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Introduction

What is rehabilitation?

Rehabilitation is designed to assist you if you are injured or become ill as a result of your service. The type and extent of rehabilitation will depend on the nature and severity of your injury or illness. Under the Veterans Entitlements Act 1986 (VEA), for those eligible for rehabilitation through the Veterans’ Vocational Rehabilitation Scheme (VVRS), services are available for veterans with or without an injury or illness.

Medical rehabilitation can be as simple as having physiotherapy on a sprained ankle, or as complex as teaching you to walk again. Vocational rehabilitation is the process of assisting you to return to the workforce. Psychosocial rehabilitation may include such things as referral to community support services, basic skills training, lifestyle programs, attendant care services or drug and alcohol management programs.

The aim is to do everything possible to get you back to at least the same physical and psychological state, and at least the same social, vocational and educational status as you had before being injured or becoming ill.

If your injury or illness can be linked to your ADF service and a claim for liability has been accepted, DVA may provide rehabilitation services. While you are a serving member, rehabilitation is generally provided through an ADF Rehabilitation Coordinator in Defence, but once you are discharged, medically or otherwise, rehabilitation is provided through DVA.

What is compensation?

When you are injured or suffer an illness related to Defence service you may be eligible to be compensated for that injury or illness. Compensation is commonly associated with a loss. If, due to your injury or illness, you actually incur or may in the future incur, for example, an expense or loss of income or suffer a functional impairment, you may be compensated for that loss.

What cover are you eligible for?

The Military Rehabilitation and Compensation Act 2004 (MRCA) provides treatment, rehabilitation and compensation for members and former members of the ADF, their dependants and other eligible persons in respect of injury, disease or death related to service. The MRCA covers all service from 1 July 2004.
The Safety Rehabilitation and Compensation Act 1988 (SRCA) provides members and former members of the ADF with workers compensation and rehabilitation for injuries or diseases as a result of duties in the ADF. The SRCA covers peacetime and peacekeeping service up to 30 June 2004 and operational service between 7 April 1994 and 30 June 2004.

The Veterans’ Entitlements Act 1986 (VEA) provides treatment, benefits, allowances and compensation to veterans and their dependants, members of the Forces, members of Peacekeeping Forces or Australian mariners, their dependants and other eligible persons in respect of injury, disease or death caused or aggravated by war or eligible defence service. The VEA covers war service before 1 July 2004 and in certain circumstances, peacetime service between 7 December 1972 and 30 June 2004.

How to make a claim?

To make a claim, you need to complete a claim form. Forms are available at www.dva.gov.au or from your nearest DVA office.

If you find anything in the form difficult to understand or complete you should get help from a DVA staff member. You may also ask your service or ex–service organisation, as most have officers and advocates who can help you with the claim. Alternatively, you can visit your nearest DVA office for assistance. DVA staff also conduct regular visits to most major ADF bases.

Once you have lodged a claim, a delegate of the Military Rehabilitation and Compensation Commission (MRCC) must investigate your claim before making a decision. The investigation is aimed at ensuring that all information relevant to your claim is available when the delegate makes a decision.

The type of information that the delegate seeks can differ from case to case but usually includes your service history, service medical records, incident reports and other information on your medical history. The delegate may also ask you for information in your possession or readily available to you. The time taken to process your claim will be greatly reduced if you submit all available evidence at the time of submitting your claim.

Additionally, the delegate may ask you to undergo a medical examination. The MRCC will pay for any medical examinations it requests as well as reasonable travel and accommodation costs associated with the examination.
Why should I claim now?

If you believe an injury or illness is related to your ADF service, and you are concerned it may affect you in the future, it is in your interest to submit a claim for liability for that injury or illness.

Some of the benefits of submitting your claim as soon as practicable after the occurrence of your injury or illness are:

- The evidence, including medical evidence required to substantiate your claim will be readily available. The evidence may not be easily attainable in later years.

- Once liability has been accepted you will have the knowledge that in the future you will be covered medically and financially should the accepted injury or illness cause you problems. Your injury may not be costing you (money or pain) now, but as you get older you may develop problems relating to that injury.

- If you have been medically downgraded or lost allowances, by submitting your claim promptly you may be entitled to have your reduced salary increased to the level of pay you were receiving prior to your injury or illness.

- If you have been required to change your employment category and suffered a downgrade in pay level, by submitting your claim you may be eligible to have your new salary topped-up to the pay level you were receiving prior to your re-employment.

- In some circumstances you may be entitled to a greater permanent impairment benefit the sooner you submit your claim.

It is in your interests to submit a claim for liability as soon as practicable after sustaining a service injury or disease. If liability is accepted, DVA will conduct a needs assessment to determine what benefits and assistance are appropriate to your situation.

Who is covered?

The MRCA provides compensation and rehabilitation cover for the following members of the ADF for service on or after 1 July 2004:

- all members and former members of the permanent Defence Force

- all members of the reserve force
- cadets and officers and instructors of cadets
- other people declared in writing by the Minister for Defence to be members of the ADF.

The MRCA also provides benefits to certain dependants of these persons in the event that they are severely impaired or die as a result of their service.

ADF members and former members who die from, or who suffer, injury or disease related to service solely before 1 July 2004 continue to be covered under the SRCA or VEA, or both.

**When am I covered?**

Normally, you are covered for that part of a day while you are rendering defence service. You may be covered when you are undertaking activities incidental to your duties in the ADF; for example, travelling, while rendering peacetime service, to a place for a purpose of performing duty, or away from a place of duty upon having ceased to perform duty.

You may also be eligible for compensation if you suffer an injury or disease as a consequence of medical treatment paid for by the Commonwealth under the MRCA or, if you are a full-time serving member, the unintended consequences of treatment provided by the Department of Defence on or after 1 July 2004.

Liability will not be accepted if:

- the injury or disease arose from a serious default or wilful act (including drug or alcohol consumption), a serious breach of discipline or was self-inflicted, or
- the injury or disease resulted from reasonable counselling in relation to a person’s performance as a member, or a failure to obtain a promotion transfer or benefit.

The above exclusions do not apply if the member is seriously and permanently impaired by the injury or disease, or die as a result.

Additionally, liability will not be accepted if:

- the injury, disease or death resulted from an accident that occurred on a journey undertaken on peacetime service where the journey was made by an indirect route for a reason not connected with performance of the member’s duties that substantially increased the risk of the injury, disease or death occurring
• the injury, disease or death resulted from an accident that occurred on a journey undertaken on peacetime service that was substantially delayed or interrupted for a reason not connected with performance of the member's duties in a way that substantially increased the risk of the injury, disease or death occurring

• the member wilfully made a false representation that s/he did not suffer from the injury or disease to which the claims relates

• the injury, disease or death is due only to the personal use of tobacco products and no other cause is determined to have been contributory.

**What am I covered for?**

You may be eligible for compensation under the MRCA if you have an injury or disease which relates to your defence service on or after 1 July 2004.

You may also be eligible for compensation for the loss of, or damage to, medical aids or appliances (e.g. a medical, surgical or similar aid or appliance which you use) as a result of an occurrence while you were rendering defence service.

Your dependants may be eligible for compensation if you die as a result of your service, or while rendering service, on or after 1 July 2004.
Types of service

Under the MRCA, there are just three categories of service:

- warlike service
- non-warlike service
- peacetime service.

The Minister for Defence, in consultation with the Prime Minister, determines warlike and non-warlike service in a formal declaration. Peacetime service constitutes all other service.

Warlike service is determined by the Minister for Defence on the advice from the Chief of the Defence Force. When the application of force is authorised to pursue specific military objectives and there is an expectation of casualties the determination is likely to be that of warlike service. It also includes peace enforcement activities, that is peacemaking and not peacekeeping operations, when armed force is authorised to restore peace and security.

Non-warlike service is likely to be determined where military activities are short of warlike operations and where casualties could occur but are not expected. The only force authorised to be used by the Australian Defence Force (ADF) is in self-defence. Peacekeeping activities such as truce observation and monitoring of cease-fire agreements, maintenance of peace and order with the consent of both parties and sanction enforcement come into the category of non-warlike service.

ADF members who are injured or contract a disease that is related to warlike and non-warlike service may receive higher permanent impairment payments than those injured on peacetime service. However, members who are eligible for maximum permanent impairment compensation get the same amount, regardless of the type of service which caused the impairment.

Under the MRCA, different standards of proof apply to claims for acceptance of liability for an injury or disease for different types of service. For those who suffered an injury or disease during warlike or non-warlike service, the Military Rehabilitation and Compensation Commission (MRCC) must be satisfied beyond reasonable doubt that injury, disease or death is not related to a member's service before it can deny liability. For conditions related to peacetime service, the MRCC must be reasonably satisfied that the injury or disease was, more likely than not, related to that service.
What benefits are available?

There are a range of benefits that may be applicable if you suffer a loss that is directly related to your accepted service injury or disease.

Rehabilitation

Rehabilitation is designed to assist you if you are injured or become ill as a result of your service. The aim is to do everything possible to get you back to at least the same physical and psychological state, and at least the same social, vocational and educational status as you had before being injured or becoming ill.

