

Practice support and account management

Claims administration

✓ Authority and consent on claims

✓ Communication with stakeholders

Quality assurance

✓ File and diary maintenance

✓ Receiving and actioning requests for claim file

✓ Suspensions, ceases and refusal to deal

✓ Compliance and fraud

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Introduction

Premium paying agencies may be responsible for a range of different types of claims depending on when an employee was employed with them and depending on the history of the agency.

An agency could be liable for long latency claims, premium claims and pre premium claims. There are also complexities surrounding which agency may be the Rehabilitation Authority for a claim.

It is important to consider the date of injury (DOI) of a claim, and where the employee was working at the time the injury was sustained. A premium paying agency at an employee's date of injury may no longer be a premium paying agency, but instead may be an exit agency or a licensee.

This page provides information on premium paying entities, premium and pre-premium claims, long latency claims, and liable and payroll agencies as the Rehabilitation Authority. It also discusses Machinery of Government changes, Exit Agencies, the QWL Corporation, Off Budget Agencies, and the Northern Territory Government.

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Premium paying entities

Premium-paying entities are liable for workers compensation injuries and diseases through the payment of annual premiums to Comcare. Under the SRC Act, Comcare determines the amount of annual premium each Commonwealth entity/agency pays each financial year and the premium paid funds the liabilities for all accepted claims expected to occur during that financial year.

When an employer/entity pays their annual premium to Comcare, it is expected to fund their future liabilities associated with claims incurred in the upcoming financial year for the life of those claims, as well as Comcare's claims management costs.

There are around 160 to 175 separate premium paying entities each year depending on [machinery of government](#) changes that occur during the year.

Some entities have premium claims, but do not actually pay their own premium. Instead, for the purposes of premium calculations, they are considered part of their parent entity. These entities may have their own injury management staff and Rehabilitation Case Managers, but they do not receive an annual premium notice from Comcare.

This is the case for the following employers:

Entity	Parent entity responsible for premium
IP Australia	Dept of Industry, Science and Resources
Geoscience Australia	Dept of Industry, Science and Resources
The Royal Australian Mint	Dept of the Treasury

These parent entities may apportion some of the premium costs to their child entities and request reimbursement directly from them. In that regard, Comcare Account Managers usually provide those parent entities with a breakdown of incurred claim costs from each child entity that contributed to the premium.

Premium claims

Premium claims are those claims where the date of injury was on or after 1 July 1989. Claims that are accepted and have a date of injury from that date form part of the 'premium pool' calculations. This is regardless of whether the claim is open, closed or whether a [No present piability](#) decision is in place.

The premiums for an entity or Commonwealth Authority respond to general trends in both the aggregate 'premium pool' and the respective entity's claim performance. Accepted claims with a date of injury within the four most recently completed

financial years fall within an entity's 'premium window'. These claims directly impact the entity's share of the premium pool and it's the costs of those claims that are a key input into the calculation.

For more information about the premium system refer to the information about premium calculations on [Comcare's website](#).

Pre-premium claims

Pre-premium claims are those with a date of injury prior to 1 July 1989 and all long latency claims where the event or exposure occurred before 1 December 1988. Regardless of when these claims are submitted or liability is accepted by Comcare, the claim costs do not impact an entity's premium.

Note that off-budget agencies have unique arrangements for funding of their pre-premium claims. This is discussed in detail in the [Off budget agencies](#) section.

Long Latency claims

Section 90B of the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) enables Comcare to access the Consolidated Revenue Fund (CRF) to pay compensation for claims in respect of conditions where the event or process that led to the illness happened or commenced prior to 1 December 1988 but the condition did not manifest itself until after that date.

The most common claims fitting this scenario would be hearing loss or diseases relating to exposure to asbestos. In those cases, the date of injury may be deemed to have been after the commencement of the SRC Act, but if the actual exposure occurred prior to that date, the claim can be flagged as an 'exposure' claim and it will not affect the entity's premium. The claim costs will be taken from the CRF.

