Summary of Workers' Compensation Scheme Developments in Australia and New Zealand (2024)

Report

safe work australia

Contact information
Safe Work Australia | info@swa.gov.au | www.swa.gov.au

CONTENTS

Introduction

This report will outline significant developments in workers' compensation schemes in Australia and New Zealand between 1 January 2024 and 31 December 2024.

This report contains information regarding significant changes in:

- administration and scheme delivery
- policy developments, and
- legislative amendments.

Workers' compensation schemes aim to minimise the cost and impact of work-related injury and illness. Workers' compensation in Australia is predominately jurisdictionally based, with coverage of injured workers generally based on the location of employment. There are 11 main workers' compensation schemes in Australia, one for each state and territory and 3 Commonwealth schemes.

In contrast to Australia, New Zealand has a no-fault accident insurance scheme covering everyone who is injured in New Zealand, including workers, drivers, children, beneficiaries, students, unemployed, retirees and visitors. The scheme is managed by the Accident Compensation Commission, funded by compulsory levies, and replaces the right to sue for injury.

New South Wales

Administrative and scheme delivery changes

Claims Management Guide updates

The Claims Management Guide, which is the State Insurance Regulatory Authority's (SIRA) online resource for workers' compensation claims management information, underwent a complete review in 2024. The review updated existing information and provided additional resources.

Increased transparency and accountability in the workers' compensation system

SIRA continues to report publicly on scheme performance to maintain transparency and accountability in the NSW workers' compensation scheme. The open data application is a self-service visual analytics tool that makes it easier to view scheme performance data over time. Key metrics reported on via the open data portal include:

- system effectiveness, efficiency and affordability
- return-to-work rates
- claims data, and
- payments data.

SIRA has also commenced publishing on its website the *Insurer recovery through work performance report.* The purpose of these reports is to:

- present insurer's recovery through work performance
- ensure work participation remains at the forefront of insurer performance, and
- foster transparency of insurer performance.

The report is based on the following outcome measures:

- **Stay at work rate (SAW)** - number of workers who have remained at work in any capacity after their injury.
- **Return to work rate (RTW)** - number of workers who have returned to work after having at least one day off work.
- **Working rate (WR)** - number of workers who have returned to work after having at least one day off work as well as workers who have continued to work.

The report presents a comparison of 13-week recovery through work rates over a period of 5 quarters and 2 years.

A Workers' Compensation Guide for Employers

In November 2024, 'A Workers Compensation Guide for Employers' was updated and revised to provide practical information, clearly outlining Employer obligations and best practices.

The key changes comprise of information about psychological injury, including guidance on:

- creating a mentally healthy workplace
- looking out for early warning signs
- engaging with your worker who is off work, and
- things to consider and assistance available to identify suitable work.

How employers can prevent and respond to psychological injury in the workplace – 5 key messages

In November 2024, SIRA developed and published a new guide on the SIRA website including 5 actions an employer can take, with links to tools, information and support:

- Manage risks and look for early warning signs
- Show you care
- Encourage a worker to seek support
- Offer suitable employment
- Take care of yourself

Actual wage declaration campaign

In November 2024, SIRA implemented a social media campaign to inform employers about their obligation to submit actual wage declarations at the end of their workers' compensation policy period. SIRA's website was updated with relevant information and to reflect the penalties and consequences of non-submission.

SIRA's campaign was implemented in conjunction with direct messaging to employers from the Nominal Insurer and resulted in a significant increase in submission of actual wage declarations. SIRA continues this approach on a quarterly basis as one strategy to address under-insurance.

Transition to the Allied Health Treatment Request

In June 2024, SIRA released a new Allied Health Treatment Request form to replace the previous Allied Health Recovery Request. The revised form aims to ensure that health practitioners provide the right information to insurer case managers so they can determine treatment requests in a timely manner. The new form aligns to SIRA's value-based care approach to healthcare in the NSW personal injury schemes.

Policy developments

2023 Law and Justice Review of the Workers Compensation Scheme

In 2022, the Standing Committee on Law and Justice commenced a review into the Workers Compensation Scheme. This review was to ensure the workers' compensation scheme is fiscally sustainable and supports injured workers and their families when it is needed most. The Review had a focus on the increase in psychological claims and their impact on the scheme.

In December 2023, the Government released the findings from the Review. The Review proposed 18 recommendations, including consideration to legislative and policy reforms and a whole of government return to work strategy for injured workers. The Standing Committee did not formally table a report on the 2022 review prior to the end of the 57th parliament and, the findings and response are to the 2023 review.

On 4 March 2024, the Government published its response to the Review. SIRA is working with various agencies to support the Review implementation.

Victoria

The financial sustainability of Victoria's WorkCover Scheme (the Scheme) has been under increasing pressure in recent years due to more injured workers staying on the Scheme for longer, rapid growth in mental injury claims, and a premium rate that was one of the lowest in the country prior to 2023-24.

To address these issues, the Victorian Parliament passed amendments to the *Workplace Injury Rehabilitation and Compensation Act 2013* (WIRC Act) and *Accident Compensation Act 1985* (AC Act) under the Workplace Injury Rehabilitation and Compensation Amendment (WorkCover Scheme Modernisation) Bill 2023.

These amendments came into effect on 31 March 2024 under the Workplace Injury Rehabilitation and Compensation Amendment (WorkCover Scheme Modernisation) Act 2024 (Scheme Modernisation Act).

The Scheme Modernisation Act made several changes designed to deliver a more sustainable Scheme. These amendments included:

- new eligibility requirements for mental injury claims
- an additional whole person impairment (WPI) requirement for workers to continue to receive weekly payments after 130 weeks
- clarifying that disputes regarding eligibility to access compensation cannot be referred to the Workplace Injury Commission for arbitration, and
- an independent review of the changes introduced under the Scheme Modernisation Act to be conducted by a panel of experts in 2027.

In parallel to the legislative reforms, the Victorian Government established Return to Work Victoria (RTWV) as a business unit within WorkSafe Victoria (WorkSafe).

RTWV's primary function is to find new ways to support workers and employers, and to help injured Victorians recover and get back to work safely. Alongside delivering the legislative reforms, RTWV is now considering specifically what needs to be developed and delivered so that injured workers have every opportunity to maximise their recovery and return to work opportunities and outcomes.

Administrative and scheme delivery changes

Scheme Modernisation Act transition support for workers

Collaborating with stakeholders

To support the administration of the new legislative provisions, and to minimise the impact of these changes on injured workers, RTWV is working with the following stakeholders to improve support during the transition:

- Scheme Agents
- Self-Insurers
- Independent Medical Examiners
- Independent Impairment Assessors, and
- Occupational Rehabilitation providers.

