



## Précis Paper

### **E-Reports**

A discussion about E-reports, Australia's largest Australian owned provider of independent medical assessments, the provision of medico-legal reports online and how they are changing the insurance sector in Australia.

#### **Discussion Includes**

- E-reports and the challenges faced by medical assessment companies
- Recent changes in the life industry
- Recent Inquiries
- Privacy and costs of medical records
- How does a client access E-reports?
- Regional and rural medical assessments

## Précis Paper

### Residential Construction Defects

1. In this edition of BenchTV, Chris Argyle (CEO– E-reports) and Hanna Barclay (Role – E-reports) discuss E-reports, Australia's largest Australian owned provider of independent medical assessments, the provision of medico-legal reports online and how they are changing the insurance sector in Australia.

#### E-reports and the challenges faced by medical assessment companies

2. One of the biggest challenges faced by the medico-legal industry is transparency and choice for persons who require examinations.
3. E-reports has recognised this challenge and has responded by providing an app which delivers transparency by allowing examinees to access the app and view the CVs of their doctors prior to making any appointment.
4. A link is sent to the examinee/injured worker, who is able to view a list of all doctors who are accredited for their assessment.
5. This means that examinees can go to a doctor of their choice and also make an appointment at a time and date of their choice.
6. Another major issue that is faced by the industry is disengagement of workers, that is people losing faith in the system.
7. By involving injured workers in the examination process, they are empowered with the ability to do something about their situation and feel in control.

#### Recent changes in the life industry

8. Recently, with the re-introduction of the life insurance code of practice, there have been many changes to the insurance industry.
9. One such change is that now insurers are required to make a decision on a claim within 6 months, or under exceptional circumstances within 12 months.
10. In the past, many of the delays in making a decision on a claim were due to lack of information or waiting on clinical notes.
11. Now, more than ever it is critical for examinees to utilise independent medical assessments to gain information efficiently and to allow for decisions to be reached quickly.
12. The life insurance code of practice also focuses on providing choice to examinees. Examinees must be provided the choice of either 3 different practitioners or, if this is not possible 3 different dates and times for the practitioner.
13. Over the years there has been criticism over doctor shopping, non-independence of medical specialists.

14. E-reports is a sudo-practice management company, who do not contract doctors and instead have doctors contracting to the company.
15. All reports at E-reports go through a quality assurance process with experienced case managers and lawyers checking the quality of reports.
16. Further, every single question in the report is answered in detail.
17. The doctor receives a copy of the final report that goes to the client and retains a copy of the same.

#### Recent inquiries

18. Over the past few years questions about fairness and transparency in medical assessments, in particularly in the personal injury space, have prompted a number of inquiries to take place.
19. These include the Ombudsman Report into Workers Compensation in September 2016, the Parliamentary Inquiry into Life Insurance and the Joint House Parliamentary Inquiry into Life.
20. There has also been the re-introduction of the Life Insurance Code of Practice, the second draft of which has recently been released.
21. The common theme through all of the inquiries is a call for transparency, a call for fairness and a call to give choice, not only to accommodate the injured party but to also involve them in their process of recovery.
22. An engaged worker, as opposed to a disengaged worker is going to invest in their recovery and feel that they have power in the claims process.
23. Prior to the Joint House Parliamentary Inquiry, there were constant articles in the press which were critical of various aspects of the life industry, particularly of potentially disadvantaging life members.
24. The Joint House Parliamentary Inquiry addressed that the disadvantages potentially faced by life members and developed a code of practice that life insurance providers must comply with.
25. The Life Insurance Code of Practice issued life insurers with a number of guidelines, one of which being that they must make a decision on the claims within 6 months and in special circumstances, 12 months.
26. In the past, the average life insurance claim could run from 12 months to three years.
27. Many of the delays were due to lack of information, waiting on reports from doctors and then the in the process of the final collaboration and assessment from the life insurance claims assessor.
28. Increasingly, claims assessors are now using independent medical examinations as an efficient and effective way to gather that information, reducing the time spent waiting for the information to be provided to them.

29. E-reports makes this process simple by allowing for the case manager, when making a booking for the injured examinee, to also book in up-to-date radiology scans. This means that there will be current reports ready and available by the time the independent medical examination comes around.
30. Since the Royal Commission and the re-introduction of the Life Insurance Code of Practice and the restriction in the time frame that assessors have to make a decision on the claim, the usage of independent medical examinations has increased.

