miscellaneous

200 Secrecy

(1) In this section:

court includes a tribunal, authority or person having power to require the production of documents or the answering of questions.

divulge includes communicate.

person to whom this section applies means a person who exercises, or has exercised, a function under this Act.

produce includes allow access to.

protected information means information about a person that is disclosed to, or obtained by, a person to whom this section applies because of the exercise of a function under this Act by the person or someone else.

- (2) A person to whom this section applies commits an offence if—
 - (a) the person—
 - (i) makes a record of protected information about someone else; and
 - (ii) is reckless about whether the information is protected information about someone else; or
 - (b) the person—
 - (i) does something that divulges protected information about someone else; and
 - (ii) is reckless about whether—
 - (A) the information is protected information about someone else; and

(B) doing the thing would result in the information being divulged to another person.

Maximum penalty: 50 penalty units, imprisonment for 6 months or both.

- (3) Subsection (2) does not apply if the record is made, or the information is divulged—
 - (a) under this Act or another territory law; or
 - (b) in relation to the exercise of a function, as a person to whom this section applies, under this Act or another territory law.
- (4) Subsection (2) does not apply to the divulging of protected information about someone with the person's consent.
- (5) A person to whom this section applies need not divulge protected information to a court, or produce a document containing protected information to a court, unless it is necessary to do so for this Act or another territory law.

200A Record keeping

- (1) An employer must keep records of the following for 5 years after the day the record is made:
 - (a) an injury notice under section 93;
 - (b) a statement of the employer's estimate under section 155;
 - (c) a statement of total wages under section 156;
 - (d) a statement of total wages under section 157;
 - (e) a statement of total wages under section 158;
 - (f) a certificate of currency issued by a licensed insurer to the employer;
 - (g) wages and earnings paid by the employer;

- (h) invoices and related information given to the employer by a subcontractor:
- (i) a certificate of currency in relation to a contractor;
- (j) material used by the employer to work out the wages for a statement of total wages;
- (k) any record the employer is required to maintain under this Act.

Maximum penalty: 100 penalty units.

- (2) The regulator, or the employer's licensed insurer, may request the employer to make available any of the records mentioned in subsection (1).
- (3) The employer must make the records available, not later than 3 days after a request is made, to the person who requested the records.

Maximum penalty: 50 penalty units.

- (4) An offence against subsection (3) is a strict liability offence.
- (5) In this section:

certificate of currency—see section 160.

201 **Medical referees**

(1) The Minister may appoint 1 or more doctors as medical referees for this Act.

Note For the making of appointments (including acting appointments), see the Legislation Act, pt 19.3.

- (2) The Minister may appoint a doctor as a medical referee only if satisfied that the doctor has the experience and expertise to adequately perform the duties of a medical referee.
- (3) A medical referee must not act as medical referee in relation to an injury if the medical referee's services have been used as a doctor in relation to the injury by, or on behalf of, the employer, worker or licensed insurer.

- (4) A person appointed as a medical referee is to be paid the fees decided by the Minister for the exercise of the person's functions as a medical referee.
- (5) An appointment under subsection (1) is a notifiable instrument.

Note A notifiable instrument must be notified under the Legislation Act.

201A Civil liability of executive officers

- (1) This section applies if the regulator is entitled to recover an amount from a corporation under section 149 (Failure to maintain compulsory insurance policy—regulator entitled to recovery amount) or section 162A (Avoiding payment of premium—regulator entitled to recovery amount).
- (2) An amount is not recoverable from a corporation if the regulator is satisfied that the amount is unlikely to be recovered by reasonable recovery efforts because the corporation is being wound up or is unable to pay its debts or otherwise.
- (3) The regulator may recover the amount from an executive officer if the officer was a culpable executive officer at the relevant time.
- (4) An executive officer is culpable at the relevant time if the officer was an executive officer of the corporation at any time during which the corporation committed the offence to which the entitlement to recover relates.
- (5) However, an executive officer is culpable only if—
 - (a) the officer knew, or ought reasonably to have known, that the offence was committed; or
 - (b) the officer was in a position to influence the corporation's conduct in relation to the offence; or
 - (c) the officer, being in a position to influence the conduct of the corporation, failed to exercise appropriate diligence to prevent the corporation committing the offence.

- (6) If more than 1 executive officer of a corporation is culpable, the culpable executive officers are jointly and severally liable for any amount the regulator may recover under this section.
- (7) If an amount is recovered from an executive officer under this section, the executive officer may recover the amount from the officer's corporation.
- (8) This section does not apply to an amount the regulator is entitled to recover from a corporation in relation to an offence that the corporation committed before the commencement of this section.

202 Time for beginning prosecutions

- (1) A prosecution for an offence against any of the following sections must be started not later than 5 years after the day, or the last day, the offence is committed:
 - section 147 (Compulsory insurance—employers)
 - section 155 (Information for licensed insurers on application for issue or renewal of policies)
 - section 156 (Information for licensed insurers after renewal of policies)
 - section 157 (Information for licensed insurers after end or cancellation of policies)
 - section 158 (Information for new licensed insurers after change of insurers)
 - section 203 (Criminal liability of executive officers).
- (2) Subsection (1) only applies to an offence against section 203 if the offence relates to the contravention by a corporation of another section mentioned in subsection (1).
- (3) A prosecution for an offence against any other provision of this Act may be begun within 1 year after the commission of the offence.

203 Criminal liability of executive officers

- (1) An executive officer of a corporation commits an offence if—
 - (a) the corporation commits a relevant offence; and
 - (b) the officer was reckless about whether the relevant offence would be committed; and
 - (c) the officer was in a position to influence the conduct of the corporation in relation to the commission of the relevant offence: and
 - (d) the officer failed to take reasonable steps to prevent the commission of the relevant offence.

Maximum penalty: The maximum penalty that may be imposed for the commission of the relevant offence by an individual.

- (2) In deciding whether the executive officer took (or failed to take) all reasonable steps to prevent the commission of the offence, a court must consider any action the officer took directed towards ensuring the following (to the extent that the action is relevant to the act or omission):
 - (a) that the corporation arranges regular professional assessments of the corporation's compliance with the provision to which the relevant offence relates;
 - (b) that corporation implements appropriate the any recommendation arising from such an assessment;
 - (c) that the corporation's employees, agents and contractors have a reasonable knowledge and understanding of the requirement to comply with the provision to which the relevant offence relates;
 - (d) any action the officer took when the officer became aware that the relevant offence was, or might be, about to be committed.
- Subsection (2) does not limit the matters the court may consider.

- (4) Subsection (1) does not apply if the corporation would have a defence to a prosecution for the relevant offence.
 - *Note* The defendant has an evidential burden in relation to the matters mentioned in s (4) (see Criminal Code, s 58).
- (5) This section applies whether or not the corporation is prosecuted for, or convicted of, the relevant offence.
- (6) In this section:

relevant offence means an offence against one of the following:

- (a) section 152 (Compulsory insurance—insurers);
- (b) section 155 (2) (Information for licensed insurers on application for issue or renewal of policies);
- (c) section 156 (2) (Information for licensed insurers after renewal of policies);
- (d) section 158 (2) (Information for new licensed insurers after change of licensed insurers);
- (e) section 162 (False information causing lower premium);
- (f) section 163 (Employment after 2nd offence).

204 Court-directed publicity for offences

If an employer is convicted or found guilty of an offence against this Act, the court may direct the employer to publish a statement in relation to the offence.

205 Publication by regulator of convictions etc

- (1) This section applies if a person, or a representative of a person, is convicted or found guilty of an offence against this Act and—
 - (a) the time for making an appeal against the conviction or finding of guilt ends without an appeal being made; or

- (b) if an appeal is made against the conviction or finding of guilt—
 - the conviction or finding is confirmed on appeal, and the time for making any further appeal in relation to the conviction or finding ends without an appeal being made; or
 - (ii) the appeal is withdrawn, struck out or discontinued or lapses; or
- (c) if a retrial has been ordered—the time for making an appeal on the retrial ends in accordance with paragraph (a) or (b).

Note For the meaning of *found guilty*, see the Legislation Act, dict, pt 1.

- (2) The regulator may publish the following information in relation to the conviction or finding of guilt in a way that the regulator considers appropriate:
 - (a) particulars that allow the public to identify the person;
 - (b) details of the offence;
 - (c) the decision of the court and the penalty imposed on the person or a representative of the person (including the forfeiture of anything under this Act).

Examples of publication

- 1 a press release
- 2 an article in a document published by the Territory or a territory authority
- 3 an advertisement in a newspaper circulating generally in the ACT
- 4 a public notice

Examples for par (a)

- 1 the employer's name and ACN (if any)
- 2 any name (and, if relevant, ACN) used in the past by the employer
- 3 the employer's current and previous business addresses
- (3) If the conviction or finding of guilt is quashed or set aside on appeal, the information must not be published.

- (4) If the penalty is changed on appeal, this section applies in relation to the penalty as changed.
- (5) In this section:

representative, of a person, means-

- (a) if the person is an individual—an employee or agent of the person; or
- (b) if the person is a corporation—an employee, agent or executive officer of the person.

206 Minister must take advice

- (1) The Minister must ask for, and take into consideration, the advice of the work health and safety council in relation to the development of regulations for this Act.
- (2) To remove any doubt—
 - (a) it is a function of the work health and safety council to advise the Minister on matters relating to workers compensation; and

Note This function is given to the work health and safety council under the Work Health and Safety Act 2011, sch 2, s 2.2 (1) (a).

(b) the work health and safety council may set up an advisory committee, made up of people with suitable expertise, to help it in the exercise of this function.

Examples—suitable expertise

legal or medical expertise

Note The power to set up an advisory committee if necessary to assist in the exercise of a function is given to the work health and safety council under the Work Health and Safety Act 2011, sch 2, s 2.16.

(3) In this section:

work health and safety council means the work health and safety council established under the Work Health and Safety Act 2011, schedule 2, section 2.1.

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208 Directions about procedure

- (1) If the procedure for taking a step in a proceeding is not prescribed under this Act, the Chief Magistrate may give directions about the procedure to be followed for the step.
- (2) A direction is a notifiable instrument.
 - Note A notifiable instrument must be notified under the Legislation Act.
- (3) If the procedure for taking a step in a proceeding is not prescribed under this Act (including under a direction mentioned under subsection (1)), the Magistrates Court may give directions about the procedure to be followed in relation to the step.

209 References to Workers' Compensation Act etc

In any Act, statutory instrument or document—

- (a) a reference to the *Workers' Compensation Act 1951* or the *Workers Compensation Supplementation Fund Act 1980* is a reference to this Act: and
- (b) a reference to the *nominal insurer* is a reference to the DI fund manager; and
- (c) a reference to the *workers compensation supplementation fund* is a reference to the DI fund.

210 Apportioning cost of administering workers compensation and safety legislation

(1) The Minister may apportion liability for the cost of administering the workers compensation and safety legislation for a financial year among the entities that are licensed insurers or licensed self-insurers during the year.

- (2) To apportion liability for a financial year, the Minister must—
 - (a) determine the overall cost of administering the workers compensation and safety legislation for the year, based on either—
 - (i) the actual cost of administering the legislation; or
 - (ii) an estimate of the cost of administering the legislation; and
 - (b) as far as practicable, determine an amount of the cost of administering the workers compensation and safety legislation that is attributable, or estimated to be attributable, to each licensed insurer and licensed self-insurer for the year.
- (3) If the Minister apportions liability based on an estimate of costs for a financial year (an *estimate year*), the Minister must ensure each licensed insurer and licensed self-insurer's apportioned liability for a later financial year is adjusted to take into account—
 - (a) the actual overall cost of administering the workers compensation and safety legislation for the estimate year; and
 - (b) the actual cost of administering the workers compensation and safety legislation that is attributable, or estimated to be attributable, to the licensed insurer and licensed self-insurer for the estimate year.
- (4) The Minister may apportion liability in relation to an estimate year, and give notice under section 210A for the year, before any actual cost of administering the workers compensation and safety legislation for the year has been incurred.
- (5) If an amount apportioned to a licensed insurer or licensed self-insurer is not paid within the time stated for payment in a notice under section 210A, the amount is a debt owing to the Territory by the licensed insurer or licensed self-insurer.

Note An amount owing under a law may be recovered as a debt in a court of competent jurisdiction or the ACAT (see Legislation Act, s 177).

- (6) An amount received because of an apportionment under this section must be paid into a directorate banking account maintained by the director-general in accordance with the *Financial Management Act* 1996, section 34 (2).
- (7) For this section, the *cost of administering the workers compensation* and *safety legislation* includes a cost incurred by the Magistrates Court in relation to the workers compensation and safety legislation.

210A Notice of apportioned liability

- (1) If the Minister apportions liability under section 210, the Minister must give each licensed insurer and licensed self-insurer a written notice that—
 - (a) sets out details of the apportionment; and
 - (b) requires the licensed insurer or licensed self-insurer to pay to the Territory the amount apportioned to the licensed insurer or licensed self-insurer within the time for payment stated in the notice.
- (2) The time stated for payment in the notice must not be shorter than 30 days after the day the licensed insurer or licensed self-insurer receives the notice.
- (3) The Minister may amend or revoke a notice given under this section.
- (4) In subsection (1) (b):

the amount means either—

- (a) an amount in dollars; or
- (b) a percentage—
 - (i) for a licensed insurer—of the gross written premiums for the licensed insurer; or
 - (ii) for a licensed self-insurer—of the notional gross written premium for the licensed self-insurer.

Miscellaneous

211 Amounts for administering workers compensation and safety legislation

- (1) The costs of administration of the workers compensation and safety legislation may be paid out of amounts received by the Territory under section 210 and any other amounts received by the Territory under the workers compensation and safety legislation.
- (2) To remove any doubt, costs incurred by the Magistrates Court in relation to the workers compensation and safety legislation may be paid out of amounts mentioned in subsection (1).

221 **Determination of fees**

(1) The Minister may determine fees for this Act.

Note The Legislation Act contains provisions about the making of determinations and regulations relating to fees (see pt 6.3).

(2) A determination is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

222 **Approved forms**

- (1) The Minister may approve forms for this Act.
- (2) If the Minister approves a form for a particular purpose, the approved form must be used for that purpose.

For other provisions about forms, see the Legislation Act, s 255.

(3) An approved form is a notifiable instrument.

Note A notifiable instrument must be notified under the Legislation Act.

223 Regulation-making power

(1) The Executive may make regulations for this Act.

Note A regulation must be notified, and presented to the Legislative Assembly, under the Legislation Act.