HelpConnect

In accordance with the WIRC Act, workers receiving weekly payments have their entitlement reviewed before they reach 130 weeks of payments. If a worker is no longer entitled to weekly payments, they are given a notice period of 13 weeks before payments stop. WorkSafe Victoria works with delivery partners and occupational rehabilitation providers to offer support services to these workers - giving them the best chance to transition off the scheme and return to work. Support services can include psychosocial supports, training, or connecting the worker with suitable employment opportunities.

To complement the existing suite of services and supports offered, RTWV is piloting a new service, HelpConnect. This is an occupational rehabilitation service offered to workers as part of the second entitlement review process. HelpConnect seeks to ease the transition off the Scheme by:

- connecting workers with community-based services and supports (financial, social, health and wellbeing)
- re-offering vocational counselling and advice, and
- providing workers with a community-based resource list.

During the service, workers are invited to nominate their most pressing needs and providers support and/or advocate for them with relevant community-based services. To date, securing continued financial support and income (e.g., through Centrelink or emergency funds) has been commonly prioritised by workers. The HelpConnect pilot has been welcomed by stakeholders, with impacts being closely monitored.

Monitoring provider compliance

WorkSafe Victoria is optimising its approach to ensuring providers bill appropriately for their services.

System-based controls

Decision Centre was implemented in 2021, establishing a self-serve platform that enables WorkSafe to implement critical billing rule changes in real-time. Over 1,000 billing rules have been implemented, with an ongoing program in place to identify and address financial leakage.

Billing position statements

WorkSafe Victoria have introduced a number of billing position statements (Spinal Surgery, Shoulder Surgery and Interventional Pain Therapy), working closely with the Australian Orthopaedic Association, Australasian Shoulder and Elbow Society and the Faculty of Pain Medicine. The statements outline WorkSafe's position on billing and set clear expectations for using appropriate item numbers to ensure WorkSafe Victoria is paying reasonable costs for these procedures. The statements also provide an enforceable position for WorkSafe Victoria to rely on for provider compliance.

Pre-payment invoice reviews

Surgical invoices for implantable pain therapy and elective surgery procedures are currently reviewed prior to payment. Where non-compliant billing practices have been identified, WorkSafe Victoria engages directly with providers and can deny payments. This has resulted in liability savings and, more importantly, provides the opportunity to raise awareness about non-compliant billing and drive favourable changes in surgical provider billing practices.

Self-Insurance data uplift

In 2024, Victoria's 33 self-insurers started providing consistent monthly performance data to WorkSafe Victoria. As the data matures over the next 2-3 years, comparative analysis will help drive improvements and allow for more targeted performance monitoring.

Policy developments

Scheme Modernisation Act transition support for providers

To support providers to apply and adhere to the requirements of Victoria's new scheme modernisation legislation, WorkSafe has created and published 2 practice directives for managing injured workers.

The *Mental injury eligibility* Practice Directive provides guidance and information about mental injury eligibility under the WIRC Act for medical practitioners, independent medical examiners and independent impairment assessors. It highlights key considerations consistent with the legislative intent and includes important information regarding the requirements for quality decision making. It applies to mental injuries that have occurred on or after 31 March 2024, and may also be useful for employers and workers.

The *Whole person impairment for ongoing entitlement to weekly payments* Practice Directive provides guidance and information about the second entitlement period WPI impairment requirement under the WIRC Act for medical practitioners, independent medical examiners and independent impairment assessors.

Legislative amendments

Mental injury eligibility

The Scheme Modernisation Act introduced new eligibility requirements for mental injuries which came into effect on 31 March 2024. Mental injury is now defined as an injury that causes significant behavioural, cognitive, or psychological dysfunction and must be diagnosed by a general practitioner or psychiatrist. Further, for a mental injury to be eligible for compensation, it must be predominantly caused by employment.

The changes to mental injury eligibility are designed to strengthen the nexus between employment and mental injury, and explicitly exclude mental injuries caused by work related stress or burnout resulting from a worker's usual or typical duties.

Workers who are routinely exposed to traumatic events will continue to be eligible for compensation if they are diagnosed with a significant mental injury that is predominantly caused by work-related stress and burnout. Similarly, mental injuries caused by bullying, discrimination or harassment in the workplace will still be compensable.

Thirteen weeks of provisional payments for mental health services will be available for all workers that make a mental injury claim, regardless of whether it is accepted, so that they can access treatment without delay. Facilitated discussions with their employer will also be conducted to support workers to identify and address barriers to return to work.

Weekly payments after second entitlement period

The Scheme Modernisation Act included amendments to entitlements for injured workers receiving weekly payments beyond 130 weeks. These changes also came into effect on 31 March 2024.

A WPI threshold of greater than 20% was introduced for workers to continue to receive weekly payments beyond 130 weeks. This new requirement was in addition to the existing work capacity test that requires an injured worker to demonstrate an indefinite incapacity for work. The requirement to demonstrate an indefinite incapacity for work is necessary to ensure the ongoing weekly payments are made appropriately and recognises that some workers with a significant degree of impairment may continue to have a capacity for work.

The threshold applies to the greater of one or more of the workers' degree of impairment resulting from one or more physical injury/ies or primary mental injury/ies.

Subject to eligibility requirements, workers no longer eligible to receive weekly payments beyond 130 weeks may be able to access impairment benefits and common law damages.

Arbitration

The Scheme Modernisation Act amended the WIRC Act so that disputes about whether a worker is entitled to compensation can't be referred to arbitration. An injured worker will still be able to refer a dispute for conciliation by the Workplace Injury Commission (per the current process). If a dispute is not resolved at conciliation, it will then be referred to, and resolved by, the Courts. This is to ensure the new mental injury eligibility changes are applied consistently through judicial interpretation.

New regulations for workers' compensation

The Workplace Injury Rehabilitation and Compensation Regulations 2024 (WIRC Regulations) commenced on 26 May 2024. The WIRC Regulations replaced the Workplace Injury Rehabilitation and Compensation Regulations 2014, which ended on 27 May 2024. The WIRC Regulations set out a number of key changes relating to compensation arrangements:

- The percentages deemed 'not remuneration' for specific classes of contractors have been refined to pre-injury average weekly earnings for injured workers help determining.
- The statement of identity and medical certificate forms for injured workers living overseas have been updated and are available on WorkSafe's website.
- Since 1 January 2025, a simplified formula has been used to calculate self-insurer contributions and the current discount on common costs has been removed from the formula.

Eligible progressive diseases

The Victorian Government added uterine, cervical, and ovarian cancers to the list of eligible progressive diseases (EPDs) pursuant to section 51A of the WIRC Act. The Order listing the new cancers as EPDs came into effect on 5 December 2024. Workers with uterine, cervical, and ovarian cancers that have developed those cancers in the course of employment will benefit from:

- streamlined access to impairment benefit compensation
- an entitlement to receive further compensation where their condition deteriorates, and
- access to family counselling services.