The assistance provided might involve medical treatment, physiotherapy, or providing you with special equipment to help you to manage your daily activities. You might need assistance to adapt in your current job or assistance to find, or to train for, a more suitable job. It may be that assistance through counselling or lifestyle programs might help you and your family to adjust to your changed circumstances or just to help get you through a difficult time.

Liability for your injury or disease under the MRCA is decided by a delegate of the Military Rehabilitation and Compensation Commission (MRCC) based on reports by appropriate medical practitioners. MRCC delegates are DVA officers who have been trained in determining MRCA claims. If liability is accepted an assessment of your specific needs will be carried out by the MRCC delegate. This needs assessment will consider:

- any health care arrangements that may be required
- the likelihood of payment of compensation under the Act
- whether an assessment is required to determine your capacity to undertake and benefit from a rehabilitation program.

If your needs assessment indicates that you need to be assessed for your capacity to undertake rehabilitation, this will be co-ordinated by:

- a delegate of your Service Chief if you are still serving with the ADF, or
- a delegate of the MRCC if you have been discharged from the ADF or you are still serving but have been identified as likely to be discharged on medical grounds.

If you believe at any time that you may benefit from rehabilitation you are encouraged to request an assessment of your capacity for rehabilitation. A
rehabilitation assessment will determine your capacity to undertake a rehabilitation program and the kinds of rehabilitation services from which you will benefit. The delegate will seek the assistance of a person with suitable qualifications and expertise in rehabilitation in conducting the assessment. The assessment must be completed before a rehabilitation program can be developed and approved.

If your rehabilitation assessment indicates that you may benefit from rehabilitation, assistance available to you may include:

- the development of an individual rehabilitation program
- the provision of aids, appliances and/or home and workplace modifications
- help to find suitable defence or civilian work
- assistance in moving from defence to civilian life.

A rehabilitation program will be developed by an approved rehabilitation provider, in consultation with you. Your program may include one or more of the following:

- medical services
- dental services
- psychiatric services
- hospital services
- physical training
- physiotherapy
- occupational therapy
- vocational assessment and training
- counselling
- psychosocial training.

Psychosocial training may include such things as referral to community support services, basic skills training, lifestyle programs, attendant care services or drug and alcohol management programs.

You will have a rehabilitation plan developed for you which will set out the services that will be provided, the time period covered under the plan and the likely outcome at the end of the plan.
The authority responsible for your rehabilitation (your Service Chief or the MRCC) will pay the cost of your rehabilitation. If you are required to attend any examinations in relation to your rehabilitation assessment, reasonable transport and accommodation costs for attendance at the examination as well as the examination itself will also be paid for by your Service Chief or the MRCC.

Rehabilitation is designed to assist you. You will be encouraged to contribute to the assessment process by providing information on your specific vocational and social needs.

If a rehabilitation program is subsequently developed, your input is considered essential. You will be consulted throughout the process so that your needs are addressed and you achieve the agreed rehabilitation goals.

During the operation of the rehabilitation program you will be kept informed of all important decisions. You will be expected to make an honest attempt to achieve and sustain the aims of your program and take direction from the service provider managing your activities.

If your personal or medical circumstances change significantly you are able to request an amendment to your program and a new assessment may be undertaken.

If you are required to undergo an examination as part of an assessment of your capacity to undertake rehabilitation and you choose not to attend, your right to compensation (but not treatment) under the MRCA may be suspended until you attend the examination. Similarly, if you are required to undertake a rehabilitation program and you fail to undertake the program your right to compensation (but not treatment) under the MRCA may also be suspended.

**Permanent impairment**

Permanent impairment compensation is paid for the permanent impairment suffered as a result of an injury or disease accepted as related to your MRCA service. They are not based on economic loss but are paid as compensation for the medical impairment, pain and suffering and the lifestyle restrictions which are a result of the accepted injury or disease.

Permanent impairment compensation is calculated on the degree of impairment and the lifestyle effects of your accepted conditions using the Guide to Determining Impairment and Compensation (GARP M).

All accepted conditions are combined, using a combined values table, to arrive at a total impairment rating on a scale from 0 to 100 points. The impairment
rating will then be combined with a lifestyle rating (0 to 7) to determine the compensation payable. Impairment and lifestyle ratings are then combined to give a compensation factor on a scale from 0.000 to 1.000 where 1.000 is the highest possible factor. This factor is applied to the maximum amount of permanent impairment compensation (current at the time) to determine how much you are entitled to as a weekly payment.

Up to 50 impairment points, a weighted average of impairment and lifestyle assessments determines the compensation factor. Impairment is weighted at 85 per cent and lifestyle at 15 per cent of the overall effects on a person. Between 50 and 80 impairment points the weighting applied to lifestyle will be lower and from 80 impairment points the compensation factor will be one, irrespective of lifestyle.

Different tables apply to warlike/non-warlike service and peacetime service. The compensation payable will be the weighted average of the level that would be paid if all the conditions were caused by warlike or non-warlike service and the level paid if all the conditions were caused by peacetime. The weight used will be the impairment points attributable to warlike/non-warlike service and to peacetime service.
A person whose impairment is assessed at 80 points or more will be entitled to maximum permanent impairment compensation. Regardless of the type of service causing the impairment, all ADF members assessed at 80 or more points receive the same permanent impairment compensation (adjusted for age if taken as a lump sum).

Normally permanent impairment must be assessed at 10 impairment points or more from all accepted conditions. In the case of hearing loss, loss of fingers or toes, and loss of taste or smell, only 5 points are required.

If your condition worsens, you will need to lodge a claim for additional permanent impairment compensation so that the level of your impairment can be reassessed. Additional permanent impairment compensation can be paid where your impairment has increased by 5 points or more.

Permanent impairment compensation can be paid as:

- a periodic payment on a fortnightly basis
- a lump sum, or
- a combination of a lump sum and periodic payments with the options available depending on the level of permanent impairment as indicated in the table below.

<table>
<thead>
<tr>
<th>Level of permanent impairment</th>
<th>Combination payment option</th>
</tr>
</thead>
<tbody>
<tr>
<td>10% to 20% of the maximum weekly amount</td>
<td>50% lump sum, 50% periodic payments</td>
</tr>
<tr>
<td>Above 20% of the maximum weekly amount</td>
<td>25% lump sum, 75% periodic payments</td>
</tr>
<tr>
<td></td>
<td>or</td>
</tr>
<tr>
<td></td>
<td>50% lump sum, 50% periodic payments</td>
</tr>
<tr>
<td></td>
<td>or</td>
</tr>
<tr>
<td></td>
<td>75% lump sum, 25% periodic payments.</td>
</tr>
</tbody>
</table>

You will have six months from the date the offer is made to you to notify the MRCC of your choice.

Until a choice is made, periodic payments will continue to be made on a fortnightly basis. These will be subtracted from the lump sum if an option containing a lump sum is chosen. If a choice is not made within the allowable time period, periodic payments will continue each fortnight. You cannot ask after that time to take any periodic payments as a lump sum.
The conversion of the weekly amount to a lump sum is based on life expectancy tables provided by the Australian Government Actuary. Age adjustments will not be made for males up to age 30 and females up to age 35. This age difference is due solely to the fact that women live longer than men on a total population basis. After these ages the lump sum is decreased, based on your age next birthday at the time the notice was given to you about the choices.

Permanent impairment payments, whether taken as a lump sum or as periodic payments, are tax-free.

The only MRCA payment affected by your choice is the bereavement payment made to a wholly dependent partner or an eligible young person upon your death. The bereavement payment is equal to twelve times the weekly rate of permanent impairment periodic payments a member was receiving or entitled to receive. However, lump sum permanent impairment payments do not attract a bereavement payment as they were paid out before death.

It is not mandatory for you to seek financial advice to make a permanent impairment payment choice. However, we strongly recommend that you seek financial advice from a suitably qualified person prior to making a choice on how you want your compensation to be paid.

**Incapacity payments**

Incapacity payments are payments for economic loss due to the inability to work because of an injury or disease that has been accepted as service related under the MRCA.

Incapacity payments can be made to current and previously serving, permanent and reserve Australian Defence Force (ADF) members, cadets, cadet officers and instructors and declared members who are incapacitated for service or work as a result of an injury or disease for which liability has been accepted.

Incapacity payments are essentially the difference between *normal earnings* and *actual earnings* for a week. If you are a serving member, incapacity payments make up the full difference. If you are a former member you will be paid the difference between a percentage of your normal earnings and your actual earnings. The percentage will vary between 75 per cent and 100 per cent depending on the length of time you have been receiving incapacity payments and the hours you are able to work in a week.

Different rules apply to the calculation of incapacity payments for former members. Once you start to receive incapacity payments as a former member
you get a bank of *maximum rate hours* equal to 45 times your normal weekly hours. This bank is reduced by one hour for every hour that your incapacity prevents you from working, or working at your previous level. If the bank contains a positive number of hours for a full week that you are receiving incapacity payments, that week is a *maximum rate week*. During a maximum rate week your incapacity payments make up the full difference between your normal earnings and your actual earnings.