- (2) A regulation may make provision in relation to the following:
 - (a) medical assessments of injured workers;
 - (b) the use of medical specialists in relation to compensable injuries;
 - (c) the functions of medical referees appointed under this Act;
 - (d) what compulsory insurance policies must, and must not, include;
 - (e) how the performance of brokers and agents in relation to workers compensation in the ACT may be monitored;
 - (f) the maximum fees and expenses that may be required for matters dealt with under this Act in relation to the following:
 - (i) medical examinations or medical treatment;
 - (ii) legal services;
 - (iii) rehabilitation services;
 - (iv) investigative services;
 - (g) fees and expenses that may not, or may not for a period, be claimed from a worker for a service provided in relation to a compensable injury;
 - (h) the action that may be taken in relation to a licensed insurer, licensed self-insurer or approved rehabilitation provider in circumstances prescribed by regulation, including an order that a licensed insurer or provider pay to the Territory an amount of not more than \$17 000;
 - (i) the accreditation of people to act as injury managers;

- (j) arbitration of matters and questions arising under this Act, including provision for the exclusion or modification of the *Commercial Arbitration Act 2017* in its application to such an arbitration;
- (k) protocols that may be approved by the Minister for this Act and how they may be approved;
- (l) the approval of brokers for this Act, including—
 - (i) the factors to be taken into account in deciding whether to approve brokers; and
 - (ii) the conditions that may be imposed on approvals; and
 - (iii) how approvals may be renewed, suspended and revoked.
- (3) A regulation may create offences and fix maximum penalties of not more than 20 penalty units for the offences.

Chapter 21 Transitional—Employment and **Workplace Safety Legislation Amendment Act 2020**

269 Meaning of commencement day

In this chapter:

commencement day means the day the Employment and Workplace Safety Legislation Amendment Act 2020, part 3 (Workers Compensation Act 1951) commences.

270 **Approved insurers**

- (1) This section applies if, immediately before the commencement day, an insurer was an approved insurer under this Act.
- The insurer is, on the commencement day, taken to be a licensed insurer until the end of the period for which the insurer was approved under section 145, as in force immediately before the commencement day.

271 **Self-insurers**

- (1) This section applies if, immediately before the commencement day, an employer was a self-insurer under this Act.
- The employer is, on the commencement day, taken to be a licensed self-insurer until the end of the period for which the employer was exempted under section 151, as in force immediately before the commencement day.

272 Transitional regulations

- (1) A regulation may prescribe transitional matters necessary or convenient to be prescribed because of the enactment of the *Employment and Workplace Safety Legislation Amendment Act 2020*.
- (2) A regulation may modify this chapter (including in relation to another territory law) to make provision in relation to anything that, in the Executive's opinion, is not, or is not adequately or appropriately, dealt with in this chapter.
- (3) A regulation under subsection (2) has effect despite anything elsewhere in this Act or another territory law.

273 Expiry—ch 21

This chapter expires 2 years after the day it commences.

Note Transitional provisions are kept in the Act for a limited time. A transitional provision is repealed on its expiry but continues to have effect after its repeal (see Legislation Act, s 88).

Schedule 1 Compensation for permanent injuries

(see s 48 and s 51)

column 1 item	column 2 nature of injury	column 3 % of single loss amount payable
	Speech loss	
1	loss of power of speech	60
	Sensory loss	
2	loss of sense of taste or smell	17
3	loss of senses of taste and smell	34
	Hearing loss	
4	loss of hearing of both ears	65
5	loss of hearing of 1 ear	20
	Loss of vision	
6	loss of sight of both eyes	100
7	loss of sight of an only eye	100
8	loss of sight of 1 eye, together with serious diminution of	75
_	the sight of the other eye	
9	loss of sight of 1 eye	40
10	loss of binocular vision (if not otherwise compensable under this schedule)	40
11	loss of eyeball (in addition to compensation for loss of sight of the eye)	22
	Arm injuries	
12	loss of right arm at or above elbow	80
13	loss of right arm below elbow	75
14	loss of left arm at or above elbow	75
15	loss of left arm below elbow	70
	Hand injuries	
16	loss of right hand	70
17	loss of left hand	65
18	loss of thumb of right hand	30
19	loss of thumb of left hand	26
20	loss of a joint of thumb	16
21	loss of forefinger of right hand	21

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column 1	column 2	column 3
item	nature of injury	% of single loss amount payable
22	loss of forefinger of left hand	18
23	loss of 2 joints of forefinger of right hand	16
24	loss of 2 joints of forefinger of left hand	12
25	loss of first joint of forefinger of right hand	10
26	loss of first joint of forefinger of left hand	9
27	loss of middle finger of either hand	12
28	loss of 2 joints of middle finger of either hand	10
29	loss of first joint of middle finger of either hand	6
30	loss of little or ring finger of either hand	11
31	loss of 2 joints of little or ring finger of either hand	9
32	loss of first joint of little or ring finger of either hand	6
	Leg injuries	
33	loss of either leg at or above knee	75
34	loss of either leg below knee	70
	Foot injuries	
35	loss of a foot	65
36	loss of great toe of either foot	22
37	loss of a joint of great toe of either foot	10
38	loss of any other toe	6
39	loss of any joint of any other toe	2
	Bowel injury	
40	permanent loss of bowel function	65
	Loss of sexual organs etc	
41	loss of sexual organs	47
42	loss of both breasts	47
43	loss of 1 breast	30
44	permanent and total loss of capacity to engage in sexual intercourse	75
	Brain damage	
45	permanent brain damage if not, or not completely an injury otherwise compensable under this schedule	100
	Permanent impairment of back, neck, pelvis	
46	permanent impairment of back	60
47	permanent impairment of neck	40
48	permanent impairment of pelvis	15
.0	permanent impairment of portio	

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column 1 item	column 2 nature of injury	column 3 % of single loss amount payable
	Disfigurement	
49	severe facial disfigurement if not, or not completely, an	80
	injury otherwise compensable under this schedule	
50	severe bodily disfigurement if not, or not completely, an	50
	injury otherwise compensable under this schedule	
	Disease	
51	HIV infection (Human Immunodeficiency Virus	100
	infection)	
52	AIDS (Acquired Immune Deficiency Syndrome)	100
53	imminently fatal asbestos-related disease	100

Schedule 2 Adjacent areas for States and Territories

(see s 36B (10), def Territory or State)

2.1 Definitions—sch 2

In this schedule:

continental shelf—see the Seas and Submerged Lands Act, section 3 (1).

Petroleum (Submerged Lands) Act means the Petroleum (Submerged Lands) Act 1967 (Cwlth).

Seas and Submerged Lands Act means the Seas and Submerged Lands Act 1973 (Cwlth).

territorial sea—see the Seas and Submerged Lands Act, section 3 (1).

2.2 Adjacent areas for States and the Northern Territory

- (1) The *adjacent area* for New South Wales, Victoria, South Australia or Tasmania is—
 - (a) the part of the area described in the Petroleum (Submerged Lands) Act, schedule 2 for the State that is within the outer limits of the continental shelf; and
 - (b) the space above and below that area.
- (2) The *adjacent area* for Queensland is—
 - (a) the part of the area described in the Petroleum (Submerged Lands) Act, schedule 2 for Queensland that is within the outer limits of the continental shelf; and
 - (b) the Coral Sea area within the meaning of the Petroleum (Submerged Lands) Act, section 5A (7), other than the territorial area within the Coral Sea area; and

- (c) the areas within the outer limits of the territorial sea adjacent to certain islands of Queensland as determined by proclamation on 9 February 1983 under the Seas and Submerged Lands Act, section 7; and
- (d) the space above and below the areas described in paragraphs (a), (b) and (c).
- (3) The *adjacent area* for Western Australia is the part of the area described in the Petroleum (Submerged Lands) Act, schedule 2 for Western Australia that—
 - (a) is within the outer limits of the continental shelf, including the space above and below the area; and
 - (b) is not within Area A of the Zone of Cooperation.
- (4) The *adjacent area* for the Northern Territory is—
 - (a) the part of the area described in the Petroleum (Submerged Lands) Act, schedule 2 for the Northern Territory that—
 - (i) is within the outer limits of the continental shelf; and
 - (ii) is not within Area A of the Zone of Cooperation; and
 - (b) the adjacent area for the Territory of Ashmore and Cartier Islands (within the meaning of the Petroleum (Submerged Lands) Act section 5A (3)) other than the territorial sea within that area; and
 - (c) the space above and below the areas described in paragraph (a) and (b).
- (5) However, the *adjacent area* for a State or the Northern Territory does not include any area inside the limits of a State or Territory.

Schedule 3 DI fund advisory committee

3.1 Definitions—sch 3

In this schedule:

chair means the chair of the committee.

committee means the DI fund advisory committee.

member means a member of the committee.

3.2 Establishment of DI fund advisory committee

The DI fund advisory committee is established.

3.3 Functions of committee

- (1) The committee has the following functions:
 - (a) to keep informed of the operations of the DI fund to provide the advice mentioned in paragraph (b);
 - (b) if the Minister or the DI fund manager asks for advice in relation to the DI fund—to provide the advice requested.
- (2) The committee may exercise any other function given to it under this Act or any other territory law.

Note A provision of a law that gives an entity (including a person) a function also gives the entity powers necessary and convenient to exercise the function (see Legislation Act, s 196 and dict, pt 1, def *entity*).

3.4 Membership of committee

- (1) The committee consists of—
 - (a) the DI fund manager; and
 - (b) the regulator; and

- (c) 3 members appointed by the Minister.
- Note For laws about appointments, see the Legislation Act, pt 19.3.
- (2) The Minister must appoint the following members:
 - (a) 1 member that the Minister is satisfied represents the interests of employers;
 - (b) 1 member that the Minister is satisfied represents the interests of workers;
 - (c) 1 member that the Minister is satisfied represents the interests of insurers.
- (3) An appointment under subsection (2) must not be for longer than 3 years.

3.5 When DI fund manager not member of committee

The DI fund manager is not a member of the committee if it is considering the manager's conduct under this Act.

3.6 **Ending of members' appointments**

The Minister may end the appointment of a member (other than the DI fund manager or regulator)—

- (a) if the member contravenes a territory law; or
- (b) for misbehaviour; or
- (c) if the member becomes bankrupt or executes a personal insolvency agreement; or
- (d) if the member is convicted, or found guilty, in Australia of an offence punishable by imprisonment for at least 1 year; or
- (e) if the member is convicted, or found guilty, outside Australia of an offence that, if it had been committed in the ACT, would be punishable by imprisonment for at least 1 year; or

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- (f) if the member exercises the member's functions other than in accordance with section 3.8 (Honesty, care and diligence of members); or
- (g) if the member fails to take all reasonable steps to avoid being placed in a position where a conflict of interest arises during the exercise of the member's functions; or
- (h) if the member contravenes section 3.11 (Disclosure of interests by members); or
- (i) if the member is absent, other than on leave approved by the Minister, from 3 consecutive meetings of the committee; or
- (j) for physical or mental incapacity, if the incapacity substantially affects the exercise of the member's functions.

Note A person's appointment also ends if the person resigns (see Legislation Act, s 210).

3.7 Committee chair

The committee chair is the regulator.

3.8 Honesty, care and diligence of members

In exercising the functions of a member, a member must exercise the degree of honesty, care and diligence required to be exercised by a director of a corporation in relation to the affairs of the corporation.

3.9 Conflicts of interest by members

A member must take all reasonable steps to avoid being placed in a position where a conflict of interest arises during the exercise of the member's functions.

3.10 Agenda to require disclosure of interest item

(1) The agenda for each meeting of the committee must include an item requiring any material interest in an issue to be considered at the meeting to be disclosed to the meeting.

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(2) In this section:

material interest—see section 3.11 (4).

3.11 Disclosure of interests by members

(1) If a member has a material interest in an issue being considered, or about to be considered, by the committee, the member must disclose the nature of the interest at a committee meeting as soon as practicable after the relevant facts come to the member's knowledge.

Material interest is defined in s (4). The definition of *indirect interest* in s (4) applies to the definition of *material interest*.

- (2) The disclosure must be recorded in the committee's minutes and, unless the committee otherwise decides, the member must not—
 - (a) be present when the committee considers the issue; or
 - (b) take part in a decision of the committee on the issue.

Example

Jane, Jerome and Kimberley are members of the committee. They have an interest in an issue being considered at a committee meeting and they disclose the interest as soon as they become aware of it. Jerome's and Kimberley's interests are minor but Jane has a direct financial interest in the issue.

The committee considers the disclosures and decides that because of the nature of the interests:

- Jerome may be present when the committee considers the issue but not take part in the decision
- Kimberley may be present for the consideration and take part in the decision.

The committee does not make a decision allowing Jane to be present or take part in the committee's decision. Accordingly, because Jane has a material interest, she cannot be present for the consideration of the issue or take part in the decision.

(3) Any other member who also has a material interest in the issue must not be present when the committee is considering its decision under subsection (2).

(4) In this section:

associate, of a person, means—

- (a) the person's business partner; or
- (b) a close friend of the person; or
- (c) a family member of the person.

executive officer, of a corporation, means a person (however described) who is concerned with, or takes part in, the corporation's management, whether or not the person is a director of the corporation.

indirect interest—without limiting the kinds of indirect interests a person may have, a person has an *indirect interest* in an issue if any of the following has an interest in the issue:

- (a) an associate of the person;
- (b) a corporation if the corporation has not more than 100 members and the person, or an associate of the person, is a member of the corporation;
- (c) a subsidiary of a corporation mentioned in paragraph (b);
- (d) a corporation if the person, or an associate of the person, is an executive officer of the corporation;
- (e) the trustee of a trust if the person, or an associate of the person, is a beneficiary of the trust;
- (f) a member of a firm or partnership if the person, or an associate of the person, is a member of the firm or partnership;
- (g) someone else carrying on a business if the person, or an associate of the person, has a direct or indirect right to participate in the profits of the business.

material interest—a member has a *material interest* in an issue if the member has—

- (a) a direct or indirect financial interest in the issue; or
- (b) a direct or indirect interest of any other kind if the interest could conflict with the proper exercise of the member's functions in relation to the committee's consideration of the issue.

