ISV medical assessments

As part of settling your claim, you may be required to attend an Injury Scale Value (ISV) medical assessment to determine your eligibility for compensation.

What is the purpose of an ISV medical assessment?

Once your injury is medically stable, your insurer may discuss arranging an ISV medical assessment to help in assessing your claim for compensation.

The ISV medical assessment assigns an item number for your injury (or injuries) which your insurer will use to determine the type/s and amount of compensation you are eligible for. Your injuries must meet a minimum threshold for some types of compensation.

When is an ISV medical assessment required?

An ISV medical assessment is required when requested by you or your legal representative (if you have one), or your insurer when your injuries are stable. The assessment must be undertaken by an accredited doctor.

An assessment <u>may not</u> be required when:

- no qualified doctor has been accredited, or
- agreement is reached between you and your insurer, or
- a court determines that an assessment is not required.

For more information about item numbers, injury descriptions and the values assigned

to particular injuries, you should speak to your insurer.

Organising an ISV medical assessment

To ensure an independent assessment of your injuries, your insurer must select a suitably specialised doctor with expertise relevant to your injury, who has not been involved in your treatment to date.

To assist you, if you and your CTP Insurer wish to arrange a joint independent medical assessment, the Regulator has developed a Guideline for Arranging Joint Independent Medical Assessments available on our website. A joint medical assessment benefits a claim by providing a process for arranging objective, timely and appropriate assessments that minimise impacts and support your recovery and a return to usual activity, they can also reduce the number of assessments you need to attend.

The number of assessments you may need to attend can be reduced if you and your CTP Insurer wish to arrange a joint independent medical assessment. The CTP Regulator has developed a Guideline for Arranging Joint Independent Medical Assessments, and it is available on our website.

When arranging a medical assessment, your insurer must:

 consider any issues that may impact your ability to attend an assessment such as access requirements, travel and

appointment times if you live in a remote area, and any cultural or religious issues that may require the doctor to be a specific gender

- give you at least seven business days' notice of the appointment details such as date and time, location, specialty of the doctor, the documentation you need to take with you, and the reason you are required to attend
- arrange a professional translator or interpreter, at your insurer's cost, if required.

If you are unable to attend your assessment, you must give your insurer at least two business days' notice, to avoid a cancellation fee.

A cancellation fee may apply if you do not attend as arranged by the insurer and provide an acceptable reason. Your insurer will tell you if you are going to be charged a fee. This amount may be deducted from any compensation payment you may receive.

What to expect at your ISV medical assessment

The doctor will discuss your injuries with you and the impact they have had. They will conduct a medical examination to assess the nature and extent of your injuries.

ISV medical assessment reports

The doctor must provide your insurer with a report within 30 days of the assessment. When your insurer receives the ISV assessment report, they must provide you with a copy within 21 days.

If you dispute or do not understand any of the information in the report, you should contact your insurer.

Where can I get further information?

You can find out more about ISV medical assessments and reports in <u>Regulator</u> <u>Rule 9</u> on our website, or by asking your insurer.