

Dear Abbie, Claire, Jason and Richard,

As you are all aware my older brother Anthony Sheedy as an intellectual disability and I found Anthony after 40 years apart.

Warren and I pay all his finances, arrange his medical and dental appointments, basically look after him from Sydney as best we can

We do not get a carer's allowance because we live interstate.

We are NOT quibbling about the lack of a carer's allowance.

My email to you tonight is a letter which arrived for Anthony Sheedy from the Australian Government -Medicare Australia informing Anthony that about his role and his responsibilities regarding his compensation claim.

Anthony has put in a claim with Angela Sdrinis of Ryan, Carlisle and Thomas Vic. As Victoria has no redress scheme. This is the only option for him to seek justice.

He has NOT been offered any compensation/redress from either the Victorian State Government or the Christian Brothers.

Can someone please explain to me why Anthony is receiving this letter when he has not been given any compensation as yet ?

Anthony has suffered enough deprivation, abuse and use in his childhood, which has impacted his whole adulthood.

He has hardly been to a Doctor in his 68 years of life, he never felt entitled to go to get his medical and dental needs assessed and looked after. He was also frightened of doctors.

He has probably been to the Dr's more times in his whole lifetime since we met each other in the last 8 years as we have taken him to our Dr in Sydney and now recently we have found a wonderful caring Dr in Geelong where Anthony lives.

So if in the future he is given some form of compensation for the abuse, neglect and suffering he endured as a State Ward of Victoria, then the Federal government wants a refund for any medical expenses he incurred to alleviate the effects of the abuse and use while supposedly in the care of the Catholic Church and Victorian State government.

Why should any Care Leaver have to repay the Federal government for any medical expenses to do with their abuses.

I find it highly offensive to receive this letter in the post from the Australian Government prior to any settlement and I find it also offensive to repay Anthony's medical expenses to do with the damages he suffered a child under the so called care of the Victorian Government and Catholic Church.

The Victorian Government and the Churches and Charities should be held accountable and if anyone should repay Medicare then the Churches and Charities and State Governments combined should be required to repay the federal government.

Perhaps the Australian Government could send a letter to both the Victorian Government and the Catholic church and remind them of their role and responsibilities in the sad outcome of my brother's life.

When some adventurer on the high seas requires Australian rescue services, at considerable cost to Australian Taxpayer we do not expect the adventurer to repay the full cost of the rescue even though these people put themselves in jeopardy.

This Health and Other Services (Compensation) ACT 1995 which affects thousands of marginalised, disadvantaged and socially excluded Australian battlers needs to be amended asap.

All Care Leavers should be exempt from this legislation as a special needs area.

By the way ,I am aware of other care leavers getting these same letters from Medicare Australia.

I look forward to your response.

Thank you for all your support to the Clannies

Best wishes and Hooroo

Leonie Sheedy

CLAN.



Australian Government  
Medicare Australia

If not delivered return to GPO Box 2436 Brisbane QLD 4001

18 June 2010

Phone: 132 127  
(Call charges apply)

033 1446  
ANTHONY J SHEEDY

Dear ANTHONY J SHEEDY

**Important information on your compensation claim**

I understand that you have lodged a compensation claim.

This letter and attached information sheet provide you with information to help you understand our role and your responsibilities in this matter.

If compensation of more than \$5,000 is set the *Health and Other Services (Compensation) Act 1995* requires that the Australian Government be reimbursed for any Medicare benefits, nursing home benefits or residential care subsidies paid in relation to the claim.

If you wish to discuss your case please call us on **132 127** and ask to speak to a compensation supervisor. Alternatively you can write to the address below or email **compensation.recovery@medicareaustralia.gov.au**. For general information about compensation recovery you can visit **www.medicareaustralia.gov.au**

Yours sincerely

[Redacted signature and address block]

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Run No 979  
CP003K



## **Medicare Australia and your compensation claim**

### ***What is a compensation payment?***

A compensation payment is a sum of money paid to compensate a person who has been injured or suffered an illness due to negligence or lack of care by another person. The payment is usually made by an insurance company but can be made by an individual or a company.