An example of this type of claim would be where the employee inhaled asbestos fibres during employment before 1 December 1988 and the employee, as a result of this exposure, contracts mesothelioma which manifests in 2020.

You can view the exposure flag on a claim in Pracsys using the 'View Claim Registration' (VCLM) function. On the 'NDS/TP/Journey' tab you will see the fields for exposure claims.

When determining liability on a claim, a delegate must consider when the exposure occurred and enter the appropriate date. If the exact date is unknown but it is clear the exposure occurred prior to the SRC Act commencing, it is sufficient to enter 30

November 1988 as the exposure date.

It is possible for some illnesses to be contributed to by multiple periods of employment with different agencies. In these instances, it is recommended claims staff liaise with Practice Support and Account Management for assistance with identifying the appropriate liable employer.

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Liable and payroll agencies (rehabilitation authority)

It is not uncommon for employees with active compensation claims to move between Commonwealth and APS entities. This could be due to a Machinery of Government (MoG) change (discussed in the next section) or because the employee has transferred to a new entity due to their injury, or because they have successfully obtained a position with a new employer.

Comcare maintains a record, and history of a claim's 'liable agency' and its 'payroll agency'. These can be seen in the 'View Claim Cost Centre' (VCCC) function in Pracsys.

The difference between the two terms are:

- **'Liable agency'** – the entity responsible for the premium costs of the claim. This is usually the entity where the injury was sustained.
- **'Payroll agency'** – the entity where the employee now works. This agency will be the recipient of any incapacity payments from Comcare for that claim while the employee is employed there. The payroll agency will also be the 'rehabilitation authority' with delegation to make return to work determinations.

Rehabilitation Authority

The rehabilitation authority (who is usually the current employer) has the delegation to make decisions under the SRC Act in relation to the return to work of an injured employee. That delegation must lie with an officer of the rehabilitation authority and not to any contracted case manager or rehabilitation provider. In most instances the rehabilitation authority will be the liable agency, however if an injured employee leaves the liable agency and takes up employment with another Commonwealth agency/entity, the rehabilitation authority will change to that new employer.

There are a range of scenarios outlined on Comcare’s website that explain who the rehabilitation authority is in circumstances where an employee changes employer or ceases to be employed at all. Refer to: [Rehabilitation information for employers](#).

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Machinery of Government (MoG) changes

A Machinery of Government (MoG) change follows a government decision to abolish or create an entity, move functions or responsibilities between entities, or move functions into, or out of, the Australian Public Service. These changes may be documented in correspondence from the Prime Minister, or in orders issued by the Governor-General.

Once a MoG change has occurred, Comcare is required to assess whether responsibility for claims has changed between employers and whether premiums need to be adjusted.

New agencies

Some MoG changes will result in the creation of a new entity. This could be because a function within a larger department is being moved out on its own, or it could be that a new entity has been established. In these circumstances, the Account Managers and the Claims Data and Reporting team will liaise with the appropriate stakeholders within the new entity to obtain details of payroll, full-time equivalent (FTE) and a claims history (if there is one).

MoG changes to existing entities

For entities that have functions transferring between them, Comcare will work with those employers to identify whether there were any claims for compensation incurred in that function and whether any people with compensation claims are moving between agencies with that function.

The movement of claims could look like the following:

Where was the claim incurred	Where is the claimant moving	MOG outcome
Claim was incurred in the	Claimant is transferring to the	New agency will

function that is moving as part of the MoG	new agency as part of the MoG change	become both the liable and payroll agency for that worker's claim
	Claimant is not moving to the new agency as part of the MoG change	New agency becomes the liable agency, and the old agency remains the payroll agency
Claim was not incurred in the function that is moving as part of the MoG change	Claimant is transferring to the new agency as part of the MoG change	Original agency remains the liable employer for the existing claim and the new agency becomes the payroll agency

The Account Managers work with the Claims Data and Reporting team to perform the following steps with agencies subject to a MoG:

- Have the agency losing a function identify any claims incurred in that function using Customer Information System (CIS) reporting.
- Provide a list of those claims identified to the gaining agency for their scrutiny and agreement.
 - If agreement is reached, arrange for the transfer of those claims in Pracsys.
- Have both agencies provide Comcare with details of the changes in their payroll and FTE as a result of the MoG change.