These changes were made following the introduction of these cancers on the presumptive rights framework through the *Justice Legislation Amendment Act 2023*.

Queensland

Administrative and scheme delivery changes

New psychiatric assessment tribunal

Medical assessment tribunals (MATs) are established under the *Workers' Compensation and Rehabilitation Act 2003* (WCR Act) to make independent, expert medical decisions about work-related injury or impairment.

On 1 July 2024 the Psychiatric Assessment Tribunal (PAT) commenced as a new speciality medical assessment tribunal in the Queensland workers' compensation scheme.

The PAT will assess psychiatric and psychological injuries previously assessed by the General Medical Assessment Tribunal (GMAT). In conducting assessments, the PAT will apply the same assessment criteria and methodology used by the GMAT.

The PAT was designated in response to the increasing proportion of psychiatric and psychological injuries before the MATs and in acknowledgement of the important role of psychiatrists in assessing these injuries.

Policy developments

Publication of new information statement for workers and employers

In December 2024, the Office of Industrial Relations published 2 scheme information statements for workers and employers respectively. These statements are designed to help workers and employers navigate the workers' compensation process and understand their rights and obligations in the scheme.

Insurers can provide the statements to workers and employers in various ways including in person, by mail or electronically (such as by email or a link in an email).

From 1 January 2025, workers' compensation insurers must give an injured worker and their employer an information statement after a claim is lodged.

Publication of reasonable management factsheet for workers

In December 2024, the Office of Industrial Relations published a factsheet for workers about the reasonable management action exclusion for psychiatric and psychological claims.

The reasonable management exclusion is longstanding and prevents a worker's psychiatric or psychological injury from being compensated if it arises out of, or in the course of, reasonable management action taken in a reasonable way by the worker's employer in connection with the worker's employment.

The factsheet is an educational tool and is designed to ensure workers who make psychiatric or psychological claims are better informed about the operation of the exclusion.

Medical research grant for occupational dust lung diseases

In February 2024, the Office of Industrial Relations completed a second round of grant funding for medical research to improve the health and wellbeing of workers suffering from occupational dust lung disease including coal workers' pneumoconiosis and silicosis. Following the completion of this second round over $3.5 million of grant funding has now been awarded.

Legislative amendments

Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2024

On 23 August 2024, the *Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2024* (Amendment Act) received assent.

The Amendment Act introduced amendments to the *Workers' Compensation and Rehabilitation Act 2003* to give effect to accepted legislative recommendations of the 2023 *Review of the Operation of the Queensland Workers' Compensation Scheme.*

At the high level, the Amendment Act aims to:

- assist workers and employers to understand their rights and responsibilities by providing mandatory information statements
- provide greater support for firefighters by expanding the list of occupational firefighting diseases presumed to be work-related
- expedite injured workers' access to weekly compensation payments by introducing a basic weekly payment to be paid while the insurer waits for the information necessary to calculate the workers' actual compensation entitlement
- increase early intervention for physical injury claims to prevent the development of a secondary psychiatric or psychological injury
- expand the compliance and enforcement tools available to the Workers' Compensation Regulator
- improve rehabilitation and return to work (RRTW) outcomes in the scheme by empowering injured workers to choose an alternative workplace rehabilitation provider, requiring host employers to cooperate with labour hire providers to fulfil their RRTW obligations, and introducing a timeframe for the preparation of a RRTW plan, and
- provide flexibility for gig workers and certain workers in the road transport industry to be covered by the workers' compensation scheme where they are covered by a minimum standards order, minimum standards guideline or collective agreement made or registered by the Fair Work Commission.

Most of the provisions of the Amendment Act commenced on assent. Provisions relating to gig workers commenced on 27 September 2024 and provisions requiring workers and employers to be given scheme information statements commenced on 1 January 2025.

More information at Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2024.

Western Australia

Administrative and scheme delivery changes

New Act implementation

In the first half of 2024 the main focus of WorkCover WA was on supporting our stakeholders and staff on the journey towards implementation of the new *Workers Compensation and Injury Management Act 2023* on 1 July 2024. This included a comprehensive refresh of all resources including our website content, publications and educational videos. We also held 14 targeted *Future Empowered* workshops for our stakeholders to provide comprehensive information about the new framework to support the transition to the new Act.

Guide for Treating Medical Practitioners

WorkCover WA launched the *Workers Compensation and Injury Management: A Guide for Treating Medical Practitioners.* The Guide will assist treating medical practitioners in understanding their role in the workers' compensation and injury management scheme and facilitate improved health and return to work outcomes.

Brokers principles and Standards & online training

WorkCover WA implemented the *Insurance Brokers Principles and Standards of Practice* developed in collaboration with our stakeholders. WorkCover WA also introduced a new online training course to deliver essential knowledge and service expectations to brokers operating in the Western Australian workers' compensation scheme.

Policy developments

On 1 July 2024 the *Workers' Compensation and Injury Management Act 1981* was repealed and replaced by the *Workers Compensation and Injury Management Act 2023*. The following key policy and technical changes were implemented as part of the new Act on 1 July 2024:

- clarified the status of contractors in the definition of 'worker' and provided flexibility for regulations to extend cover to persons in non-conventional employment arrangements if the circumstances justify it in the future
- clarified the presumption of work-related injury for workers suffering dust disease, including silicosis, and streamlined provisions for how dust disease compensation and common law claims are made and determined
- amended the *Limitation Act 2005* to ensure workers with silicosis are on the same footing as workers with asbestosis
- updated the list of deemed diseases via regulations
- streamlined the way noise induced hearing loss claims are assessed and determined
- provided for catastrophically injured workers to receive lifetime care and support under the Catastrophic Injuries Support Scheme administered by the Insurance Commission of Western Australia
- simplified the method for calculating income compensation payments

- extended the period, from 13 to 26 weeks, before income (weekly) compensation payments step down, and increased the cap on medical and health expenses compensation from 30% to 60% of the general maximum amount (both of which were 2021 State Government election commitments)
- improvements to insurer liability decision timeframes including a requirement to make provisional payments to workers where a liability decision is not given in time
- clarified and provided more flexibility in settlement pathways
- clear provisions and processes for discontinuing, reducing or suspending compensation payments
- more prominence in the Act for the role and functions of the worker's treating medical practitioner and the right of workers to choose their treating medical practitioner
- prohibited employer attendance when a worker is being physically or clinically examined by their treating medical practitioner (2021 State Government election commitment)
- consolidated safety net funds for claims associated with uninsured employers, insolvent insurers and self-insurers, and terrorism events
- provided modernised frameworks for WorkCover WA to licence, approve and regulate service providers
- discontinuing the regulatory framework for registered agents representing parties in WorkCover WA's Conciliation and Arbitration Services, and
- updated fines and penalties for offences under the Act.

