

## WHY COMCARE MAY REVIEW YOUR PATIENT'S CLAIM FOR COMPENSATION

Comcare's role in managing claims is to ensure your patient receives the appropriate compensation and treatment they are entitled to.

There are many reasons why Comcare may review your patient's claim for compensation. Triggers include:

- > scheduled reviews to ensure liability continues to exist for the injury, and that treatment being received is appropriate
- > lack of clarity in relation to liability for the injury, medical treatment and other benefits
- > an employee who had successfully stayed at work or returned to work subsequently becomes incapacitated
- > evidence suggesting the employee's work capacity or entitlement has changed
- > to determine the acceptance of a new condition when one is added to the claim and/or medical certificate
- > concerns about the level of treatment being received
- > insufficient or conflicting medical evidence on the claim file
- > difficulty establishing a link between employment and the claimed condition
- > assessing a claim for permanent impairment.

Claim reviews may require an independent medical assessment of your patient's claim, which your patient will be required to attend. Additional information may be sought from existing treatment providers.

## **GP'S ROLE**

As your patient's GP, you may be requested by Comcare to provide a report on the current state of your patient's injury or disease. This report may be sent to the independent medical examiner.

The independent examiner may contact you prior to finalising the report to discuss their findings.

Comcare will send you a copy of the final report. Your patient may wish to book a time to meet with you and go through the report.

## **FURTHER INFORMATION**

If you have any questions, please call us on 1300 366 979 or email to general.enquiries@comcare.gov.au