



claims

2025 Comcare Licensee Audit

Australian National University

FINAL REPORT

Claims Management System Review/Audit

Audit Date: 13 – 14 January 2025

Copyright © BRM Risk Management Pty Ltd. This material shall not be reproduced in part or whole or otherwise distributed without the express permission in writing of BRM Risk Management Pty Ltd. This document (including any attachments) is intended only to be read or used by the addressee. It contains information that is confidential and legally privileged.

Table of Contents

Scope of Review/Audit	3
Executive Summary	5
Table of Criteria	7
ELEMENT 2: Planning	8
ELEMENT 3: Implementation.....	9
Summary of File Findings	17

Scope of Review/Audit

Organisation:	Australian National University ('ANU')
Site/Workplace:	Review conducted remotely
Scope of Audit:	<p>The review/audit examined ANU's claims management system, processes and outcomes to validate that ANU is meeting its licence conditions and is complying with the <i>Safety, Rehabilitation and Compensation Act 1988</i> (SRC Act).</p> <p>16 claim files were examined by the auditors. These files were randomly selected from a list of 53 claim files where some activity had occurred in the previous 12 months.</p> <p>Overall findings are based on the identification of issues that are considered to be systemic rather than isolated incidents.</p>
Audit Criteria:	<p>This review/audit assessed the claims management system against 16 criteria grouped within two elements:</p> <ol style="list-style-type: none">2. Planning (1 criteria)3. Implementation (15 criteria)
Ratings	<p>The findings in the review/audit report have been classified and marked as follows:</p> <p>Conformance—indicates that the criterion has been met.</p> <p>Non-conformance—indicates that the criterion has not been met.</p> <p>Not able to verify— indicates that the organisation has documented procedures in place however there are no cases to test that the organisation has followed those procedures. It is expected that this classification will only be used in limited circumstances and where applied, the reasons for the finding will be explained by the auditor.</p> <p>Not Applicable—indicates that the criterion does not apply to the organisation.</p> <p>Where a criterion has been met but the auditor has identified a 'once off' situation or a 'minor' deviation from the documented management system or reference criterion, an Observation may be made. These findings, while representing a non-fulfilment of a requirement, are recognised as being of lower risk to the organisation.</p>
Date(s) of review/audit:	13 – 14 January 2025
Auditors:	Sophie Anastasov and Ritu Barhmi, BRM Risk Management Pty Ltd ("BRM")
Client Contacts:	Lisa McLoughlin, Senior Consultant Claims Management, ANU

Ingrid Krauss, Manager Injury, Prevention & Wellbeing, ANU

**Record of
review/audit:**

This report contains a summary of the review/audit outcomes. Detailed information is not recorded in the report. A record of the documentation and records sighted, persons interviewed, observations and auditor comments are retained on the auditor's file.

Acknowledgment:

BRM wishes to acknowledge the cooperation and assistance provided by the management and staff of ANU and thanks them for their contribution to the audit process.

Executive Summary

Australian National University has held a self-insurance licence under the Safety, Rehabilitation and Compensation Act 1988 (SRC Act) since 1 July 2018. Their licence is due to expire on 30 June 2026.

ANU engages Comcare as a third-party service provider for claims management and this arrangement has been in place since the commencement of the licence.

The last review was undertaken by Comcare in July 2023. The Non-conformance (3.17) and Observations (3.12 and 3.17) noted from the last audit have been remediated.

BRM was requested to undertake a file audit only. It is important to note that this audit did not include a review of documented systems, procedures, or processes. Overall, the file audit found that the claim files continue to be very well managed, indicating an efficient and robust claims management system.

Claims received were immediately acknowledged in writing, providing the injured employee with their claim number and relevant contact details. Each claim was accompanied by a medical certificate, an injury report was on file, and the employee met the definition under Section 5.

All determinations, including initial liability, incapacity, medical, and reconsideration determinations issued to employees, were provided in writing. These determinations included the terms and reasons for each decision, along with a notice of rights and obligations, ensuring transparency and clarity.

Case notes on file demonstrated frequent and regular discussions and communication with employees, providing evidence that employees were consistently updated on the status of their claims.

A total of 16 files were reviewed; five of these files had findings. There are no non-conformances, however there is an observation related to the timeliness of determinations.

The audit period reviewed was from 1 January 2024 to 31 December 2024.

This audit has been conducted against the file related criteria of Comcare's CMS audit workbook, version 4.0, February 2021.