### ***Who advises Medicare Australia about my compensation claim?***

By law, the compensation payer (usually the insurance company) must tell Medicare Australia when a claim for compensation reaches judgment or settlement and the value of that judgment or settlement is set at more than \$5,000 (including all costs).

Medicare Australia is not required to be notified of claims that are set at less than \$5,000 (including all costs).

### ***Why is Medicare Australia involved?***

When you suffer an injury or illness, you are usually entitled to Medicare benefits, nursing home benefits and residential care subsidies. However, when your injury or illness is the subject of a compensation claim and you subsequently receive compensation, this compensation should cover the full cost of your treatment.

To ensure that no "double dipping" occurs, the Australian Government is entitled to recover the cost of those benefits and subsidies it has paid in relation to your injury or illness under the *Health and Other Services (Compensation) Act 1995* (the Act).

Medicare Australia administers the Compensation Recovery Program under the Act and is therefore responsible for recovering the above benefits and subsidies paid to a claimant on behalf of the Australian Government.

### ***Can I claim Medicare if I have a compensation claim?***

Yes. If you have been injured, for example at work, in a car accident or as a result of the negligence of another person, you can claim Medicare benefits for the treatment of your injury or illness. Your doctors can direct bill Medicare or give you an account to take to a Medicare office.

### ***Will my compensation payment affect my future claims for Medicare benefits?***


No. After your claim has been finalised you will have the same entitlement to claim Medicare benefits as you had before your injury or illness.

### ***What if the insurer accepts liability?***

If a compensation payer accepts liability for your injury or illness and agrees to pay your medical expenses, all medical accounts should be directed to the compensation payer for payment.

### ***What should I do before I settle my claim for compensation?***

It is suggested that you identify the amount of benefits or subsidies to be repaid before you accept a settlement, as the amount due to Medicare Australia will be deducted from your compensation payment.



***How do I know how much I may need to repay to the Australian Government once my claim settles?***

If you would like to know the amount to be repaid before your case reaches judgment or settlement, you, your solicitor or the compensation payer should request that your Medicare history statement be sent to you by Medicare Australia. The Medicare history statement is a list of the services for which a Medicare benefit has been paid since the date of your injury or illness. From this list you can determine the amount that you will need to repay Medicare Australia, if any.

For information on how to get your Medicare history statement, please call 132 127.

**Note:** No matter who requests your Medicare history statement, it will be sent directly to you (unless you authorise Medicare Australia to send it to a third party, for example your solicitor).

Once you have received your Medicare history statement you will need to identify each service that relates to your injury or illness. You will also receive a statutory declaration with your Medicare history statement asking you to declare if you received nursing home benefits and residential care subsidies relating to your injury or illness. Once you have completed the Medicare history statement and signed the attached statutory declaration, you must return them back to Medicare Australia in the supplied reply paid envelope, within 28 days.

Medicare Australia will assess your returned Medicare history statement and if satisfied that the identified services do relate to your injury or illness, we will issue a Notice of past benefit to the compensation payer: a copy will also be forwarded to you.

The Notice of past benefits will identify the amount, if any, that is required to be repaid to Medicare Australia upon judgment or settlement of your claim. The Notice of past benefits remains valid for a period of six months.

***What if I need more time identify and return my Medicare history statement?***

If you need more time to identify services relating to your injury or illness and to return your Medicare history statement, you can apply for an extension of time by contacting Medicare Australia on 132 127.

However, if your claim reaches judgment or settlement before you are able to return your Medicare history statement, Medicare Australia is unable to grant an extension of time.


***What if Medicare Australia does not agree with my returned Medicare history statement?***

Medicare Australia will review your submitted Medicare history statement to make sure that all services related to your injury or illness have been identified. If Medicare Australia considers the services identified are not substantially correct, we will return the Medicare statement for you to review further.

If Medicare Australia does not receive an amended Medicare history statement by the due date or it believes services relating to your injury or illness have still not been identified, then all services on the Medicare history statement will be Deemed as relating to the injury or illness.

