



Noise Induced Hearing Loss – Strategic Review

Consultation brief

February 2025

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Purpose of strategic review

Introduction

Noise Induced Hearing Loss (NIHL) has been identified as an issue of concern by stakeholders and ReturnToWorkSA, due to:

- concerns workers are not receiving the standard of services expected under the Return to Work scheme;
- rapid growth in the number of hearing loss claim numbers, costs and disputation in recent years.
- anecdotal information about potentially misleading market behaviour by some service providers;

The purpose of this paper is for ReturnToWorkSA to seek:

1. stakeholder insight and feedback regarding NIHL;
2. stakeholder views and suggestions on possible changes to scheme design for NIHL.

Why is a strategic review being proposed?

Market behaviour, claim numbers and costs relating to NIHL have changed markedly since 2018. At 30 June 2024:

- workers appear to be experiencing marketing strategies that may be misleading and lock-in long-term relationships with providers, with limited ability to choose different providers;
- hearing devices appear to require more frequent repairs and replacement than would ordinarily be expected;
- the proportion of NIHL claims in the South Australian Return to Work scheme has doubled since 2018 and continues to increase;
- 90% of workers with a NIHL claim already have legal representation when they submit their claim (this contrasts with around 10% of workers with other work injuries);
- the independent scheme actuary has increased scheme liability by \$34 million and has forecasted further increases.

Prior to 2018, NIHL claims were considered a small and stable part of the Return to Work scheme. For 30 years (the WorkCover scheme started in 1987), NIHL represented around 6% of claims and 2.3% of claims liability. At 30 June 2024, NIHL claims represents 13% of claims and 5.9% of claims liability (and rising).

Significant changes in market behaviour, claim numbers, cost and disputation have prompted the need for this strategic review and have raised concerns regarding worker experience, quality of services being received, and the extent to which market behaviour and frictional costs may be negatively impacting the receipt of entitlements by workers.

ReturnToWorkSA wishes to better understand the underlying causes of these changes and to identify strategies to ensure workers who suffer NIHL injuries at work receive high-quality services, are treated with dignity and are supported financially, consistent with the objects of the *Return to Work Act 2014* (RTW Act).

Strategic review

The Minister for Industrial Relations and Public Sector has requested a report be provided regarding improvements that could be made to services and support provided to workers with work-related NIHL. In addition, the Minister has asked the Minister's Advisory Committee to assist ReturnToWorkSA with the strategic review. The following central principle will guide the review.

[the strategic review] is not intended to have an adverse impact on the support available to injured workers experiencing NIHL.

Instead, the purpose of the review is to identify potential improvements to the experience of, and delivery to, those injured workers.

(extract from the Minister's letter to the Ministers Advisory Committee, dated 13 August 2024)

Structure of the consultation material

The consultation material consists of this briefing document and a survey.

The briefing document includes the following key sections.

- Hearing loss – an overview
- Prevention and work health safety
- Hearing loss as a work injury
- Hearing loss as a health and work injury concern
- Current ReturnToWorkSA initiatives
- Scheme design
- Strategic review – next steps
- Attachments - a consolidated list of questions, additional statistics and resources.

The questions included in this briefing document are replicated in the survey document.

Stakeholder engagement

Stakeholders are asked to complete the survey online or download the survey and email to stakeholderrelations@rtwsa.com by **9 April 2025**.

An eight-week consultation period has been provided.

The Minister's Advisory Committee for the Return to Work scheme has been asked to assist in the NIHL strategic review, and will be involved in reviewing stakeholder feedback and considering possible changes. More information about the committee can be found at [South Australian Government Boards and Committees Information](#) (see page 108 of the report).

Disclaimer

Reasonable efforts have been made to ensure the information provided in this briefing document (including statistics and anecdotal information) is valid and represents information known by ReturnToWorkSA. Where relevant, the data and categorisation currently recorded in ReturnToWorkSA's information systems have been relied on. Independent file reviews have not been undertaken to verify the statistical or anecdotal information.

External data referred to in this briefing document is accompanied by source references.

Hearing loss – an overview

Introduction

According to the World Health Organization (WHO), by 2050 nearly 2.5 billion people globally are projected to experience some degree of hearing loss, with at least 700 million requiring hearing rehabilitation. This suggests approximately 35% of the world's population will be affected and 10% will need rehabilitation services.

One of the WHO's primary concerns is the hearing health of over one billion young people aged 12-35, who are at risk of hearing loss due to recreational exposure to loud sound. In response, the WHO has prioritised research, established evidence-based standards, and launched awareness campaigns.

Causes of Noise Induced Hearing Loss

Hearing loss can result from a variety of factors, but one of the most common and preventable causes is noise. NIHL is caused by excessive exposure to loud noise which damages the hair cells in the inner ear responsible for hearing and understanding speech and sound. The damage caused by hazardous noise can result in a range of symptoms, including a reduction in hearing ability, tinnitus (ringing, buzzing, or hissing in the ears), and even partial or complete deafness due to inner ear damage. This damage is permanent, irreversible, and often accumulates over time.

NIHL can be caused by:

- acoustic trauma (a one-time exposure to an extremely loud sound);
- repeated exposure to loud sounds;
- vibration (repeated exposure to vibrations from machinery and equipment);
- ototoxic substances (certain chemicals can damage hearing, particularly when combined with noise exposure).

The harmful effects of noise are cumulative. The longer a person spends in a noisy environment or the louder the noise, the higher the risk of permanent hearing loss. A simple rule of thumb is that if someone needs to raise their voice to communicate with a person standing 1-2 metres away, the noise level is likely too loud and could lead to hearing damage over time.

Industry workers often develop a higher threshold for discomfort, meaning they may not perceive a sound as harmful until it reaches a louder volume than what a non-industry worker might find painful. However, this increased discomfort threshold does not reduce the actual damage being done to their hearing—noise remains equally harmful regardless of how it is perceived.

The harmful effects of noise are often not immediately noticeable and tend to develop slowly over time. Many individuals may not recognise symptoms of hearing loss until years after their exposure to excessive noise has ended. Unfortunately, once hearing loss has occurred, there are no current interventions available to reverse the damage.

Beyond hearing loss, prolonged exposure to loud noise has been linked to other health problems, including stress, high blood pressure, and depression. NIHL can make communication and social interactions challenging, increasing the risk of social isolation and reduced quality of life.