Legislative amendments

Extensive subsidiary legislation and administrative instruments were implemented on 1 July 2024 to support the new Act:

- Workers Compensation and Injury Management Regulations 2024
- Conciliation and arbitration rules
- Legal costs determination
- 8 WorkCover WA issued instruments
- 60 Act approved forms
- 4 Ministerial medical and allied health fee orders (effective 1 July & indexed on 1 November 2024)
- 12 transitional directions

South Australia

Administrative and scheme delivery changes

Digital Transformation Project

ReturnToWorkSA is modernising its digital technology infrastructure through the Digital Transformation Project. As part of the project a new digital platform ‘Salesforce’ is being used for online claims lodgement and managing ReturnToWorkSA’s stakeholder engagement. Since the introduction of online claims lodgement, circa 23% of claims received have been lodged online by employers.

Digital initiatives include, for example, the development of an injured worker digital channel to enable injured workers to lodge information and documents online as part of their claim lodgement.

Policy developments

Permanent Impairment Guidelines

A ‘Stakeholder Representative Consultation Group’ (SRCG) was formed in 2022 by invitation of the Minister for Industrial Relations and Public Sector, to review South Australia’s Return to Work Scheme’s Impairment Assessment Guidelines second edition, and to consult on a draft third edition. That review has been conducted with significant expert medical input. There have been several rounds of stakeholder consultation on the draft third edition. The final Formal Consultation closed on 31 July 2024 and feedback has been compiled, in preparation for actuarial valuation and tabling in Parliament, intended for 2025.

Legislative amendments

Return to Work (Employment and Progressive Injuries) Amendment Act 2024

The *Return to Work (Employment and Progressive Injuries) Amendment Act 2024* (Amendment Act) was passed by the Parliament of South Australia in November 2024 introduced important changes to the *Return to Work Act 2014* (RTW Act). The Amendment Act commenced on 1 December 2024, however some of the changes that require supporting regulations to operate, are due to come into effect at a later date.

The legislative amendments include:

- a clear and concise definition of 'stabilised' which provides clarity regarding when injured workers may seek a permanent impairment assessment under section 22 of the RTW Act
- new exceptions to the requirement that a worker’s injury needs to have stabilised in order to be assessed for permanent impairment. The Act now provides for pathways for injured workers with terminal illnesses and conditions prescribed by regulation to be assessed for permanent impairment even though their condition may continue to deteriorate

- improved choice and fairness in the calculation of average weekly earnings for injured workers suffering from dust diseases. Workers with dust diseases can elect to either have their average weekly earnings calculated with reference to the employment they held at their date of injury (i.e. the date of exposure to hazardous dust), or the employment they held at the date on which they were diagnosed by a medical practitioner with a prescribed dust/fibre disease
- strengthening worker medical privacy by introducing a general prohibition on employers and compensating authorities from being present while a worker is being physically or clinically examined or treated by a health practitioner, or undergoing diagnostic examination or testing required for the purposes of treatment
- strengthening protections for injured workers returning to work following an injury by extending the period of time to which they can request suitable employment from their employer under section 18 of the RTW Act
- providing greater clarity on relevant processes and procedures relating to disputes between workers and employers about suitable employment
- broadening the powers and jurisdiction of the South Australian Employment Tribunal (SAET) so that it can:
    - make specific orders relating suitable employment arrangements including the nature and range of duties, any adjustments to be made to enable the worker to perform those duties, and the number of hours to be worked
    - concurrently deal with disputes concerning suitable employment and the compensability of an injury
    - consider evidence in relation to medical and factual developments that arise during a dispute about suitable employment
    - determine monetary claims for wages or salary owed when a worker is undertaking alternative or modified duties
    - make orders that an employer pay backpay to the injured worker for wages or salary they would have received if suitable employment had been provided
- clarifying that where a worker is injured working for a group self-insured employer, the duty to provide suitable employment applies across that self-insured group and is not confined to the pre-injury employer
- creating a new obligation for host employers to cooperate with labour hire providers in returning injured workers to work
- providing an express exception to the employer's duty to provide suitable employment to injured workers in circumstances where the worker's employment was properly terminated on grounds of serious and wilful misconduct, and
- inserting new provisions that govern the transition from an existing set of Impairment Assessment Guidelines to an amended or substituted set of Guidelines.

Tasmania

Administrative and scheme delivery changes

New Claims Forms

Tasmania has released a new Workers' Compensation Claim Form and a new Dependants of Deceased Workers Claim Form to support a timely and effective workers' compensation process. The new forms are simplified and can now be completed digitally or printed and completed by hand. The new forms streamline the information needed to make it easier for workers and dependents to complete.

Medical Certificate

In February 2024, Tasmania released a new Workers' Compensation Certificate of Capacity (medical certificate) to medical practitioners via medical practice software for their use. The new medical certificate better supports positive return-to-work outcomes by focussing on what the worker can do and by considering both the worker's physical and psychosocial capacity for work. This new medical certificate focuses on capacity rather than incapacity. Tasmania has initiated a review of the new medical certificate to gauge uptake and acceptance and is due for completion in November.

Work Health and Safety and Workers' Compensation Compliance Program in the Tasmanian Racing

Due to compliance concerns within the Tasmanian racing industry, Tasmania has developed a compliance program that will focus on both work health and safety and workers' compensation compliance in the harness, thoroughbred and greyhound racing sectors. The program has multiple phases, including on raising awareness for compliance within the industry. The program focused on high-risk hazards within each industry sector, that workplaces have the necessary controls in place to mitigate their risks and employers within the industry understood their workers' compensation obligations, including having a current workers' compensation insurance policy in place. This program has been developed in consultation with Racing Tasmania and, as of 30 October 2024, no Work Healthy and Safety or Workers Rehabilitation and Compensation notices have been identified as the industry is subject to an extensive accreditation system.

Implementation of the Family Support Framework

In 2024, Tasmania began implementing the recommendation of the Family Support Framework Project's (the FSF Project) Advisory report completed in 2022-23. The project's aims included determining what actions were required to improve support to seriously injured workers and families affected by a workplace death and ensuring Tasmania addressed the national principles to support families following an industrial death. The project's final Advisory Report outlined the internal standards, systems and inter-agency approach that is required to appropriately respond to and manage cases of serious injury and industrial death in Tasmania. The recommendations include changes to WorkSafe Tasmania's systems and processes, and to the Tasmanian workers' compensation scheme. Since May 2024, a Project Manager and Family Support Liaison Officer (the first FLO in Tasmania) have been appointed to oversee the implementation of the recommendations.

Improving Injury Outcomes (in the TSS)

Tasmania is conducting the Improving Injury Outcomes in the Tasmanian State Service project. The objective of project is to identify factors (culture, system, and process) to improve the outcomes of injured workers and workers' compensations systems performance for workers and employers. The final output of this project is a Recommendations Report for consideration of the WorkCover Tasmania Board and the Tasmanian Government.

