

# Reallocation/transfer of claims

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## Claims administration

✓ Authority and consent on claims

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✓ Communication with stakeholders

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Quality assurance

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✓ File and diary maintenance

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✓ Receiving and actioning requests for claim file

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✓ Suspensions, ceases and refusal to deal

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✓ Compliance and fraud

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✓ Agency information

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The following procedure outlines the steps that must be undertaken and by who, when it is identified that claims are to be reallocated.

## Guiding principles

The guiding principles of reallocating a claim are:

1. An employee should always know, or be able to quickly determine, who is managing their claim.
2. An employee should not have to tell their story again as a result of a change in Claims Manager (CM).
3. An employee should always be attached to a current and active CM in the Claims Management Group.

## Background

Claims will need to be re-allocated in situations where a claim moves for operational reasons, a CM moves teams within the Group, changes roles within the Group, or departs the Group either permanently or for an extended period. This does not apply to short periods (less than two weeks) of annual or other leave. Please refer to the [availability protocols](#) for further information.

If a CM leaves and their claims are not reallocated to an active CM, the claims move into the *inactive* user's workgroup which will result in a lack of consistent and effective claims management. All open and closed claims allocated to a CM in the circumstances above must be reallocated to ensure adequate oversight and ongoing effective and accountable management of these claims.

## Roles

Allocation of claims is the responsibility of the Assistant Director (AD). Any reallocation of a claim must be completed at the direction of an AD or above.

# Procedure for reallocation/transfer of claims

## Step One - Client Communication

- Check Pracsys priority comment for preferred contact method or whether there is an Act on Behalf of, before making contact
- Telephone discussions are the preferred method of communication. This provides opportunities to take a person-centred approach to building relationships and allows us to support return to work and health.
- Where phone contact is being made, a minimum of two contact attempts by phone is recommended before an email is sent. Where a claim does not have a current email address, a formal written letter should be sent to the client (with a copy sent to the employer), to confirm the change in CM and team.

## Step Two - Before-transfer:

- The current CM must inform the employee that there will be a change of claims manager and the date this will take place.
- For high intensity and sensitive claims, it is recommended that phone contact is completed. Please build this into a 'check-in' conversation to review the progress of the employee prior to advising them of the change in CM. Make sure any outstanding requests/questions are addressed for the employee.
- For low intensity claims, the current CM can send an email or letter to the client advising them of who their new CM will be.
- The current CM must:
  - Update the claim plan on the claim being reallocated, including key information and actions.
  - Ensure the NDS Work Status code accurately reflects the work status on the claim.
  - Provide a verbal handover to the receiving CM about the claim including key priority actions to be undertaken. These actions should be noted in the Claim Plan prior to the handover.

### Step Three - After-transfer:

- The new CM is to contact the employee as soon as practical to introduce themselves. Where possible, please ensure that you complete a file review prior to calling to understand the claim and can offer support to the employee.
  - For high intensity and sensitive claims, it is recommended that contact is completed by phone communication within two weeks of taking on management of the claim.
  - For low intensity claims, it is recommended that contact is completed by phone communication within six weeks of taking on management of the claim.
- The new CM is to contact the employer to notify of the change in CM. If the employer is unavailable, the receiving CM is to send follow-up email to arrange a time to complete introduction and discuss the claim further.

**Please note:** If a Claims Manager has left at short notice and is not available to complete the above actions with either the client or employer contact, the AD must ensure the actions are undertaken by the new Claims Manager. The new Claims Manager actions would be more tailored and responsive to the situation and should be encouraged to take a risk-based approach in prioritising who to contact first. I.e. complex/sensitive claims.

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## Transfer of claims in Pracsys

If claims are to be managed by one CM, the claims can be moved in "bulk":

1. Open the Pracsys function 'Amend Claims Manager (multiple claims)' (SANCM). This can be accessed from the list of functions listed under 'Claim Maintenance'.
2. Enter the name of the outgoing CM.
3. Enter the name of the receiving CM.
4. Input the date the claims are to be moved (note: to move overnight, input the date of the following day).
5. Select "open" under "claims status".
6. If closed claims are also to be transferred to this CM, select "closed" under "claim status".
7. Select "create" down the bottom of the page.
8. Select "proceed" when prompted.

If open claims are to be managed by multiple CMs the claims will need to be individually transferred

1. Identify all open claims in the outgoing CM's name using ci0144 (daily report)
2. Open PRACSYS function 'Amend Claims Manager (single claim)' (ANCM) – note: this function can be accessed via Manage Claim (MC) or from the list of functions listed under 'Claim Maintenance'.
3. Each claim will need to be moved separately. Once you have opened the function and selected the required claim, input the details of the receiving CM's name.
4. Next, input the date for the transfer to occur (either immediately by entering in today's date, or on another date).
5. Repeat this process for each open claim that is to be moved.

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## Key Reminders

### Pre-transfer communication

Please telephone the employee first and follow up in writing, particularly where a claim has been identified as complex/high intensity or sensitive (unless the employee has requested only written contact or there is a communication protocol in place).

### Post transfer communication

Please email the employee first and diarise to call them (at their nominated day/time if they have a preference).

### For pre and post transfer email correspondence

When sending written correspondence to the employee regarding the change in CM, please cc the RCM, unless there are sensitivities, and the RCM needs to be contacted separately.

### Act on Behalf

If there is an 'act on behalf' of the injured employee, please adjust both verbal and written (email) communications accordingly.

## **Closed claims**

All closed claims must also be moved from the outgoing CM no longer with the Group. Weekly PowerBI reporting is to be reviewed by Assistant Directors to ensure no claims are allocated to inactive users.

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