3.12 Reporting of disclosed committee interests to Minister

- (1) Not later than 3 months after the day a material interest is disclosed under section 3.11 (1), the committee chair must report to the Minister in writing about—
 - (a) the disclosure; and
 - (b) the nature of the interest disclosed; and
 - (c) any decision by the committee under section 3.11 (2).
- (2) The chair must also give the Minister, not later than 31 days after the end of each financial year, a statement that sets out the information given to the Minister in reports under subsection (1) that relate to disclosures made during the previous financial year.
- (3) The Minister must give a copy of the statement to the relevant Assembly committee not later than 31 days after the day the Minister receives the statement.
- (4) In this section:

material interest means—see section 3.11 (4).

relevant Assembly committee means a standing committee of the Legislative Assembly nominated, in writing, by the Speaker for subsection (3).

3.13 Protection of members from liability

- (1) A member is not civilly liable for anything done or omitted to be done honestly and without recklessness—
 - (a) in the exercise of a function under this Act; or
 - (b) in the reasonable belief that the act or omission was in the exercise of a function under this Act.
- (2) Any liability that would, apart from subsection (2), attach to a member attaches instead to the Territory.

3.14 Time and place of committee meetings

- (1) The committee is to meet when and where it decides.
- (2) However, the committee must meet at least once every 3 months.
- (3) The chair—
 - (a) may at any time call a meeting of the committee; and
 - (b) must call a meeting if asked by the Minister or at least 2 members.
- (4) The chair must give the members reasonable notice of the time and place of a meeting called by the chair.

3.15 Presiding member at committee meetings

- (1) The chair presides at all meetings of the committee at which the chair is present.
- (2) If the chair is absent, the member chosen by the members present presides.

3.16 Quorum at committee meetings

Business may be carried on at a meeting of the committee only if the following members are present:

(a) the regulator or the DI fund manager;

(b) at least 2 members appointed by the Minister.

3.17 Voting at committee meetings

- (1) At a meeting of the committee each member (other than the DI fund manager) has a vote on each question to be decided.
- (2) A question is decided by a majority of the votes of the members present and voting but, if the votes are equal, the member presiding has a deciding vote.

3.18 Conduct of committee meetings etc

- (1) The committee may conduct proceedings (including its meetings) as it considers appropriate.
- (2) A meeting may be held using a method of communication, or a combination of methods of communication, that allows a committee member taking part to hear what each other member taking part says without the members being in each other's presence.

Examples

a phone link, a satellite link, an internet or intranet link

- (3) A member who takes part in a meeting conducted under subsection (2) is taken, for all purposes, to be present at the meeting.
- (4) A resolution is a valid resolution of the committee, even if it is not passed at a meeting of the committee, if all members agree to the proposed resolution in writing or by electronic communication.

Example of electronic communication

email

(5) The committee must keep minutes of its meetings.

Dictionary

(see s 2)

- Note 1 The Legislation Act contains definitions and other provisions relevant to this Act.
- *Note* 2 For example, the Legislation Act, dict, pt 1 defines the following terms:
 - ACAT
 - ACT
 - Australian statistician
 - contravene
 - director-general (see s 163)
 - doctor
 - fail
 - financial year
 - found guilty
 - in relation to
 - Magistrates Court
 - penalty unit (see s 133)
 - proceeding
 - public notice
 - public servant
 - quarter
 - reviewable decision notice
 - territory law
 - under
 - work health and safety commissioner
 - year.

act of terrorism, for part 8.3 (Acts of terrorism)—see section 179C.

annual premium, for an employer, for part 5.4A (Return-to-work coordinators)—see section 103A.

approved rehabilitation provider—see section 139 (1).

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asbestos-related disease means a disease caused by exposure to asbestos.

assessed treatment and care needs, of a participant in the LTCS scheme—see the LTCS Act, section 29.

auditor means any of the following:

- (a) an auditor registered under the Corporations Act;
- (b) a member of the Institute of Chartered Accountants in Australia;
- (c) a member of CPA Australia;
- (d) a member of the Institute of Public Accountants.

average pre-incapacity weekly earnings means earnings worked out under—

- (a) for a worker who is not a contractor—section 21; or
- (b) for a worker who is a contractor—section 22.

average pre-incapacity weekly hours means hours worked out under—

- (a) for a worker who is not a contractor—section 23; or
- (b) for a worker who is a contractor—section 24.

AWE means—

(a) the average weekly earnings seasonally adjusted for the ACT (all males total earnings) in *Average Weekly Earnings, Australia* (State and Territory Earnings) issued by the Australian statistician; or

Note Average Weekly Earnings, Australia is issued in May and November and is available at www.abs.gov.au.

(b) if the Australian statistician issues a publication (however described) containing average weekly earnings in substitution for, or instead of, the average weekly earnings mentioned in paragraph (a)—the substituted average weekly earnings.

awe indexed, for an amount, for chapter 4 (Entitlement to compensation)—see section 20.

boilermakers deafness includes deafness of a similar origin.

chair, for schedule 3 (DI fund advisory committee)—see schedule 3, section 3.1.

child, of a worker, means a child of the worker who is—

- (a) not in a domestic partnership; and
- (b) under16 years old or a full-time student.

Note For the meaning of *domestic partnership*, see the Legislation Act, s 169.

chiropractor means a person registered under the *Health Practitioner Regulation National Law (ACT)* to practise in the chiropractic profession (other than as a student).

claim for payment, by a person, for part 8.2 (Default insurance fund)—see section 170.

claims manager, for part 8.2 (Default insurance fund)—see section 165.

committee—

- (a) for a matter arising under the Act between an employer and the employer's workers—means a committee that—
 - (i) represents the employer and workers; and
 - (ii) has the power to decide the matter; and
- (b) for schedule 3 (DI fund advisory committee)—see schedule 3, section 3.1.

compensable injury means an injury in relation to which compensation is payable under this Act.

compensation means an amount payable under this Act in relation to an injury to, or the death of, a person.

compulsory insurance policy—see section 144.

connected, for chapter 10 (Inspection)—see section 187.

continental shelf, for schedule 2 (Adjacent areas for States and Territories)—see schedule 2, section 2.1.

cpi indexed, for an amount, for chapter 4 (Entitlement to compensation)—see section 20.

damages, for chapter 9 (Common law damages)—see section 180.

damages claim, for part 9.2 (Choice of law)—see section 182C.

decision-maker, for chapter 12 (Notification and review of decisions)—see section 199A (1).

deductible proportion, for part 4.4 (Compensation for permanent injuries)—see section 61 (1).

dependant, of a dead worker, means an individual—

- (a) who was totally or partly dependent on the worker's earnings on the day of the worker's death or who would, apart from the worker's incapacity because of the injury, have been so dependent; and
- (b) who was—
 - (i) a member of the worker's family; or
 - (ii) a person to whom the worker acted in place of a parent or who acted in place of a parent for the worker.

determined categories, of territory workers, means the categories of workers determined by the Minister under section 8 (3).

DI fund means the Default Insurance Fund established under section 166.

DI fund actuary means the actuary engaged as DI fund actuary under section 166H.

DI fund advisory committee means the DI fund advisory committee established under schedule 3, section 3.2.

DI fund manager means the DI fund manager appointed under section 166C.

disease includes any physical or mental ailment, disorder, defect or morbid condition, whether of sudden or gradual development, and also includes the aggravation, acceleration or recurrence of a pre-existing disease.

domestic partner, of a worker who has died, means the person who was the worker's domestic partner when the worker died.

Note This definition qualifies the meaning of *domestic partner* given by the Legislation Act, s 169.

employer—

- (a) for this Act generally—see section 5; and
- (b) for part 4.2A (Employment connection with ACT or State)—see section 36A (2); and
- (c) for chapter 5 (Injury management process)—see section 87; and
- (d) for part 9.2 (Choice of law)—see section 182A (1).

employment, for part 4.2A (Employment connection with ACT or State)—see section 36A (2).

excluded treatment and care—see the LTCS Act, section 9.

executive officer, of a corporation, means a person, by whatever name called and whether or not the person is a director of the corporation, who is concerned with, or takes part in, the corporation's management.

full-time student means an individual who—

- (a) is at least 16 years old but younger than 25; and
- (b) is receiving full-time education at a secondary or tertiary educational institution.

given to the insurer, for pt 6.2 (Time for accepting or rejecting claims)—see section 127 (2).

gross written premiums, in relation to a licensed insurer, means the total amount of premiums, less GST, for all insurance policies written by the licensed insurer for a policy period.

imminently fatal asbestos-related disease, in a person, means an asbestos-related disease that is reasonably likely to—

- (a) substantially contribute to the death of the person; and
- (b) result in the death of the person within 2 years after a doctor mentioned in section 116 (2) (a) certifies the person has the disease.

initial incapacity date, for a worker in relation to an injury that causes incapacity or death, for part 4.3 (Weekly compensation)—see section 36G.

initial loss, for part 4.4 (Compensation for permanent injuries)—see section 61 (1).

injured worker—see section 85A.

injury—

- (a) for this Act generally—see section 4; and
- (b) for chapter 9 (Common law damages claims)—see section 180.

injury management, for chapter 5 (Injury management process)—see section 86.

injury management program, for chapter 5 (Injury management process)—see section 86.

injury notice—

- (a) for chapter 5 (Injury management process)—see section 93 (2); and
- (b) for chapter 6 (Claims)—see section 120.

inspector means an inspector appointed under section 188 (1).

insurance service—see section 143A.

insurer—

- (a) for chapter 5 (Injury management process)—
 - (i) see section 86A; and
 - (ii) if there is more than 1 employer of a worker—see section 87; and
- (b) for part 6.2 (Time for accepting or rejecting claims)—see section 127 (1); and
- (c) for part 8.3 (Acts of terrorism)—see section 179B.

insurer licence—see section 143A.

internally reviewable decision, for chapter 12 (Notification and review of decisions)—see section 199B (1).

internal reviewer, for chapter 12 (Notification and review of decisions)—see section 199B (3).

licence, for division 8.1.5 (Regulatory action)—see section 164A.

licensed insurer—see section 143A.

licensed self-insurer—see section 143A.

licensee, for division 8.1.5 (Regulatory action)—see section 164A.

liquidator, of an insurer, includes—

- (a) the official manager of the insurer; or
- (b) the receiver of the insurer's property; or
- (c) the receiver and manager of the insurer's property; or
- (d) the managing controller of the insurer's property.

loss, for chapter 4 (Entitlement to compensation)—see section 48.

LTCS Act means the Lifetime Care and Support (Catastrophic Injuries) Act 2014.

LTCS commissioner—see the LTCS Act, dictionary.

LTCS scheme—see the LTCS Act, dictionary.

lump sum claim means a claim for compensation under this Act in relation to a loss to which part 4.4 (Compensation for permanent injuries) or 4.6 (Compensation for death) applies.

managing controller—see the Corporations Act, section 9.

maximum loss amount, for part 4.4 (Compensation for permanent injuries)—see section 50.

medical referee means a medical referee appointed under section 201.

medical treatment means—

- (a) an examination, test or analysis, conducted by or under the direction, or at the request, of a doctor to diagnose an injury; or
- (b) medical or surgical treatment by a doctor; or
- (c) dental treatment by a dentist or a dental prosthetist; or
- (d) chiropractic treatment by a chiropractor; or
- (e) treatment by a psychologist; or
- (f) therapeutic treatment by a masseur, osteopath, physiotherapist, remedial kinesiologist or speech therapist; or
- (g) therapeutic treatment given on referral by a doctor or dentist; or
- (h) the taking of x-rays; or
- (i) the provision, repair or replacement of contact lenses, crutches, prostheses, spectacles or other artificial aids; or
- (j) a consultation, examination, therapeutic treatment or other service reasonably rendered in relation to a treatment mentioned in paragraph (c), (d), (f), (g), (h) or (i); or

- (k) treatment and maintenance as a patient at a hospital; or
- (l) the provision of nursing attendance, medicines, medical and surgical supplies and curative apparatus in a hospital or otherwise.

member, for schedule 3 (DI fund advisory committee)—see schedule 3, section 3.1

member of the family, in relation to a worker or an employer, means the grandchild, child, stepchild, adopted child, sister, brother, half-sister, half-brother, domestic partner, parent, step-parent, mother-in-law, father-in-law or grandparent of the worker or employer.

Note For the meaning of *domestic partner*, see the Legislation Act, s 169. If a worker has died, the definition of *domestic partner* elsewhere in the dictionary provides that the term refers to the person who was the worker's domestic partner when the worker died.

nominated treating doctor, for chapter 5 (Injury management process)—see section 86.

non-business employer means an employer who employs the worker other than for work that is for (or incidental to) the employer's trade or business.

notional gross written premium, in relation to a licensed self-insurer, means the total amount of premium that would have been payable, less GST, if the licensed self-insurer had obtained a compulsory insurance policy for a policy period.

occupier, for chapter 10 (Inspection)—see section 187.

offence, for chapter 10 (Inspection)—see section 187.

official manager—see the Corporations Act, section 9.

osteopath means a person registered under the *Health Practitioner Regulation National Law (ACT)* to practise in the osteopathy profession (other than as a student).

partially incapacitated—see section 7.

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participant, in the LTCS scheme—see the LTCS Act, dictionary.

payment includes a non-monetary payment.

personal injury plan—see section 85A.

Petroleum (Submerged Lands) Act, for schedule 2 (Adjacent areas for States and Territories)—see schedule 2, section 2.1.

physiotherapist means a person registered under the *Health Practitioner Regulation National Law (ACT)* to practise in the physiotherapy profession (other than as a student).

premises, for chapter 10 (Inspection)—see section 187.

professional sporting activity means—

- (a) participation for fee or reward as a contestant in a sporting or athletic activity; or
- (b) training or preparation for such participation; or
- (c) travelling to or from a place for the purpose of such participation, training or preparation.

protocol—

- (a) for this Act generally—means a protocol, approved by regulation, prescribing how certain activities under this Act should be performed; and
- (b) for chapter 7 (Vocational rehabilitation)—see section 141.

receiver and manager—see the Corporations Act, section 9.

registered agreement means an agreement registered under section 79.

regulator—see the *Work Health and Safety Act 2011*, dictionary.

regulator condition, in relation to an insurer licence or a self-insurer licence, means a condition the regulator considers appropriate for the licence.

regulatory action, for division 8.1.5 (Regulatory action)—see section 164A.

rehabilitation services includes training and retraining services.

return-to-work coordinator, for part 5.4A (Return-to-work coordinators)—see section 103A.

return-to-work program means a program mentioned in section 109.

reviewable decision, for chapter 12 (Notification and review of decisions)—see section 199.