The changes in liable agency for a group of claims may also result in changes to the Claims Manager alignment especially if the MoG involves a change in the government portfolio.

You can see the MoG history of a claim via the 'View Claim Cost Centre' (VCCC) in Pracsys. A history of MoG changes will be visible including the date they took effect in this screen.

The changes made to an agency's payroll and liable claims may result in an adjustment being calculated to their premium.

Exit Agencies

An exit agency is a former premium paying entity that has either exited the Comcare compensation scheme or they have been granted a self-insurance license and now administer their own claims.

Depending on the circumstances of the entity's exit, Comcare may not be liable for claims for compensation where the injury date is after the entity's exit date. In some instances, an entity may cease to be a stand-alone employer and instead it may be absorbed or merged into another parent department through a Machinery of Government (MoG) change. In those instances, coverage would continue for those employees under the responsibility of the new entity.

In cases where an entity ceases to exist in any form, the legislation governing the abolishment may indicate which entity is to manage ongoing liabilities and obligations under the SRC Act.

Premium payers who become self-insured licensees will have the details of their future claims management arrangements outlined in their licence conditions. In most instances, Comcare continues to manage those claims which occurred before the exit date but in some cases (such as ACT Government and Australian National University) the licensee takes on responsibility for claims before the exit date as well.

In the case of ACT Government, there are some intricacies with the licence conditions and the dates surrounding the ACT Government's status as an employer under the SRC Act. ACT Government employees were technically employees of the Commonwealth before 11 May 1989.

As a result, the ACT Government is only liable for disease claims made by an ACT employee if both of the following are satisfied:

- The disease was contributed to by their employment with ACT after 11 May 1989 (noting that ACT was not an employer for the purposes of the SRC Act until 11 May 1989).
- The date of injury for the disease is on or after 1 July 1989. See clause 6 of ACT's licence and [section 7\(4\)](#) of the SRC Act.

Claims which do not fit those conditions will be managed by Comcare and not the ACT Government.

Types of Exit agencies

Exit Agency	Outcome
Agency merges into another agency via a MoG change	The new agency takes on responsibility for all claims and is the new liable and payroll agency (and rehabilitation authority)
Agency is privatised and is no longer a Commonwealth employer	Ongoing responsibility for claims will depend on the circumstances around the privatisation. Advice should be sought from Practice Support & Account Management
Agency is abolished entirely and ceases to exist	Responsibility for existing claims will likely lie with whichever parent agency has been identified in the relevant legislation. Advice should be sought from Practice Support & Account Management
Agency becomes a self-insured licensee	Responsibility for management of claims incurred prior to the licence taking effect will depend on the conditions of the specific licence. Advice should be sought from Practice Support & Account Management

The status of an exit agency and its exit date can be viewed in the 'View Customer' (VCUS) function of Pracsys. The 'License Class' and date of exit is visible on the History tab. Exit details for some exit agencies with active claims are also available in Comcare's Customer Relationship Management (CRM) platform.

If you are unsure who the correct employer is for an exit agency contact the Practice Support and Account Management team for assistance at [Practice Support and Account Management team](#)

Self-Administration/Self Insurance

Some employers within the SRC Scheme have not had their claims managed by Comcare but instead have self-administered and/or self-insured under the SRC Act themselves – these are called licensed authorities. Refer to [List of current and former self-insured licensees | Safety, Rehabilitation and Compensation Commission \(SRCC\)](#).