Scheme review 2023/24

The scheme actuary completed the Scheme Review to 30 June 2024 report. The report highlights a significant increase in claim payments in the 2023/24 year, primarily driven by weekly payments and lump sum payments. The report also highlights that the experience for mental-health related claims has been a key driver of emerging trends, noting that the proportion of claims reported that are mental-health related has risen to 13% in 2023/24. Mental-health related claims represented 35% of total claim payments in 2023/24 at a scheme level, and 67% of all claim payments in the Tasmanian State Service.

Additional regulatory items for workplace rehabilitation providers (WRPs)

Following feedback, Tasmania added 2 service codes to the list of codes WPRs and insurers use to report workplace rehabilitation services provided. The new service codes are:

- WRP010 – non-accredited services
- WRP011 – travel

WRPS and insurers are required to be able to report these by 1 January 2025.

New Annual Reporting and Compliance Report (self-assessment template)

Tasmania has also developed and implemented a new Annual Reporting and Compliance Report template. WRPs are required to complete this 'self-assessment' annually.

Secondary injury data collection

In June 2024, WorkSafe Tasmania drafted changes to its NIDS data specification which included the introduction of new fields to capture secondary injury data. The changes included a proposed definition of secondary injury for the purpose of data reporting.

Data to be collected includes narrative fields and TOOCS 3.1 codes for Nature of Injury and Bodily Location of the secondary injury, as well as a date of diagnosis of the secondary injury and an indication of liability status of the secondary injury. A transition period of 6 months was commenced from 1 July 2024, with reporting of secondary injuries by insurers to commence from 1 January 2025.

Policy developments

Impairment Guidelines

Tasmania has conducted a review of the Guidelines for the Assessment of Permanent Impairment. The WorkCover Tasmania Board agreed that the preferred way forward is for Tasmania to adopt AMA-5 and the national guidelines duly modified as required for Tasmania. The Board agreed to wait until the review of the national guidelines is complete to commence the implementation project. The National Template Guidelines for the Assessment of Permanent Impairment (revised 2024) have recently been received and will be considered by the WorkCover Tasmania Board at an upcoming meeting to determine the next steps in this project.

Legislative amendments

Improvements to the Asbestos Compensation Scheme

On 5 September 2024, amendments to the *Asbestos-Related Diseases (Occupational Exposure) Compensation Act 2011* to implement the recommendations of the 2022 independent review were passed by Parliament.

The independent review by Rod Chandler and Liz Gillam made 15 findings and 8 recommendations addressing both operational and legislative issues regarding the performance of the Act against its objectives, the ongoing viability and sustainability of the Asbestos Compensation Scheme, and the performance of the Scheme. All recommendations of the independent review have now been implemented.

Australian Capital Territory

Administrative and scheme delivery changes

Increased WorkSafe ACT Activity

Since WorkSafe ACT was established as the ACT's Scheme regulator on 1 July 2020, a key objective of the ACT Government has been to build capability and capacity of WorkSafe ACT as a responsive regulator. The regulator's activity under the *Workers Compensation Act 1951* has increased significantly in recent years.

In 2022-23, WorkSafe ACT Inspectors conducted a total of 120 workplace visits. In 2023-24 an increased operational focus resulted in 614 workers' compensation compliance inspections being completed.

The result highlights WorkSafe ACT's commitment to ensure employers are complying with their workers' compensation responsibilities, which includes holding a current workers' compensation insurance policy for all of their workers in the ACT.

Further information, including data relating to Work Health and Safety compliance and enforcement, can be found on the WorkSafe website[1].

Implementation of the Type of occurrence classification system (TOOCS) 3.1

The ACT implemented the planned TOOCS version 3.1 change to allow insurers to submit data in WCMS under revised codes. Mechanism for incident 88 coded as "other harassment" has been revised and divided to "racial harassment" code 88 and "sexual harassment", code 80. Insurers and self-insurers were provided a transition period for system alignment. However, mandatory reporting under the revised code is scheduled for January 2025.

Policy developments

ACT Workers' Compensation Review of Scheme Performance to 30 June 2023

An independent review of the ACT Scheme's performance is carried out annually; the results of which are integral to monitoring and regulating scheme performance, responding to trends in claim experience and, importantly, developing suggested reasonable premium rates for individual industry classes for the forthcoming policy year. The Annual Review Report and Suggested Reasonable Premium Rates for each financial year are published on the CMTEDD website.[2] The Review of Scheme Performance to 30 June 2023 was published in May 2024.

In 2022-23, around 19,700 policies were written, covering $15 billion in wages and premiums of $315 million were collected under the ACT private sector workers' compensation scheme.

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[1] Compliance and enforcement data, WorkSafe ACT
[2] ACT Workers' Compensation Review of Scheme Performance, CMTEDD

Northern Territory

Administrative and scheme delivery changes

There have been no major administrative and scheme delivery changes in the Northern Territory for the reporting period, 1 January 2024 to 31 December 2024.

Northern Territory's current data base is unable to capture a sequalae psychological injury from an accepted physical injury claim. The data base is only capable of capturing the initial accepted injury. In an attempt to ascertain the potential number of psychological sequala, NT WorkSafe has introduced 2 new benefit types into the 'Insurer Guide to NT WorkSafe Data Requirements Guide', namely:

75S	Sequalae Psychological – accepted
75SW	Sequalae Psychological – without prejudice

In adding these benefit types, it will allow us to run reports that indicate those claims that have additional psychological components that we have not previously been able to identify and explore.

The following 2 benefit types continue to be fit for purpose:

75.3	Psychologist • Solely for injured workers treated for Psychological injuries
75W	Worker Counselling – Counselling for workers immediate family – Section 73(2)(3)(6) • Costs incurred by the worker for family counselling provided to the worker or members of the workers immediate family • The total costs to not exceed 150% of average weekly earnings • Family counselling means counselling to assist the worker or family member to cope with the psychological impact of the injury sustained by the workers injury

Legislative amendments

Presumptive legislation for firefighters

The Northern Territory introduced presumptive legislation for firefighters on 1 July 2015. The legislation covered 12 diseases. Section 50A of the *Return to Work Act 1986* provides the eligibility of a firefighter for compensation for prescribed disease. The diseases and qualifying periods are prescribed in the Return to Work Regulations 1986 (the Regulations), Regulation 5B. An additional 4 diseases were prescribed in the Regulations on 29 July 2020 taking the total to 16.

On 11 June 2024, His Honour Professor the Honourable Hugh Heggie AO PSM, the Administrator of the Northern Territory made amendments to the Regulations, Regulation 5B, to include 7 additional cancers to the prescribed diseases and qualifying periods for firefighters in the Northern Territory.

