Weekly payment reimbursement request

WorkCoverSA
Better together

Government of South Australia

USE ONE FORM PER WORKER Please contact your case manager if you have any queries when completing this form

Name of employer (as per registration) _____

Employer ABN ☐☐ ☐☐☐ ☐☐☐ ☐☐☐ WorkCover registration no. _____ Location no. ☐☐☐☐

Worker's name	Claim no.	Date of injury	Notional weekly earnings (NWE)*	Normal hours worked per week

Details of worker earnings and hours of paid employment

Week starting (Note 1)	Week ending (Note 1)	No earnings (Note 2)	Earnings from paid employment (Note 3)	Hours worked (Note 4)
		☐		
		☐		
		☐		
		☐		
		☐		

Notes:

1. Each week must start on a Sunday and end on a Saturday - the Sunday is to be recorded in column 1 of the table above and the Saturday in column 2. Only record one week per line.
2. Only tick this box if the worker did not perform any work for you during the week.
3. Only include amounts paid for work performed in your employment by the worker. The amount of reimbursement will be calculated for you. Any payment, allowance or benefit related to annual leave, sick leave or other leave paid to the worker must not be included in the 'earnings from paid employment' column.
4. Only include hours for work performed in your employment.

* Weekly rate determined for workers compensation. Examples can be found on the back of this form.

I declare that weekly payments of income maintenance have been paid to the worker in accordance with the *Workers Rehabilitation and Compensation Act 1986*, and that I have read the conditions of reimbursement printed below.

_____
Signature of authorised officer of employer

Date _____ / _____ / _____

Conditions of reimbursement

1. Evidence of payment/pay records must be attached.
2. WorkCover will only reimburse income maintenance payments which the worker was legally entitled to receive. **It is the employer's responsibility to ensure** (by obtaining a written authorisation from WorkCover or the claims agent) **that the worker was entitled to receive a particular payment of income maintenance.**
3. WorkCover has the right, having paid a reimbursement of income maintenance, to recalculate an employer's past, present or future levy rate.
4. By making a claim for reimbursement the employer warrants that all of the details provided in the reimbursement claim are true, accurate and complete. A failure to report all claims and costs with an intent to affect the levy payable by an employer may amount to a breach of section 120 of the *Workers Rehabilitation and Compensation Act 1986*.

AGENT OFFICE USE ONLY Date actioned _____ / _____ / _____ Signature/authorised _____

Examples

Additional copies of this form are available on WorkCover's website **www.workcover.com** or by contacting the Service Centre on **13 18 55**.

No return to work during period - NWE = $1000

Week starting (Note 1)	Week ending (Note 1)	No earnings (Note 2)	Earnings from paid employment (Note 3)	Hours worked (Note 4)
11/4/2011	17/4/2011	X	$0	
18/4/2011	24/4/2011	X	$0	
25/4/2011	1/5/2011	X	$0	
2/5/2011	8/5/2011	X	$0	
9/5/2011	15/5/2011	X	$0	

Employer entitled to be reimbursed = $5000.00

Partial return to work during period - NWE = $1000

Week starting (Note 1)	Week ending (Note 1)	No earnings (Note 2)	Earnings from paid employment (Note 3)	Hours worked (Note 4)
11/4/2011	17/4/2011	☐	$375	15
18/4/2011	24/4/2011	☐	$500	20
25/4/2011	1/5/2011	☐	$450	18
2/5/2011	8/5/2011	☐	$500	20
9/5/2011	15/5/2011	☐	$500	20

Employer entitled to be reimbursed = $2675.00

Partial return to work and No return to work during period - NWE = $1000

Week starting (Note 1)	Week ending (Note 1)	No earnings (Note 2)	Earnings from paid employment (Note 3)	Hours worked (Note 4)
11/4/2011	17/4/2011	X	$0	
18/4/2011	24/4/2011	X	$0	
25/4/2011	1/5/2011	☐	$375	15
2/5/2011	8/5/2011	X	$0	
9/5/2011	15/5/2011	☐	$250	20

Employer entitled to be reimbursed = $4375.00

Partial return to work during period and two days of annual leave in week two - NWE = $1000

Week starting (Note 1)	Week ending (Note 1)	No earnings (Note 2)	Earnings from paid employment (Note 3)	Hours worked (Note 4)
11/4/2011	17/4/2011	☐	$500	20
18/4/2011	24/4/2011	☐	$500	20
25/4/2011	1/5/2011	☐	$100	4*
2/5/2011	8/5/2011	☐	$500	20
9/5/2011	15/5/2011	☐	$500	20

*Worker also received a payment for leave from the employer

Employer entitled to be reimbursed = $2900 (notional weekly earnings – earnings from paid employment, paid leave is disregarded)