Seas and Submerged Lands Act, for schedule 2 (Adjacent areas for States and Territories)—see schedule 2, section 2.1.

self-insurer licence—see section 143A.

single loss amount, for part 4.4 (Compensation for permanent injuries)—see section 49.

speech therapist means—

- (a) a person entitled to practise as a speech therapist under a law of the Territory, a State or another Territory; or
- (b) a person who is a member of the Australian Association for Speech and Hearing.

statutory floor, for part 4.3 (Weekly compensation)—see section 36G (1).

substantial means real, actual or material.

substantive law, for part 9.2 (Choice of law)—see section 182B.

temporary fund, for part 8.3 (Acts of terrorism)—see section 179D (1).

temporary fund threshold amount, for part 8.3 (Acts of terrorism)—see section 179A (2).

territorial sea, for schedule 2 (Adjacent areas for States and Territories)—see schedule 2, section 2.1.

Territory or State of connection—see section 36A.

territory worker means a worker for whom the ACT is the Territory or State of connection.

therapeutic treatment includes an examination, test or analysis done for the purpose of diagnosing, or treatment given for the purpose of alleviating, an injury.

totally incapacitated—see section 6.

total wages—see section 7A.

treatment and care needs, of a participant in the LTCS scheme—see the LTCS Act, section 9.

vocational rehabilitation, for chapter 7 (Vocational rehabilitation)—see section 140.

weekly compensation, for a worker, for part 4.3 (Weekly Compensation)—see section 36G.

worker—

- (a) for this Act generally—see chapter 3; and
- (b) for part 4.2A (Employment connection with ACT or State)—see section 36A (2); and
- (c) for part 9.2 (Choice of law)—see section 182A (1).

workers compensation and safety legislation means this Act and the Work Health and Safety Act 2011.

workers compensation law means a law of a place that sets up a statutory scheme for the compensation of injuries arising out of or in the course of employment.

workplace injury, for chapter 5 (Injury management process)—see section 86.

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work-related injury, for part 9.2 (Choice of law)—see section 182A (2) and (3).

Endnotes

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1 **About the endnotes**

Amending and modifying laws are annotated in the legislation history and the amendment history. Current modifications are not included in the republished law but are set out in the endnotes.

Not all editorial amendments made under the Legislation Act 2001, part 11.3 are annotated in the amendment history. Full details of any amendments can be obtained from the Parliamentary Counsel's Office.

Uncommenced amending laws are not included in the republished law. The details of these laws are underlined in the legislation history. Uncommenced expiries are underlined in the legislation history and amendment history.

If all the provisions of the law have been renumbered, a table of renumbered provisions gives details of previous and current numbering.

The endnotes also include a table of earlier republications.

2 Abbreviation key

A = ActNI = Notifiable instrument

AF = Approved form o = orderom = omitted/repealed am = amended amdt = amendment ord = ordinance

AR = Assembly resolution orig = original

par = paragraph/subparagraph ch = chapter CN = Commencement notice pres = present

def = definition prev = previous DI = Disallowable instrument

(prev...) = previously dict = dictionary pt = part

disallowed = disallowed by the Legislative r = rule/subrule Assembly reloc = relocated div = division renum = renumbered exp = expires/expired R[X] = Republication No

Gaz = gazette RI = reissue hdg = heading s = section/subsection IA = Interpretation Act 1967 sch = schedule

ins = inserted/added sdiv = subdivision LA = Legislation Act 2001 SL = Subordinate law LR = legislation register sub = substituted

LRA = Legislation (Republication) Act 1996 underlining = whole or part not commenced

mod = modified/modification or to be expired

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3 Legislation history

This Act was originally a Commonwealth ordinance—the *Workmen's Compensation Ordinance 1951* No 2 (Cwlth).

The Australian Capital Territory (Self-Government) Act 1988 (Cwlth), s 34 (4) converted most former Commonwealth ordinances in force in the ACT into ACT enactments. This allowed the ACT Legislative Assembly to amend and repeal the laws. This Act was converted into an ACT enactment on 11 May 1989 (self-government day).

As with most ordinances in force in the ACT, the name was changed from *Ordinance* to *Act* by the *Self-Government (Citation of Laws) 1989* A1989-21, s 5 on 11 May 1989 (self-government day).

The Act was renamed as the *Workers' Compensation Act 1951* by the *Workers' Compensation (Amendment) Act 1991* A1991-105, and later renamed as the *Workers Compensation Act 1951* under the *Legislation Act 2001* (see also A2001-81 s 5).

Before 11 May 1989, ordinances commenced on their notification day unless otherwise stated (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12).

Legislation before becoming Territory enactment

Workmen's Compensation Act 1951 A1951-2

notified 21 March 1951 (Cwlth Gaz 1951 No 20) commenced 21 March 1951 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

as amended by

Workmen's Compensation Ordinance 1952 Ord1952-4

notified 1 May 1952 (Cwlth Gaz 1952 No 34) commenced 1 May 1952 (s 2 and Cwlth Gaz 1952 No 34)

Workmen's Compensation Ordinance 1954 Ord1954-12

notified 3 June 1954 (Cwlth Gaz 1954 No 35) commenced 3 June 1954 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance 1956 Ord1956-1

notified 1 March 1956 (Cwlth Gaz 1956 No 10) commenced 1 March 1956 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

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Workmen's Compensation Ordinance 1959 Ord1959-12

notified 17 September 1959 (Cwlth Gaz 1959 No 57) commenced 17 September 1959 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance (No 2) 1959 Ord1959-20

notified 23 December 1959 (Cwlth Gaz 1959 No 84) commenced 23 December 1959 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Ordinances Revision Ordinance 1959 Ord1959-21

notified 23 December 1959 (Cwlth Gaz 1959 No 84) commenced 31 December 1959 (s 2)

Workmen's Compensation Ordinance 1961 Ord1961-8

notified 1 June 1961 (Cwlth Gaz 1961 No 48) commenced 1 June 1961 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance 1962 Ord1962-10

notified 6 September 1962 (Cwlth Gaz 1962 No 75) commenced 6 September 1962 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance 1965 Ord1965-6

notified 13 May 1965 (Cwlth Gaz 1965 No 40) commenced 10 June 1965 (s 2)

Workmen's Compensation Ordinance 1967 Ord1967-44

notified 14 December 1967 (Cwlth Gaz 1967 No 106) commenced 14 December 1967 (see Seat of Government (Administration) Act 1910 (Cwlth), s 12)

Workmen's Compensation Ordinance 1968 Ord1968-19

notified 3 October 1968 (Cwlth Gaz 1968 No 81) commenced 3 October 1968 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance 1969 Ord1969-7

notified 29 May 1969 (Cwlth Gaz 1969 No 44) commenced 29 May 1969 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workers Compensation Act 1951 R81 Effective: 09/01/23-09/01/23 09/01/23

Workmen's Compensation Ordinance (No 2) 1969 Ord1969-13

notified 24 July 1969 (Cwlth Gaz 1969 No 62) commenced 24 July 1969 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance (No 3) 1969 Ord1969-18

notified 28 August 1969 (Cwlth Gaz 1969 No 72) commenced 1 September 1969 (s 2)

Workmen's Compensation Ordinance 1970 Ord1970-26

notified 9 July 1970 commenced 20 July 1970 (Cwlth Gaz 1970 p 4716)

Workmen's Compensation Ordinance 1971 Ord1971-15 (as amended by Ord1978-47)

notified 1 July 1971 (Cwlth Gaz 1971 No 66) commenced 1 July 1971 (s 2)

Workmen's Compensation Ordinance 1972 Ord1972-35

notified 2 November 1972 (Cwlth Gaz 1972 No 103) commenced 2 November 1972 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance (No 2) 1972 Ord1972-38

notified 23 November 1972 (Cwlth Gaz 1972 No 118) commenced 23 November 1972 (s 2)

Workmen's Compensation Ordinance 1973 Ord1973-11

notified 5 April 1973 (Cwlth Gaz 1973 No 40) commenced 5 April 1973 (see *Seat of Government (Administration) Act* 1910 (Cwlth), s 12)

Workmen's Compensation Ordinance 1974 Ord1974-34

notified 25 September 1974 (Cwlth Gaz 1974 No 78B) commenced 25 September 1974 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation Ordinance 1975 Ord1975-11

notified 1 May 1975 (Cwlth Gaz 1975 No S78) commenced 1 May 1975 (see *Seat of Government (Administration) Act* 1910 (Cwlth), s 12)

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Workmen's Compensation (Amendment) Ordinance 1978 Ord1978-15 (as amended by Ord1978-47)

notified 8 June 1978 (Cwlth Gaz 1978 No S99) commenced 8 June 1978 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Ordinances Revision Ordinance 1978 Ord1978-46

notified 28 December 1978 (Cwlth Gaz 1978 No S292) commenced 28 December 1978 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation (Amendment) Ordinance (No 2) 1978 Ord1978-47 (as amended by Ord1979-15)

notified 28 December 1978 (Cwlth Gaz 1978 No S292) commenced 28 December 1978 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation (Amendment) Ordinance 1979 Ord1979-15

notified 29 June 1979 (Cwlth Gaz 1979 No S122) commenced 29 June 1979 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation (Amendment) Ordinance 1980 Ord1980-29

notified 11 September 1980 (Cwlth Gaz 1980 No S203) commenced 11 September 1980 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation (Amendment) Ordinance 1981 Ord1981-4

notified 4 March 1981 (Cwlth Gaz 1981 No S37) commenced 4 March 1981 (see *Seat of Government (Administration) Act 1910* (Cwlth), s 12)

Workmen's Compensation (Amendment) Ordinance 1982 Ord1982-103

notified 31 December 1982 (Cwlth Gaz 1982 No S274) taken to have commenced 1 July 1982 (s 2)

Workmen's Compensation (Amendment) Ordinance (No 2) 1982 Ord1982-104

notified 31 December 1982 (Cwlth Gaz 1982 No S274) commenced 1 January 1983 (s 2)

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Workmen's Compensation (Amendment) Ordinance 1983 Ord1983-69 (as amended by Ord1984-5)

notified 30 December 1983 (Cwlth Gaz 1983 No S349) commenced 30 December 1983 (s 2 and Cwlth Gaz 1983 No S349)

Court of Petty Sessions (Civil Jurisdiction) Ordinance 1984 Ord1984-76

notified 19 December 1984 (Cwlth Gaz 1984 No S530) commenced 19 December 1984 (see Seat of Government (Administration) Act 1910 (Cwlth), s 12)

Public Trustee (Miscellaneous Amendments) Ordinance 1985 Ord1985-9

notified 8 March 1985 (Cwlth Gaz 1985 No S69) commenced 28 October 1985 (s 2 and Cwlth Gaz 1985 No G42)

Magistrates Court Ordinance 1985 Ord1985-67

notified 19 December 1985 (Cwlth Gaz 1985 No S542) commenced 1 February 1986 (s 2 and Cwlth Gaz 1986 No G3)

Commercial Arbitration Ordinance 1986 Ord1986-84

notified 22 December 1986 (Cwlth Gaz 1986 No S664) commenced 2 March 1987 (s 2 and Cwlth Gaz 1987 No G6)

Workmen's Compensation (Amendment) Ordinance 1987 Ord1987-10

notified 2 April 1987 (Cwlth Gaz 1987 No S59) commenced 2 April 1987 (see Seat of Government (Administration) Act 1910 (Cwlth), s 12)

Workmen's Compensation (Amendment) Ordinance (No 2) 1987 Ord1987-24

notified 15 June 1987 (Cwlth Gaz 1987 No S127) commenced 15 June 1987 (see Seat of Government (Administration) Act 1910 (Cwlth), s 12)

Self-Government (Consequential Amendments) Ordinance 1989 Ord1989-38 sch 1

notified 10 May 1989 (Cwlth Gaz 1989 No S160) s 1, s 2 commenced 10 May 1989 (s 2 (1)) sch 1 commenced 11 May 1989 (s 2 (2) and see Cwlth Gaz 1989 No S164)

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Legislation after becoming Territory enactment

Magistrates and Coroner's Courts (Registrar) Act 1991 A1991-44 s 7

notified 20 September 1991 (Gaz 1991 No S95)

s 1, s 2 commenced 20 September 1991 (s 2 (1))

s 7 commenced 25 September 1991 (s 2 (2) and Gaz 1991 No S103)

Workers' Compensation (Amendment) Act 1991 A1991-105

notified 15 January 1992 (Gaz 1992 No S3)

ss 1-3 commenced 15 January 1992 (s 2 (1))

remainder commenced 22 January 1992 (s 2 (2) and Gaz 1992 No S9)

Workers' Compensation (Amendment) Act 1993 A1993-19

notified 9 March 1993 (Gaz 1993 No S26) commenced 9 March 1993 (s 2)

Administrative Appeals (Consequential Amendments) Act 1994 A1994-60 sch 1

notified 11 October 1994 (Gaz 1994 No S197)

s 1, s 2 commenced 11 October 1994 (s 2 (1))

sch 1 commenced 14 November 1994 (s 2 (2) and see Gaz 1994 No S250)

Workers' Compensation (Amendment) Act 1994 A1994-68

notified 1 November 1994 (Gaz 1994 No S229)

s 1, s 2 commenced 1 November 1994 (s 2 (1))

s 5 (in pt) 25 November 1994 (s 2 (2) and Gaz 1994 No S286)

remainder commenced 1 January 1995 (s 2 (2) and Gaz 1995 No S286)

Statutory Offices (Miscellaneous Provisions) Act 1994 A1994-97 sch pt 1

notified 15 December 1994 (Gaz 1994 No S280)

s 1, s 2 commenced 15 December 1994 (s 2 (1))

sch pt 1 commenced 15 December 1994 (s 2 (2) and Gaz 1994 No S293)

Statute Law Revision Act 1995 A1995-46 sch

notified 18 December 1995 (Gaz 1995 No S306) amdts commenced 18 December 1995 (s 2)

Workers' Compensation (Amendment) Act 1995 A1995-52

notified 20 December 1995 (Gaz 1995 No S313) commenced 20 December 1995 (s 2)

Workers' Compensation (Amendment) Act 1996 A1996-13

notified 1 May 1996 (Gaz 1996 No S71) commenced 1 May 1996 (s 2)

Workers' Compensation (Amendment) Act 1997 A1997-27

notified 16 July 1997 (Gaz 1997 No S185) ss 1-3 commenced 16 July 1997 (s 2 (1)) remainder commenced 13 January 1998 (s 2 (2) and Gaz 1998 No S19)

Workers' Compensation (Amendment) Act (No 2) 1997 A1997-66

notified 9 October 1997 (Gaz 1997 No 300) ss 1-3 commenced 9 October 1997 (s 2 (1)) remainder commenced 17 December 1997 (s 2 (2) and Gaz 1997 No S414)