Audiologists, audiometrists and appliances in Australia

In Australia, both audiologists and audiometrists play key roles in assessing, preventing, and managing hearing-related issues, including NIHL. Audiologists typically hold a master's degree in

clinical audiology, while audiometrists are trained with diplomas or degrees in audiometry. Neither profession is currently required to register under the Australian Health Practitioner Regulation Agency (AHPRA). Instead, they operate under a self-regulatory framework, with professional standards set by recognised bodies such as Audiology Australia and the Australian College of Audiology.

Workforce Development and Regulation

As part of the national [Roadmap for hearing health 2019](#), efforts are underway to improve the regulatory framework and workforce training for audiologists and audiometrists. In the short term, this involves conducting a national audit of the workforce, training, and skills gaps to better inform future strategies. The sector continues to foster self-regulation, focusing on maintaining high standards while addressing emerging challenges.

Audiology Australia provides a standard of self-regulation for its members (National Competency Standards), based on the standards sets by the National Alliance of Self-Regulating Health Professions. Practitioners are also required to adhere to ethical standards and maintain professional certifications to support safe and effective care for patients.

Commonwealth Government Support

The Department of Health and Aged Care is implementing initiatives aligned with the [Roadmap for hearing health 2019](#) to improve hearing outcomes across the country. This includes partnerships with key stakeholders such as state and territory governments, Services Australia, the National Disability Insurance Agency, the Department of Veterans' Affairs, Hearing Australia, and other hearing service providers.

Through these collaborations, eligible Australians have access to hearing checks, hearing aids, and ongoing care, ensuring comprehensive support for those dealing with hearing-related challenges.

Hearing devices, along with post-fitting support, are critical in maximising long-term hearing outcomes for individuals.

The Australian Government Hearing Services Program provides subsidised hearing services and devices to eligible Australians through two key components:

- Voucher Scheme: A network of over 300 hearing service providers across 3,000 locations offers services to eligible individuals.
- Community Service Obligations (CSO): Hearing Australia provides specialised services for people under 26 years of age, eligible Aboriginal and Torres Strait Islanders, those in remote areas, and individuals requiring specialist care.

Eligible participants in the program can access a range of services, including:

- free hearing tests;
- subsidised or free hearing aids;
- free adjustments and maintenance, with a small annual fee for hearing aid upkeep.

Eligibility for Commonwealth Government Funded Hearing Services

To be eligible for Commonwealth government-supported hearing services, individuals must be Australian citizens or permanent residents and meet specific criteria, such as being:

- Holders of a Pensioner Concession Card, Department of Veterans' Affairs Gold or White Cards, or receiving Sickness Allowance from Centrelink.
- Members of the Australian Defence Force or participants in the National Disability Insurance

Scheme (NDIS) with hearing needs.

People with a work-related NIHL are not eligible for commonwealth funded services, as the work injury scheme funds the necessary cost of services reasonably incurred.

Fees and scale – general population

The costs associated with hearing services and devices in Australia can vary significantly depending on the type of service, device, and provider.

Under the Australian Government Hearing Services Program the fees that can be charged are set out in the Hearing Services Program ([Schedule of Service Items and Fees 2024 – 2025 \(2024\)](#)).

The Australian Government's Hearing Services Program hearing aid fees range from \$463.55 - \$533.65 per aid. These prices appear to be low compared with prices paid by ReturnToWorkSA (currently capped at \$2,020 per hearing aid). This is assumed to be due to wholesale arrangements with suppliers who benefit from the economies of scale of the national program.

Other avenues of support for hearing services and devices include:

- certain hearing services can be bulk billed under the Medicare Benefits Schedule;
- rebates on the cost of hearing aids under private health insurance.

These supports are not available to work injuries as support is provided by the work injury schemes in each jurisdiction (such as ReturnToWorkSA).

Australian Competition and Consumer Commission enquiry¹

In 2017, the Australian Competition and Consumer Commission (ACCC) conducted enquiries with consumers and industry participants relating to the sale of hearing aids.

As a result of these enquiries, three key issues relating to the sale of hearing aids were identified:

1. Sales may be driven by commissions and other incentives rather than consumer need.
2. Cost and performance of hearing aids.
3. Treatment of vulnerable consumers.

The ACCC has communicated directly with industry participants to encourage further consideration of commissions and sales practices in the context of the Australian Consumer Law. The ACCC requested hearing clinic operators review their incentive programs and performance measures to ensure that they do not create a conflict between independent healthcare advice and sales.

Prevalence of hearing loss in South Australia – general population

There is limited information about the prevalence of hearing loss for the general population in South Australia. A proxy is the national hearing loss voucher scheme, noting that vouchers are available to eligible Australians only and each voucher is valid for five years – in 2023-24²:

- 11,104 new vouchers were issued in South Australia (8.5% of the national total);
- 13,224 return vouchers were issued in South Australia (9% of the national total);
- 73,527 clients serviced in South Australia (9.1% of the national total);
- 38,565 subsidised devices fitted, replaced or provided as a spare aid in South Australia (8.8% of

¹ Australian Competition and Consumer Commission, Issues around the sale of hearing aids, 3 March 2017

² Australian Government, Department of Health and Aged Care, Hearing Services Program, Monthly Program Statistics 2023-24

the national total).

In the 2021 Census, the number of people counted as usual residents of South Australia was 1.8 million³ (7% of the nation total⁴).

Work-related work injuries are in addition to this. Information relating to work injuries is included later in this document.

Please note: there are no survey questions relating to this section as it is provided for information purposes.

³ <https://www.abs.gov.au/articles/snapshot-sa-2021>

⁴ <https://www.abs.gov.au/statistics/people/people-and-communities/snapshot-australia/2021>

Prevention and Work Health Safety

Regulatory Requirements

SafeWork SA is South Australia's workplace health and safety regulator. SafeWork SA:

- offers advice and education on work health and safety;
- provides licences and registration for workers and plant;
- investigates workplace incidents;
- enforces the work health and safety laws in South Australia.

Preventing NIHL is a priority in many industries, and effective management of noise exposure is a legal requirement under the *Work Health and Safety Act 2012 (SA)* and its associated regulations. Employers must provide audiometric (hearing) testing for workers who are required to frequently use hearing protection as a control measure for noise that exceeds the exposure standard. Testing is required within the first three months of employment and then every two years to ensure that noise control measures are effective.

Hearing Loss Prevention Resources

To support compliance, South Australia has adopted the *Code of Practice: Managing Noise and Preventing Hearing Loss at Work*, which provides practical guidance for identifying and managing noise risks in workplaces. This code, introduced in February 2024, offers a framework for meeting WHS legislative requirements and ensuring that businesses protect workers from the risks of excessive noise exposure.