While ‘Asbestos Related Diseases’ captures all asbestos related diseases, ‘Malignant Mesothelioma’ was added to the list of deemed diseases for firefighters to ensure that there is no ambiguity with regard to ‘Asbestos Related Diseases’. With the addition of 7 identified diseases, the Northern Territory has 23 presumptive diseases for firefighters.

The following provides the 7 additional identified diseases included through the Regulation change:

- Primary site cervical cancer
- Primary site ovarian cancer
- Primary site penile cancer
- Primary site uterine cancer
- Primary site pancreatic cancer
- Primary site thyroid cancer
- Malignant Mesothelioma

The inclusion of the additional 7 cancers identified will ensure the presumptive provisions for firefighters is up to date and consistent with available research and evidence.

Amending the definition of ‘first responder’

On 11 June 2024, His Honour Professor the Honourable Hugh Heggie AO PSM, the Administrator of the Northern Territory made amendments to the Regulations to include correctional officers as defined under section 4 of the *Correctional Services Act 2014* in the ‘first responder’ definition in Regulation 3.

Section 3A of the Act provides the meaning of ‘injury’, which includes in part ‘An injury, in relation to a worker, is a physical or mental injury arising out of or in the course of the worker’s employment…’

Section 4 of the Act provides the meaning of ‘out of or in the course of employment’ and section 4(6) provides in part ‘Unless the contrary is established, a disease shall be taken to have been contracted by a worker in the course of his or her employment if: (a) it is prescribed by the Regulations to be a particular disease, or a disease of a particular kind, specified by the Regulations as being related to employment of a particular kind…’

Regulation 5AB provides ‘For section 4(6)(a) of the Act, the diseases and kinds of diseases, and the kinds of employment related to those diseases, are those prescribed and specified in Schedule 2’.

Regulation 3 provides in part, ‘*first responder*, for Schedule 2, means a person with specialised training (such as a paramedic, police officer, firefighter or other emergency personnel), who attends the site of an incident and provides assistance in situations…’

Schedule 2, 9A in the Regulations provides ‘Post-traumatic stress disorder’ as a disease with the kinds of employment being ‘All work as a first responder, including as a volunteer, but not including a person trained as a first responder who has not attended in person at an emergency situation or incident’.

It is recognised that correctional officers, as defined under section 4 of the *Correctional Services Act 2014*, provide assistance in the situations provided in the first responder definition, however, this can sometimes be misunderstood and lead to legal ambiguity. To reduce legal ambiguity when resolving claims and reduce administrative costs of managing claims by encouraging earlier intervention, a further clarification for correctional officers is

provided within the example, namely, such as a paramedic, police officer, firefighter, other emergency personnel or correctional officers.

The inclusion of correctional officer, as defined under section 4 of the *Correctional Services Act 2014*, in the definition of first responder will reduce legal ambiguity and ensure the presumptive provisions for a first responder meet the intent of when it was introduced into the legislation.

Commonwealth

Administrative and scheme delivery changes

Comcare

Career Transition program

Comcare partnered with EML to pilot the Your Future program from November 2021 to October 2022. The program produced statistically significant evidence that the program had a positive effect on Return to Work (RTW) outcomes for participants in the Comcare scheme. As a result, Comcare and EML established the RTW Brokerage service from July 2023 to June 2024 with a continued focus on job readiness, career coaching, recovery and return to 'good work' or help with career development for injured employees. The brokerage demonstrated continued positive outcomes for participants returning to meaningful work.

Given the success of the programs, in July 2024 Comcare launched the Career Transition program as an ongoing service offering for Comcare scheme employers.

Department of Veterans' Affairs (DVA)

DVA supports the wellbeing of those who serve or have served in the defence of our nation, and their families. The focus of DVA activity over this reporting period has been:

- reducing the compensation claims backlog
- supporting the Government to progress major legislative reform of veterans' compensation and rehabilitation compensation, and
- supporting the Royal Commission into Defence and Veteran Suicide, which delivered its final report to Government on 9 September 2024.

Reducing the claims backlog

Of the 41,799 backlog of claims identified in the Royal Commission's interim report, the last of the unallocated claims backlog (the permanent impairment backlog) was cleared at the end of February 2024, ahead of the Royal Commission's 31 March 2024 deadline. Of these claims 98% have now been completed.

The Government's previous commitment to an additional 500 ongoing staff has allowed DVA to clear the backlog and now operate in a new business-as-usual (BAU) environment. This commitment has been extended in the 2024-25 Budget with an additional 141 ongoing claims processing staff to increase determinations and reduce time taken to process claims.

DVA receives nearly 5,000 claims every 2 weeks, and in this BAU environment it aims to register, screen and allocate new claims to an officer for processing within 2 weeks of receipt. While clearing the backlog of unallocated claims is an important first step, DVA is now focused on improving claims processing timeframes and outcomes for veterans and families.

Injury Management/Rehabilitation Services

In July 2024, DVA implemented a new operational model to improve the delivery of the DVA Rehabilitation Program. As part of the new model, DVA engaged 15 national rehabilitation providers to support continuity of support for veterans when they relocate within Australia and improve consistency in service delivery. Other changes included simplifying and streamlining how providers deliver rehabilitation services, enhancing DVA's capabilities to monitor provider performance and improving the Rehabilitation Client Satisfaction Survey.

Claim simplification

DVA continues to review and implement options for the streamlining of claims where it can be established that causal factors in the Statements of Principles (SOPs) will be met by Australian Defence Force (ADF) cohorts. Most recently, streamlining policy has been expanded to include dental attrition when bruxism has previously been accepted as service related. This policy means that where bruxism has previously been accepted by DVA, a claim for dental attrition that onsets after bruxism can be accepted without a need for further investigation about the connection to service. The policy is designed to make the claim process simpler for both veterans and claims assessors. Over 80 conditions are now included in streamlining and straight through processing arrangements.

Policy developments

Comcare

Review of the *Safety, Rehabilitation and Compensation Act 1988*

On 24 June 2024, the Australian Government announced the commencement of an independent Review of the *Safety, Rehabilitation and Compensation Act 1988* (the Review). The Review is chaired by Ms Justine Ross and panel members Professor Robin Creyke AO and Mr Greg Isolani. The terms of reference for the Review covers all aspects of the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act), including eligibility, entitlements, coverage, and governance. The terms of reference also provide for public consultation and a tripartite reference group (comprising employer, employee and government representatives). The Review will make recommendations to the Australian Government to inform future legislative reform of the SRC Act. A final report with findings and recommendations is due to government in 2025.

In October 2024, as part of the consultation process the Panel published an issues paper, to guide stakeholder submissions or responses to a short survey, to help better understand the experiences of injured workers and other stakeholders within the Comcare scheme. The public submission process closed on 20 December 2024 and survey responses closed on 31 January 2025.