When the SRC Act commenced in 1988, provision was made for both Australia Post and Telstra (Telecom) to become self-administrators of the Commonwealth workers compensation scheme. This was for a two-year trial period. Under these arrangements the two organisations were responsible for all aspects of the administration of the SRC Act for their employees. However, following an independent review of the scheme a recommendation was made that these self-administration arrangements should end and be replaced with a system of licences for self-insurance and in-house claims management.

Becoming a self-insured licensee under the SRC Act is a two-step process.

1. The Minister responsible for Industrial Relations (currently the Attorney General) must first declare a corporation eligible to be granted a licence to self-insure under the SRC Act.
2. Once declared eligible by the Minister, a corporation may apply to the Safety Rehabilitation and Compensation Commission (SRCC) for a self-insurance licence.

Current and former Commonwealth authorities may apply to the SRCC for a self-insurance licence after consulting with their portfolio minister.

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QWL Corporation

In the 1990s, Comcare created a subsidiary organisation called QWL Corporation Pty Ltd (now de-registered). The purpose of this subsidiary was to perform the functions that may be performed by Comcare under the SRC Act. In particular, it managed the claims of specific self-insured licensees including CSL Limited, Pacific National (formerly Asciano and National Rail Corp) as well as a subsidiary of Telstra called Network Design and Construction (NDC).

Comcare claims staff performed the work for QWL and used Comcare systems (such as Pracsys) to manage these claims. In 2003/04, QWL ceased to provide workers compensation services to corporations following a decision by Comcare's then-Minister (and subsequent changes to licence conditions). Those claims were transferred to the licensees for them to manage via other insurers or licensees. The closed claims are still visible in Pracsys however but should remain closed and any queries from employees about their claim should be referred to the licensee directly. Contact [Practice Support and Account Management](#) if you receive a query for one of these claims.

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Off Budget Agencies

Off-budget agencies (prescribed Commonwealth authorities) do not receive funding from the Department of Finance to pay for compensation claims where the date of injury occurs before 1 July 1989. [Section 128A](#) of the SRC Act contains the provisions regarding the funding of these compensation claims. For claims from employees of these agencies with a date of injury on or after 1 July 1989, the usual premium arrangements apply.

Comcare is the determining authority for these agencies (other than Telstra Corporation Limited) and will issue determinations as required for claims where the date of injury occurred before 1 July 1989. Payments made as a result of these determinations are sought from the agency in two different ways:

1. The off-budget agency makes incapacity payments directly to the injured worker. Comcare will determine these payments and claims staff should advise the agency of the details including the periods and quantum of the incapacity.
 - a. Agencies can also utilise the Customer Information System (CIS) to monitor incapacity determinations made by Comcare on off-budget claims.
2. Comcare makes non-incapacity payments directly to the employee or the service provider as per normal processes. Each month, Comcare's Finance team invoices the off-budget agency for those costs determined and paid in the previous month.

It is important the Claims Manager keeps the off-budget agency consulted on determinations being made so that the agency is aware of the funds it may need to spend.

A list of relevant off budget agencies (prescribed Commonwealth authorities) is provided in [section 128A\(4\)](#) of the SRC Act. However, over the years, some of those agencies have changed names, merged with other agencies or been abolished completely. The list below shows prescribed Commonwealth authorities listed currently under s 128A(4) and the changes to the off-budget status of that agency:

Original listing in section 128A(4)	Current name of the agency	Comments
(a) Aboriginal Hostels Limited	Aboriginal Hostels Limited	Current premium payer, only claims prior to 1/7/89 are off-budget.
(b) A.C.T. Electricity and Water	ACTEW AGL	Exit agency. No longer pays a premium. Claims prior to 1/7/89 are off-budget.
(c) Army and Airforce Canteen Service	Army and Airforce Canteen Service	Current premium payer, only claims prior to 1/7/89 are off-budget.
(d) Australian Airlines Limited	QANTAS	Exit agency. No longer pays a premium. Claims prior to 1/7/89 are