#### Privacy and costs of medical records

31. In recent years there has been an increasing emphasis on security of information and the privacy of people's medical records.
32. In February 2018, there was the enactment of legislation making it obligatory for any privacy breach to be reported.
33. This influenced the life insurance market by causing insurers to become more aware of sending their member's medical information out to third parties.
34. Providers now have to increase the quality of the service they are providing. For example E-reports allows access to sensitive documents via an encrypted portal. This safeguard protects sensitive information being emailed or relying on Australia post to deliver sensitive documents to the correct address.
35. Some providers have tried to cut costs by sending their documents and transcriptions overseas which poses a significant risk of privacy breach.
36. When the information leaves Australia, it is no longer protected under Australian privacy laws. E-reports keeps all documents within Australia and within the protection of Australian privacy law.
37. E-reports have also introduced a new service specifically for solicitors.
38. This was as a result of delving into issues faced by plaintiffs requesting reports in cases where they were unsure whether there was a claim in the matter
39. E-reports' process is to send examinees to a medical specialists so that they receive an interim assessment and medical advice. Prior to the report being written, the examinee's solicitor will be contacted with the potential contents of the report and whether or not the matter actually has grounds to stand on.
40. This saves an examinee costs. If the examinee does not wish to proceed with the claim once they have received medical advice, they do not have to spend the additional money having the report drafted put together and sent to their solicitor.
41. This is a significant cost saver and time saver for the plaintiffs and solicitors, as solicitors are not wasting time on matters that do not have grounds to stand on.
42. Further, E-reports turn around for reports are 2-3 days and therefore there is no need for additional fees for express reports.

43. With the traditional high costs of reports, solicitors often have to resort to funding mechanisms in order to pay for the reports and quite often that funding can be onerous.
44. Lawyers will typically approach finance companies, who may charge 30-40% (and sometimes up to 80%) to pay for the reports which can be a huge burden on the injured workers especially in situations where it is possible that they do not have a claim.
45. This is one of the most significant advantages of E-reports and any person, including both plaintiff and defendant solicitors, who are after an independent medical assessment has the ability to use E-reports.

#### How does a client access E-reports?

46. An injured worker can download the app and can find and book a suitable appointment within the app.
47. Many schemes require an injured worker to give 2-3 weeks notice for medical assessments, however the app allows the injured work to make an appointment based solely on when the injured worker is ready.
48. It is imperative to the efficiency and accuracy of E-reports that doctors are well trained.
49. E-reports does a large amount of training with their doctors and ensures that they know the difference between claims such as a worker's compensation claim independent medical assessment and a report for a total and permanent disability claim relating to superannuation.
50. For example, a worker's compensation report will look at the ongoing entitlement to benefits or a percentage of a whole person impairment whereas the total and permanent disablement report will look at whether or not a person can return to work within their education, training and experience
51. A significant issue in the media and a point of tension between the providers is about the carrying out of assessments by the insurer's own doctors and as a result, the injured worker not being adequately and independently assessed.
52. E-reports has an examinee feedback process whereby any person who comes out of an appointment immediately receives an SMS with a survey for feedback on how their experience was. This survey has nothing to do with the outcome of the report, but ensures the integrity and efficiency of the doctors E-reports uses.

#### Regional and rural medical assessments

53. E-reports have done a lot of work with industry bodies and have received feedback in regard to the unavailability of appointments in regional areas, particularly for disabled persons who cannot travel.
54. E-reports has become the preferred provider for industry associations to accommodate for regional and rural appointments, particularly in the area of psychiatry.

55. E-reports has a service line called Nexus which was Australia's first dedicated psychiatric assessment network which started in 2014. Assessments are undertaken via electronic medium.
56. People tend to arrive to these appointments less stressed as they have not needed to travel, rapport happens quicker and there is a better quality of report provided.
57. With the advancements in technology, E-reports are starting to provide rural and regional persons with physical assessments as well as psychological assessment.

## **BIOGRAPHY**

### **Chris Argyle**

**CEO, eReports - Sydney**

Chris Argyle is CEO and Founder of eReports, a leading national expert medical advisory and medicolegal company. For over 25 years as a digital health pioneer, Chris has developed proven services to assist lawyers to access a completely Independent Specialist's Network across Australia. Through innovative leadership and challenging convention, Chris paved the way for developing a comprehensive range of services on a national scale that delivered consistency, accessibility and transparency for lawyers and their clients.

Chris co-developed Australia's first completely dedicated medicolegal telehealth network 'NEXUS' that has been so successful, the system is highly utilised in regional and international locations that were notoriously difficult and expensive to conduct assessments. eReports develops intelligent business systems that are customisable to the requirements of eReports national clients with a focus on improving outcomes for all stakeholders. Recently, eReports have undertaken a number of well publicised large scale class action suits for lawyers. eReports' reputation for accessing the very best medical experts with an understanding of the workings of class actions is enhancing eReports' reputation as the preferred provider of solutions for the legal sector.

Chris is a foundation board member and current Chairman of Craig's Table, New South Wales' first injured worker led, place-based for purpose enterprise that supports people to see themselves as a leader, valuable in the community and able to engage in employment after a work place injury. Chris sees the service he provides as Chairman of Craig's Table as a way of giving back to the sector he has been involved with for almost 3 decades.

In his position, Chris has witnessed every aspect of the Personal Injury and Workers Compensation cycle and the many legislative changes across multiple schemes and this insight assists eReports to deliver effective, innovative services across every sector.

### **Hanna Barclay**

**Business Relationship Manager, eReports - Melbourne**

Hanna Barclay is the Business Relationship Manager at eReports with years of experience in personal injury law, disability insurance and workers' compensation. Hanna is working closely with industry leaders and peak bodies to provide customised solutions to personal injury sectors. Hanna is focused on partnering with stakeholders to understand their unique needs and is driven to exceed expectations.