Legal Practitioners (Consequential Amendments) Act 1997 A1997-96 sch 1

notified 1 December 1997 (Gaz 1997 S380) s 1, s 2 commenced 1 December 1997 (s 2 (1)) sch 1 commenced 1 June 1998 (s 2 (2))

Workers' Compensation (Amendment) Act 1998 A1998-31

notified 11 September 1998 (Gaz 1998 No S193) commenced 11 September 1998 (s 2)

Statute Law Revision (Penalties) Act 1998 A1998-54 sch

notified 27 November 1998 (Gaz 1998 No S207) s 1, s 2 commenced 27 November 1998 (s 2 (1)) sch commenced 9 December 1998 (s 2 (2) and Gaz 1998 No 49)

Law Reform (Miscellaneous Provisions) Act 1999 A1999-66 sch 3

notified 10 November 1999 (Gaz 1999 No 45) commenced 10 November 1999 (s 2)

Legislation history

Occupational Health and Safety (Amendment) Act (No 2) 1999 A1999-82

notified 23 December 1999 (Gaz 1999 No S65) ss 1-3 commenced 23 December 1999 (s 2 (1)) remainder commenced 23 June 2000 (s 2 (3))

Long Service Leave (Cleaning, Building and Property Services) Act 1999 A1999-85 s 70

notified 23 December 1999 (Gaz 1999 No S65) pts 1 and 2 (ss 1-28) commenced 23 December 1999 (s 2 (1)) s 70 commenced 23 June 2000 (s 2 (3))

Workers' Compensation Amendment Act 2000 A2000-74

notified 21 December 2000 (Gaz 2000 No S69) commenced 21 December 2000 (s 2)

Statute Law Amendment Act 2000 A2000-80 sch 3

notified 21 December 2000 (Gaz 2000 No S69) amdts commenced 21 December 2000 (s 2 (1))

Legislation (Consequential Amendments) Act 2001 A2001-44 pt 418

notified 26 July 2001 (Gaz 2001 No 30) s 1, s 2 commenced 26 July 2001 (IA s 10B) pt 418 commenced 12 Sept 2001 (s 2 and see Gaz 2001 No S65)

Workers Compensation Amendment Act 2001 A2001-81

notified LR 28 September 2001 s 1, s 2 commenced 28 September 2001 (LA s 75) new s 8OA as ins by s 11 and sch 2 commenced 28 September 2001 (s 2 (2)) remainder commences 1 July 2002 (s 2 (1))

Legislation Amendment Act 2002 A2002-11 amdts 2.113-2.115

notified LR 27 May 2002 s 1, s 2 commenced 27 May 2002 (LA s 75) amdts 2.113-2.115 commenced 1 July 2002 (s 2 (2))

Workers Compensation (Acts of Terrorism) Amendment Act 2002 A2002-22

notified LR 28 June 2002 s 1, s 2 commenced 28 June 2002 (LA s 75) remainder commenced 1 July 2002 (s 2)

> Workers Compensation Act 1951 Effective: 09/01/23-09/01/23

as modified by

Workers Compensation Regulations 2002 SL2002-20

notified LR 28 June 2002 reg 1, reg 2 commenced 28 June 2002 (LA s 75 (1)) remainder commenced 1 July 2002 (reg 2) as amended by

Workers Compensation Amendment Regulations 2002 (No 1) SL2002-29 reg 14, reg 15

notified LR 25 October 2002 reg 1, reg 2 commenced 25 October 2002 (LA s 75 (1)) reg 14, reg 15 commenced 26 October 2002 (reg 2)

as amended by

Statute Law Amendment Act 2002 (No 2) A2002-49 pt 1.5 and pt 3.30

notified LR 20 December 2002 s 1, s 2 taken to have commenced 7 October 1994 (LA s 75 (2)) pt 1.5 and pt 3.30 commenced 17 January 2003 (s 2 (1))

Criminal Code 2002 No 51 pt 1.29

notified LR 20 December 2002 s 1, s 2 commenced 20 December 2002 (LA s 75 (1)) pt 1.29 commenced 1 January 2003 (s 2 (1))

Workers Compensation Amendment Act 2003 A2003-32

notified LR 30 June 2003 s 1, s 2 commenced 30 June 2003 (LA s 75 (1)) remainder commenced 1 July 2003 (s 2)

Statute Law Amendment Act 2003 A2003-41 sch 3 pt 3.24

notified LR 11 September 2003 s 1, s 2 commenced 11 September 2003 (LA s 75 (1)) sch 3 pt 3.24 commenced 9 October 2003 (s 2 (1))

Workers Compensation Amendment Act 2003 (No 2) A2003-49

notified LR 3 December 2003 s 1, s 2 commenced 3 December 2003 (LA s 75 (1)) sch 1 commenced 3 June 2004 (s 2 and LA s 79) remainder commenced 5 April 2004 (s 2 and CN2004-7)

Sexuality Discrimination Legislation Amendment Act 2004 A2004-2 sch 1 pt 1.19

notified LR 18 February 2004 s 1, s 2 commenced 18 February 2004 (LA s 75 (1)) sch 1 pt 1.19 commenced 22 March 2004 (s 2 and CN2004-4)

Education Act 2004 A2004-17 sch 2 pt 2.7

notified LR 8 April 2004 s 1, s 2 commenced 8 April 2004 (LA s 75 (1)) sch 2 pt 2.7 commenced 1 January 2005 (s 2)

Health Professionals Legislation Amendment Act 2004 A2004-39 sch 1 pt 1.10

notified LR 8 July 2004 s 1, s 2 commenced 8 July 2004 (LA s 75 (1)) sch 1 pt 1.10 commenced 7 July 2005 (s 2 and see Health Professionals Act 2004 A2004-38, s 2 and CN2005-11)

Statute Law Amendment Act 2004 A2004-42 sch 3 pt 3.22

notified LR 11 August 2004 s 1, s 2 commenced 11 August 2004 (LA s 75 (1)) sch 3 pt 3.22 commenced 25 August 2004 (s 2 (1))

Court Procedures (Consequential Amendments) Act 2004 A2004-60 sch 1 pt 1.74

notified LR 2 September 2004 s 1, s 2 commenced 2 September 2004 (LA s 75 (1)) sch 1 pt 1.74 commenced 10 January 2005 (s 2 and see Court Procedures Act 2004 A2004-59, s 2 and CN2004-29)

Workers Compensation Amendment Act 2005 A2005-16

notified LR 13 April 2005 s 1, s 2 commenced 13 April 2005 (LA s 75 (1)) commenced 14 April 2005 (s 2)

Workers Compensation Act 1951
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Statute Law Amendment Act 2005 A2005-20 sch 3 pt 3.73

notified LR 12 May 2005

s 1, s 2 taken to have commenced 8 March 2005 (LA s 75 (2)) sch 3 pt 3.73 commenced 2 June 2005 (s 2 (1))

Workers Compensation Amendment Act 2006 A2006-4

notified LR 22 February 2006

s 1, s 2 commenced 22 February 2006 (LA s 75 (1)) remainder commenced 1 July 2006 (s 2 (2))

Workers Compensation Amendment Act 2006 (No 2) A2006-8

notified LR 15 March 2006

s 1, s 2 commenced 15 March 2006 (LA s 75 (1)) remainder commenced 1 July 2006 (s 2 and see Workers Compensation Amendment Act 2006 A2006-4 s 2 (2))

Sentencing Legislation Amendment Act 2006 A2006-23 sch 1 pt 1.39 notified LR 18 May 2006

s 1, s 2 commenced 18 May 2006 (LA s 75 (1)) sch 1 pt 1.39 commenced 2 June 2006 (s 2 (1) and see Crimes (Sentence Administration) Act 2005 A2005-59 s 2, Crimes (Sentencing) Act 2005 A2005-58, s 2 and LA s 79)

Justice and Community Safety Legislation Amendment Act 2006 A2006-40 sch 2 pt 2.33

notified LR 28 September 2006 s 1, s 2 commenced 28 September 2006 (LA s 75 (1)) sch 2 pt 2.33 commenced 1 January 2007 (s 2 (4))

Statute Law Amendment Act 2007 (No 2) A2007-16 sch 3 pt 3.35

notified LR 20 June 2007

s 1, s 2 taken to have commenced 12 April 2007 (LA s 75 (2)) sch 3 pt 3.35 commenced 11 July 2007 (s 2 (1))

Statute Law Amendment Act 2008 A2008-28 sch 3 pt 3.62

notified LR 12 August 2008

s 1, s 2 commenced 12 August 2008 (LA s 75 (1)) sch 3 pt 3.62 commenced 26 August 2008 (s 2)

notified LR 13 August 2008 s 1, s 2 commenced 13 August 2008 (LA s 75 (1))

remainder commenced 14 August 2008 (s 2)

ACT Civil and Administrative Tribunal Legislation Amendment Act 2008 (No 2) A2008-37 sch 1 pt 1.109

notified LR 4 September 2008

s 1, s 2 commenced 4 September 2008 (LA s 75 (1))

sch 1 pt 1.109 commenced 2 February 2009 (s 2 (1) and see ACT Civil and Administrative Tribunal Act 2008 A2008-35, s 2 (1) and CN2009-2)

Workers Compensation (Terrorism) Amendment Act 2009 A2009-9

notified LR 7 April 2009

s 1, s 2 commenced 7 April 2009 (LA s 75 (1)) remainder commenced 8 April 2009 (s 2)

Workers Compensation (Default Insurance Fund) Amendment Act 2009 A2009-23

notified LR 2 September 2009

s 1, s 2 commenced 2 September 2009 (LA s 75 (1)) remainder commenced 3 September 2009 (s 2)

Work Safety Legislation Amendment Act 2009 A2009-28 sch 2 pt 2.14

notified LR 9 September 2009

s 1, s 2 commenced 9 September 2009 (LA s 75 (1))

sch 2 pt 2.14 commenced 1 October 2009 (s 2 and see Work Safety Act 2008 A2008-51 s 2 (1) (b) and CN2009-11)

Workers Compensation (Default Insurance Fund) Amendment Act 2009 (No 2) A2009-38

notified LR 21 October 2009

s 1, s 2 commenced 21 October 2009 (LA s 75 (1)) ss 3-6, s 10, ss 15-19 commenced 22 October 2009 (s 2 (1)) remainder commenced 10 July 2010 (s 2 (2), CN2010-7 and LA s 77 (3))

Statute Law Amendment Act 2009 (No 2) A2009-49 sch 3 pt 3.86

notified LR 26 November 2009

s 1, s 2 commenced 26 November 2009 (LA s 75 (1)) sch 3 pt 3.86 commenced 17 December 2009 (s 2)

page 298 Workers Compensation Act 1951 Effective: 09/01/23-09/01/23

Workers Compensation Amendment Act 2009 A2009-56

notified LR 16 December 2009

s 1, s 2 commenced 16 December 2009 (LA s 75 (1))

ss 4, 5, 9 commenced 1 July 2010 (s 2 (1))

remainder commenced 17 December 2009 (s 2 (2))

Health Practitioner Regulation National Law (ACT) Act 2010 A2010-10 sch 2 pt 2.22

notified LR 31 March 2010

s 1, s 2 commenced 31 March 2010 (LA s 75 (1))

sch 2 pt 2.22 commenced 1 July 2010 (s 2 (1) (a))

Workers Compensation (Default Insurance Fund) Amendment Act 2010 A2010-12

notified LR 30 March 2010

s 1, s 2 commenced 30 March 2010 (LA s 75 (1))

s 3, ss 7-9, s 11, s 13 commenced 31 March 2010 (s 2 (1))

remainder commenced 30 September 2010 (s 2 (2) and LA s 79)

Road Transport (Alcohol and Drugs) Legislation Amendment Act 2010 A2010-47 sch 1 pt 1.4

notified LR 25 November 2010

s 1, s 2 commenced 25 November 2010 (LA s 75 (1))

sch 1 pt 1.4 commenced 1 December 2010 (s 2 (2) and see Road Transport (Alcohol and Drugs) (Random Drug Testing) Amendment Act 2010 A2010-27, s 2 and CN2010-15)

Administrative (One ACT Public Service Miscellaneous Amendments) Act 2011 A2011-22 sch 1 pt 1.177

notified LR 30 June 2011

s 1, s 2 commenced 30 June 2011 (LA s 75 (1))

sch 1 pt 1.177 commenced 1 July 2011 (s 2 (1))

Justice and Community Safety Legislation Amendment Act 2011 (No 2) A2011-27 sch 1 pt 1.9

notified LR 30 August 2011

s 1, s 2 taken to have commenced 29 July 2008 (LA s 75 (2))

sch 1 pt 1.9 commenced 13 September 2011 (s 2 (1))

Statute Law Amendment Act 2011 (No 2) A2011-28 sch 3 pt 3.33

notified LR 31 August 2011

s 1, s 2 commenced 31 August 2011 (LA s 75 (1))

sch 3 pt 3.33 commenced 21 September 2011 (s 2 (1))

Statute Law Amendment Act 2011 (No 3) A2011-52 sch 3 pt 3.54

notified LR 28 November 2011

s 1, s 2 commenced 28 November 2011 (LA s 75 (1))

sch 3 pt 3.54 commenced 12 December 2011 (s 2)

Work Health and Safety (Consequential Amendments) Act 2011 A2011-55 sch 1 pt 1.12

notified LR 14 December 2011

s 1, s 2 commenced 14 December 2011 (LA s 75 (1))

sch 1 pt 1.12 commenced 1 January 2012 (s 2 and see Work Health and Safety Act 2011 A2011-35, s 2 and CN2011-12)

Workers Compensation (Terrorism) Amendment Act 2012 A2012-8

notified LR 28 March 2012

s 1, s 2 commenced 28 March 2012 (LA s 75 (1))

remainder commenced 29 March 2012 (s 2)

Directors Liability Legislation Amendment Act 2013 A2013-4 sch 1 pt 1.13

notified LR 21 February 2013

s 1, s 2 commenced 21 February 2013 (LA s 75 (1)) sch 1 pt 1.13 commenced 22 February 2013 (s 2)

Statute Law Amendment Act 2013 (No 2) A2013-44 sch 3 pt 3.26

notified LR 11 November 2013

s 1, s 2 commenced 11 November 2013 (LA s 75 (1))

sch 3 pt 3.26 commenced 25 November 2013 (s 2)