Non-Conformances

No non-conformances were identified during the review/audit.

Observations

One observation was identified during the review/audit.


Criterion	Observations
3.5	Determinations are not always issued in a timely manner.

In summary, for the 16 criteria within the claims management audit tool, the outcomes are:

	Number of criteria	% of assessed criteria
Conformance (with 1 Observation)	12	100%
Non-conformance	0	Nil
Not able to verify	3	
Not applicable	1	

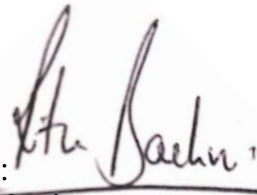
An action plan, which includes completion/review dates and responsibilities, must be developed to address each of the above review/audit findings – and any individual file findings where an error in entitlement was identified.

The auditors invite ANU to discuss any aspect of this audit with the auditors.



Signed:

Sophie Anastasov



Signed:

Ritu Barhmi

Date: 23 January 2025

Table of Criteria

Audit element/criterion description	Criterion	Rating
2. Planning		
Delegation schedule	2.1	Conformance
3. Implementation		
Communication—relevant stakeholders	3.2	Conformance
Employees are aware of rights	3.3	Conformance
Determinations in accordance with the Act	3.5	Conformance with 1 Observation
Powers under the Act	3.6	Conformance
Initial liability	3.7	Conformance
Determining incapacity	3.8	Conformance
Determining benefits	3.9	Conformance
Determining permanent impairment	3.10	Not able to verify
Transitional provisions	3.11	Not Applicable
Reconsiderations	3.12	Conformance
Reasonable opportunity	3.13	Not able to verify
Claim reviews	3.14	Conformance
Surveillance	3.15	Not able to verify
Privacy and confidentiality	3.16	Conformance
Reporting, records, documentation	3.17	Conformance

ELEMENT 2: Planning

Administrative arrangements

Criterion 2.1

The determining authority identifies the administrative and financial limitations for each level of claims manager.

Finding: Conformance

Evidence:

- Delegation of Powers and Functions of a Licensed Authority signed 19 May 2023

Comment:

The delegation instrument was signed by Professor Brian Schmidt, Vice Chancellor of the Australian National University on 19 May 2023.

Schedule A specifies the powers and functions that have been delegated to the following positions:

Comcare:

- Claims Manager
- Senior Claims Manager
- Senior Claims Delegate
- Reconsideration Officers

"Nominated Reconsideration Officers as per specified in the Deed of Agreement for Claims Managed Services and subsequent revisions – Schedule 9 Personnel."

ANU:

- Senior Consultant Claims Management
- Manager Injury, Prevention and Wellbeing
- Deputy Chief People Officer (Safety and Wellbeing)
- Chief People Officer

Schedule B outlines the financial limitations that apply. No payment or agreement to pay above the financial authorities in Table 2 may be made without prior endorsement of the Chief People Officer.

File audit:

Of the 15 files applicable, file audit confirmed compliance with this criterion.

ELEMENT 3: Implementation

Communication and awareness

Criterion 3.2

The determining authority defines and communicates responsibilities to relevant stakeholders.

Finding: Conformance

File audit:

Of the 15 files applicable, file audit confirmed compliance with this criterion.

All determinations issued to employees were accompanied by a notice of rights and obligations. Case notes on file demonstrated consistent discussion and communication with the employee, providing evidence of promptly responded emails and correspondence.

Criterion 3.3

The determining authority communicates relevant information regarding the claims management process including:

- (i) ensuring that employees are aware of their legislative rights and obligations in relation to workers' compensation
- (ii) ensuring that employees are informed of the status of their claims
- (iii) ensuring consultation occurs between all parties in regards to the claims management process.

Finding: Conformance

File audit:

Of the 15 files applicable, file audit confirmed compliance with this criterion.

Upon receipt of each claim, an acknowledgement of receipt of claim was sent, including the claim number and relevant contact details. Case notes indicated that the employee was consistently updated on the status of their claim throughout the process, with evidence of promptly responded emails and correspondence demonstrating ongoing communication.

Compliance with the legislation

Criterion 3.5

The determining authority complies with the provisions of the SRC Act when making decisions on claims, including:

- (i) determining claims accurately and quickly
- (ii) determining claims in writing with adequate terms and reasons
- (iii) ensuring there is equity of outcomes resulting from administrative practices used by Comcare.

