

WORK INJURY COMPENSATION (WICA) CLAIM PROCESS

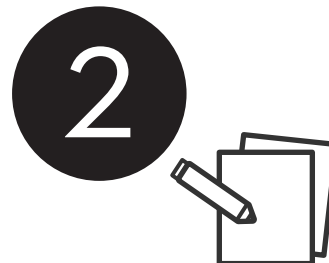


3A/5A Aliwal Street
Chenn Leonn Building
Singapore 199896
+65-67426766 (O)
+65-85331766 (H)
info@tib.com.sg



Report

Report the accident to
Tan Insurance Brokers Pte Ltd
via email: claims@tib.com.sg



Documentation

Prepare all the required
documents (as below)
to be submitted



Claim Submission

Submit completed claim
form and documents to:
Tan Insurance Brokers Pte Ltd
3A/5A Aliwal Street
Chenn Leonn Building
Singapore 199896



Claims Enquiries

Ms Tan Yen Huan (Ext: 125)
yenhuan@tib.com.sg
Mr Vince Pang (Ext:130)
vincepang@tib.com.sg

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Dear Sir/ Madam,

When a claim arises, we understand that you will be very much concerned on how to go about submitting a claim. We understand that this would be a challenging period for you and we stand by ready to assist you to ensure the process is less painful.

You may refer to the following link to understand more about Ministry of Manpower position on Work Injury related claims and the changes. While the worker is injured in course of employment and unfit for work please kindly ensure that you continue to pay medical leave wages & medical expenses to the injured worker and thereafter seek reimbursement from the insurer (We will assist you in this).

<http://www.mom.gov.sg/workplace-safety-and-health/work-injury-compensation>

Please be advised that as an employer these are the following that you will be required to do:

- Report the accident to MOM and us (the insurance broker)
- Report a work-related accident to MOM if one of the following applies:
 - It results in the death of an employee.
 - The employee has to take more than 3 days of MC (whether consecutive or not).
 - The employee was hospitalised for at least 24 hours.

In addition, we require the following standard documents to be submitted:

- Original completed claim form
- Ireport, if applicable
- Police report / internal incident report, if applicable
- NRIC/work permit
- Payslips for the past 12 months before the accident (e.g. if the accident happened in May 2015, insured has to submit the payslips from May 2014 to April 2015)
- Inpatient discharge summary/medical report/doctor's memo/referral letter/radiology report, whichever applicable
- Original medical bills
- Original medical certificate
- Contract agreement between the main-con and sub-con (for project-related accident)
- Toolbox meeting record/attendance sheet/punch card on the accident date (for project-related accident)
- Additional info/documents may be required on case by case basis and subject to the respective claims handler

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If you are acting as a sub-contractor and your worker meets with an accident at the project site of the main contractor, you will then be required to report the case to the main contractor and ensure that the main-contractor's project insurer is taking up the claim. In the event that the main contractor do not agree to do so, please kindly contact us for assistance. Likewise if you are the main contractor, please notify us of the potential claim that will come in unless you have supporting documents to decline that claim.

After MOM has assessed the claim, they may issue a medical report form for employers to send the injured worker for medical assessment for potential Permanent Incapacity (PI). The completed medical report will be sent directly from the hospital/clinic to MOM. MOM will issue a Notice of Assessment (NOA) for the compensation amount to 3 parties (employer, employee & insurer) upon receiving the medical report. If there is no objection received from either party within the stipulated timeframe, insurer will have to issue a PI cheque made in favour of the injured worker.

If there is objection, it will be important for you to know the reason and to see if you are agreeable to that. If the matter has turned to common law case, you are requested to forward us the LOD/Writ of Summons IMMEDIATELY upon recipient. Insurer would reserve their right under the policy when such document are not submitted to them promptly. Common law occurs when the worker is not satisfied with the compensation amount.

The typical processing time of a WICA claim maybe three to six months depending on the number of medical bills submitted and the follow up required. In cases of common law, where the worker do not agree with MOM's notice of assessment, the process may typically take up three years to resolve.

Alternatively, if you require further clarifications or have other enquiries please do not hesitate to contact:

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vincepang@tib.com.sg

Ms Tan Yen Huan
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