Workers Compensation Amendment Act 2013 A2013-46

notified LR 12 November 2013

s 1, s 2 commenced 12 November 2013 (LA s 75 (1))

remainder commenced 13 November 2013 (s 2)

Justice and Community Safety Legislation Amendment Act 2014 A2014-17 sch 1 pt 1.10

notified LR 13 May 2014

s 1, s 2 taken to have commenced 25 November 2013 (LA s 75 (2)) sch 1 pt 1.10 taken to have commenced 25 November 2013 (s 2 (4) and see Statute Law Amendment Act 2013 (No 2) A2013-44 s 2)

Workers Compensation (Cross-border Workers) Amendment Act 2014 A2014-46

notified LR 5 November 2014 s 1, s 2 commenced 5 November 2014 (LA s 75 (1)) remainder commenced 6 November 2014 (s 2)

Red Tape Reduction Legislation Amendment Act 2015 A2015-33 sch 1 pt 1.77, sch 3 pt 3.4

notified LR 30 September 2015 s 1, s 2 commenced 30 September 2015 (LA s 75 (1)) sch 1 pt 1.77, sch 3 pt 3.4 commenced 14 October 2015 (s 2)

Road Transport (Public Passenger Services) (Taxi Industry Innovation) Amendment Act 2015 A2015-47 sch 1 pt 1.3

notified LR 24 November 2015 s 1, s 2 commenced 24 November 2015 (LA s 75 (1)) s 3 commenced 20 May 2016 (LA s 75AA) sch 1 pt 1.3 commenced 1 August 2016 (s 2, CN2016-9 and see mod of A2001-62 by SL2016-12 s 3)

Workers Compensation Amendment Act 2016 A2016-8

notified LR 29 February 2016 s 1, s 2 commenced 29 February 2016 (LA s 75 (1)) s 3, s 5 commenced 1 March 2016 (s 2 (1)) remainder commenced 31 May 2016 (s 2 (2))

Protection of Rights (Services) Legislation Amendment Act 2016 (No 2) A2016-13 sch 1 pt 1.40

notified LR 16 March 2016 s 1, s 2 commenced 16 March 2016 (LA s 75 (1))

sch 1 pt 1.40 commenced 1 April 2016 (s 2 and see Protection of Rights (Services) Legislation Amendment Act 2016 A2016-1 s 2)

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Red Tape Reduction Legislation Amendment Act 2016 A2016-18 sch 3 pt 3.49

notified LR 13 April 2016 s 1, s 2 commenced 13 April 2016 (LA s 75 (1)) sch 3 pt 3.49 commenced 27 April 2016 (s 2)

Lifetime Care and Support (Catastrophic Injuries) Amendment Act 2016 A2016-25 sch 1 pt 1.1

notified LR 12 May 2016 s 1, s 2 commenced 12 May 2016 (LA s 75 (1)) sch 1 pt 1.1 commenced 13 May 2016 (s 2)

Workers Compensation Amendment Act 2016 (No 2) A2016-27 pt 2

notified LR 15 June 2016 s 1, s 2 commenced 15 June 2016 (LA s 75 (1)) pt 2 commenced 1 July 2017 (s 2)

Lifetime Care and Support (Catastrophic Injuries) Amendment Act 2016 (No 2) A2016-35 sch 1 pt 1.2

notified LR 21 June 2016 s 1, s 2 commenced 21 June 2016 (LA s 75 (1)) sch 1 pt 1.2 commenced 22 June 2016 (LA s 73 (1) (a) and see LA s 75B (1))

Public Sector Management Amendment Act 2016 A2016-52 sch 1 pt 1.64

notified LR 25 August 2016 s 1, s 2 commenced 25 August 2016 (LA s 75 (1)) sch 1 pt 1.64 commenced 1 September 2016 (s 2)

Statute Law Amendment Act 2017 A2017-4 sch 3 pt 3.36

notified LR 23 February 2017 s 1, s 2 commenced 23 February 2017 (LA s 75 (1)) sch 3 pt 3.36 commenced 9 March 2017 (s 2)

Commercial Arbitration Act 2017 A2017-7 sch 1 pt 1.9

notified LR 4 April 2017 s 1A, s 1B commenced 4 April 2017 (LA s 75 (1)) sch 1 pt 1.9 commenced 1 July 2017 (s 1B and CN2017-1)

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Workers Compensation Amendment Act 2017 A2017-49 pt 2

notified LR 12 December 2017

s 1, s 2 taken to have commenced 1 July 2017 (LA s 75 (2))

s 5, s 7 and s 8 taken to have commenced 1 July 2017 (s 2 (1))

pt 2 remainder commenced 13 December 2017 (s 2 (2))

Road Transport Reform (Light Rail) Legislation Amendment Act 2018 A2018-19 sch 1 pt 1.10

notified LR 17 May 2018

s 1, s 2 commenced 17 May 2018 (LA s 75 (1))

sch 1 pt 1.10 commenced 24 May 2018 (s 2)

Statute Law Amendment Act 2018 A2018-42 sch 1 pt 1.10

notified LR 8 November 2018

s 1, s 2 taken to have commenced 1 July 2018 (LA s 75 (2))

sch 1 pt 1.10 commenced 22 November 2018 (s 2 (1))

Work Health and Safety Amendment Act 2019 A2019-38 sch 1 pt 1.10

notified LR 31 October 2019

s 1, s 2 commenced 31 October 2019 (LA s 75 (1))

sch 1 pt 1.10 commenced 30 April 2020 (s 2 (1) and LA s 79)

Workers Compensation Amendment Act 2020 A2020-6

notified LR 27 February 2020

s 1, s 2 commenced 27 February 2020 (LA s 75 (1))

remainder commenced 28 February 2020 (s 2)

Employment and Workplace Safety Legislation Amendment Act 2020 A2020-30 pt 3 (as am by A2020-42 s 70)

notified LR 9 July 2020

s 1, s 2 commenced 9 July 2020 (LA s 75 (1))

pt 3 commenced 9 January 2021 (s 2 (2) (as am by A2020-42 s 70) and LA s 79)

Justice Legislation Amendment Act 2020 A2020-42 s 70

notified LR 27 August 2020

s 1, s 2 commenced 27 August 2020 (LA s 75 (1))

s 70 commenced 28 August 2020 (s 2 (9))

Note

This Act only amends the Employment and Workplace Safety

Legislation Amendment Act 2020 A2020-30.

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Statute Law Amendment Act 2021 A2021-12 sch 1 pt 1.4

notified LR 9 June 2021 s 1, s 2 commenced 9 June 2021 (LA s 75 (1)) sch 1 pt 1.4 commenced 23 June 2021 (s 2 (1))

Legislation (Legislative Assembly Committees) Amendment Act 2022 A2022-4 sch 1 pt 1.22

notified LR 30 March 2022 s 1, s 2 commenced 30 March 2022 (LA s 75 (1)) sch 1 pt 1.22 commenced 6 April 2022 (s 2)

Workplace Legislation Amendment Act 2022 A2022-23 pt 3

notified LR 9 December 2022 s 1, s 2 commenced 9 December 2022 (LA s 75 (1)) ss 15-18 commenced 9 January 2023 (s 2 (3)) pt 3 remainder awaiting commencement

Workers Compensation Act 1951 R81
Effective: 09/01/23-09/01/23 09/01/23

Long title

long title am Ord1983-69 s 4; A1991-105 s 4

Preliminary

pt 1 hdg ins A1991-105 s 5

om A2001-81 s 4

Entitlement to compensation

pt 2 hdg ins A1991-105 s 7

om A2001-81 s 6

Occupational rehabilitation

pt 2A hdg ins A1994-68 s 5

om A2001-81 s 19

Insurance

pt 3 hdg renum as ch 8 hdg

Compensation and common law remedies

pt 4 hdg renum as ch 9 hdg

Inspection

pt 5 hdg renum as ch 10 hdg

Procedure for payment of compensation

pt 6 hdg renum as ch 11 hdg

Weekly compensation payments

pt 6A hdg ins A1994-68 s 6

om A2001-81 amdt 1.45

On-the-spot fines

pt 6B hdg renum as ch 12 hdg

Miscellaneous

pt 7 hdg renum as ch 14 hdg and then ch 13 hdg

Transitional

pt 8 hdg ins A2000-80 amdt 3.40

om A2001-81 s 31

Preliminary

ch 1 hdg ins A2001-81 s 4

Name of Act

s 1 sub A1991-105 s 5; A2001-81 s 5

Interpretation generally

ch 2 hdg ins A2001-81 s 5

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Directions about procedure
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s 27C **orig s 27C**

ins A1991-105 s 20 om A2001-44 amdt 1.4382

prev s 27C

renum as s 218 and then s 208

References to Workers' Compensation Act

s 27CA renum as s 219

Funds for administration of Act s 27D renum as s 220

Employment-related diseases

s 28 orig s 28

renum as s 221 **pres s 28**

(prev s 9A) ins Ord1983-69 s 8

am A1991-105 sch 2

reloc as s 5O A2001-81 amdt 1.14 renum as s 28 R9 LA (see A2001-81 s 34)

am A2017-49 s 4

Compensation for disease

s 29 **orig s 29**

renum as s 31 prev s 29 renum as s 222 pres s 29

(prev s 9B) ins Ord1983-69 s 8

am A1991-105 sch 2 and note about section headings;

A2001-81 s 13, s 14

reloc as s 5P A2001-81 amdt 1.14 renum as s 29 R9 LA (see A2001-81 s 34)

DI fund manager required to pay weekly compensation

s 30 hdg (prev s 6C hdg) bracketed note exp 1 July 2004 (s 3 (3))

s 30 **orig s 30** renum as s 223

prev s 30

(prev s 6C) renum as s 31

pres s 30 ins A2006-4 s 4

(2)-(4) exp 1 July 2009 (s 30 (4) (LA s 88 declaration applies))

om A2009-38 s 5

Compensation for personal injury

pt 4.2 hdg ins A2001-81 s 8

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renum as s 231 and then s 179H s 30H

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s 31 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 31 orig s 31

(prev s 29) ins A2000-80 amdt 3.40 renum A2001-44 amdt 1.4384

om A2001-81 s 31

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(prev s 6D) renum as s 32

pres s 31

(prev s 6C) ins A2001-81 s 8 am A2002-22 amdt 1.9

renum as s 30 R9 LA (see A2001-81 s 34)

am A2003-49 amdt 1.1

renum as s 31 A2006-4 amdt 1.2

Amounts of compensation under Act cumulative

orig s 32 s 32

renum as s 233 pres s 32

(prev s 6D) ins A2001-81 s 8

renum as s 31 R9 LA (see A2001-81 s 34)

renum as s 32 A2006-4 amdt 1.2

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s 33 orig s 33

renum as s 234

prev s 33

(prev s 7A) ins A1997-27 s 5

am A2001-81 s 9, amdts 1.8-1.10, amdt 2.3 renum as s 33 R9 LA (see A2001-81 s 34)

om A2003-49 amdt 1.2

pres s 33

(prev s 6E) ins A2001-81 s 8

renum as s 32 R9 LA (see A2001-81 s 34)

renum as s 33 A2006-4 amdt 1.2

Injury outside Australia

s 34 orig s 34

renum as s 235 pres s 34

(prev s 7B) ins A1997-27 s 5 sub A2001-81 amdt 1.11

renum as s 34 R9 LA (see A2001-81 s 34)

When is a worker taken to be totally incapacitated?

s 35 **orig s 35**

renum as s 236 pres s 35

(prev s 7C) ins A1997-66 s 5 sub A2001-81 amdt 2.4

renum as s 35 R9 LA (see A2001-81 s 34)

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s 36 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 36 **orig s 36** renum as s 237

renum as s 23 pres s 36

(prev s 8) am Ord1952-4 s 6; Ord1968-19 s 2; Ord1983-69 s

7; A1991-105 sch 3 sub A2001-81 s 10

renum as s 36 R9 LA (see A2001-81 s 34)

am A2006-4 amdt 1.3

Employment connection with ACT or State

pt 4.2A hdg ins A2003-49 amdt 1.3

Meaning of Territory or State of connection etc

s 36A ins A2003-49 amdt 1.3

Employment connection test

s 36B ins A2003-49 amdt 1.3

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Determination of Territory or State of connection in workers compensation

proceedings

s 36C ins A2003-49 amdt 1.3

Determination of Territory or State of connection by Magistrates Court

s 36D ins A2003-49 amdt 1.3

Recognition of previous determinations of Territory or State of connection

s 36E ins A2003-49 amdt 1.3

No ACT compensation if external compensation received

s 36F ins A2003-49 amdt 1.3

Weekly compensation

pt 4.3 hdg ins A2001-81 s 11

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s 36G ins A2006-4 s 5

am A2011-28 amdt 3.228

def initial incapacity date ins A2006-4 s 5

def pension age ins A2017-49 s 5

def **statutory floor** ins A2011-28 amdt 3.227 def **weekly compensation** ins A2006-4 s 5

What if the worker is dead?

s 37 orig s 37

renum as s 238

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(prev s 8A) ins A2001-81 s 11

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s 37E renum as s 243

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s 37F renum as s 244

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When do weekly compensation payments begin etc?
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s 38
                   renum as s 245
                   pres s 38
                   (prev s 8B) ins A2001-81 s 11
                   renum as s 38 R9 LA (see A2001-81 s 34)
                   am A2002-49 amdt 1.7
                   sub A2006-4 s 6
                   am A2017-49 s 6
Entitlement to weekly compensation for first 26 weeks of incapacity
s 39
                   orig s 39
                   renum as s 246
                   pres s 39
                   (prev s 8C) ins A2001-81 s 11
                   renum as s 39 R9 LA (see A2001-81 s 34)
                   sub A2006-4 s 6
                   am A2006-8 s 9; A2017-49 s 7; A2018-42 amdt 1.38
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s 40
                   (prev s 8D) ins A2001-81 s 11
                   renum as s 40 R9 LA (see A2001-81 s 34)
                   sub A2006-4 s 6
                   am A2006-8 s 10; A2017-49 s 7; A2018-42 amdt 1.39
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                   (prev s 8E) ins A2001-81 s 11
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                   renum as s 41 R9 LA (see A2001-81 s 34)
                   sub A2006-4 s 6
                   am A2011-28 amdt 3.229
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s 42
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s 44 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 44 (prev s 8H) ins A2001-81 s 11 renum as s 44 R9 LA (see A2001-81 s 34)

Effect of living outside Australia if compensation still payable

s 45 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 45 (prev s 8I) ins A2001-81 s 11

renum as s 45 R9 LA (see A2001-81 s 34) am R28 LA (see also A2006-4 s 7)

