

Australian Capital Territory

# Motor Accident Injuries (COVID-19) Guidelines 2020

## Disallowable instrument DI2020–94

made under the

**Motor Accident Injuries Act 2019, section 487 (MAI guidelines)**

## EXPLANATORY STATEMENT

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Section 487 of the *Motor Accident Injuries Act 2019* (MAI Act) enables the MAI Commission to make guidelines (the MAI guidelines) about any matter required or permitted by the MAI Act to be included in guidelines.

The guidelines have been developed to apply in light of the potential impacts of COVID-19 on business continuity and health-related services. The guidelines recognise potential changes to the availability, accessibility, and mode of delivery of health services for injured people, and also the impacts on an insurer's ability to manage some elements of defined benefit applications. For example, not being able to receive timely information about a person's treatment and recovery during the COVID-19 pandemic.

The guidelines deal with matters not already covered by the MAI guidelines and in some instances modify guidelines made for various purposes under the MAI Act. The modifications should be read in conjunction with the relevant MAI guideline.

This approach has been taken in place of remaking the guidelines, as most modifications affect very few paragraphs, it provides transparency of the temporary changes to apply during the COVID-19 pandemic and allows for ease of revocation once it is considered that the modifications are no longer required.

Specifically, the COVID-19 guidelines make provision for:

- Medical and other assessments requiring physical attendance at an appointment to be requested by an insurer only if essential and, ideally, is conducted at a location that minimises travel for an injured person;
- A longer period, if required by the insurer because of disruption to their business, for a receipt notice to be given within 7 business days for an application for defined benefits (this is an additional 2 days);

- A full and satisfactory explanation for a late application to include circumstances where a person was restricted in attending an appointment to obtain a medical report for their injuries;
- Enabling an interim approval plan to be prepared by the insurer where there are delays obtaining information required to prepare a draft recovery plan. The interim approval plan will allow an injured person to proceed with treatment and care, knowing it has been approved;
- Extending the amount of time from 5 business days to 10 business days for a treating doctor and injured person to consider a draft recovery plan or revised plan;
- Informing insurers on the status of a worker stood down from employment for the purposes of working out income replacement benefits. This is relevant as the Act and Income Replacement Benefits guidelines contain provisions for when a worker is in paid work, and it is considered guidance is necessary for the circumstances of a worker stood done;
- More flexibility in the provision of fitness for work certificates.

The ACT Government consulted with insurers and the legal profession in preparing the temporary guidelines.