DVA

The Government response to the Royal Commission Final Report

On 2 December 2024, the Australian Government responded to the Royal Commission into Defence and Veteran Suicide's Final Report. The Government agreed or agreed in principle to 104 recommendations, noted 17 recommendations, and did not support one recommendation in part. The Government response is available on the DVA website.

The Government's response marks the beginning of a substantial and long-term program of reform across Defence, DVA and the veteran support system. As part of its response, the Government took action to establish 2 new entities as a priority:

- The Defence and Veterans' Services Commission – an independent new body to provide independent oversight and evidence-based advice to improve suicide prevention and drive better outcomes for serving and ex-serving ADF personnel.
- The Royal Commission into Defence and Veteran Suicide Implementation Taskforce within the Department of the Prime Minister and Cabinet, to deliver a coordinated plan to implement the Government's response.

As part of the Government's response DVA has been funded to co-design with the veteran community a new agency focused on veteran wellbeing to be established within DVA, and to continue consultation on a new national peak body for ex-service organisations.

Provisional Access to Medical Treatment

In July 2024, DVA's Provisional Access to Medical Treatment Trial (PAMT) was extended until 31 December 2026. Under this program if a veteran has lodged a claim for one of 20 commonly accepted conditions, they can access necessary treatment for the condition from DVA while liability under the *Military Rehabilitation and Compensation Act 2004* (MRCA) and *Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988* (DRCA) is being determined.

This means that a veteran does not have to wait for DVA to approve a claim before they can access treatment that we fund. If a claim is not accepted, the veteran's entitlement to treatment under the program will cease. However, DVA will not ask the veteran to pay back the costs of care while we were assessing their claim.

Defence and Veteran Mental Health and Wellbeing Strategy 2025-2030

The Department of Defence (Defence) and DVA have been working together to develop a new joint Defence and Veteran Mental Health and Wellbeing Strategy 2025-2030. The Veteran Mental Health and Wellbeing Strategy and National Action Plan 2020-2023 and the Defence Mental Health and Wellbeing Strategy 2018-2023 expired at the end of 2023.

The strategy aims to improve the mental health and wellbeing of the Defence and veteran community. The strategy sets out the joint approach of the Defence and DVA over the next 5 years to promoting and supporting wellbeing, through early intervention and prevention, timely access to care and support, and a positive and connected community, while focussing on suicide prevention and using data to drive positive outcomes.

Working together to develop the strategy ensures a coordinated approach to supporting the mental health and wellbeing needs of serving members and veterans throughout their lives – during recruitment, service, employment, transition from service, and civilian life.

This approach aligns with the Productivity Commission's Inquiry Report, A Better Way to Support Veterans that called for a new single mental health Strategy for veterans' lifetime mental health (Recommendation 17.4). The Strategy incorporates best practice and responds to emerging priorities during a period of significant reform, with careful consideration of the Royal Commission into Defence and Veteran Suicide Final Report and to the evolving whole-of-government policy architecture.

The Exposure Draft of the strategy was released on 2 December 2024.

Defence and Veteran Family Wellbeing Strategy 2025-2030

On 20 December 2024, the Australian Government released the *Defence and Veteran Family Wellbeing Strategy 2025-2030* (the Strategy) and First Action Plan, which will benefit the families of current ADF personnel and veterans, including the serving members and veterans within those families. Over the next 5 years, this Strategy will guide how Defence and DVA provide targeted support to Defence and veteran families with the ultimate goal of seeing Defence and veteran families thrive during and after Defence service.

The Strategy recognises the impacts of military service on families and related life events during and after service. The Strategy outlines how families will be supported, confirms a continued commitment to understanding the needs of Defence and veteran families, and seeks to improve engagement and ongoing support.

Legislative amendments

Comcare

Safety, Rehabilitation and Compensation Act 1988

Fair Work Legislation Amendment (Closing Loopholes) Act 2023

The *Fair Work Legislation Amendment (Closing Loopholes) Act 2023* was assented to on 14 December 2023. The amendment introduced presumptive workers' compensation coverage under the SRC Act for first responders and members of a class of employees declared by the Minister, who suffer, or are suffering from Post-Traumatic Disorder (PTSD).

The amendment also required Comcare to prepare the *Guide for Arranging Rehabilitation Assessments and Requiring Examinations 2024* (the Guide). The Guide sets requirements for rehabilitation authorities when arranging section 36 rehabilitation assessments and requiring section 36 rehabilitation examinations. It also sets the requirements for relevant authorities requiring section 57 medical examinations.

The Guide was prepared by Comcare in consultation with the Safety, Rehabilitation and Compensation Commission, employee representatives (including a first responder union), employer representatives and various bodies with expertise. The Guide was approved by the Minister of Employment and Workplace Relations and is now a legislative instrument. The Guide commenced on 18 September 2024 and applies from 30 October 2024.

As of 14 June 2024, requests to undergo medical examinations under section 57 of the SRC Act became determinations and can be reviewed at the Administrative Review Tribunal.

The Safety, Rehabilitation and Compensation Amendment (Period for Decision Making) Regulations 2023

On 1 April 2024, the Safety, Rehabilitation and Compensation Amendment (Period for Decision-making) Regulations 2023 commenced. The amendment prescribes timeframes for decision making under the SRC Act in relation to initial claims for workers' compensation made under section 14 of the Act and for reconsiderations of determinations following a request made by a claimant.

The Regulations prescribe the following periods for decision-making:

- 20 calendar days for claims made in respect of an injury (other than a disease) or an aggravation of an injury (other than a disease)
- 60 calendar days for claims made in respect of a disease, and
- 30 calendar days to decide a request by a claimant to reconsider a determination.

The periods prescribed above in relation to initial claims do not include certain periods in which a determining authority is seeking further information or material in relation to a claim.

DVA

Harmonisation and Simplification of Veterans' Legislation

In July 2024, as part of the Government's ongoing response to the Royal Commission, and informed by extensive consultation with veterans and ex-service organisations, the Veterans Entitlements, Treatment and Support (Simplification and Harmonisation) Bill was introduced into the Australian Parliament. The Bill was passed by Parliament on 13 February 2025 and is now the *Veterans Entitlements, Treatment and Support (Simplification and Harmonisation) Act 2025* (VETS Act).

The VETS Act will bring the 3 current systems governing veterans' entitlements under a single and improved MRCA. This significant reform will make it easier for veterans and families to understand their entitlements, simpler for advocates to support veterans making DVA claims, and it will streamline claims processing within DVA.

Key features of the Act include:

- all new claims for compensation and rehabilitation will be considered under an improved MRCA from 1 July 2026
- closing the Veterans' Entitlements Act 1986 (VEA) and DRCA to most new compensation related claims, and
- VEA and DRCA compensation payments being received at the commencement date will be grandparented.