Finding: Conformance with 1 Observation

File audit:

Of the 15 files applicable to this criterion, file audit found five findings from four files: four determinations were not issued in a timely manner; and one reconsideration of own motion did not include sufficient details (reasons for the determination).

Determinations were all set out in writing and included the terms of the determination, the reasons for the determination, a statement to the effect that the claimant may, if dissatisfied with the determination, request a reconsideration under subsection 62(2).

Observation:

Determinations are not always issued in a timely manner.

Criterion 3.6

The determining authority complies with the provisions of the SRC Act when using its powers or meeting statutory obligations under that Act.

Finding: Conformance

File audit:

Of the four files applicable, file audit confirmed compliance with this criterion.

Section 57 independent medical examination (IME) under the SRC Act on file were issued as determinations from 14/6/24. There were no section 57 determinations issued on or after the Guide coming into effect 30 October 2024.

A "Section 57 – Checklist" was provided, outlining the changes and steps to be followed in accordance with the "Guide for Arranging Rehabilitation Assessments and Requiring Examinations 2024." A template section 57 determination was also provided.

Criterion 3.7

The determining authority complies with the provisions of the SRC Act when determining initial liability.

Finding: Conformance

File audit:

Of the seven files applicable, file audit confirmed compliance with this criterion.

The file audit confirmed that the received claims complied with Section 54. Each claim was accompanied by a medical certificate, an injury report was on file, and the employee met the definition under Section 5. All relevant claims were determined in accordance with Section 14.

Criterion 3.8

The determining authority complies with the provisions of the SRC Act when determining liability for incapacity.

Finding: Conformance

File audit:

Of the six files applicable to this criterion, file audit found two findings from one file:

- Weekly payments have been determined and made without corresponding medical certificates
- Weekly payments have not been made for certified periods

Section 8 NWE determinations were made in accordance with Section 9 of the SRC Act by considering the two-week period immediately before the date of injury. An initial NWE calculation sheet was on file. Subsequent Section 8 determinations were made due to EBA increases. Section 19 incapacity calculations were also found to be accurate.

Criterion 3.9

The determining authority complies with the provisions of the SRC Act when determining liability for benefits, including medical expenses.

Finding: Conformance

File audit:

Of the 13 files applicable, file audit confirmed compliance with this criterion.

Regular Section 16 determinations were on file, informing the employee about the approval of reasonable specific medical and related services for a defined period, with updates provided as necessary. Additionally, when reimbursing the employee, Section 16 determinations were also provided outlining the approved services and the corresponding reimbursement amounts.

Criterion 3.10

The determining authority complies with the provisions of the SRC Act when determining liability for permanent impairment.

Finding: Not able to verify

File audit:

File audit found no activity relevant to this criterion.

Criterion 3.11

The determining authority complies with Part X of the SRC Act, the transitional provisions, particularly in relation to determining permanent impairment and incapacity benefits.

Finding: Not Applicable

Comment:

As transitional provisions relate to the changeover from legislation preceding the SRC Act, Part X of the SRC Act does not apply.

Criterion 3.12

The determining authority complies with the provisions of the SRC Act, and any specific licence conditions (if applicable), when managing reconsiderations.

Finding: Conformance

Corrective Actions:

The last review found two Observations:

Observation 1:

The reviewable decision template letter states that Comcare will agree to an extension of time to apply to the AAT rather than the University.

Observation 2:

Reviewable decisions do not include reference to section 62 of the SRC Act.

The Corrective Action Plan states:

Comcare undertakes reconsiderations for the University under a contract agreement. Comcare uses the Comcare reconsideration letter template.

Observation 1:

1. Request Comcare Reconsiderations Team make amendment to the template used for ANU reviewable decisions, to remove the reference to Comcare agreeing to an extension of time.

Comcare comments as at 8 August 2023:

The updated reconsideration letter template addresses this finding.

This observation is now closed.

Observation 2:

1. Request Comcare Reconsiderations Team make amendment to the template used for ANU reviewable decisions, to include that the decision has been made under section 62 of the SRC Act.

2. Update ANU reconsideration on own motion template letter to include that the decision has been made under section 62 of the SRC Act.

Comcare comments as at 8 August 2023:

The updated reconsideration letter template addresses this finding.

This observation is now closed.

File audit:

Of the six files applicable, file audit confirmed compliance with this criterion.

Requests for reconsideration are promptly acknowledged and forwarded to Comcare for review. In all cases, reconsideration was completed within the 30-day timeframe. The reviewable decision was documented in writing, clearly outlining the terms of the decision, the reasons, and the appeal rights to the ART.