If you are unable to work at all, the bank will drop to zero after 45 weeks. Once your *maximum rate weeks* cease, your incapacity payments will be the difference between a percentage of your normal earnings and your actual earnings for the week. The percentage that is applied to your normal earnings will vary according to the hours you work. This is shown in the following table:

<table>
<thead>
<tr>
<th>Hours worked (percentage of normal weekly hours)</th>
<th>Percentage applied to normal earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nil</td>
<td>75%</td>
</tr>
<tr>
<td>25% or less</td>
<td>80%</td>
</tr>
<tr>
<td>More than 25% but not more than 50%</td>
<td>85%</td>
</tr>
<tr>
<td>More than 50% but not more than 75%</td>
<td>90%</td>
</tr>
<tr>
<td>More than 75% but not more than 100%</td>
<td>95%</td>
</tr>
<tr>
<td>100% or more</td>
<td>100%</td>
</tr>
</tbody>
</table>

Actual earnings are what you are actually earning from suitable work, that is work you are doing or able to do having regard to your age, experience, training, qualifications and other skills. If you fail to take up or continue a reasonable offer of suitable work, your actual earnings will be what you are deemed able to earn.

For Permanent Forces members and reservists on continuous full-time service, normal earnings are:

- your ADF salary and allowances payable at the date of incapacity if you are still serving, or

- your ADF salary and allowances at the date of discharge from your last period of service if you are no longer serving.

These amounts are indexed to ADF pay rates to give the current rate of salary and allowances.

Allowances are included in normal earnings for as long as you would normally have been eligible to receive them. Service allowance is an indefinite payment.
Many other allowances are time-limited and the advice of the ADF is sought on how long you would have received these allowances.

Where a person is injured during initial training, normal earnings are those they would have received upon completion of training.

Former Reservists who were injured while on continuous full-time service may have their civilian earnings, instead of their ADF salary and allowances, taken into consideration for calculating normal earnings and incapacity payments.

Normal earnings for part-time Reservists can include their civilian earnings as well as their military earnings. Civilian earnings are indexed to a wage price index so that they reflect current civilian salaries.

Where the normal earnings of discharged ADF members are based on their full-time ADF pay and allowances, a remuneration loading is added to compensate for the loss of non-salary benefits you received whilst serving in the ADF. This amount is indexed annually to the percentage increase in the ADF Workplace Remuneration Arrangement.

The minimum normal earnings are equivalent to the federal minimum wage. This means that if your normal earnings are less than this amount, the federal minimum wage will be used as your normal earnings when calculating your incapacity payments.

The earnings capacity and circumstances of cadets and declared members can vary widely and their incapacity payments are worked out on a case by case basis.

Incapacity payments are offset dollar-for-dollar by the Commonwealth-funded portion of superannuation you receive (not your personal contributions).

Incapacity payments are payable for as long as your actual earnings are lower than your normal earnings but cease at age 65. This is because incapacity payments are designed to compensate you for lost earnings from work or service and 65 is the age you would normally stop working. The exception to the age 65 rule is where the injury or disease causing your incapacity for service or work occurred between age 63 and age 65. In these cases, incapacity payments can be paid for a maximum of 104 weeks.

Incapacity payments are not payable for any period when you are imprisoned. This excludes weekend detention, community service orders, home detention or detention on remand.
Incapacity payments are taxable as they are income-related payments. However, where the earnings being replaced are non-taxable, so too are the incapacity payments. Examples of non-taxable incapacity payments are those which replace part-time reserve earnings and tax-free salary or allowances earned while on warlike service.

**Special Rate Disability Pension**

The Special Rate Disability Pension (SRDP) provides an alternative form of ongoing compensation for people whose capacity for work has been severely curtailed because of conditions accepted due to their eligible service under MRCA.

In some circumstances, former members will be better off receiving the SRDP offset by their permanent impairment payments than receiving incapacity and permanent impairment payments. The choice is offered for this reason.

You will be offered the choice of receiving taxable incapacity payments up to age 65 or a tax-free SRDP (indefinitely) if you:

- have an injury or disease assessed at 50 or more impairment points which is likely to continue indefinitely
- are in receipt of incapacity payments
- are assessed as:
  - unable to undertake paid work for more than 10 hours a week
  - unlikely to be assisted by rehabilitation to undertake paid work for more than 10 hours a week.

The SRDP rate is based on the Special Rate (T&PI) disability pension provided under the *Veterans’ Entitlements Act 1986* (VEA). It will be reduced on a dollar-for-dollar basis by the weekly amount of permanent impairment compensation payable. This ensures that the Commonwealth pays compensation for permanent impairment once only. Any SRDP payment is then offset by the Commonwealth-funded component of superannuation at a rate of 60 cents in the dollar.

You can be reimbursed up to a statutory limit for financial advice you receive from a suitably qualified person, to assist you make a choice between incapacity payments and SRDP.
Medical treatment

Treatment is available under the MRCA for:

- all who have conditions for which liability is accepted under the MRCA who have discharged from the ADF or are not currently serving in a full-time capacity
- partners and dependent children of deceased members who are eligible for compensation for the member’s death under the MRCA.

Cadets, Officers of Cadets, Instructors of Cadets and Reservists not on continuous full-time service are also entitled to payment of reasonable costs for medical treatment.

However, members of the Permanent Forces and Reservists on continuous full-time service are provided with health care under the Defence Force Regulations through the Defence Health Service while they are still serving. In some cases, health care may be provided to a serving member under the MRCA for a condition connected with their service if their Service Chief recommends, and the Military Rehabilitation and Compensation Commission (MRCC) accepts that this would be more appropriate.

There are two ways of providing treatment under the MRCA:

- payment by DVA of reasonable costs for former ADF members until a condition is stable, or
- provision of a Repatriation Health Card.

DVA will pay for the reasonable costs of treatment for a former member or eligible serving member who:

- has a condition(s) accepted as service related under the MRCA
- after an assessment of their needs, a MRCC delegate has determined that the accepted condition(s) require only short-term, non-ongoing treatment.

Treatment costs for the accepted condition can be paid in one of two ways:

- you can pay for the costs yourself and then seek reimbursement from DVA, or
- you can ask DVA to arrange for the doctor, pharmacist or other health provider to bill DVA direct.
If treatment of your condition is through the payment of reasonable costs, you will be entitled to payment for any medical treatment reasonably required for your condition. However you will need to obtain prior approval before getting treatment.

DVA will provide a Repatriation Health Card—For Specific Conditions (White Card) to a former member who:

- has a condition accepted as service related under the MRCA
- after an assessment of their needs a MRCC delegate has determined that the accepted condition(s) has stabilised and requires periodic treatment or intermittent periods of acute treatment.

The White Card enables the member to obtain treatment for the accepted condition(s) from an approved DVA health provider who will bill DVA direct for the service provided.

DVA will provide a Repatriation Health Card—For All Conditions (Gold Card) if:

- permanent impairment from accepted conditions is assessed at or above 60 points
- a member meets the criteria for the Special Rate Disability Pension safety net payment (SRDP) (even if they don’t choose to take it),
- a wholly dependent partner or dependent child of a member is eligible for compensation for the member’s death.

A Gold Card entitles a person to treatment for all conditions, even those not related to service, by an approved DVA health provider who will bill DVA direct for the service provided.

If DVA is paying for the reasonable treatment costs of your accepted condition and the condition reaches the point where long term treatment is required, a MRCC delegate may reassess your needs and provide you with a White Card.

DVA will not normally meet the cost of medical and specialist services not listed in the MBS, although exceptions can be made in special circumstances. Your treatment provider will need to obtain approval from DVA in such cases. If you are unsure as to whether DVA will pay for a particular service, you should contact a DVA office prior to having the treatment.

You will have access to medications listed on the Pharmaceutical Benefits Scheme as well as access to an additional range of medications and dressings.
listed on the Repatriation Schedule for the conditions for which you are eligible for treatment. If a particular drug is not available on published schedules, your doctor can approach DVA for approval or authority to prescribe in certain circumstances.

Once you are issued with a White or Gold Card you will be provided with a pharmaceutical allowance. When you purchase pharmaceuticals you make a co-payment for each script. Safety net arrangements apply, so there is a maximum you will pay per calendar year. However, you may have to pay a premium for a particular brand or drug prescribed by your doctor.

You and your authorised attendant may also be eligible for payment for the reasonable costs of a journey (and accommodation) necessary to obtain treatment.

**Household services**

Compensation for the reasonable cost of household services can be provided if they are required as a direct result of an injury or disease for which liability has been accepted under the MRCA. Compensation for household services is for people with seriously incapacitating conditions.

In deciding whether you have an entitlement to compensation for household services, an assessment by a suitably qualified professional (most often an occupational therapist) is usually obtained.

Household services must be required for the proper running and maintenance of a household and may include cooking, cleaning, laundry, ironing, lawn-mowing and gardening. Requests for other similar services can also be considered. Home maintenance services such as painting, decorating, repairs, plumbing and electrical work are not covered.