There are extensive hearing loss prevention resources available to employers, including those from Safe Work Australia and Hearing Australia. Resources include factsheets, posters, infographics, social media templates, and newsletter materials, all designed to raise awareness and support effective noise prevention and management.

SafeWork SA campaign

In April 2024, SafeWork SA launched a six-month campaign to raise awareness of the risks associated with noisy work environments. The campaign includes compliance audits across 80 South Australian businesses in the construction, manufacturing, transport, mining, dry cleaning, and lift servicing industries (in metropolitan Adelaide and regional South Australia).

The campaign involved conducting compliance audits with a focus on hazardous noise risk management, health monitoring systems and employee training on the risks and correct use of personal protective equipment (PPE).

During the audits, SafeWork SA inspectors assessed how noise was being managed to prevent hearing loss among workers, in accordance with the work health and safety regulations.

SafeWork SA has published the following outcomes from its campaign⁵:

- Common themes identified during the audit were:
 - 'Offering' PPE to workers in circumstances where it should have been mandatory.
 - Only providing audiometric testing as part of a pre-employment activity, with no follow-up.

⁵ <https://www.safework.sa.gov.au/news-and-alerts/news/news/2024/workplace-noise-campaign-delivers-message-loud-and-clear>

- A number of businesses were also incorrectly using spot measures to assess noise hazards when there was a requirement to conduct personal monitoring over a duration of time.
- A total of 32 statutory notices were issued where non-compliance was identified during the audits. The most common reasons for issuing a notice were:
 - Failure to conduct audiometric testing (14).
 - Failure to manage the risk of noise exposure (11).
- At the time of writing, all but one of the improvement notices have been complied with. SafeWork SA is working with the relevant business to reach compliance with the outstanding notice.

ReturnToWorkSA – Insurance Risk Management Program

ReturnToWorkSA has an Employer Risk team in place which works with selected employers to consider hazards and injury management initiatives to reduce work injuries and improve return to work outcomes. ReturnToWorkSA works in collaboration with SafeWork SA and claims agents to ensure employer initiatives are integrated and complement each other, where required.

In response to the rising NIHL claims and costs, ReturnToWorkSA has worked with SafeWork SA by providing data analytics regarding claim and employer data, and collaborating on a webinar for employers.

Questions relating to this section

<i>Prevention and Work Health Safety</i>	
Why important	<ul style="list-style-type: none"> • Initiatives that successfully prevent and manage NIHL exposure are preferred over managing the hearing loss, particularly for the person in maintaining their health and life choices.
Issues to be considered	<ul style="list-style-type: none"> • Based on the SafeWork SA campaign, employers may not have a consistent understanding of their obligations relating to preventing and managing NIHL exposures in the workplace. • There is already an extensive range of material available to employers relating to preventing and managing NIHL. • ReturnToWorkSA’s powers in the work health and safety space are limited to the work it does with individual employers to manage risk to the Return to Work scheme. While ReturnToWorkSA works collaboratively with SafeWork SA, ReturnToWorkSA does not have a regulatory role or state-wide education responsibilities in work health and safety.
Questions	<p>Q1. Are the results from the SafeWork SA campaign consistent with your experience of the level of NIHL awareness and management in the workplace?</p> <p>Q2. What initiatives, if any, should ReturnToWorkSA consider to further support employers to improve the prevention and management of NIHL?</p>

Hearing loss as a work injury

Work injury support for NIHL across Australia

Each work injury scheme in Australia has its own specific provisions relating to NIHL. It is difficult to accurately compare supports because each jurisdiction has its own eligibility criteria, service provision and methods for calculating lump sum payments. In summary:

- around half of the jurisdictions provide both a lump sum payment (for permanent impairment) and compensation for medical expenses and hearing devices. The rest of the jurisdictions just provide a lump sum payment;
- the threshold for receiving a lump sum payment for NIHL is generally 5% or 10% and can be based on either whole person impairment (WPI) or percentage of hearing loss (the South Australian Return to Work scheme has a threshold of 5% WPI).

Further information is available in the comparative document compiled by Safe Work Australia, which can be found at [Comparison of Workers' Compensation Arrangements in Australia and New Zealand 2023 | Safe Work Australia](#).

Work injury support in the South Australian Return to Work scheme

Eligibility

NIHL is included in the Second Schedule of the RTW Act and benefits from the evidentiary presumption specified in section 9(2) of the RTW Act. This presumption dictates that when a worker suffers NIHL and was exposed to noise during their employment under the RTW Act, it is presumed, in the absence of contrary evidence, that the NIHL arose from the employment.

This means, where a worker has been exposed to noise in the workplace, has suffered NIHL consistent with that exposure, and there is no evidence to the contrary, a NIHL claim will be accepted. Additionally, if the worker has sustained a Whole Person Impairment (WPI) of greater than 5%, they are entitled to lump sum compensation for non-economic loss.

Note: if the person is no longer a worker (e.g. retired from employment on account of age or ill-health) and makes a claim for NIHL more than two years after the date of retirement, they do not have the benefit of the presumption in section 9(3) of the RTW Act.

Another specific provision relating to NIHL relates to when the loss is presumed to have occurred. Under the RTW Act:

- the whole of the loss is taken to have occurred immediately before the notice of injury was given (section 188(2)); or
- for a person who has retired from employment on account of age or ill-health, the whole of the loss is taken to have occurred before the person retired (section 188(3)).

Workers do not need to obtain legal representation to lodge a workers compensation claim, obtain required services or seek lump sum compensation.

NIHL claims primarily concern medical expenses and/or lump sum compensation, with income support claims being the exception rather than the rule. This is because, often:

- if already retired, there is no entitlement to income support;
- if still at work, the NIHL does not generally prevent a person from continuing to work as the person has access to a relevant hearing device as part of the claim process.

The focus on funding hearing devices and lump sum compensation is different to most claims within the Return to Work scheme where the main objective is recovery and return to work. This difference may mean that workers with NIHL claims want to interact with the Return to Work scheme in a different way or they may have different service expectations.

Medical expenses covered by the Scheme

ReturnToWorkSA or a self-insured employer will cover the necessary medical costs reasonably incurred in consequence of the work injury. This might include for example:

- audiology and audiometry services;
- services and products;
- replacement of hearing devices, subject to prior written approval from the claims manager;
- binaural hearing packages for workers with compensable hearing loss in both ears.