Additionally, two own-motion reconsiderations were reviewed and also met requirements.

Claims reviews

Criterion 3.13

The determining authority provides employees with a reasonable opportunity to provide information or comment when claims for on-going liability are being assessed or reviewed.

Finding: Conformance

File audit:

File audit found no activity relevant to this criterion.

Criterion 3.14

Claim reviews are timely, made accurately and guided by equity, good conscience and the substantial merits of each case without regards to technicalities.

Finding: Conformance

File audit:

Of the 15 files applicable, file audit confirmed compliance with this criterion.

The audit has confirmed that files are consistently updated and thoroughly reviewed on a regular basis. There is also ongoing and frequent communication documented regarding the status and details of each file.

Surveillance

Criterion 3.15

The determining authority has a policy on the use of covert surveillance and complies with its requirements. The policy must include:

- (i) on whose authority approval may be granted
- (ii) detailed instruction on the manner in which covert surveillance is to be conducted
- (iii) a requirement that any operative undertaking covert surveillance on behalf of the determining authority has been issued with, and has agreed to, written instructions on the policy.

Finding: Not able to verify

File audit:

File audit found no activity relevant to this criterion.

Confidentiality

Criterion 3.16

The determining authority maintains the confidentiality of information and applies legislative requirements.

Finding: Conformance

File audit:

File audit confirmed compliance with this criterion.

Document and file management

Criterion 3.17

The determining authority maintains the relevant level of reporting, records and/or documentation to support its claims management programs and legislative compliance.

Finding: Conformance

Corrective Actions:

The last review found one Non-conformance:

An auditable trail was not established on eight of the 16 claim files reviewed.

The Corrective Action Plan states:

1. CDW discrepancies:

- one s16 payment was recorded as a s39 payment;
- one GP report recorded as a s57 payment;

- one Physio report recorded as a s57 payment;
- NEL payment recorded as s24 instead of s27;
- PI tab not completed on one file;
- Date of Injury recorded in Figtree incorrect.

1. All of these findings have been corrected in Figtree and will be evident in the ANU August 2023 CDW submission.

2. File findings:

- clinical notes referenced in two files were not on Figtree
- one s19 determination was not issued in a timely manner.
- s19 determinations where there is an unpaid work trial were not clear;
- one s19 determination letter had not been saved to Figtree;
- One Figtree entry contained a different s19 determination letter than was referenced in cover email;
- Two CTOW forms were not saved to Figtree;
- Date typo in one letter

2. - The relevant clinical notes, CTOW forms, and s19 determination letters have been added to Figtree.

- Team Meeting discussion with Claims team regarding need to identify in s19 letter where there is an unpaid work trial.

3. Incorrect title findings:

- three s16 determinations signed with title 'Claims Services Officer' instead of Claims Manager;
- one s14 determination signed with title 'Claims Delegate' instead of Claims Manager.

3. All letter templates were updated in early 2023 to contain 'Claims Manager' as the title. In these identified cases, old templates had been used.

Team Meeting discussion with Claims team regarding need to use current template letters only.

Comcare comments as at 8 August 2023:

The Figtree screenshots verify the file findings have been rectified. This component of the finding is now closed.

The evidence of the team meeting invite and the description in this CAP regarding what was discussed addresses this component of the finding.

The non-conformance is now closed.

The last review found one Observation:

The Claims Manual includes links to Comcare specific information rather than The University's forms or relevant sections of The University's Claims Manual.

The Corrective Action Plan states:

Portions of the online Comcare Claims Manual were used as a basis in developing a Word version ANU Claims Manual. The links do not work but had not been removed.

Review and update the ANU Claims Manual to remove all dead links, and update references to forms to the relevant ANU version form.

Comcare comments as at 1 September 2023:

The updates to the claims manual address this finding.

This observation is now closed.

Chapter 14 of the Claims Management Manual (v4.0, 08/05/2024) discusses records management. ANU maintains claims documentation on Figtree system, and on the ANU's shared drive. Administrative standards required for claims record management are outlined. ANU also uses an electronic records management system (ERMS) to store records. "The ERMS is a long term records management repository for electronic records. It has not been designed as a format for working files or for everyday access to files required for business purposes, but rather is designed for long term storage of completed documents." "Claims files are transferred to ERMS once all rehabilitation and claim activity has finalised."

