Reopening a claim & closed claim management

Closure

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Introduction

There may be circumstances when a closed claim needs to be reopened.

Most closed claims are allocated to Assistant Directors as per the agency alignment, although some are allocated to a Claims Manager. All claims allocated to the Specialised team are allocated to the team's Assistant Director. This ensures there is a consistent approach to the allocation and management of closed claims across the Claims Management Group.

Closure of claims is an administrative process in the claim lifecycle. For further guidance, refer to the Closing a claim page. The Assistant Director will receive a notification in Pracsys when a new document is scanned to a claim file that is closed, or a new invoice is processed on a closed claim. The Assistant Director will decide whether any action needs to be taken, including whether the claim needs to be reopened. They will then allocate the claim for action. Depending on the circumstances, the claim may need to go back to triage.

To reopen a claim, see the Procedure to reopen a claim.

To action a task on a closed claim (without reopening it), see the Procedure to action a task on a closed claim.

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When should a claim be reopened?

A claim should be re-opened when:

- an invoice is received that requires payment or investigation
- a claim for benefits (e.g. incapacity, medical treatment, permanent impairment) is made is made by an employee (or their representative) that may require further investigation
- correspondence is received from an employer relating to the claim for benefits
- a reconsideration or AAT appeal is initiated
- rehabilitation action is being undertaken.

The decision to reopen or close a claim file is not a liability determination. It is purely an administrative process. Reopening a claim file for the purposes of investigating a claim for benefits does not automatically mean the employee is entitled to those benefits. Each claim for a benefit (e.g. medical treatment, permanent impairment) will still need to be assessed against the relevant legislative criteria for that benefit. The decision to reopen the claim file will have no bearing on the outcome.

A claim should **not** be re opened when the information/document to be added to the claim file is:

- a duplicate of something already on the claim file
- unrelated to the claim (e.g. document added to the wrong claim file).

To reopen a claim, see the Procedure to reopen a claim.

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Procedure to action a task on a closed claim

The Claims Support Officer (CSO) and Claims Administration Officer (CAO) are responsible for managing the workflow of closed claims in their Assistant Director's name. the Assistant Director and the Claims Manager also have responsibilities in this procedure (see **Steps 3** and **5**).

Step 1: Complete administrative tasks

All documents and claim call backs will be sent to each team tray in Pracsys for action. The CAO and CSO are responsible for filtering the team tray and actioning administrative tasks as per their agreed position responsibilities noted in the role job cards in Claims HQ.

Whilst working on an incoming notification/task, the CAO and CSO should notify the enquiry/document from the team in-tray to their personal in-tray until completed. Details of specific tasks include:

CAO

- General stakeholder enquiries.
- Duplicate invoice/documentation management including incorrect scanning to file.
- Metadata/loading documents to file with no action required.
- Agency notification with no ongoing action required.
- Documents that have been scanned to the wrong claim.

CSO

- Limited section 59 requests.
- General stakeholder enquiries.
- Invoice received requiring payment for a service that is already approved.
    - All outstanding invoices for each team can be identified by running a report in Business Objects - ci0169D – Unpaid Transactions Report. This is the preferred report as it captures all outstanding invoices including queried invoices compared to the Manage Diary function.
- The CSO is required to review all invoices in their Assistant Director's name daily to determine if the account is payable (service already approved).
- If the service is not approved and a determination is required, go to **Step 2**.

Step 2: Notify the Assistant Director (AD) of outstanding items

The CAO and CSO will notify the Assistant Director of any claim documents, invoices or requests that require a determination to be made or further investigation with a brief explanation.

To notify an invoice or document in the 'Electronic' or 'Hybrid' tab in the top left-hand corner of the Manage Claim screen:

- Invoices - Select the 'invoices' tab in the top left-hand corner of the Manage Claim screen.
- Document - Select the 'Documents' tab in the top left-hand corner of the Manage Claim screen.

Identify and select the outstanding invoice or document.

- Tick the checkbox in the 'Tag' section on the left-hand side of the screen and then select 'Notify' in the top panel. A new notification screen will appear that allows you to notify the invoice or document to your AD.
- Select your AD and then select 'Ok'. This document will now appear in your AD's personal in-tray for allocation.

Step 3: Assistant Director determines next steps

The AD will then allocate the claim to a Claims Manager or Senior Claims Manager as per the Allocation Principles. Depending on the circumstances, the claim may need to return to triage.

Procedure to reopen a claim

To reopen a claim, the Claims Manager should follow the steps below:

Step 1: Determine if information/document added to the claim file needs to be actioned

- If yes, continue to **Step 2**.
- If no, end this procedure.

Step 2: Assistant Director to allocate the claim for action

Discuss the claim with your Assistant Director and ask them to allocate the claim for action. Your discussion should include the proposed actions to be taken.

The Assistant Director then allocates the claim to the Claims Manager. For further guidance, refer to the Allocating a claim page.

Step 3: Reopen the claim

Go to 'Reopen Claim' (RROC), select an appropriate reason for the claim to be re-opened from the list provided.

Step 4: List the claim for triage (if required)

After consultation with your Assistant Director, if required, list the claim for a triage meeting to discuss next steps. For further guidance, refer to the Triage page.

Step 5: Action information or documents as appropriate

Your actions could include:

- removing a document or invoice from the claim file – for further guidance, refer to the Information capture page
- processing an invoice – for further guidance, refer to the Processing an invoice page
- seeking further information– for further guidance, refer to the Gathering claim information pages.

Once complete, this is the end of the procedure.

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