When determining whether household services are reasonably required, the following issues are among those considered:

- the extent to which the accepted condition restricts the person’s ability to undertake household tasks previously undertaken
- the duration and length of time the household services are likely to be required
- the extent to which members of the family might reasonably be expected to provide household services
• whether the assistance will enhance the likelihood of successful rehabilitation of the person

• whether the assistance would reduce any disruption to the employment and other activities of family members.

There is a maximum amount payable for household services which is updated once a year in line with movements in the Consumer Price Index. If the amount reasonably incurred in obtaining necessary household services is less than that maximum amount, the lesser amount is all that is payable.

Payment for household services is normally made by reimbursement to the person who incurs the cost of obtaining the necessary services although arrangements for direct billing for the cost of services can be made where necessary, such as cases where long-term services are required.

The provision of household services is regularly reviewed, even when a medical condition is considered to be long-term or permanent. Where the person has a short-term or ‘resolving’ condition, their eligibility for household services compensation will be reviewed more frequently to ensure that household duties are progressively resumed in line with their recovery.

Attendant care

Attendant care services are services (other than household services, medical or surgical services or nursing care) that are required for the essential and regular personal care of the person. Therefore, the types of services that can be covered include personal hygiene (bathing and toileting), assistance with mobility, grooming and feeding.

In deciding whether you have an entitlement to compensation for attendant care services, an assessment by a suitably qualified professional is usually obtained.

When determining whether attendant care services are reasonable, the following issues are among those considered:

• the nature of the accepted injury or disease

• the extent to which the accepted injury or disease impairs the person’s ability to look after their own personal care needs

• the extent to which any medical service or nursing care received by the person provides for his or her essential and regular personal care
• the extent to which attendant care will meet the person’s reasonable wish to live in their own home rather than in an institution
• the extent to which attendant care will allow the person to work
• any assessment about the person’s rehabilitation
• the extent to which a relative might reasonably be expected to provide attendant care services.

The injured or ill person’s needs in relation to attendant care services is regularly reviewed to make sure that the care provided best meets those needs.

It is not usually appropriate to pay relatives to provide attendant care services.

There is a maximum amount payable for attendant care services which is updated once a year in line with movements in the Consumer Price Index. If the amount reasonably incurred in obtaining necessary attendant care services is less than that maximum amount, the lesser amount is all that is payable.

Payment for attendant care services is normally made by reimbursement to the person who incurs the cost of obtaining the necessary services although arrangements for direct billing for the cost of services can be made where necessary, as in cases where long-term care is required.

The injured or ill person and, where necessary, their relatives are responsible for choosing the attendant carer and making arrangements for provision of the necessary care. DVA has responsibility for determining the amount of compensation payable and making payments in relation to the attendant care services.

**Death benefits**

Compensation may be provided if:

• liability for the deceased member’s death has been accepted, or
• the deceased member met the eligibility criteria for the Special Rate Disability Pension safety net payment during some period of his or her life, or
• the deceased member was entitled to maximum permanent impairment compensation for accepted conditions immediately before their death (i.e. assessed at or above 80 points).
Wholly dependent partners can receive either tax-free periodic payments equivalent to the rate of the war widow’s/widower’s pension under the Veterans’ Entitlements Act 1986 or its lump sum equivalent. The maximum lump sum is payable to a widow/er who would have turned 18 on the birthday following the date of the member’s death. The lump sum payable reduces until the age of 90 at which point it remains constant.

Where the member’s death has been accepted as related to service an additional tax-free, age-based death benefit may be paid.

For this lump sum, where the widowed partner was aged 40 or less at the time of the member’s death, s/he receives the maximum amount that was applicable at that time. The payment reduces for those aged over 40.

They can also receive compensation (up to a statutory limit) for the cost of financial advice they obtain when choosing between the pension and a lump sum.

Other benefits include:

- a Gold Card providing treatment benefits
- a pharmaceutical allowance
- a telephone allowance.

Additionally, these partners may be entitled to the VEA income support supplement and associated allowances, subject to the same rules as apply to VEA war widows and widowers.

All dependants who were eligible young persons immediately before the member’s compensable death, whether wholly or partly dependent, receive:

- a tax-free lump sum compensation payment which is payable at the rate as at date of death of the member
- education assistance under the Military Rehabilitation and Compensation Act Education and Training Scheme (MRCAETS) while they remain an eligible young person.

If the eligible young person was wholly or mainly dependent on the deceased member, they can also receive:

- a weekly payment which is payable from date of death of the member
• a Gold Repatriation Health Card providing free medical care for all conditions

• a pharmaceutical allowance

while they remain an eligible young person.

The test for wholly or mainly dependent status is the level of economic support provided by the member and the extent of financial dependence on the member. However, if the eligible young person was living with the member immediately before his or her death, the EYP is deemed to have been wholly dependent on the member.

Compensation (up to a statutory limit) is available for the cost of the funeral of a deceased member. The ADF currently bears the cost of a military funeral for ADF members who die in-service. If the cost is borne by the ADF, no funeral assistance will be payable.

A **bereavement payment** is intended to help with the financial demands that follow the death of any ADF member or former member who was receiving compensation under the MRCA

A wholly dependent partner of a deceased member or former member is entitled to a bereavement payment where the member or former member was receiving or was entitled to receive incapacity payments, permanent impairment periodic payments or the Special Rate Disability Pension (SRDP) safety net payment at the time of death.

There is no bereavement payment payable in respect of permanent impairment payments paid as a lump sum or a lump sum redemption of incapacity payments.

If there is no wholly dependent partner, the bereavement payment can be made to the dependent children of the deceased member.

The payment is equal to 12 instalments of the weekly amount of incapacity payments, permanent impairment periodic payments and/or SRDP payments that the deceased member was receiving or entitled to receive.

All compensation payments under the MRCA are in addition to any superannuation death benefits payable under the Defence Force Retirement and Death Benefits (DFRDB) Scheme and Military Superannuation Benefits Scheme (MSBS).
Once a decision is made that you are eligible for a death benefit as a wholly dependent partner of a deceased member under the MRCA, periodic payments of death benefit will commence as soon as possible. Any arrears owing from the date of death until the date periodic payments start will be paid in a lump sum.

You can choose to receive the death benefit as a lifetime (indexed) periodic payment equal to the war widow's/widower's pension provided under the Veterans’ Entitlements Act 1986 (VEA) or an actuarial lifetime equivalent in a lump sum. The Military Rehabilitation and Compensation Commission (MRCC) delegate handling your claim will make the offer to you and will advise you of the amounts for the two payment options. You will have six months from the date the offer was made to you to notify the MRCC of your choice.

Until a choice is made, periodic payments of the death benefit will continue to be made on a fortnightly basis. These payments and the arrears paid to you will be subtracted from the lump sum if you choose that option. If you do not make a choice to take the lump sum within the allowable time period, periodic payments will continue each fortnight.

Regardless of how you receive your death benefit, you will be entitled to:

- a Repatriation Health Card (the Gold Card)
- pharmaceutical allowance
- telephone allowance
- income support supplement under the VEA subject to VEA rules
- benefits for dependent children.

If your partner’s death is accepted as related to service under the MRCA, you will also be entitled to an additional death benefit lump sum.

Periodic payments of death benefit are counted as income for the purposes of determining the amount of any income support supplement and rent assistance payable. If the death benefit is taken as a lump sum, the amount you would have received if you had elected to receive periodic payments will be counted as income.

If a wholly dependent partner receives a death benefit as a lump sum or periodic payment, certain pensions and benefits like the age pension and the disability support pension will not be payable under the Social Security Act. You may be eligible for an income support supplement under the VEA instead.
If you are in receipt of, or you are intending to claim Family Tax Benefit, we strongly recommend that you consult Centrelink about the effect of the two payment options on Family Tax Benefit.

It is not mandatory for wholly dependent partners to seek financial advice to choose which death benefit payment to take. However, we strongly recommend that you seek financial advice from a suitably qualified person.

**Telephone allowance**

To be eligible for a telephone allowance under the MRCA you have to:

- be assessed as eligible for the Special Rate Disability Pension (SRDP) safety net payment
- be assessed as having a permanent impairment at or above 80 points, or
- be a wholly dependent partner of a deceased Australian Defence Force (ADF) member who is eligible for compensation in respect of the member’s death.

A higher amount of telephone allowance is payable if you have a home internet connection. To be eligible for the additional internet rate of telephone allowance you must:

- be eligible for and in receipt of telephone allowance
- have a subscription to a home internet service that is in their name, their partner’s name, or joint names
- provide written confirmation that they have a home internet connection.

You must also be an Australian resident and have a telephone service in Australia that is connected in your name or in your name and someone else’s name.

Telephone allowance is a tax-free payment to assist eligible persons with the cost of maintaining a telephone service.

Telephone allowance is payable quarterly and indexed annually on 20 September or the first payday after this date where there is an increase in the Consumer Price Index.

Telephone allowance is normally paid for a landline but can be paid for a mobile telephone service, if this is the only service the person has.
You will only be paid telephone allowance on a particular telephone allowance payday if you are eligible on that day. For example, if you are granted SRDP from 15 April, your first telephone allowance payment will be paid on the first pay-day on or after 1 July. No partial payments of telephone allowance are made.