Effect of payment of weekly compensation on other benefits etc

s 46 (prev s 8J) ins A2001-81 s 11

renum as s 46 R9 LA (see A2001-81 s 34)

No assignment etc of weekly compensation

s 47 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 47 (prev s 8K) ins A2001-81 s 11

renum as s 47 R9 LA (see A2001-81 s 34)

Compensation for permanent injuries

pt 4.4 hdg ins A2001-81 s 11

Meaning of loss

s 48 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 48 (prev s 8L) ins A2001-81 s 11

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Meaning of single loss amount

s 49 (prev s 8M) ins A2001-81 s 11

renum as s 49 R9 LA (see A2001-81 s 34)

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s 50 (prev s 8N) ins A2001-81 s 11

renum as s 50 R9 LA (see A2001-81 s 34)

Compensation for permanent injuries generally

s 51 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 51 (prev s 80) ins A2001-81 s 11 renum as s 51 R9 LA (see A2001-81 s 34)

Actuarial review and back, neck and pelvis impairments

s 52 (prev s 8OA) ins A2001-81 s 11

renum as s 52 R9 LA (see A2001-81 s 34)

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s 53 (prev s 8P) ins A2001-81 s 11

renum as s 53 R9 LA (see A2001-81 s 34)

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Compensation and left-handedness

s 54 (prev s 8Q) ins A2001-81 s 11

renum as s 54 R9 LA (see A2001-81 s 34)

Compensation for combination of items

s 55 (prev s 8R) ins A2001-81 s 11

renum as s 55 R9 LA (see A2001-81 s 34)

Compensation for only arm, leg, hand or foot

s 56 (prev s 8S) ins A2001-81 s 11

renum as s 56 R9 LA (see A2001-81 s 34)

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s 57 (prev s 8T) ins A2001-81 s 11

renum as s 57 R9 LA (see A2001-81 s 34)

Loss of bowel function

s 58 (prev s 8U) ins A2001-81 s 11

renum as s 58 R9 LA (see A2001-81 s 34)

Proportionate loss of use

s 59 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 59 (prev s 8V) ins A2001-81 s 11

renum as s 59 R9 LA (see A2001-81 s 34)

am A2002-49 amdt 1.8

Special provisions for HIV/AIDS

s 60 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 60 (prev s 8W) ins A2001-81 s 11

renum as s 60 R9 LA (see A2001-81 s 34)

Deduction for previous injury or pre-existing condition

s 61 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 61 (prev s 8X) ins A2001-81 s 11

renum as s 61 R9 LA (see A2001-81 s 34)

Further loss and deductible proportions

s 62 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 62 (prev s 8Y) ins A2001-81 s 11

renum as s 62 R9 LA (see A2001-81 s 34)

Loss of hearing because of age

s 63 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 63 (prev s 8Z) ins A2001-81 s 11

renum as s 63 R9 LA (see A2001-81 s 34)

No compensation for less than 6% hearing loss

s 64 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 64 (prev s 9) ins A2001-81 s 11

renum as s 64 R9 LA (see A2001-81 s 34)

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Presumption to be drawn from refusal to submit to hearing examination

s 65 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 65 (prev s 9A) ins A2001-81 s 11

renum as s 65 R9 LA (see A2001-81 s 34)

Employer's responsibility to pay for hearing loss tests s 66 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 66 (prev s 9B) ins A2001-81 s 11

renum as s 66 R9 LA (see A2001-81 s 34)

Reimbursement for costs of medical certificate and examination

s 67 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 67 (prev s 9C) ins A2001-81 s 11 am A2002-22 amdt 1.10

renum as s 67 R9 LA (see A2001-81 s 34)

Limited entitlement if death happens within 3 months

s 68 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 68 (prev s 9D) ins A2001-81 s 11

renum as s 68 R9 LA (see A2001-81 s 34)

Compensation for medical treatment, damage and other costs

pt 4.5 hdg ins A2001-81 s 11

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s 69 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 69 (prev s 9E) ins A2001-81 s 11

renum as s 69 R9 LA (see A2001-81 s 34)

Employer liability for medical treatment etc

s 70 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 70 (prev s 9F) ins A2001-81 s 11

renum as s 70 R9 LA (see A2001-81 s 34)

sub A2006-8 s 13

am A2008-30 s 4; pars renum R35 LA; A2016-25 amdt 1.1; ss renum R64 LA; A2016-35 amdts 1.2-1.4; ss renum R67 LA;

A2017-4 amdt 3.211

Claim for compensation for pt 4.5

s 71 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 71 (prev s 9G) ins A2001-81 s 11

renum as s 71 R9 LA (see A2001-81 s 34)

am A2006-8 s 14

Second assessments

s 72 hdg (prev s 9H hdg) sub A2002-22 amdt 1.11

renum as s 72 hdg R9 LA (see A2001-81 s 34)

bracketed note exp 1 July 2004 (s 3 (3))

s 72 (prev s 9H) ins A2001-81 s 11

am A2002-22 amdt 1.12

renum as s 72 R9 LA (see A2001-81 s 34)

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Payments for medical treatment received from hospital

s 73 hdg bracketed note exp 1 July 2004 (s 3 (3))

sub A2006-8 s 15

s 73 (prev s 9I) ins A2001-81 s 11

renum as s 73 R9 LA (see A2001-81 s 34)

Working out costs of alterations to residences

s 73A ins A2008-30 s 5

Payments for costs of alterations to residences

s 73B ins A2008-30 s 5

Transport costs other than private car

s 74 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 74 (prev s 9J) ins A2001-81 s 11

am A2002-22 amdt 1.13

renum as s 74 R9 LA (see A2001-81 s 34)

am A2006-8 s 16; A2017-4 amdt 3.212; A2018-19 amdt 1.20

Working out transport costs for private cars

s 75 (prev s 9K) ins A2001-81 s 11

renum as s 75 R9 LA (see A2001-81 s 34) am A2006-8 s 17; A2021-12 amdt 1.5

Costs of accommodation and meals

s 76 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 76 (prev s 9L) ins A2001-81 s 11

renum as s 76 R9 LA (see A2001-81 s 34) am A2006-8 s 18, s 19; A2009-49 amdt 3.217

Compensation for death

pt 4.6 hdg ins A2001-81 s 11

Death benefits

s 77 (prev s 10) ins A2001-81 s 11

renum as s 77 R9 LA (see A2001-81 s 34)

am A2002-49 amdt 1.9, amdt 1.10; ss renum R14 LA (see A2002-49 amdt 3.255); A2017-49 ss 9-11

Payment into court of lump sum death benefits

s 78 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 78 (prev s 10A) ins A2001-81 s 11

renum on a 79 PO L A (200 A 2001 91 a 2

renum as s 78 R9 LA (see A2001-81 s 34)

am A2016-13 amdt 1.147

Registration of agreements for compensation

pt 4.7 hdg ins A2001-81 s 11

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Registration of agreements for compensation

s 79 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 79 (prev s 10B) ins A2001-81 s 11

renum as s 79 R9 LA (see A2001-81 s 34)

am A2002-49 amdt 1.11; A2016-27 s 4; ss renum R71 LA

Effect of registration of agreements

s 80 hdg bracketed note exp 1 July 2004 (s 3 (3)) s 80 (prev s 10C) ins A2001-81 s 11

renum as s 80 R9 LA (see A2001-81 s 34)

Cancellation or amendment of registered agreements

s 81 (prev s 10D) ins A2001-81 s 11

renum as s 81 R9 LA (see A2001-81 s 34)

Exceptions to entitlements to compensation

pt 4.8 hdg ins A2001-81 s 11

When is compensation under Act generally not payable?

s 82 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 82 (prev s 10E) ins A2001-81 s 11

renum as s 82 R9 LA (see A2001-81 s 34)

am A2010-47 amdt 1.7, amdt 1.8; A2016-25 amdt 1.2

No compensation while imprisoned

s 83 orig s 83

(prev s 10F) ins Ord1983-69 s 10

am A1991-105 s 9 om A2001-81 s 15

pres s 83

(prev s 10F) ins A2001-81 s 11

renum as s 83 R9 LA (see A2001-81 s 34)

am A2016-25 amdt 1.3

Compensation for sporting injuries

s 84 (prev s 10G) ins A1995-52 s 6

renum as s 84 R9 LA (see A2001-81 s 34)

Injury management process

ch 5 hdg ins A2001-81 s 16

Object and definitions for ch 5

pt 5.1 hdg ins A2001-81 s 16

Object—ch 5

s 85 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 85 (prev s 10H) ins A2001-81 s 16

renum as s 85 R9 LA (see A2001-81 s 34)

Meaning of injured worker and personal injury plan-Act

s 85A ins A2007-16 amdt 3.143

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s 86 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 86 (prev s 10I) ins A2001-81 s 16

renum as s 86 R9 LA (see A2001-81 s 34) sub A2006-8 s 20; A2007-16 amdt 3.143 def *employer* ins A2006-16 amdt 3.143 def *injured worker* sub A2006-8 s 20

om A2007-16 amdt 3.143

def injury management sub A2006-8 s 20; A2007-16

amdt 3.143

def injury management program sub A2006-8 s 20;

A2007-16 amdt 3.143

def injury notice sub A2006-8 s 20; A2007-16 amdt 3.143

def *insurer* om A2006-4 s 8 ins A2007-16 amdt 3.143

def nominated treating doctor sub A2006-8 s 20; A2007-16

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def personal injury plan sub A2006-8 s 20

om A2007-16 amdt 3.143

def workplace injury sub A2006-8 s 20; A2007-16

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Meaning of insurer for ch 5

s 86A ins A2006-4 s 9

am A2020-30 s 46, s 102, s 104

Meaning of employer and insurer if more than 1

s 87 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 87 (prev s 10J) ins A2001-81 s 16

renum as s 87 R9 LA (see A2001-81 s 34)

General obligations

pt 5.2 hdg ins A2001-81 s 16

Insurer to establish etc injury management program

s 88 (prev s 10K) ins A2001-81 s 16

renum as s 88 R9 LA (see A2001-81 s 34)

am A2006-4 s 10

Insurer to give effect to injury management program

s 89 (prev s 10L) ins A2001-81 s 16

renum as s 89 R9 LA (see A2001-81 s 34) am A2006-4 s 11; A2020-30 s 104

Insurer's obligation of prompt payment

s 90 (prev s 10M) ins A2001-81 s 16

renum as s 90 R9 LA (see A2001-81 s 34)

sub A2003-49 amdt 2.2 am A2006-4 s 12

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s 91 (prev s 10N) ins A2001-81 s 16

renum as s 91 R9 LA (see A2001-81 s 34)

am A2003-49 amdt 2.3, amdt 2.4

Register of injuries

s 92 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 92 (prev s 10NA) ins A2001-81 s 16

renum as s 92 R9 LA (see A2001-81 s 34)

am A2003-49 amdt 2.5, amdt 2.6

Obligations on injury

pt 5.3 hdg ins A2001-81 s 16

Early notification of workplace injury

s 93 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 93 (prev s 100) ins A2001-81 s 16

renum as s 93 R9 LA (see A2001-81 s 34)

am A2020-30 s 104

Injury notice

s 94 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 94 (prev s 10P) ins A2001-81 s 16

renum as s 94 R9 LA (see A2001-81 s 34)

Uninsured employer to give DI fund manager injury notice etc

s 94A ins A2006-4 s 13

am A2020-30 s 104

Liquidator to give DI fund manager injury notice etc

s 94B ins A2006-4 s 13

am A2020-30 s 98

Injured workers of uninsured employers may give DI fund manager injury

notice

s 94C ins A2006-4 s 13

am A2020-30 s 104

What if employer does not give notice of injury within time?

s 95 (prev s 10Q) ins A2001-81 s 16

am A2002-22 amdt 1.14

renum as s 95 R9 LA (see A2001-81 s 34) am A2006-4 s 14, s 15; A2020-30 s 104

Obligation of insurer on being notified of injury

s 96 (prev s 10R) ins A2001-81 s 16

renum as s 96 R9 LA (see A2001-81 s 34)

sub A2003-49 s 12

am A2020-30 s 104

Obligations in relation to personal injury plans

pt 5.4 hdg ins A2001-81 s 16

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s 96A ins A2016-25 amdt 1.4

Personal injury plan for worker with significant injury

s 97 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 97 (prev s 10S) ins A2001-81 s 16

renum as s 97 R9 LA (see A2001-81 s 34)

am A2009-56 s 6; A2016-25 amdt 1.5; A2020-30 s 104

Provision of information about personal injury plan

s 98 (prev s 10T) ins A2001-81 s 16

renum as s 98 R9 LA (see A2001-81 s 34) am A2016-25 amdt 1.6; A2020-30 s 104

Vocational rehabilitation

s 99 (prev s 10U) ins A2001-81 s 16

renum as s 99 R9 LA (see A2001-81 s 34)

Appointment of approved rehabilitation provider under personal injury plan

s 99A ins A2009-56 s 7

Employer's personal injury plan obligations

s 100 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 100 (prev s 10V) ins A2001-81 s 16

renum as s 100 R9 LA (see A2001-81 s 34) am A2003-49 amdt 2.7; A2020-30 s 104

Worker's personal injury plan obligations

s 101 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 101 (prev s 10W) ins A2001-81 s 16

renum as s 101 R9 LA (see A2001-81 s 34)

am A2006-8 s 21

Nomination of doctor for personal injury plan

s 102 (prev s 10X) ins A2001-81 s 16

renum as s 102 R9 LA (see A2001-81 s 34)

am A2009-56 s 8; A2011-22 amdt 1.497; A2020-30 s 100

Subsequent medical certificates under personal injury plan

s 103 (prev s 10Y) ins A2001-81 s 16

renum as s 103 R9 LA (see A2001-81 s 34)

Return-to-work coordinators

pt 5.4A hdg ins A2016-8 s 4

Definitions—pt 5.4A

s 103A ins A2016-8 s 4

def annual premium ins A2016-8 s 4

def return-to-work coordinator ins A2016-8 s 4

Application—pt 5.4A

s 103B ins A2016-8 s 4

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am A2020-30 s 104

Appointment

s 103C ins A2016-8 s 4

Functions

ins A2016-8 s 4 s 103D

am A2020-30 s 47

Employer's obligations

ins A2016-8 s 4 s 103E

Register of return-to-work coordinators

s 103F ins A2016-8 s 4

am A2019-38 amdt 1.23

Other obligations

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Injured worker's obligation to return to work

s 104 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 104 (prev s 10Z) ins A2001-81 s 16

renum as s 104 R9 LA (see A2001-81 s 34)

Employer must provide suitable work for full-time, part-time and casual workers

s 105 hda

bracketed note exp 1 July 2004 (s 3 (3)) (prev s 10ZA) ins A2001-81 s 16 s 105

renum as s 105 R9 LA (see A2001-81 s 34)

am A2003-49 amdt 2.8

Employer must provide suitable work for contract workers

s 106 (prev s 10ZB) ins A2001-81 s 16

renum as s 106 R9 LA (see A2001-81 s 34)

am A2003-49 amdt 2.9, amdt 2.10

Payment of cost of medical treatment and rehabilitation services for injured worker

s 107 hdg bracketed note exp 1 July 2004 (s 3 (3))

sub A2006-8 s 22

s 107 (prev s 10ZC) ins A2001-81 s 16

renum as s 107 R9 LA (see A2001-81 s 34)

am A2006-8 s 22

Second injury arrangements

s 108 hdg bracketed note exp 1 July 2004 (s 3 (3))

s 108 (prev s 10ZD) ins A2001-81 s 16

renum as s 108 R9 LA (see A2001-81 s 34)

am A2020-30 s 99

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Workplace rehabilitation

s 109 (prev s 10ZE) ins A2001-81 s 16

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s 168A hdg sub A2020-30 s 65 s 168A ins A2006-4 s 45

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s 168AA hdg sub A2020-30 s 78 s 168AA ins A2009-38 s 13

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s 169 (prev s 18EA) ins Ord1969-18 s 8

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am A2009-49 amdt 3.218

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am A2001-81 amdts 1.51-1.55; A2002-22 amdt 1.29

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5 Earlier republications

Some earlier republications were not numbered. The number in column 1 refers to the publication order.

