

# Workers' Compensation and Rehabilitation and Other Legislation Amendment Bill 2013

Amendments during consideration in detail to be moved by  
The Honourable the Attorney-General and Minister for Justice

**1 Clause 29 (Amendment of ch 5, pt 12, div 1 hdg (Costs applying to worker with WRI of 20% or more, worker with latent onset injury that is a terminal condition, or dependant))**

Page 25, lines 7 to 8, 'terminal condition'—

*omit.*

**2 After clause 68**

Page 39, after line 25—

*insert—*

**68A Replacement of s 186 (Worker's disagreement with assessment of permanent impairment)**

Section 186—

*omit, insert—*

**186 Worker's disagreement with assessment of permanent impairment**

- (1) This section applies if—
  - (a) the worker's degree of permanent impairment has not been assessed by a medical assessment tribunal; and
  - (b) the worker does not agree with the degree of permanent impairment stated in the notice of assessment (the *original notice*).
- (2) The worker must advise the insurer within 20 business days after the original notice is given (the *decision period*) that the worker—
  - (a) does not agree with the degree of permanent impairment; and

- (b) requests—
  - (i) that the insurer has the worker's injury assessed again under section 179 by an entity mentioned in section 179(2) and agreed to by the worker and the insurer, (other than the entity that gave the report to the insurer under section 179(3)); or
  - (ii) that the insurer refer the question of degree of permanent impairment to a tribunal for decision.
- (3) If the worker makes a request mentioned in subsection (2)(b)(i), the insurer must decide, within 10 business days after receiving the request, whether to have the worker's injury assessed again under section 179 to decide if the worker's injury has resulted in a degree of permanent impairment.
- (4) If, under subsection (3), the insurer decides to have the worker's injury assessed again under section 179, the original notice is taken to have never been given.
- (5) If the insurer has the worker's injury assessed again under section 179, the worker can not make a further request mentioned in subsection (2)(b)(i).
- (6) If—
  - (a) under subsection (3), the insurer decides not to have the worker's injury assessed again under section 179; or
  - (b) the worker makes a request mentioned in subsection (2)(b)(ii);the insurer must refer the question of degree of permanent impairment to a medical assessment for decision.

(7) The degree of permanent impairment may then be decided only by a medical assessment tribunal.

**3 Clause 98 (Insertion of new ch 14, pt 1, div 1 and ch 14, pt 1, div 2 hdg)**

Page 78, line 15, after 'worker'—

*insert—*

knowingly

**4 Clause 98 (Insertion of new ch 14, pt 1, div 1 and ch 14, pt 1, div 2 hdg)**

Page 79, line 1, before 'makes'—

*insert—*

knowingly

**5 Schedule 2 (Minor and consequential amendments relating to chapter 3)**

Page 115, line 21, '567D(2)'—

*omit, insert—*

576D(2)