However, ReturnToWorkSA will not cover:

- non-attendance or cancellation fees;
- services invoiced before they are delivered;
- audiologist or audiometrist travel time;
- pre-payment for services or products that have not been pre-approved;
- services or products already funded by another government program, such as Hearing Services Australia;
- two monaural (of or involving one ear) hearing packages within a 3-month period. Binaural (of or related to both ears) fitting must be used for binaural hearing loss.

Fee schedules, published by the Minister for Industrial Relations in the South Australian Government Gazette, establish the gazetted fees which are the maximum fees chargeable. The fee schedules include policy requirements which outline service expectations established by ReturnToWorkSA.

Although ReturnToWorkSA expects hearing aids to last five years or more, earlier replacement can be funded based on an assessment of need and circumstances. For replacement devices, a completed Request for a Replacement Hearing Aid form must be submitted and approved by the claims manager.

Up to \$2,020 per aid is covered (noting that where there is binaural hearing loss, an aid would be required for each ear, meaning a worker can receive up to a total of \$4,040 towards their hearing aid needs), a fee set based on market research in 2018. This fee has only been increased once, by 1%, since it was introduced in 2018. Audiology Australia has requested annual indexation of this fee to account for changes in wholesale pricing, but ReturnToWorkSA's research suggests the current fee remains adequate to meet the needs of workers in the scheme.

In calendar year 2023, 35% of hearing aids ranged between \$1,215.90 to \$1,980 per aid and 65% between \$2,000 to \$2,020 (the fee schedule maximum) per aid.

Note: The Australia Government's Hearing Services Program hearing aid fees range from \$463.55 - \$533.65 per aid. It is acknowledged that these prices are low due to wholesale arrangements with suppliers.

Please note: there are no survey questions relating to this section as it is provided for information purposes.

Hearing loss as a health and work injury concern

People with NIHL in the South Australian Return to Work scheme

Some statistics relating to people with NIHL in the Return to Work scheme are provided below:

- 70% of people lodging NIHL claims in 2023-24 did so while they were still working, or within two years of their retirement;
- 2,533 hearing loss claims were received in calendar year 2023 (including accepted, rejected, pending and withdrawn);
- Hearing loss claims have escalated significantly since 2018 (further information is provided in the next section).

Additional statistical information is provided in Attachment 2.

Voice of the customer – the worker claim journey in relation to NIHL

In response to the anecdotal information, ReturnToWorkSA engaged an independent research organisation to gain a deeper understanding of the experiences and expectations of workers who have been through the claim process relating to NIHL. 31 one-on-one in-depth interviews were completed with workers who have had experience with NIHL. Telephone interviews were used and most interviews took between 30 and 45 minutes, with some extending to 60 minutes when participants had more to share.

Key findings reported by the researchers are provided below:

- Recognition of NIHL is often a slow process over time, and often highlighted by others. Seeking treatment for NIHL usually involves external influences such as friends, family, colleagues, another medical professional, or seeing an ad on TV or online.
- Workers have low awareness of the RTWSA NIHL scheme and come into the scheme with low expectations, often not seeking financial compensation. What is of utmost importance to workers is improving their hearing to maximise their quality of life and relationships.
- Due to the low awareness of the scheme, the link with RTWSA and this being a claim against their employer isn't always clear. Access to support appears to be positioned by providers as a 'Government pool' of funding that workers are entitled to, which can leave some surprised when an employer becomes involved.
- Workers often enter the scheme through a third-party such as a lawyer or audiologist. Many who use this pathway aren't aware that a claim can be submitted on their own or don't want to have to go through the process themselves.
- Misalignment between expectations set by these third-party organisations and what RTWSA can cover is often what leads to worker dissatisfaction.
- RTWSA can often come off looking like the 'bad guy' because workers perceive that they have not provided what they are entitled to.

- A mix of experiences regarding the claim process, all the way from it being very easy and straightforward to it being extremely difficult and frustrating.
- Satisfaction with the claim process is often linked to how simple, easy and short the process is, how informed workers feel and the level of communication and support throughout.
- The biggest challenges for those who are frustrated with the process relate to the length and complication, as well as a lack of proactive communication and/or listening to the worker.
- From the experiences reported by workers, there does not appear to be a great deal of consistency in terms of what hearing aids are provided (and whether there is a choice or not), when they can be updated, and how batteries are distributed.

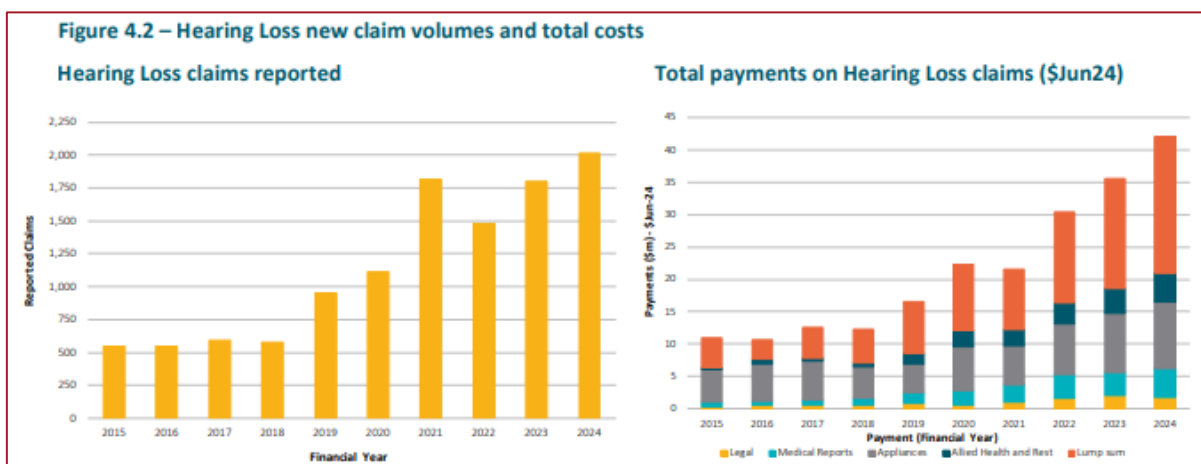
Claim numbers, costs and liability⁶

Hearing loss claims now represent 5.9% of gross claim costs⁷ of the registered scheme, compared to an average of 2.3% of gross claim costs for the accident years 2008 to 2018.

In the 30 June 2024 valuation, the outstanding claims liability was increased by \$34m due to higher NIHL claims volume. The actuary has signaled further increases in liability.

The following graphs are taken from the 30 June 2024 actuarial valuation.

The first two graphs demonstrate the rapid growth in claim numbers and payments that has occurred since 2018.