There are also a number of improvements to the MRCA:

- Introduction of the Additional Disablement Amount to the MRCA, similar to the VEA's Extreme Disablement Adjustment
- higher travel reimbursement amount when using a private vehicle to travel for treatment
- coverage for medical event while on duty
- accept claims for certain specified conditions on a presumptive basis under MRCA
- date of effect for permanent impairment payments
- merging the Military Rehabilitation and Compensation Commission with the Repatriation Commission, and
- posthumous conversion of permanent impairment periodic payments.

A full list of changes is available at www.dva.gov.au/legislationreform.

Introduction of the Administrative Review Tribunal

In October 2024, the Administrative Appeals Tribunal was replaced by the Administrative Review Tribunal (ART). Review pathways for veterans remain the same under the new arrangements, with the ART being a review pathway for matters heard by the Veterans' Review Board or claims made under the DRCA or certain income support matters under the VEA.

New Zealand

Administrative and scheme delivery changes

Levy Rate Changes

The Accident Compensation Corporation (ACC) has a statutory obligation to consult on proposed levy rates and other levy related proposals every 3 years. During the 2024 consultation period, ACC received a total of 8,748 submissions that responded to 6 proposals for changes to levy rates 2025/26 – 2027/28, and 10 proposals on changes to the levy system. The final 2024 Levy Consultation Report can be viewed here. Cabinet approved the following changes to ACC's levy rates and the levy system:

Levy rate changes:

	2024/25 levy rate	Confirmed rate for 2025/26	Confirmed rate for 2026/27	Confirmed rate for 2027/28	Timing
Earners' levy rate	1.39 per $100 liable earnings	$1.45	$1.52	$1.59	1 April each year
Average work levy rate	$0.63 per $100 liable earnings	$0.66	$0.69	$0.72	1 April each year
Average motor vehicle levy rate	$113.94 per vehicle	$122.84	$131.94	$141.69	1 July each year

Minimum and maximum liable earnings changes (Work and Earners' levies):

	2024/25 level	Confirmed level for 2025/26	Confirmed level for 2026/27	Confirmed level for 2027/28	Timing
Minimum earnings	$44,250	$49,365	$50,501	$51,632	1 April each year
Maximum earnings	$142,286	$152,790	$156,641	$160,244	1 April each year

Work Account changes:

Work Account change	Timing
Increase the medical cost threshold in the Experience Rating product from $500 to $750	1 April 2025
Introduce a new classification approach for professional sports and ballet	1 April 2025 (phased over 3 years for businesses facing significant levy increases)
Introduce a new classification for home improvement stores	1 April 2025
For Accredited Employers: update the product discounts, admin fee, bulk-funded costs fee and stop-loss and high-cost claim fees to reflect changes in the Work Account experience	1 April 2025
Introduce a new methodology for calculating payment plan interest, credit interest and penalty interest and extend interest payable on payment plans to the 3-month and 6-month plan options	1 April 2026
Remove No Claims Discount and remove the full subsidisation of Experience Rating product	1 April 2026

Motor Vehicle Account Changes:

Motor Vehicle Account Change	Timing
Reclassify battery electric vehicles and diesel plug-in hybrid electric vehicles	1 July 2025
Close the Fleet Saver audit programme	1 July 2025 closed to new entrants 30 June 2029 programme closed
Introduce 0-250cc, 251-750cc and 751+cc motorcycle sub-classes	1 July 2026
Increase the levies for motorcycles to the equivalent of 37% of motorcycle injury costs	1 July 2026 increase from 28% to 33% 1 July 2027 increase from 33% to 37%
Introduce a 25% discount for riders who have successfully completed advanced rider training (equivalent to a RideForever Gold course)	1 July 2026

Assisted Recovery – a Move to 1:1 Case Management

ACC identified that a many to many task-based approach for new non-complex weekly compensation claims does not allow for staff to provide continuity of proactive support to advance rehabilitation. When new clients were assigned to the many to many stream, they were supported by a Return to Work team. These teams focussed on promoting early recovery at work, screened for needs via a scripted welcome conversation, and helped clients work through obstacles getting in the way of recovery. However, work was assigned on a 'next task' basis meaning that clients would have multiple staff managing specific aspects of their claim but no one with overall responsibility for monitoring progress.

A change was therefore made to enable all new non-complex weekly compensation clients to receive 1:1 support from a Recovery Assistant with the capability to proactively coordinate return to work.

Changes to the Accredited Employers Programme

In 2024 ACC finalised changes to the Accredited Employers Programme to deliver a better experience for businesses and workers whose work injury claims are handled by the organisation directly, rather than through ACC. These changes will modernise health and safety assessment requirements, removing excessive compliance and increasing flexibility for accredited employers. The changes will take effect from 1 April 2025.

Policy developments

Amendments to the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003 and the Accident Compensation (Apportioning Entitlements for Hearing Loss) Regulations 2010

Amendments to these regulations came into force in June 2024, updating rates for the cost of treatment, as well as adding a new rate for internal examinations for maternal birth injuries.

The *Accident Compensation Act 2001* (AC Act) requires ACC to undertake a biennial review of the rates prescribed in the Cost of Treatment Regulations to assess whether any changes are required to account for changes in the costs of rehabilitation.

Additional amendments came into force in December 2024, associated with the amendments to the Definitions regulations (see below). These changes added new rates for the cost of treatment provided by paramedics, and specified that the rates for treatment provided by an audiologist also apply to treatment provided by an audiometrist.

Amendments to the Accident Compensation (Definitions) Regulations 2019

Amendments to these regulations came into force on 19 December 2024. The amendments updated the definitions of acupuncturists, audiologists and nurses, and added new definitions for audiometrists, Chinese medicine practitioners, and paramedics. The most significant impact of these changes is that paramedics can now be paid for services provided to ACC clients.

Review of Schedule 2: List of Occupational Diseases

Schedule 2 in the AC Act provides a route for someone to access ACC cover for certain work-related gradual process, disease, or infection injuries. It has not been updated since 2008. The Ministry of Business, Innovation and Employment (MBIE) is currently reviewing the Schedule 2 list with the support of ACC. MBIE carried out public consultation on proposed additions in November 2024 and Cabinet is expected to consider further advice in 2025.

Legislative amendments

Accident Compensation (Interest on Instalment Plans) Amendment Act 2024

This Bill commenced on 30 June 2024 and introduced a regulation-making power that allows the ACC to charge debit interest on levies that are paid under instalment plans and provide that in future the rate of interest payable will be set by regulations. It sets out the circumstances under which the ACC can waive all, or part of, debit interest charges due on instalment plans. It also validates the ACC's past and current practice of charging interest in cases where levies are paid by instalment.