		off-budget.
(f) Australian Dried Fruits Corporation	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Agriculture. Any claims prior to 1/7/89 are off-budget.
(g) Australian Honey Board	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Agriculture. Any claims prior to 1/7/89 are off-budget.
(i) Australian Meat and Livestock Corporation	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Agriculture. Any claims prior to 1/7/89 are off-budget.
(k) Australian National University	Australian National University	Exit agency and now self-insured licensee. No longer pays a premium. All claims are part of license agreement.
(n) Australian Shipping Commission	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Finance. Any claims prior to 1/7/89 are off-budget.
(p) Australian Tobacco Board	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Agriculture. Any claims prior to 1/7/89 are off-budget.
(q) Australian Wheat Board	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Agriculture. Any claims prior to 1/7/89 are off-budget.
(r) Wine Australia Corporation	Wine Australia	Current premium payer, only claims prior to 1/7/89 are off-budget.

(s) Australian Wool Corporation	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Agriculture. Any claims prior to 1/7/89 are off-budget.
(t) Central Land Council	Central Land Council	Current premium payer, only claims prior to 1/7/89 are off-budget.
(u) Civil Aviation Authority	Civil Aviation Safety Authority	Current premium payer, only claims prior to 1/7/89 are off-budget.
	Airservices Australia	Current premium payer, only claims prior to 1/7/89 are off-budget.
(v) Commonwealth Banking Corporation	Commonwealth Bank of Australia	Exit agency and now self-insured licensee. No longer pays a premium. Claims prior to 1/7/89 are off-budget.
(w) Commonwealth Serum Laboratories Commission	CSL Ltd	Exit agency and now self-insured licensee. No longer pays a premium. Claims prior to 1/7/89 are off budget.
(x) Coselco Insurance Pty Ltd	Subsidiary of CSL	Exit agency. Claims prior to 1/7/89 are off budget.
(y) Coselco Mimotopes Pty Ltd	Subsidiary of CSL	Exit agency. Claims prior to 1/7/89 are off budget.
(z) Federal Airports Corporation	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Infrastructure. Any claims prior to 1/7/89 are off budget.
(zb) Housing Loans Insurance Corporation	Abolished	Exit agency. Claims prior to 1/7/89 are off budget.

(zc) National Exhibition Centre Trust	EPIC	Exit agency. Claims prior to 1/7/89 are off budget.
(zd) Northern Land Council	Northern Land Council	Current premium payer, only claims prior to 1/7/89 are off budget
(ze) Snowy Mountains Engineering Corporation	SMEC Holdings	Exit agency. Claims prior to 1/7/89 are off budget.
(zg) Superannuation Fund Investment Trust	Commonwealth Funds Management	Exit agency. Claims prior to 1/7/89 are off budget.
(zh) Telstra Corporation Limited	Telstra Corporation Limited	Self-Insured licensee. Any claims prior to 1/7/89 are off budget.
(zi) The Pipeline Authority	Abolished	Exit agency. Abolished. Responsibility for claims likely lies with Dept of Industry. Any claims prior to 1/7/89 are off budget.
(zj) Reserve Bank of Australia	Reserve Bank of Australia	Exit agency and now self-insured licensee. No longer pays a premium. Claims prior to 1/7/89 are off budget.

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Northern Territory Government (NT Government)

The NT Government has a similar arrangement to off-budget agencies. [Section 124A](#) of the SRC Act provides that the NT Government must reimburse Comcare for the amount of any payments of compensation made by Comcare under the SRC Act, in relation to claims for NT Government employees which occurred between 1 July 1978 and 1 January 1987.

Comcare makes non-incapacity payments and incapacity payments to those employees no longer employed by NT Government. The NT Government are then invoiced the costs of compensation payments made by Comcare each month

from Comcare's Finance team.

As with off-budget agencies, communication with NT Government representatives is necessary to keep them informed of compensation determined.

Further to those claim costs, section 124A(2) allows for Comcare to charge the NT Government for the cost of administering their claims.

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