Benefit for Medical and Related Expenses Resulting from HOD Injury (s.12D)

The Police Superannuation Scheme (PSS) provides benefits for medical and related expenses resulting from a hurt-on-duty (HOD) injury received in the NSW Police Force. These benefits are available only for an injury received on or after 21 November 1979. See also PSS Fact Sheet 15 Pre 21 November 1979 benefits arising from work-related injuries.

SAS Trustee Corporation (STC) is the trustee of the PSS. The administration of medical expense claims is undertaken by Allianz Australia Insurance Limited (Allianz) on behalf of STC.

Who can apply?
You can apply if:
- the delegate of the Commissioner of Police has decided that the injury in respect of which you are making a benefit claim was an HOD injury, and
- you are a contributor or former contributor to the PSS. To have contributed to the PSS, you must have joined the NSW Police Force before 1 April 1988.

If you have recovered damages in relation to a HOD injury, you are not eligible for a benefit from the PSS for permanent impairment or medical and related treatment expenses. Please note that if you recover damages for an HOD injury after you receive a benefit from the PSS for that injury, you must repay the PSS benefit.

If you have received a Victims Compensation payment for medical expenses for a HOD injury, any benefit you receive from the PSS for medical expenses must be reduced by the amount of the Victims Compensation payment.

You will need to disclose damages and Victims Compensation payments you receive if they relate to the same injury as your PSS benefit claim.

What to do if I require treatment
It is important to know whether the cost of a specific treatment or service will be covered by your claim. Please contact Allianz and ask to speak to your Allianz Case Manager before commencing any treatment or surgery.

Treatment requests must be accompanied by one of the following:
- Currently employed by The NSW Police Force: A Workcover Medical Certificate indicating what treatment is required
- Medically discharged/retired: Written confirmation from your regular GP indicating what ongoing treatment is required

Allianz will review your treatment request and communicate the outcome to you and your provider.

How does approved treatment get paid?
Your provider will bill Allianz directly for approved treatment once approval has been communicated to them by Allianz.

Please provide all providers with your Allianz claim number.

If you have paid for approved treatment, please forward your receipts/accounts to Allianz for consideration.

What if I need to travel for my treatment?
Should you require flights to travel for approved treatment/surgery, please contact your Allianz Case Manager.

Travel by car for approved treatment can be claimed by completing a travelling expenses claim form. Please contact your Allianz Case Manager to have one mailed out to you.
Travel by public transport for approved treatment can be claimed by sending in your receipts.

**What if my treatment is not approved?**

The decision to decline treatment will be communicated to you and your provider by your Allianz Case Manager.

A letter explaining the reason/s for the decline, with the option to have our decision reviewed will be mailed out to you.

**What happens when I notify a new HOD injury?**

Your HOD Injury will be lodged with Allianz and a claim number will be generated.

Your Case Manager will action a “3pt Contact”. This is where your case manager contacts you, your employer, and your doctor to obtain relevant information pertaining to your injury.

Allianz will commence provisional medical payments and will approve reasonable and necessary treatment for your HOD injury on the basis of the provisional acceptance of liability for an amount as may be specified by the WorkCover Authority of NSW guidelines.

Medical accounts or expenses incurred in relation to your claim should be forwarded to Allianz for consideration. The medical expenses will be paid provided the expenses are reasonably necessary for your reported injury. This means that the expenses are:

- appropriate for your injury
- progress you towards recovery and health
- cost-effective
- an accepted treatment type.

It is important to note that:

- Allianz is only able to pay for expenses incurred in accordance with the WorkCover NSW gazetted fees.
- Your treatment provider is not able to request that you pay the difference between the WorkCover NSW gazetted rate and their fee, nor is Allianz liable to reimburse you any difference.
- Reductions in pain or support from your nominated treating doctor alone do not meet the requirements of reasonably necessary treatment.

The Police HOD Unit will then make the 12D determination and communicate their decision to all relevant parties.

**How to contact Allianz:**

Phone: 1300 788 946
Monday to Friday 8.30am to 5.30pm
Fax: 1300 788 942

**Disclaimer**

The information contained in this fact sheet is intended as a guide only and is not a statement of the law and is not to be considered legal advice. You should seek independent legal advice if you require assistance on the application of the law to a particular situation or circumstance.