You cannot be paid telephone allowance if you are living overseas or if you are away from Australia on a temporary basis longer than 26 weeks.

**Motor Vehicle Compensation Scheme**

The Motor Vehicle Compensation Scheme (MVCS) specifies the circumstances under which assistance can be provided for the cost of vehicle modifications or vehicle purchase.

To be eligible for assistance, you must have suffered an impairment from an injury or disease for which liability has been accepted under the MRCA, and the accepted conditions must result in you being unable to drive or be driven in a motor vehicle in safety and comfort without modifications to your vehicle. You must also be considered able to drive or derive a benefit from using your motor vehicle at least twice a week.

DVA will pay for the reasonable costs of clinically necessary modifications to your vehicle, their maintenance and repair as well as the cost of any additional insurance that relate to these modifications.

Assistance with the cost of buying a new or second hand motor vehicle will be provided where:

- modification of your existing vehicle is not practicable, or
- you do not own a motor vehicle, have not disposed of one in the last 12 months and can derive a real benefit from a vehicle.

If your existing motor vehicle cannot be modified, the amount of assistance provided will take into account the trade-in value of your existing motor vehicle.

If you receive assistance with the purchase of a motor vehicle, you must register the vehicle and comprehensively insure the vehicle to its full market value. You must also ensure that the vehicle is maintained in good working order. The vehicle cannot be sold, transferred, encumbered or otherwise dealt with without the written agreement of the MRCC. If agreement is not sought and you dispose of the vehicle or otherwise create an encumbrance you may be required to repay the subsidy you received from the MRCC.
A decision on your eligibility will be made by the Military Rehabilitation and Compensation Commission having regard to expert advice from an occupational therapist or other suitably qualified person who has assessed your situation.

**MRCA education and training scheme**

The MRCA education and training scheme (MRCAETS) provides financial assistance, student support services, guidance and counselling for eligible children to help them achieve their full potential in education or career training. The MRCAETS caters for children undertaking primary, secondary or tertiary study and is normally provided only for full-time study within Australia.

Eligibility for access to the MRCAETS is established where:

- a member or former member is eligible for the Special Rate Disability Pension (SRDP) or maximum permanent impairment compensation under the MRCA
- a deceased member or former member of the ADF whose death has been accepted as related to service on or after 1 July 2004 under the MRCA
- a deceased member or former member of the ADF was eligible for the SRDP during some period of his or her life or was eligible for maximum permanent impairment compensation under the MRCA.
Information for Reservists

All members of the Australian Defence Force (ADF) Navy, Army, and Air Force Reserves with service on or after 1 July 2004 are covered under the MRCA, whether they are on part-time service or continuous full-time service. They are covered for injury, disease or death arising out of that service. This includes injury, disease or death:

- sustained while travelling between a member’s place of residence and place of employment, including Reserve parades, camps etc, or
- aggravated, or materially contributed to, by Reserve service on or after 1 July 2004.

All ADF members can receive the same range of benefits. The only difference is in the calculation of incapacity payments for reservists. This is to ensure that reservists receive incapacity payments that reflect fairly the earnings they have lost.

Incapacity payments for all ADF members are based on the difference between the person's normal earnings (NE) before the injury or disease occurred and his or her actual earnings. NE is defined differently according to the circumstances of the member. For a reservist NE is based on:

- a choice of either their full time ADF wage or their full time civilian income plus their part-time reserve income—if the reservist was rendering continuous full-time service (CFTS) at the time of the injury or contraction of the disease, or
- a combination of their civilian income plus their part-time reserve income—if the reservist was injured or contracted the disease whilst performing part time service.

Where the full-time ADF wage is taken into consideration and the person has discharged, a loading is added to NE to compensate for the non-salary benefits enjoyed by serving CFTS reservists.

The ADF provides medical treatment for all permanent force members and CFTS reservists. If you are injured or suffer a disease during a period of CFTS, the ADF will provide you with any necessary medical treatment you may require until you cease CFTS.
The ADF provides limited treatment for part-time reservists who need medical attention whilst performing their reserve service. This treatment is provided until they return home from reserve duty and can access their regular medical practitioner or, until it is possible for the Department of Veterans’ Affairs (DVA) to take over management of their compensation claim. Further details on the Department of Defence policy on health care of ADF personnel can be found in Defence Instruction (General) PERS 16-1. Before DVA can assist, it is necessary to lodge a claim for acceptance of liability for the injury or disease under the MRCA and for it to be determined that there is liability to pay compensation for that injury or disease. Once the injury or disease is accepted, DVA can reimburse you for medical treatment reasonably obtained back to the date the injury or disease occurred.

The MRCA provides for payment of the cost of medical treatment for an accepted injury or disease for part-time reservists when they are not undertaking reserve service and for former reservists (i.e. those who had reserve service but no longer serve in the ADF).
Information for Cadets, Officers of Cadets and Instructors of Cadets

The ADF Cadets is a community based, youth development program aimed at youth between the ages of 12½ and 20. Defence Service Chiefs appoint suitable adult volunteers as Officers of Cadets (OoCs) and Instructors of Cadets (IoCs) to supervise and control the training program for, and the activities of, ADF Cadets. A person may not be appointed an OoCs unless they are 19 years of age. Properly appointed OoCs and IoCs are paid a Cadet Force Allowance based upon the equivalent service rank.

All members of the ADF Navy, Army, and Air Force cadets, OoCs and IoCs are covered under the MRCA for injury, disease or death related to cadet service on or after 1 July 2004. This includes injury, disease or death:

- sustained while travelling between home and the place where they undertake cadet service, including parades, camps etc
- aggravated, or materially contributed to, by Cadet service on or after 1 July 2004.

All ADF members can receive the same range of benefits. To ensure that cadets, OoCs and IoCs who are incapacitated for work receive incapacity payments that reflect fairly the earnings they have lost, their civilian earnings (and in the case of OoCs and IoCs, their cadet pay and/or ADF pay) can be taken into account in assessing the level of their incapacity payments. Special rules apply to cadets who cannot work or study at all because of their service injury or disease and were not working or were only in casual employment at the time of the incapacity. In these circumstances, the Military Rehabilitation and Compensation Commission looks at the each cadet’s situation individually to determine the degree of economic loss they are suffering and hence, the level of incapacity payments payable.

Before DVA can assist, it is necessary to lodge a claim for acceptance of liability for the injury or disease under the MRCA, and for it to be determined that there is liability to pay compensation for that injury or disease.

The MRCA provides for payment of the cost of medical treatment for an accepted injury or disease.
Where the cadet is under 18, a claim can be made by the person with primary responsibility for the daily care of the cadet (e.g. cadet’s parent, foster parent, step parent or guardian). Until the cadet turns 18, compensation is paid to the person who made the claim. Payments can be made direct to the cadet once they reach age 18.
What if I’m medically discharged?

The Transition Management Service (TMS) helps full-time serving members of the Australian Defence Force (ADF) who are being discharged on medical grounds. TMS aims to ensure that eligible members make a successful transition from military to civilian life by ensuring that they have access to the full range of information and services that are available to assist in their transition.

TMS is an optional and free service. It is a member’s choice whether to use the service or not and if so, to what extent. A member can contact TMS directly if he/she feels medical discharge is a possibility and wants to access the service.

The desired result of the TMS is a ‘seamless’ transition from military service to civilian life for eligible members. The Departments of Defence and Veterans’ Affairs (DVA) work together to make the discharge process as easy as possible for members who are unable, for medical reasons, to continue service in the ADF.

DVA provides the TMS on behalf of the respective Service Chiefs and this operates as an extension of the rehabilitation and compensation services which DVA provides. TMS Coordinators work in collaboration with Defence staff involved in administering member discharges, particularly ADF Transition Coordinators and Resettlement Officers.

An ADF member can use the TMS if he/she is currently serving full-time and:

- believes that he/she is likely to be discharged on medical grounds
- has been notified that he/she is to be referred to a Medical Employment Classification Review Board (MECRB), or
- has been notified that he/she is to be discharged on medical grounds.

TMS services are not dependent on a finding of liability to pay compensation. If a member is being medically discharged from the ADF, TMS staff will provide assistance to a member regardless of whether he/she has lodged a compensation claim.

The TMS helps members in the medical transition process by ensuring that they are aware of the preparations required and changes that will be experienced during and after transition from the ADF.
If there is a possibility that a member may be going to be discharged on medical grounds, a TMS Coordinator will, as required:

- explain the discharge process to them and highlight the decisions a member will need to make
- advise a member of his/her possible entitlements and how to claim them
- prepare a ‘Discharge Impact Statement’ on the member which is provided to his/her Career Manager for consideration by the MECRB
- refer the member to the relevant areas in DVA to discuss compensation and rehabilitation issues
- refer the member to external or community providers for additional assistance
- encourage the member to attend an ADF Transition Seminar.

When a member believes that he/she is likely to be discharged on medical grounds, or a formal decision has been made to medically discharge a member, a TMS Coordinator will work with the member to help identify, and to cope with, all of the changes that will affect him/her upon return to civilian life. The Coordinator will assist with information to allow, as much as practical, the member to make informed decisions about his/her transition.