***What does 'Deemed' mean?***

If you do not return your completed Medicare history statement and statutory declaration to Medicare Australia by the due date and you have not been granted an extension, then all services listed on your Medicare history statement will be taken as relating to your injury of illness. This is known as being 'Deemed'.



If your Medicare history statement has been 'Deemed', the amount listed on the Notice of past benefits will be the total value of all services listed. This is the amount that must be repaid upon settlement.

***Your claim has reached judgment or settlement.***

If your claim is finalised by way of judgment or settlement during the six-month period your Notice of past benefit is valid, the compensation payer will:

- send the amount to be repaid to Medicare Australia from the amount of compensation set; and
- send the balance to you

If your claim is finalised and your notice is no longer valid, you can either:

- request a new Medicare history statement to be sent to you so you can identify the services paid since the last Notice of past benefits was issued and return the statement to Medicare Australia. Medicare Australia will then issue a new Notice of charge to the compensation payer; or
- if no Medicare benefits have been paid since the last Notice of past benefits was issued, you can submit a statutory declaration confirming this.

**NOTE:** The compensation payer cannot send you any of the judgment or settlement amount until the Australian Government has been repaid for any past benefits or subsidies you received in relation to your injury or illness.

***What if Medicare Australia isn't notified of your claim until after judgment or settlement has been reached?***

If the amount to be repaid is unknown at the time of judgment or settlement and Medicare Australia has not issued a Notice of past benefits, there are two options you and your solicitor may take:

1. you can request that Medicare Australia issue a Medicare history statement so that you can identify the amount payable, before you are paid compensation; or
2. the compensation payer can choose to make an advance payment to Medicare Australia.

***What is the Advance payment option?***

An Advance payment is a payment made by the compensation payer which is equal to 10% of the total amount of compensation set at judgment or settlement. This is sent to Medicare Australia within 28 days of judgment or settlement, before the amount of past benefits or subsidies previously paid in relation to your injury or illness is known.

By using the Advance payment option, the compensation payer is able to pay the balance of the compensation to you prior to knowing the amount of your past benefits or subsidies. The compensation payer can make an advanced payment when:

- the amount of compensation to be paid is more than \$5,000; and
- there is no valid Notice of past benefit in place

If the amount due to the Australian Government is less than the Advance payment amount, Medicare Australia will refund the balance to you within 28 days of receipt of the Advance payment and completed documents from the compensation payer.

If the amount due to the Australian Government is more than the Advance payment made by the compensation payer, you are responsible for and must pay the difference to Medicare Australia.

***Example***

- you have been awarded \$10,000 in compensation
- the compensation payer sends Medicare Australia an amount of \$1,000 by way of the 10% Advance payment option
- you receive the remaining \$9,000
- you are sent a Medicare history statement to complete





- you return the completed Medicare history statement to Medicare Australia
- If Medicare Australia assesses the amount owed to the Australian Government is for example \$650, Medicare Australia refunds the balance of \$350 ( $\$1,000 - \$650 = \$350$  refund) to you.

OR

- If Medicare Australia assesses the amount owed to the Australian Government is in fact \$1,420, Medicare Australia will retain the \$1,000 Advanced payment and ask you to pay an additional \$420 ( $\$1,000 - \$1,420 = \$420$  debt).

**For more information on Compensation Recovery**

General enquiries: 132 127\*  
TTY: 1800 552 152\*\* (hearing impaired)  
TIS: 13 14 50\* (translating and interpretation service)  
Email: [compensation.recovery@medicareaustralia.gov.au](mailto:compensation.recovery@medicareaustralia.gov.au)  
Internet: [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)  
Write: If the insurer is in the ACT or NSW:

Compensation Recovery Manager  
Medicare Australia  
GPO Box 4104  
Sydney NSW 2001

Fax: (02) 9895 3200

If the insurer is in any other state or territory:

Compensation Recovery Manager  
Medicare Australia  
GPO Box 2436  
Brisbane QLD 4001

Fax: (07)3004 5406

- \* Call charges apply
- \*\* Call charges apply from mobile or pay phones only