The increase does not appear to be caused by a generational change (e.g. baby boomers becoming older and submitting claims), it is not geographically based, and the increase does not appear to be slowing.

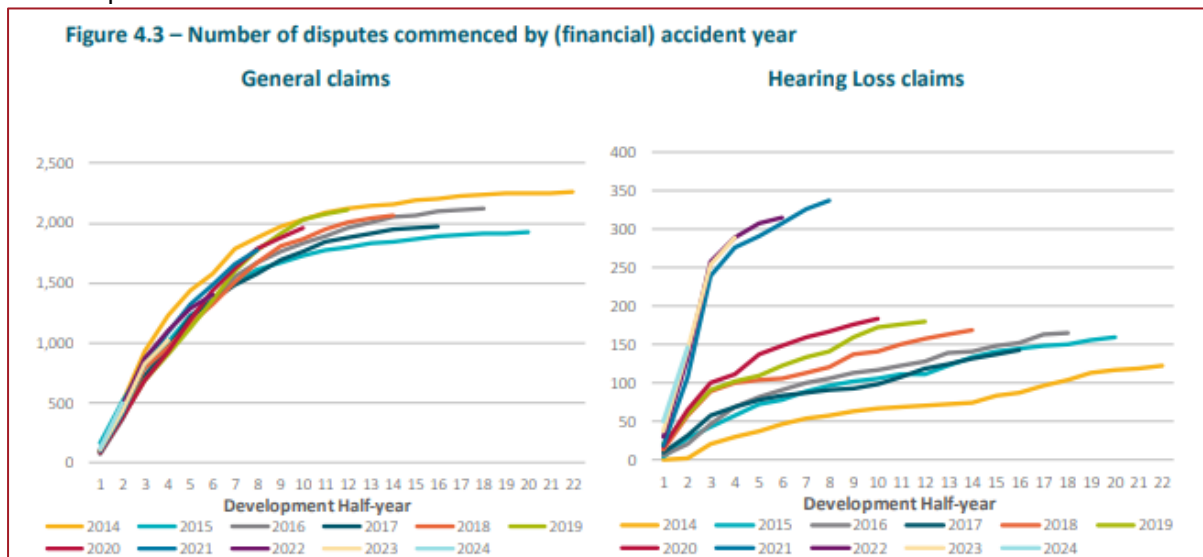
⁶ Discussion relating to claim numbers, cost and liability relates to the registered scheme, which excludes self-insured employers.

⁷ Finity Consulting, Scheme Actuarial Valuation as at 30 June 2024, 30 August 2024 (based on central estimate of \$3,799m gross claim costs and \$227m hearing loss gross claim costs).

Disputation

19.4% of disputes received in 2023-24 were related to NIHL claims, compared with 10.2% in 2017-18 (almost double).

The next two graphs (sourced from the 30 June 2024 actuarial valuation) show the cumulative number of disputes for each accident year since 2014 (showing hearing loss claims separately from other claims). There has been an ongoing increase since 2014, and a further material increase in NIHL dispute numbers since 2021.



Further operational analysis shows:

- 75% of NIHL disputes relate to compensability and a further 20% relate to non-economic loss which, consistent with general claims, makes these two categories the greatest sources of NIHL disputation. There are few disputes relating to income support as NIHL claims do not generally require income support.
- 90% of workers with a NIHL claim already have legal representation when they submit their claim (this contrasts with around 10% of workers with other work injuries).
- 88.8% of NIHL disputes are resolved within the first 11 months of the dispute being lodged, with 2.9% of NIHL disputes lasting more than 25 months or more.
- 41.7% of NIHL disputes are resolved at conciliation (compared with 34.7% for general claims).

Further statistical information is provided in Attachment 2.

Anecdotal information suggests that there is significant disputation about which employer the claim should be made against. This is discussed below.

Impact of NIHL on employer premiums

All registered employers pay an insurance premium to ReturnToWorkSA's insurance premium system based on:

- the remuneration paid to their workers;
- the employer's industry premium rate;
- income support costs paid to their workers (noting this is income support on claims with a date of injury in the last three financial years);
- adjustments using a discount factor and maximum penalties, based on employer size.

The costs associated with NIHL claims do not directly impact an employer's premium calculation. This is because the employer's insurance premium is adjusted by income support costs and NIHL, with appropriate aids in place, does not generally cause incapacity for work. In other words, there is a low proportion of claims for income support for NIHL resulting in less direct impact to employer premium calculation.

Historically, people with work-related NIHL take no time off work. For example, since 2018, there was one accepted claim related to NIHL with income support payments (injury year 2020-21).

From a premium calculation perspective, claim costs other than income support for the last three years, are spread across industries and the scheme.

Adjusting individual employer premiums by income support costs rather than all claim costs is a strategy designed to focus employers on return to work rather than becoming concerned with the extent of medical or other services funded.

Despite the lack of direct impact on the insurance premium for individual employers, a significant proportion of NIHL related disputation is focused on determining which employer the claim should be allocated to.

The employer allocation process is important as it assists in identifying:

- the employer who has the return to work obligation for workers with income support claims (often not relevant to NIHL claims);
- employers and industries with NIHL risk exposures, informing SafeWork SA and ReturnToWorkSA initiatives to prevent and manage work injuries;
- which industries' claim costs should be allocated to, ensuring industry classifications appropriately reflect risk.

The employer disputation process delays the claim acceptance process. Based on the current RTW Act provisions:

- a claim is allocated to a specific employer;
- the employer raises a dispute about the allocation;
- the disputation process occurs and if the employer is removed from the claim;
 - RTWSA rejects the claim based on the nominated employer not being capable of causing noise induced hearing loss or not being the last employer where the worker was exposed to noise.
 - another employer is allocated to the claim (the next employer with whom the worker is considered to have most likely been exposed to noise capable of causing NIHL);
 - that employer has the right to dispute – and if they do so, the disputation process starts again (and again if required);

Anecdotal information

ReturnToWorkSA has received anecdotal information about the way the market related to NIHL has changed in recent years, which includes:

- an increase in mass mailouts, media campaigns and cold calling to identify people with potential work-related NIHL and directing them towards certain hearing and/or legal providers or organisations;
- an increase in:
 - claims agents having to seek more information from legal representatives as an initial

- hearing assessment may not contain all of the required information to properly assess the claim;
- disputation, particularly where additional information requests are not satisfied and the claim is rejected;
- workers having to undertake additional hearing loss assessments to support the eligibility determination process;
- the claim determination process further complicated by interstate employment that may have contributed to the NIHL;
- workers being referred to specific legal firms by the hearing loss service provider, without the worker having a genuine opportunity to choose their own legal representation or understand they do not need legal representation to pursue a work injury claim;
- workers being cold-called to bring hearing devices to NIHL service providers for servicing or replacement;
- hearing devices being replaced more frequently than what would ordinarily be expected;
- use of interstate medical assessment companies to undertake independent examinations remotely (over the phone or via online platform).