To achieve the above, the member’s TMS Coordinator will develop a ‘Personal Transition Action Plan’ that includes:

- maximising discharge entitlements
- possible future employment options
- post discharge medical matters
- superannuation
- housing
- financial planning
- insurance
- compensation
- help for the member to obtain the assistance and services that he/she needs.
The TMS Coordinator will monitor the member’s progress against his/her Transition Action Plan, ensuring that, where possible, all issues are covered before the member’s discharge.

An ADF member can self refer to the TMS at any time if he/she believes that he/she may be discharged on medical grounds. Members may also be encouraged to contact the TMS by their treating medical officer, their Unit, CSIG ET&D or Transitions staff, or by DVA staff. Formal referral to the TMS occurs following notification by respective Career Management Agencies of a member’s forthcoming MECRB and requesting advice on the Discharge Impact Statement.

TMS Coordinators are located in each State capital city as well as in Canberra, Darwin and Townsville. TMS Coordinators will also provide services by visits to most major Defence Establishments and, when required, will make home or hospital visits.

Before a member is discharged, his/her TMS coordinator should have done everything necessary to assist him/her to make the transition to civilian life. Where the member has an accepted condition, DVA will provide him/her with the services he/she has become eligible for. In other cases the member will be provided with information on support available through the general community.

If for any reason, a member believes that his/her case has not been handled as well as it might have been or that he/she has specific needs that remain of concern, the member can, for a period after his/her discharge, continue to seek assistance from his/her TMS Coordinator. Such feedback is helpful to TMS staff in identifying areas where the services provided through the TMS can be improved.
Safety Rehabilitation and Compensation Act

The Safety Rehabilitation and Compensation Act 1988 (SRCA) provides similar rehabilitation and compensation coverage to that provided under the MRCA, for injuries and diseases suffered as a result of peacetime and peacekeeping service up to 30 June 2004 and operational service between 7 April 1994 and 30 June 2004.

Rehabilitation under the SRCA works in a similar way as rehabilitation under the MRCA.

Permanent Impairment compensation is paid as a lump sum payment. It is assessed by reference to Part 2 of Comcare’s Guide to the Assessment of the Degree of Permanent Impairment—2nd edition, as a percentage whole person impairment. For serious injuries an additional benefit may be payable under the Defence Act 1903, as discussed below.

Incapacity payments are made in the same way as they are under the MRCA. However under the SRCA there is no remuneration loading included in normal weekly earnings. Additionally compensation paid while you are still serving may count to the calculation of maximum rate compensation weeks.

Compensation is payable for cost of medical treatment obtained in relation to an injury, provided the treatment was reasonable to obtain in the circumstances. There is no provision for Repatriation Health Cards under the SRCA.

The Household Services and Attendant Care provisions are exactly the same under the SRCA as they are under the MRCA.

Death benefits include a lump sum benefit plus a weekly payment for each dependent child (up to the age of 16 or full time students up to the age 25). The benefit is paid in addition to any superannuation payable. The funeral benefit is identical to that provided under the MRCA. Additional benefits are payable under the Defence Act 1903, as discussed below.

Other benefits include:

- compensation for essential home, workplace and vehicle modifications
- aids and appliances and their repair or replacement.
Additional compensation payable under the Defence Act

As well as compensation payable under the SRCA, additional compensation under a *Defence Act 1903* determination is payable to those who are severely injured and to families of those who die in compensable circumstances. This additional compensation has been included in the MRCA.

A severe injury is one which results in an assessment of 80% or more whole person impairment under the SRCA. The types of injuries which could lead to this level of impairment are paraplegia, quadriplegia, total blindness or any other injury having a similar effect.

The additional compensation includes:

- an additional permanent impairment lump sum benefit
- a further lump sum for each dependent child
- the cost of obtaining financial advice, up to a statutory limit
- counselling services of the Veterans’ Children Education Scheme for dependent children of those who die in compensable circumstances.
Veterans’ Entitlements Act

The Veterans’ Entitlements Act 1986 (VEA) provides treatment, benefits, allowances and compensation to veterans and their dependants, members of the Forces, members of the Peacekeeping Forces or Australian mariners in respect of injury, disease or death caused or aggravated by war or defence service. The VEA covers war service before 1 July 2004 and in certain circumstances, peacetime service between 7 December 1972 and 30 June 2004. A member who had not completed a qualifying period of three years service prior to 7 April 1994 is not covered under the VEA, unless he or she was medically discharged.

If you have an injury or disease arising out of, or aggravated by, a period of full-time service when you were covered under the VEA, you may be eligible for a disability pension and medical treatment. You may also be eligible for compensation under the SRCA for the same disability and, if so, any compensation payable is offset against your pension. You may receive a reduced pension in addition to compensation payments under the SRCA.

If you aggravate an accepted VEA disability in a period of MRCA service on or after 1 July 2004, you may choose to elect to have that aggravation compensated under either the VEA or the MRCA. This is a one time election that must be made at the time of lodging a claim.

If your claim is accepted you or your dependants may be eligible for the following:

- A disability pension that is tax free and payable for life, and indexed twice annually, as a percentage of the General Rate for disability pensions. A Special or Intermediate Rate pension may be payable if your degree of incapacity is 70% or able, your disability alone has rendered you unable to work more than 8 hours per week (for Special Rate) or 20 hours per week (for Intermediate Rate), and as a result you are suffering a loss of income. An Extreme Disablement Adjustment (EDA) is available to former members who are aged 65 or more and are severely disabled and who do not qualify for Intermediate of Special Rate.

- Treatment for your accepted disability. If you receive an EDA, Special Rate or Intermediate Rate pension, you are covered for medical treatment for all conditions, whether service related or not. Other allowances and benefits are payable in certain circumstances including pharmaceutical allowance, telephone allowance, clothing allowance, attendant allowance, funeral
benefits, decoration allowance, recreation transport allowance, temporary incapacity allowance and loss of earnings allowance.

- In the event of death, a member's disability pension (up to a maximum of 100% of the General Rate) continues to be paid for a period of six fortnights to a surviving partner. If a deceased former member was in receipt of EDA or Special Rate pension, the widow or widower is eligible for a widow/ers pension. This pension is also payable if a member's death is accepted as defence or war caused. Dependent children of a member or veteran may, in certain circumstances, be eligible for benefits under the Veterans' Children Education Scheme. Benefits are payable for children in full-time education and include education allowance, guidance and counselling. Other benefits available to dependants include treatment, telephone allowance and pharmaceutical allowance.

Further information on all VEA benefits is available by contacting your nearest DVA office.
Reconsideration review and appeal rights

If you disagree with the outcome of your claim, you have the right to request that DVA reconsider or review a particular determination. You also have the right to appeal against a determination to the Veterans’ Review Board (VRB) or the Administrative Appeals Tribunal (AAT). The path you take will depend on which Act your claim has been assessed under.

**MRCA**

There are two paths you must consider when appealing a determination made under the MRCA:

- reconsideration of the determination by DVA and then (if dissatisfied) to the AAT, or
- review of the determination by the VRB and then (if dissatisfied) by the AAT.

Importantly, you cannot access both a Reconsideration and a Review. You must choose between the different paths.

To seek **reconsideration** under section 349 of the MRCA, you must make a written request to the MRCC no more than 30 days after you received notice of the decision, or in certain circumstances within such period as DVA allows after the expiration of that period. Your request should set out the reasons why a reconsideration is sought. If you are dissatisfied with the DVA reconsideration, you can then apply to the AAT for a further review (but not the VRB). An AAT application for review must be lodged in writing with the AAT no more than 60 days after receiving the result of the reconsideration.

To seek a **review** with the VRB, you must lodge a written request no more than 12 months from the day that you receive the initial determination. Your request should set out the reasons a review is sought. If you are dissatisfied with the VRB determination, you may then appeal to the AAT.

The MRCC may exercise its discretion to reconsider its original determination under section 347 of the MRCA. If the MRCC amends the original determination, the new determination is then subject to either the Reconsiderations appeal path or the Review appeal path.
SRCA

Under the SRCA, you have the right to lodge a request for reconsideration with DVA if you are dissatisfied with a determination. A request for reconsideration must be made in writing and lodged with DVA no later than 30 days after you receive advice of the decision you wish to have reconsidered, or (in certain circumstances) within such period as DVA allows after the expiration of that period. If you have any additional information or evidence to support your claim, you should include it with your request.

If you are unhappy with the outcomes of the reconsideration, you can apply to the AAT for a review of the reconsideration decision. Any AAT application for review must be lodged in writing no more than 60 days after receiving the result of the reconsideration.

VEA

You may appeal against a determination made under the VEA to the VRB. For any matter relating to whether an injury or disease is service related, your application for review must be lodged in writing with DVA. You may request the Repatriation Commission, or it may exercise its discretion to review its original determination under section 31 of the VEA. A decision under section 31 can be reviewed by the VRB. If you are dissatisfied with the VRB determination, you may then appeal to the AAT.
The following tables provide a comparison of benefits available under the **Veterans’ Entitlement Act 1986** (VEA), the **Safety, Rehabilitation and Compensation Act 1988** (SRCA) and the **Military Rehabilitation and Compensation Act 2004** (MRCA) (current as at 20 March 2008).