File audit:

Of the 16 files applicable to this criterion, file audit confirmed compliance with this criterion.

Claim files are electronically stored on the Figtree system. The claim tabs provide a summary of key dates, such as the date of injury (DOI), the date signed, and the date received, along with a description of the injury and incident. The medical certificate tab details all medical certificates received.

The NWE tab includes the initial NWE calculation and any subsequent increases. The finance tab provides comprehensive details of all payment transactions, including provider payments and weekly incapacity payments.

Most file documents are found in the case notes. These include both the file notes and any attachments, such as claim forms, reports, determinations, letters, and requests.

Summary of File Findings

Summary of file findings																
File Ref	Audit Criteria															
	2.1	3.2	3.3	3.5	3.6	3.7	3.8	3.9	3.10	3.11	3.12	3.13	3.14	3.15	3.16	3.17
65	C	C	C	X	C	NA	C	C	NA	NA	C	NA	C	NA	C	C
80	C	C	C	C	NA	NA	C	C	NA	NA	C	NA	C	NA	C	C
81	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	C	C
100	C	C	C	C	NA	NA	NA	C	NA	NA	NA	NA	C	NA	C	C
105	C	C	C	C	C	NA	NA	C	NA	NA	NA	NA	C	NA	C	C
108	C	C	C	X	NA	NA	C	C	NA	NA	C	NA	C	NA	C	C
110	C	C	C	C	NA	NA	NA	C	NA	NA	NA	NA	C	NA	C	C
113	C	C	C	C	NA	C	NA	NA	NA	NA	C	NA	C	NA	C	C
117	C	C	C	C	NA	C	NA	C	NA	NA	NA	NA	C	NA	C	C
120	C	C	C	X	C	C	NA	N	NA	NA	C	NA	C	NA	C	C
121	C	C	C	X	C	C	C	C	NA	NA	C	NA	C	NA	C	C
125	C	C	C	C	NA	C	C	C	NA	NA	NA	NA	C	NA	C	C
129	C	C	C	C	NA	C	NA	C	NA	NA	NA	NA	C	NA	C	C
135	C	C	C	C	NA	C	X	C	NA	NA	NA	NA	C	NA	C	C
48583601	C	C	C	C	NA	NA	NA	C	NA	NA	NA	NA	C	NA	C	C
84128301	C	C	C	C	NA	NA	NA	C	NA	NA	NA	NA	C	NA	C	C

Individual file findings		
File Reference	Criterion	Finding
65	3.5	The reconsideration of own motion dated 21/05/24, does not provide details of paid public holiday and LWOP in the determination period.
65	3.5	<p>Audit is unable to verify the calculation of 30.24 hrs each week and NWE at 90% based on employees NWH 35 hrs per week. Inadequate reasons provided in determination for the amount determined.</p> <p>ROM dated 21/05/24, issued as below:</p> <p>18/04/24 to 24/04/24 NWE\$1984.05, %95, Actual hrs 30.24, AE \$854.59, Comp \$1030.26</p> <p>25/04/24 to 01/05/24 NWE \$1984.05 %95, Actual hrs 30.24, AE \$854.59, Comp \$1030.26</p> <p>Payslip indicates that employee actual hours worked 51.97 hrs over the fortnight.</p> <p>18/04/24 to 24/04/24 worked 21.57 hrs and LWOP 7.6 and 1.23 hrs recorded</p> <p>19/04/24 to 01/05/24 worked 22.8 hrs and paid public holiday 7.6 hrs, (this equates 65% of NWH worked based on NWH 35 hrs per week. However determination applied NWE at 90%)</p>
108	3.5	The section 19 determination dated 13/05/24 for the period 29/02/24 to 12/03/24 was not issued in a timely manner.
120	3.5	The section 14 determination dated 20/6/24 was not made in a timely manner. The claim was received 9/4/24.
121	3.5	The section 19 determination dated 9/7/24 for the period 25/3/24 to 19/6/24 was not issued in a timely manner. Liability was determined 30/4/24.
135	3.8	<p>Weekly payments have been determined and made for the following periods without corresponding medical certificates:</p> <p>28/5/24 to 12/9/24</p> <p>20/9/24 to 7/10/24</p>
135	3.8	<p>Weekly payments have not been made for the following certified periods:</p> <p>29/10/24 to 20/11/24. File note advise that the employee has not returned to work at ANU.</p>

Surveillance file findings		
File Reference	Criterion	Finding
N/A		Nil