Hearing loss providers – Return to Work Scheme

Hearing loss providers

There were 92 service providers who provided audiology services and devices under the Return to Work scheme in the 12 months to 31 December 2023. Services included hearing loss assessments, supply and servicing of hearing aids and replacement of batteries.

Of these providers, 79% of costs associated with audiology services and devices were provided by five providers (5.4% of the 92 providers).

Audiologists and audiometrists involved in the Return to Work scheme must meet specific registration and professional membership criteria to support the provision of high quality services. Audiologists and audiometrists must hold membership with a recognised professional body:

- Full membership with Audiology Australia and a Certificate of Clinical Practice.
- Full/Ordinary or Fellow membership with the Australian College of Audiology.
- Full or Fellow membership with the Hearing Aid Audiometrist Society of Australia (HAASA) for audiometrists.

Service Expectations and Guidelines

As with other service providers providing services in the Return to Work scheme, audiologists and audiometrists funded by the scheme must adhere to the requirements outlined in relevant fee schedules and policies.

This includes:

- qualification requirements for audiologists and audiometrists;
- compliance with practice standards issued by relevant provider associations (e.g. Audiology Australia's Professional Practice Guide);
- disclosure of business relationships (declaring any existing commercial arrangements between

referral sources);

- requirements for assessment, fitting, replacement, and repairs of hearing devices.

Compliance and monitoring for hearing loss providers

ReturnToWorkSA actively monitors compliance with the fee schedule and policies. Anyone found to incorrectly bill for services or who fails to comply with the fee schedule may be required to repay any incorrectly received payments.

Compliance monitoring during 2024 identified:

- a small number of service providers conducting independent medical examinations over the phone;
- increasing frequency for repairs and replacement of hearing devices;
- incomplete information being provided to the claims agent for claim determination and decision-making purposes.

Anecdotal information has suggested:

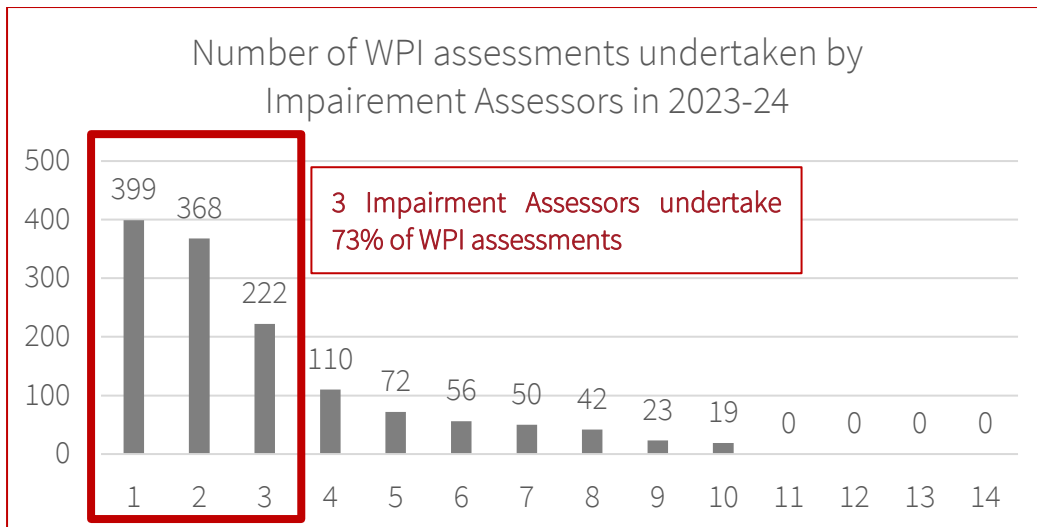
- outcomes from independent hearing assessments vary, resulting in multiple assessments being undertaken;
- hearing loss providers may be referring workers for legal representation, due to a misconception that legal representation is required to make a claim.

Recent changes to the relevant fee schedules have reinforced:

- all services must be delivered face-to-face unless approved in writing by the claims manager for remote fitting, rehabilitation, or adjustments;
- the standards of service required in undertaking assessments;
- the information required to support claim determination and decision-making.

Whole Person Impairment (WPI) assessments:

- WPI assessments are completed by accredited assessors. Assessors are accredited by the Minister for Industrial Relations and Public Sector, consistent with the arrangements described in the Impairment Assessor Accreditation Scheme (IAAS). An individual is accredited, not an organisation.
- NIHL WPI assessments need to conform to the requirements outlined in the Impairment Assessment Guidelines (IAGs).
- There are 14 assessors accredited to complete a NIHL WPI assessment. Of these 14 assessors, only 3 undertake 73% of WPI assessments.



- WPI assessment quality concerns identified from compliance monitoring include:
 - Large quantities of assessments being completed in a single day.
 - Incomplete or unclear evidence in the WPI report.

Questions relating to this section

<i>Hearing loss as a health and work injury concern</i>	
Why important	<ul style="list-style-type: none"> • This section focuses on ReturnToWorkSA’s knowledge in relation to NIHL. • There may be other insights and information that would assist ReturnToWorkSA in developing relevant and effective operational or policy initiatives.
Issues to be considered	<ul style="list-style-type: none"> • Identifying underlying causes of the changes in market behaviour, claim numbers and costs. • Understanding stakeholder views regarding services and processes relating to NIHL claims. • Identifying possible solutions.
Questions	<p>Q3. Please provide any insights or feedback about what you believe is causing the changes relating to NIHL claims? (Note: this section covers worker experiences, claim number increases, increased marketing activity, locking-in service providers, increased disputation, interstate employment, audiological services, anecdotal information etc.)</p> <p>Q4. Please provide any insights or feedback about what is causing the increased frequency of repairs and replacement of hearing devices being experienced?</p> <p>Q5. What insights do you have about the increase in the number of workers with NIHL claims being legally represented?</p> <p>Q6. What insights do you have regarding disputation in NIHL claims?</p>

Current ReturnToWorkSA initiatives

As part of its ongoing scheme improvement program, ReturnToWorkSA has commenced several initiatives to improve its understanding and management of NIHL processes and claims. The table below summarises the current initiatives underway.