### Comparison of benefits: members and former members

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<th>Benefits</th>
<th>VEA</th>
<th>SRCA</th>
<th>MRCA</th>
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<tr>
<td>Compensation for permanent impairment</td>
<td>Disability pension for life, tax-free, with the rate depending on the degree of incapacity.</td>
<td>Up to $200,771.68 tax-free lump sum for permanent impairment and non-economic loss.</td>
<td>Up to $267.83 pw tax-free for life. The rate depends on the degree of impairment and the type of service the member is rendering at the time of injury or disease (peacetime or warlike/non-warlike). This may be converted to an age-based lump sum. In the case of a 30-year old male the weekly amount would convert to a lump sum of up to $350,964.43. This final amount would reduce in the case of an older person. In the case of someone who receives the maximum Permanent Impairment payment, there is also a lump sum payment of $68,949.20 for any dependent children under 16 or between 16 and 25 in full time education.</td>
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<td><strong>Rates</strong></td>
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<td>Special</td>
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<td>Intermediate</td>
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<td>EDA</td>
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<td>General (10% to 100%)</td>
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<td>Benefits</td>
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<tr>
<td>Incapacity for service or work</td>
<td>Loss of Earnings Allowance (LOE) is paid where treatment for an accepted disability, or attending a medical appointment in relation to a disability, results in an actual loss of earnings which has not been compensated from another source. LOE tops up the disability pension to the Special Rate, or, pays the amount of salary, wages or earnings actually lost, whichever is the lesser amount. Temporary Incapacity Allowance (TIA) is paid where hospital or institutional treatment has resulted in an incapacity for work for a period of at least 28 days. TIA tops up the disability pension to the Special Rate. Note: Both LOE and TIA payments are offset by the fortnightly equivalent of any lump sum received under the SRCA regardless of whether that lump sum was for a VEA accepted disability or not.</td>
<td>Weekly, taxable, incapacity payments for loss of earnings at 100% of normal weekly earnings reducing to 75%, after 45 weeks in receipt of incapacity payments. Payments cease at age 65</td>
<td>Weekly, taxable, incapacity payments for loss of earnings paid at 100% of normal earnings reducing to a minimum of 75% after 45 weeks of incapacity payments after discharge. Payments cease at age 65. In the case of more seriously injured, the person may choose to receive a tax-free SRDP of $485.25 per week instead of incapacity payments and Permanent Impairment payments, payable for life. The SRDP is reduced by any permanent impairment payments. [Note: Incapacity payments made to injured ADF personnel will reflect the ADF pay allowances received at the time they suffered their injury or contracted their disease. In the case of personnel deployed on peacekeeping or peace-enforcement operations this will include allowances such as hardship, sea-going etc]</td>
</tr>
<tr>
<td>Attendant Allowance</td>
<td>Paid in cases of service accepted multiple amputations, blindness, disease affecting the cerebro-spinal system or a condition accepted as being similar in effect or severity. $66.05 pw (low) $132.25 pw (high)</td>
<td>Reimbursement of up to $365.03 pw for the cost of a personal attendant reasonably required as a result of the accepted conditions.</td>
<td>Reimbursement of up to $379.22 pw for the cost of a personal attendant reasonably required as a result of the accepted conditions.</td>
</tr>
<tr>
<td>Household Services</td>
<td>Low level domestic support services according to assessed need (Gold Card) or assessed need related to accepted disability (White Card). Up to 15 hours per year of garden maintenance (safety related only) and home maintenance.</td>
<td>Reimbursement of up to $365.03 pw for the cost of household service reasonably required as a result of the accepted conditions.</td>
<td>Reimbursement of up to $379.22 pw for the cost of household service reasonably required as a result of the accepted conditions.</td>
</tr>
<tr>
<td>Benefits</td>
<td>VEA</td>
<td>SRCA</td>
<td>MRCA</td>
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<tr>
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</tr>
<tr>
<td>Vehicle Purchase, Modification</td>
<td>Vehicle Assistance Scheme including up to $39,810 for a new vehicle</td>
<td>Reasonable cost of any modifications to the vehicle, which are</td>
<td>Reasonable cost of any modifications to the vehicle, which are</td>
</tr>
<tr>
<td>and maintenance</td>
<td>(only available to certain amputees, complete paraplegics, or</td>
<td>reasonably required as a result of accepted injury or disease.</td>
<td>reasonably required as a result of accepted injury or disease.</td>
</tr>
<tr>
<td></td>
<td>someone who has a condition accepted as being similar in effect and</td>
<td>Assistance to purchase a new or second hand vehicle may be provided</td>
<td>Assistance to purchase a new or second hand vehicle will be</td>
</tr>
<tr>
<td></td>
<td>severity to certain amputees).</td>
<td>for someone whose vehicle cannot be modified or who does not own a</td>
<td>provided for someone whose vehicle cannot be modified or who does</td>
</tr>
<tr>
<td></td>
<td>Modifications necessary for accepted disabilities.</td>
<td>vehicle, and will derive real benefit from the vehicle.</td>
<td>own a vehicle, and will derive real benefit from the vehicle.</td>
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<tr>
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<td>Maintenance allowance towards running costs</td>
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<tr>
<td></td>
<td>$1,835.20 pa.</td>
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</table>
Comparison of benefits: health, treatment and rehabilitation

<table>
<thead>
<tr>
<th>Benefits</th>
<th>VEA</th>
<th>SRCA</th>
<th>MRCA</th>
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<tbody>
<tr>
<td>White Card</td>
<td>Yes—for the treatment of accepted disabilities only and some other disabilities as per ss 85(2) and 88A.</td>
<td>Reimbursement for medical expenses reasonably required as a result of accepted injury or disease.</td>
<td>Ongoing medical expenses arising from the accepted medical condition will be met through either: • Payment of expenses, or • Provision of a White Card.</td>
</tr>
<tr>
<td>Gold Card</td>
<td>• Gold Card—if receiving a disability pension at or above 100% of the General Rate, or 50% disability pension and any amount of service pension, or 70 years of age with qualifying service (warlike).</td>
<td>Reimbursement for ongoing medical expenses reasonably required as a result of accepted injury or disease.</td>
<td>Gold Card—if permanent impairment rating of 60 or more impairment points, or if eligible to choose to receive the SRDP. Gold Card—to widowed spouse where • Death is service caused, • The member was eligible to choose to receive the SRDP at time of death, • The member suffered a permanent impairment of 80 or more impairment points at the time of death Gold Card to dependent child of deceased member, under 16 or between 16 and 24 in full time education of deceased member where • Death is service caused, • The member was eligible to choose to receive the SRDP at time of death, • The member suffered a permanent impairment of 80 or more impairment points at the time of death</td>
</tr>
<tr>
<td>Pharmaceutical Allowance</td>
<td>Yes, for holder of a treatment card. $2.90 pw.</td>
<td>No allowance, but the cost of all reasonable pharmaceuticals is reimbursed for accepted conditions.</td>
<td>Yes, for holder of a treatment card. $2.90 per week</td>
</tr>
<tr>
<td>Benefits</td>
<td>VEA</td>
<td>SRCA</td>
<td>MRCA</td>
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<tr>
<td>Cost of attendance for medical treatment</td>
<td>Reimbursement of travel allowance at specified rates.</td>
<td>Reimbursement of travel and/or accommodation at specified rates for travel in excess of 50km return.</td>
<td>Reimbursement of travel and/or accommodation at specified rates for travel in excess of 50km return.</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>Veterans’ Vocational Rehabilitation Scheme—limited in scope to vocational rehabilitation and return to work assistance.</td>
<td>All rehabilitation required or deemed appropriate to return the person to their best possible functioning in their home and their work life.</td>
<td>All rehabilitation required or deemed appropriate to return the person to at least the same physical and psychological state and at least the same social, vocational and educational status as he or she had before the injury or disease.</td>
</tr>
<tr>
<td>Home modification</td>
<td>Limited availability under some DVA programs.</td>
<td>Alterations to the home that are reasonably required due to the person’s accepted injury or disease.</td>
<td>Provide through rehabilitation, alterations to the home that are reasonably required due to the person’s accepted injury or disease.</td>
</tr>
<tr>
<td>Aids and appliances</td>
<td>Appropriate aids and appliances according to assessed clinical need (gold card) or accepted disability (white card) or work related aids and appliances under the Veterans’ Vocational Rehabilitation Scheme (VVRS).</td>
<td>All reasonable cost of aids and appliances reasonably required as a result of the person’s accepted injury or disease.</td>
<td>All reasonable cost of aids and appliances reasonably required as a result of the person’s accepted injury or disease.</td>
</tr>
<tr>
<td>Workplace modifications</td>
<td>Under Veterans Vocational Rehabilitation Service.</td>
<td>All reasonable costs for necessary alterations requested as a result of the client’s accepted condition.</td>
<td>Provided through rehabilitation program. All reasonable costs for necessary alterations.</td>
</tr>
<tr>
<td>Compensation for loss of, or damage to, property used by employee where employee is NOT injured</td>
<td>No</td>
<td>Reimbursement of the cost of replacing or repairing property used by the employee which was lost or damaged as a result of an accident arising out of and in the course of employment, but in which the employee was not injured. For example, the cost of replacing glasses broken in a scuffle during the apprehension of a person where the employee was not injured.</td>
<td>Reimbursement of the cost of replacing medical aid or appliance used by the employee which was lost or damaged as a result of an accident arising out of and in the course of employment, but in which the employee was not injured. For example, the cost of replacing glasses broken in a scuffle during the apprehension of a person.</td>
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</table>
### Comparison of benefits: benefits for dependants