Since 12 September 2001 every authorised republication has been published in electronic pdf format on the ACT legislation register. A selection of authorised republications have also been published in printed format. These republications are marked with an asterisk (*) in column 1. Electronic and printed versions of an authorised republication are identical.

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R2C	15 Dec 1994–	A1994-97	amendments by
19 July 2006	31 Dec 1994		A1994-97
R3	1 Jan 1995–	A1994-97	amendments by
1 Jan 1995	17 Dec 1995		A1994-68
R3 (RI) 19 July 2006	1 Jan 1995– 17 Dec 1995	A1994-97	reissue of printed version
R3A 19 July 2006	20 Dec 1995– 30 Apr 1996	A1995-52	amendments by A1995-46 and A1995-52
R4	31 Mar 1997–	A1996-13	amendments by
31 Mar 1997	16 Dec 1997		A1996-13

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R4 (RI) 19 July 2006	31 Mar 1997– 16 Dec 1997	A1996-13	reissue of printed version
R5 31 Jan 1998	31 Jan 1998– 31 May 1998	A1997-96	amendments by A1997-27 and A1997-66
R5 (RI) 19 July 2006	31 Jan 1998– 31 May 1998	A1997-96	reissue of printed version
R5A 19 July 2006	1 June 1998– 10 Sept 1998	A1997-96	amendments by A1997-96
R5B 19 July 2006	11 Sept 1998– 8 Dec 1998	A1998-31	amendments by A1998-31
R6 31 Dec 1998	31 Dec 1998– 9 Nov 1999	A1998-54	amendments by A1998-54
R6 (RI) 19 July 2006	31 Dec 1998– 9 Nov 1999	A1998-54	reissue of printed version
R6A 19 July 2006	10 Nov 1999– 22 Dec 1999	A1999-66	amendments by A1999-66
R6B 19 July 2006	23 Dec 1999– 22 June 2000	A1999-85	amendments by A1999-85
R6C 19 July 2006	23 June 2000– 20 Dec 2000	A1999-85	amendments by A1999-82 and A1999-85
R6D 19 July 2006	21 Dec 2000– 11 Sept 2001	A2000-80	amendments by A2000-74 and A2000-80
R7 9 Nov 2001	9 Nov 2001– 27 May 2002	<u>A2001-81</u>	amendments by A2001-44 and A2001-81
R8 30 May 2002	28 May 2002- 30 June 2002	A2002-11	uncommenced amendments by A2002-11
R9 1 July 2002	1 July 2002– 1 July 2002	A2002-22	amendments by A2001-81, A2002-11 and A2002-22

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Republication No and date	Effective	Last amendment made by	Republication for
R10 2 July 2002	2 July 2002– 12 Sept 2002	A2002-22	commenced expiry
R11 13 Sept 2002	13 Sept 2002– 25 Oct 2002	A2002-22	commenced expiry
R12 29 Oct 2002	26 Oct 2002– 31 Dec 2002	A2002-22	modification by SL2002-29
R13 1 Jan 2003	1 Jan 2003– 16 Jan 2003	A2002-51	amendments by A2002-51
R14* 17 Jan 2003	17 Jan 2003– 30 June 2003	A2002-51	amendments by A2002-49
R14 (RI) 31 Jan 2005	17 Jan 2003– 30 June 2003	A2002-51	amendments by A2002-49 reissue for textual correction in s 79
R15 (RI) 31 Jan 2005	1 July 2003– 8 Oct 2003	A2003-32	amendments by A2003-32 reissue for textual correction in s 79
R16 (RI) 31 Jan 2005	9 Oct 2003– 21 Mar 2004	A2003-41	amendments by A2003-41 reissue for textual correction in s 79
R17 (RI) 31 Jan 2005	22 Mar 2004– 4 Apr 2004	A2004-2	amendments by A2004-2 reissue for textual correction in s 79
R18 (RI) 31 Jan 2005	5 Apr 2004– 2 June 2004	A2004-2	amendments by A2003-49 reissue for textual correction in s 79
R19 (RI) 31 Jan 2005	3 June 2004– 1 July 2004	<u>A2004-17</u>	amendments by A2003-49 reissue for textual correction in s 79

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Republication No and date	Effective	Last amendment made by	Republication for
R20 (RI) 31 Jan 2005	2 July 2004– 24 Aug 2004	<u>A2004-17</u>	commenced expiry reissue for textual correction in s 79
R21 (RI) 28 Oct 2004	25 Aug 2004– 31 Dec 2004	A2004-42	amendments by A2004-42
R22 1 Jan 2005	1 Jan 2005– 9 Jan 2005	A2004-42	amendments by A2004-17
R23 10 Jan 2005	10 Jan 2005– 13 Apr 2005	A2004-60	amendments by A2004-60
R24 14 Apr 2005	14 Apr 2005– 1 June 2005	A2005-16	amendments by A2005-16
R25* 2 June 2005	2 June 2005– 6 July 2005	A2005-20	amendments by A2005-20
R26 7 July 2005	7 July 2005– 31 Dec 2005	A2005-20	amendments by A2004-39
R27 1 Jan 2006	1 Jan 2006– 1 June 2006	A2005-20	commenced expiry
R28 (RI) 9 Aug 2007	2 June 2006– 3 June 2006	A2006-23	amendments by A2006-23 reissue for textual correction in s 180
R29 (RI) 9 Aug 2007	4 June 2006– 30 June 2006	A2006-23	commenced expiry reissue for textual correction in s 180
R30 (RI) 9 Aug 2007	1 July 2006– 1 July 2006	A2006-23	amendments by A2006-4 and A2006-8 reissue for textual correction in s 180
R31 (RI) 9 Aug 2007	2 July 2006– 31 Dec 2006	A2006-23	commenced expiry reissue for textual correction in s 180
R32* 1 Jan 2007	1 Jan 2007– 10 July 2007	A2006-40	amendments by A2006-40

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Republication No and date	Effective	Last amendment made by	Republication for
R32 (RI) 9 Aug 2007	1 Jan 2007– 10 July 2007	A2006-23	amendments by A2006-40 reissue for textual correction in s 180
R33 (RI) 9 Aug 2007	1 July 2007– 1 July 2008	A2007-16	amendments by A2007-16 reissue for textual correction in s 180
R34 2 July 2008	2 July 2008– 13 Aug 2008	A2007-16	commenced expiry
R35 14 Aug 2008	14 Aug 2008– 25 Aug 2008	A2008-30	amendments by A2008-30
R36 26 Aug 2008	26 Aug 2008– 9 Jan 2009	A2008-30	amendments by A2008-28
R37 10 Jan 2009	10 Jan 2009– 1 Feb 2009	<u>A2008-37</u>	commenced expiry
R38* 2 Feb 2009	2 Feb 2009– 7 Apr 2009	A2008-37	amendments by A2008-37
R39 8 Apr 2009	8 Apr 2009– 1 July 2009	A2009-9	amendments by A2009-9
R40 2 July 2009	2 July 2009– 2 Sept 2009	A2009-9	commenced expiry
R41 3 Sept 2009	3 Sept 2009– 30 Sept 2009	A2009-23	amendments by A2009-23
R42 1 Oct 2009	1 Oct 2009– 21 Oct 2009	A2009-28	amendments by A2009-28
R43 22 Oct 2009	22 Oct 2009– 16 Dec 2009	A2009-38	amendments by A2009-38
R44 17 Dec 2009	17 Dec 2009– 30 Mar 2010	<u>A2009-56</u>	amendments by A2009-49 and A2009-56
R45 31 Mar 2010	31 Mar 2010– 30 June 2010	A2010-12	amendments by A2010-12

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Republication No and date	Effective	Last amendment made by	Republication for
R46 1 July 2010	1 July 2010– 9 July 2010	<u>A2010-12</u>	amendments by A2009-56 and A2010-10
R47 10 July 2010	10 July 2010– 29 Sept 2010	<u>A2010-12</u>	amendments by A2009-38
R48	30 Sept 2010–	A2010-12	amendments by
30 Sept 2010	30 Nov 2010		A2010-12
R49	1 Dec 2010–	A2010-47	amendments by
1 Dec 2010	30 June 2011		A2010-47
R50	1 July 2011–	A2011-22	amendments by
1 July 2011	12 Sept 2011		A2011-22
R51	13 Sept 2011–	A2011-27	amendments by
13 Sept 2011	20 Sept 2011		A2011-27
R52*	21 Sept 2011–	A2011-28	amendments by
21 Sept 2011	11 Dec 2011		A2011-28
R53	12 Dec 2011–	A2011-52	amendments by
12 Dec 2011	31 Dec 2011		A2011-52
R54	1 Jan 2012–	A2011-55	amendments by
1 Jan 2012	28 Mar 2012		A2011-55
R55	29 Mar 2012–	A2012-8	amendments by
29 Mar 2012	21 Feb 2013		A2012-8
R56*	22 Feb 2013–	A2013-4	amendments by
22 Feb 2013	12 Nov 2013		A2013-4
R57 13 Nov 2013	13 Nov 2013– 24 Nov 2013	A2013-46	amendments by A2013-46
R58	25 Nov 2013-	A2013-46	amendments by
25 Nov 2013	5 Nov 2014		A2013-44
R58 (RI) 13 May 2014	25 Nov 2013- 5 Nov 2014	A2013-46	reissue for retrospective amendments by A2014-17
R59	6 Nov 2015-	A2014-46	amendments by
6 Nov 2015	13 Oct 2015		A2014-46

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R60	14 Oct 2015-	A2015-33	amendments by
14 Oct 2015	29 Feb 2016		A2015-33
R61 1 Mar 2016	1 Mar 2016- 31 Mar 2016	A2016-8	amendments by A2016-8
R62	1 Apr 2016-	A2016-13	amendments by
1 Apr 2016	26 Apr 2016		A2016-13
R63	27 Apr 2016-	A2016-18	amendments by
27 Apr 2016	12 May 2016		A2016-18
R64	13 May 2016-	A2016-25	amendments by
13 May 2016	19 May 2016		A2016-25
R65 20 May 2016	20 May 2016- 30 May 2016	A2016-25	updated endnotes for CN2016-9
R66 31 May 2016	31 May 2016- 21 June 2016	A2016-25	amendments by A2016-8
R67	22 June 2016-	A2016-35	amendments by
22 June 2016	31 July 2016		A2016-35
R68	1 Aug 2016-	A2016-35	amendments by
1 Aug 2016	31 Aug 2016		A2015-47
R69	1 Sept 2016-	A2016-52	amendments by
1 Sept 2016	8 Mar 2017		A2016-52
R70	9 Mar 2017-	A2017-4	amendments by
9 Mar 2017	30 June 2017		A2017-4
R71 1 July 2017	1 July 2017– 12 Dec 2017	A2017-7	amendments by A2016-27 and A2017-7
R71 (RI) 1 July 2017	1 July 2017– 12 Dec 2017	A2017-49	reissued for retrospective amendments made by A2017-49
R72	13 Dec 2017–	A2017-49	amendments by
13 Dec 2017	23 May 2018		A2017-49
R73	24 May 2018–	A2018-19	amendments by
24 May 2018	21 Nov 2018		A2018-19

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Endnotes

5 Earlier republications

Republication No and date	Effective	Last amendment made by	Republication for
R74 22 Nov 2018	22 Nov 2018– 27 Feb 2020	A2018-42	amendments by A2018-42
R75 28 Feb 2020	28 Feb 2020– 28 Feb 2020	A2020-6	amendments by A2020-6
R76 29 Feb 2020	29 Feb 2020– 29 Apr 2020	A2020-6	republication for expiry of transitional provisions (ch 20)
R77 30 Apr 2020	30 Apr 2020– 8 Jan 2021	A2020-6	amendments by A2019-38
R78 9 Jan 2021	9 Jan 2021– 22 June 2021	A2020-42	amendments by A2020-30 and A2020-42
R79 23 June 2021	23 June 2021– 5 Apr 2022	A2021-12	amendments by A2021-12
R80 6 Apr 2022	6 Apr 2022– 8 Jan 2023	A2022-4	amendments by A2022-4

6 Renumbered provisions

This Act was renumbered under the *Legislation Act 2001* in R9 (see Act 2001 No 81). Details of renumbered provisions are shown in endnote 4 (Amendment history). For a table showing the renumbered provisions, see R12.

7 Expired transitional or validating provisions

This Act may be affected by transitional or validating provisions that have expired. The expiry does not affect any continuing operation of the provisions (see *Legislation Act 2001*, s 88 (1)).

Expired provisions are removed from the republished law when the expiry takes effect and are listed in the amendment history using the abbreviation 'exp' followed by the date of the expiry.

To find the expired provisions see the version of this Act before the expiry took effect. The ACT legislation register has point-in-time versions of this Act.

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