Table: Current ReturnToWorkSA initiatives	
Initiative	Description
Worker experience	
1. Voice of the Customer (VOC) survey.	<ul style="list-style-type: none"> Undertook a VOC survey to identify areas for improvement and review (findings are included in this document).
2. ReturnToWorkSA website – information and brochures about NIHL.	<ul style="list-style-type: none"> Improved material is available on the ReturnToWorkSA website at NIHL and hearing services This material is intended to provide additional information and guidance regarding NIHL – for workers, employers and providers.
Claims Management	
3. Claim management processes <ol style="list-style-type: none"> Eligibility process. Management of NIHL claims. Independent medical examiner request template. 	<ul style="list-style-type: none"> Reviewing instructions and tools available to claims agents. Revised information required for history, to streamline processes. Reviewing claims management approach to improve processes and timeliness. This includes a pilot to improve communication with workers regarding claim determination and information being sought.
Whole Person Impairment	
4. Management of WPI process <ol style="list-style-type: none"> Impairment assessment request and report templates. NIHL compliance review process. 	<ul style="list-style-type: none"> Reviewing templates to improve assessment process and report content. Reviewing NIHL compliance review process to improve consistency and development of a quality framework. Returning the NIHL compliance review process to ReturnToWorkSA (previously it was with the claims agents). Review of all NIHL assessments to ensure compliance with the IAGs and to ensure that the WPI rating outlined in the assessment is supported by appropriate evidence and clear rationale.
5. Impairment Assessment Guidelines (IAG) Third Edition.	<ul style="list-style-type: none"> Requested changes to the NIHL chapter in the IAG to improve quality of assessments. <p>Note: changes to the IAG are subject to both Ministerial approval and the Parliamentary process, which is expected to occur in 2025.</p>
6. Impairment Assessor Accreditation Scheme (IAAS).	<ul style="list-style-type: none"> Reviewed and suggested changes to the IAAS to improve quality of assessments and requirements of impairment assessors. <p>Note: Changes to the IAAS are subject to consultation process and Ministerial approval.</p>

Table: Current ReturnToWorkSA initiatives	
Initiative	Description
Disputation	
7. Management of disputation process	<ul style="list-style-type: none"> Reviewing disputation process to improve process and timeliness.
Provider management	
8. Provider fee schedules and policy requirements.	<ul style="list-style-type: none"> Reviewed fee schedules and policy requirements to clarify expectations and ensure quality services are provided. Issued information to providers, including those who undertake high volumes of assessments, to ensure all providers are clear on ReturnToWorkSA’s expectations for the completion of assessments and the evidence required to substantiate invoicing requirements.
9. Provider information and capability	<ul style="list-style-type: none"> Provided CPD sessions to improve understanding of scheme and assessing hearing loss.
10. Billing	<ul style="list-style-type: none"> Monitoring provider billing to identify opportunities for further investigation and discussion with individual providers.
Data analysis and improvement	
11. WPI compliance reviews of reports.	<ul style="list-style-type: none"> Reviewed data needs and improved data collection and analysis.
12. NIHL service billing	<ul style="list-style-type: none"> Reviewed billing data to improve understanding and identify areas for improvement or further investigation.
Workplace safety	
13. SafeWork SA – NIHL campaign.	<ul style="list-style-type: none"> Worked with SafeWork SA to support 6-month campaign. Reviewing compliance outcomes to inform Employer Risk Activities.
14. Employer Risk Activities	<ul style="list-style-type: none"> Targeting employers in industries at risk of NIHL.

ReturnToWorkSA considers the operational initiatives that are being implemented are unlikely to resolve all of the current NIHL challenges. Either more significant operational initiatives or legislative change is required. Possible policy solutions are discussed in the next section.

Questions relating to this section

<i>Current ReturnToWorkSA initiatives</i>	
Why important	Operational changes should be implemented where possible to ensure: <ul style="list-style-type: none"> Processes are as effective and streamlined as possible, under the current legislative framework. To improve services for injured workers in a timely manner. The need for legislative change is minimised.
Issues to be considered	<ul style="list-style-type: none"> The initiatives already being implemented by ReturnToWorkSA. Any gaps that can be addressed through other operational initiatives.
Questions	Q7. What other operational initiatives, if any, should ReturnToWorkSA consider to improve the management of NIHL claims?

Scheme Design

Current considerations

ReturnToWorkSA has undertaken some preliminary work on the following scheme design option that, if supported by stakeholders and the Government, would require legislative change.

Independent hearing services

A new independent hearing service entity would be established to provide a single point of contact for information and services associated with NIHL claims under the Scheme. This would include all audiological assessments, hearing aid fittings, adjustments, repairs and maintenance associated with NIHL claims.

This proposal would entail a separate body, independent of ReturnToWorkSA, being set up to provide and coordinate these services. It would operate under its own governance framework, and all services would be provided in accordance with approved service-delivery standards. This would ensure that people receive accurate and impartial information about NIHL claims and address current limited oversight of hearing service providers. It would be expected to result in hearing assessments that are of a consistently high quality, reducing delays to claim determination and lowering the chance of disputation.

Other options

ReturnToWorkSA is interested in stakeholder suggestions regarding any other ideas that should be considered to improve the experience of, and delivery to, injured workers with NIHL claims.

There is no need to repeat initiatives already identified in responses to previous questions.

Questions relating to this section

<i>Scheme Design</i>	
Why important	<p>There appears to be sufficient information to suggest that the experience for workers with NIHL claims is not optimal.</p> <p>ReturnToWorkSA considers the current operational initiatives, while important, to be unlikely to resolve all the current NIHL challenges. Changes to the Scheme through legislative amendments may therefore be needed.</p>
Issues to be considered	<p>It may be beneficial to consider possible options against the following criteria:</p> <ul style="list-style-type: none"> • Improving knowledge relating to work-related NIHL. • Improve awareness and practice in the workplace to prevent and minimise NIHL. • Improving and streamlining the worker's claim experience. • Improving the hearing loss assessment process. • Improving the quality and consistency of hearing loss services. • Improving the claims management process. • Reducing unnecessary disputation. • Improving processes to purchase, maintain, and replace hearing loss devices and supplies.
Questions	<p>Q8. Please provide your feedback regarding the hearing service proposal currently being considered.</p> <p>Q9. What other changes to the Scheme, if any, should ReturnToWorkSA consider to improve the claim service and experience for injured workers with NIHL claims?</p> <p>Q10. Do you have any other comments or suggestions?</p>

Strategic review – next steps

The Minister has requested a report regarding the NIHL strategic review, which is expected to include:

- analysis of feedback from this stakeholder consultation process;
- possible solutions for operational and scheme design;
- recommendations regarding next steps.