<table>
<thead>
<tr>
<th>Benefits</th>
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<tr>
<td>Widow(er)’s benefits</td>
<td>$291.20 pw tax-free war widow(er)’s pension payable fortnightly for life in respect of death due to service.</td>
<td>Up to $219,023.62 tax-free lump sum (shared with child dependents, if any, but minimum of 75% to spouse). Payment under the Defence Act 1903 of $263,184.20 (less the amount payable under the SRCA).</td>
<td>$291.20 pw tax-free for a wholly dependent partner of a deceased member. The partner may elect to convert the payment to an age based lump sum An additional age-based lump sum is provided where the death is service caused. A widow or widower would be eligible for $114,915.33 up to the age of 40. The total lump sum reduces thereafter.</td>
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<td>Up to $81.60 pw additional income support supplement (means tested).</td>
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<td></td>
<td>Gold Card for life</td>
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<tr>
<td>Dependant children benefits</td>
<td>Forthnightly orphans pension (if war/service caused death of parent). Conditions apply if child is over 16 years of age—e.g. not eligible if receiving education benefits. $40.40 pw if service parent deceased $80.75 pw if both parents deceased Gold card while in full time education</td>
<td>Dependant child benefit $65,796.06. $72.98 pw (while under 16 yrs of age or between 16 and 25 years of age and in full time education).</td>
<td>$68,949.20 tax-free lump sum payment for each dependent child under 16 or between 16 and 25 if in full time education. $75.84 pw (while under 16 years or between 16 and 25 if in full time education).</td>
</tr>
<tr>
<td>Benefits</td>
<td>VEA</td>
<td>SRCA</td>
<td>MRCA</td>
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</table>
| Children’s Education benefits          | Veterans’ Children Education Scheme (VCES) benefits (non-means tested) for eligible children of certain severely disabled members or members whose death has been accepted as service-caused. VCES has various rates of education allowances:  
  - Primary education rate of $214.10 per year.  
  - Secondary/Tertiary rates range from $22.00 pw for a student aged under 16 and living at home up to a maximum $177.70 pw for those aged 16 to 25, who are forced to live away from home for educational purposes (based on Centrelink Youth Allowance rates for those aged 16 and over.) | No—would have to apply for Youth Allowance through Centrelink. Youth Allowance rates and VCES rates are identical for students aged 16 years and over. | Military Rehabilitation and Compensation Act Education and Training Scheme (MRCAETS) for dependant children of severely injured members or deceased members where:  
  - The member’s death is accepted as service caused,  
  - The member is eligible to choose to receive the SRDP at time of death, or  
  - The member suffers a permanent impairment of 80 or more impairment points  
  MRCAETS has various rates of education allowances:  
  - Primary education rate of $214.10 per year.  
  - Secondary/Tertiary rates range from $22.00 pw for a student aged under 16 and living at home up to a maximum $177.70 pw for those aged 16 to 25, who are forced to live away from home for educational purposes (based on Centrelink Youth Allowance rates for those aged 16 and over.) |
| Funeral Benefit                        | Yes, for service caused death. Reimbursement up to $2,000. Also, automatic grants of funeral benefit of $2,000 to the estates of certain deceased veterans. | Yes, where death due to service or to a service related medical condition. $9,297.00 | Yes, where death is due to service or to a service related medical condition. $9,297.00 |
| Bereavement payment (Disability Pension)| Deceased person’s disability pension continues for 6 fortnights if there is a surviving spouse. | No.                                        | The following payments continue for 6 fortnights if there is a surviving spouse or dependent child:  
  - Weekly permanent impairment payments  
  - Incapacity payments  
  - SRDP |

Bereavement payment (Disability Pension)
<table>
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<tr>
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<th>MRCA</th>
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</thead>
<tbody>
<tr>
<td>Financial Advice</td>
<td>No.</td>
<td>$1,315.99</td>
<td>$1,378.98 for member offered the choice between SRDP and weekly incapacity payments and permanent impairment payment.</td>
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<td></td>
<td>$1,378.98 for member who has permanent impairment of 50 or more impairment points.</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>$1,378.98 for wholly dependant partner when offered choice between weekly payment or conversion of that payment to a lump sum.</td>
</tr>
</tbody>
</table>
Veterans and Veterans Families Counselling Service

Veterans and Veterans Families Counselling Service (VVCS) is a specialised, confidential service that provides nation-wide counselling and support to Australian veterans, peacekeepers, their families and eligible ADF personnel. VVCS can help you work through issues that are directly related to your service as well as lifestyle issues that affect your health and wellbeing.

VVCS Services include:

- individual, couple and family counselling
- after-hours telephone crisis counselling
- group programs including lifestyle management programs
- referral to other services
- information and education.

Contact VVCS by calling 1800 011 046.

During business hours—connects you to the nearest VVCS centre. There are 15 centres located across Australia.

After business hours—connects you with Veterans Line, the after-hours telephone crisis counselling service.
Veterans Vocational Rehabilitation Scheme

The Veterans Vocational Rehabilitation Scheme (VVRS) can assist members moving to civilian employment or ex-members who want to increase their hours of employment or want to return to paid work or feel they are at risk of losing their job or are having difficulty maintaining their job. Benefits may include assistance with job seeking, interview skills, vocational guidance and retraining.

Personnel deployed overseas before 1 July 2004 may be eligible for assistance, regardless of whether they receive a pension or other entitlements from DVA.
Defence Services Homes Scheme

The Defence Service Homes Scheme (DSH) provides subsidised housing loans, home support loans and associated insurances to eligible ADF personnel, veterans and their dependants.

For loan enquiries, phone freecall 1800 722 000 or email vic.dshsubsidy@dva.gov.au.

For insurance phone 1300 552 662 or email insurance@dva.gov.au.
How to contact DVA

DVA staff visit most major ADF bases and appointments can be made through Defence Health Services or the Transition section.

For information, please call (from anywhere in Australia): **133 254**

Callers from regional Australia can call: **1800 555 254**

If you wish to call DVA in another State, please call: **1300 131 945**

<table>
<thead>
<tr>
<th>State</th>
<th>Address</th>
<th>Postal address</th>
</tr>
</thead>
<tbody>
<tr>
<td>New South Wales</td>
<td>Centennial Plaza Tower B</td>
<td>GPO Box 3994</td>
</tr>
<tr>
<td></td>
<td>280 Elizabeth Street</td>
<td>Sydney NSW 2001</td>
</tr>
<tr>
<td></td>
<td>Sydney NSW 2001</td>
<td></td>
</tr>
<tr>
<td>Victoria</td>
<td>300 Latrobe Street</td>
<td>GPO Box 87 A</td>
</tr>
<tr>
<td></td>
<td>Melbourne VIC 3000</td>
<td>Melbourne VIC 3001</td>
</tr>
<tr>
<td>Queensland</td>
<td>Bank of Queensland Centre</td>
<td>GPO Box 651</td>
</tr>
<tr>
<td></td>
<td>259 Queen Street</td>
<td>Brisbane QLD 4001</td>
</tr>
<tr>
<td>South Australia</td>
<td>Blackburn House</td>
<td>GPO Box 1652</td>
</tr>
<tr>
<td></td>
<td>199 Grenfell Street</td>
<td>Adelaide SA 5001</td>
</tr>
<tr>
<td>Western Australia</td>
<td>AMP Building</td>
<td>GPO Box F352</td>
</tr>
<tr>
<td></td>
<td>140 St Georges Terrace</td>
<td>Perth WA 6001</td>
</tr>
<tr>
<td>Tasmania</td>
<td>21 Kirksway Place</td>
<td>GPO Box 481 E</td>
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<tr>
<td></td>
<td>Cnr Gladstone Street</td>
<td>Hobart TAS 7001</td>
</tr>
<tr>
<td>Northern Territory</td>
<td>Ground Floor</td>
<td>GPO Box 3374</td>
</tr>
<tr>
<td></td>
<td>Civic Plaza Building</td>
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</tr>
<tr>
<td></td>
<td>2 Chung Wah Terrace</td>
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</tr>
<tr>
<td>Australian Capital</td>
<td>Lovett Tower</td>
<td>PO Box 21</td>
</tr>
<tr>
<td>Territory</td>
<td>13 Keltie Street</td>
<td>Woden ACT 2601</td>
</tr>
<tr>
<td>Townsville</td>
<td>150 Walker Street</td>
<td>PO Box 2050</td>
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<td></td>
<td>Townsville QLD 4810</td>
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