The Minister's Advisory Committee will be involved in reviewing the feedback and considering possible options for operational initiatives or scheme design changes.

Feedback to stakeholders will be provided once the Minister has the opportunity to consider and respond to the report.

Attachments

Attachment 1: Consolidated list of consultation questions

Prevention and Work Health Safety

- Q1. Are the results from the SafeWork SA campaign consistent with your experience of the level of NIHL awareness and management in the workplace?
- Q2. What initiatives, if any, should ReturnToWorkSA consider to further support employers to improve the prevention and management of NIHL?

Hearing loss as a health and work injury concern

- Q3. Please provide any insights or feedback about what you believe is causing the changes relating to NIHL claims? (Note: this section covers worker experiences, claim number increases, increased marketing activity, locking-in service providers, increased disputation, interstate employment, audiological services, anecdotal information, etc.)
- Q4. Please provide any insights or feedback about what is causing the increased frequency of repairs and replacement of hearing devices being experienced?
- Q5. What insights do you have about the increase in the number of workers with NIHL claims being legally represented?
- Q6. What insights do you have regarding disputation in NIHL claims?

Current ReturnToWorkSA initiatives

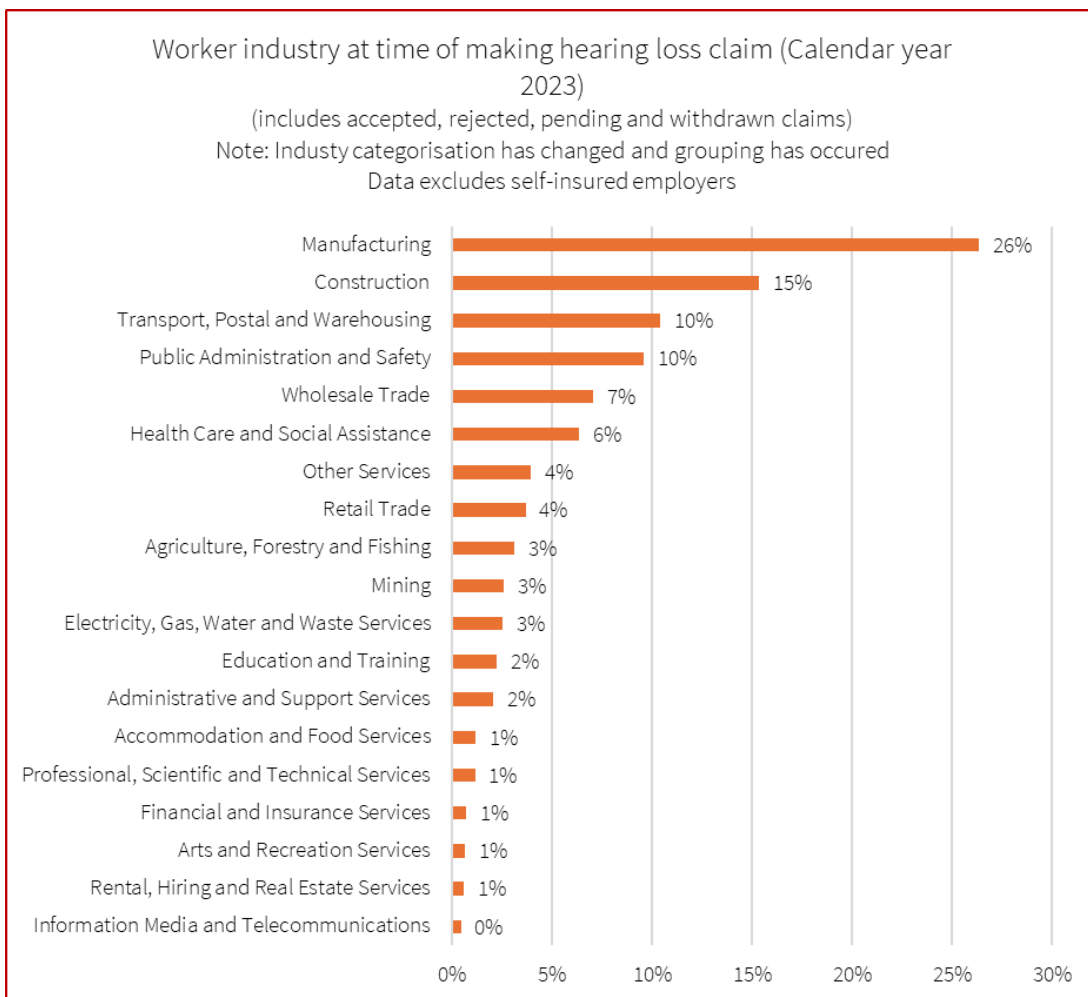
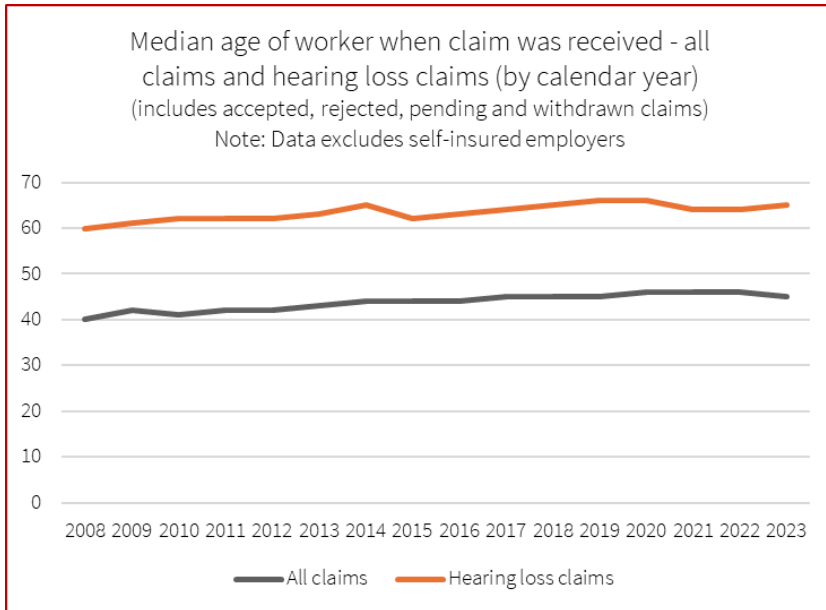
- Q7. What other operational initiatives, if any, should ReturnToWorkSA consider to improve the management of NIHL claims?

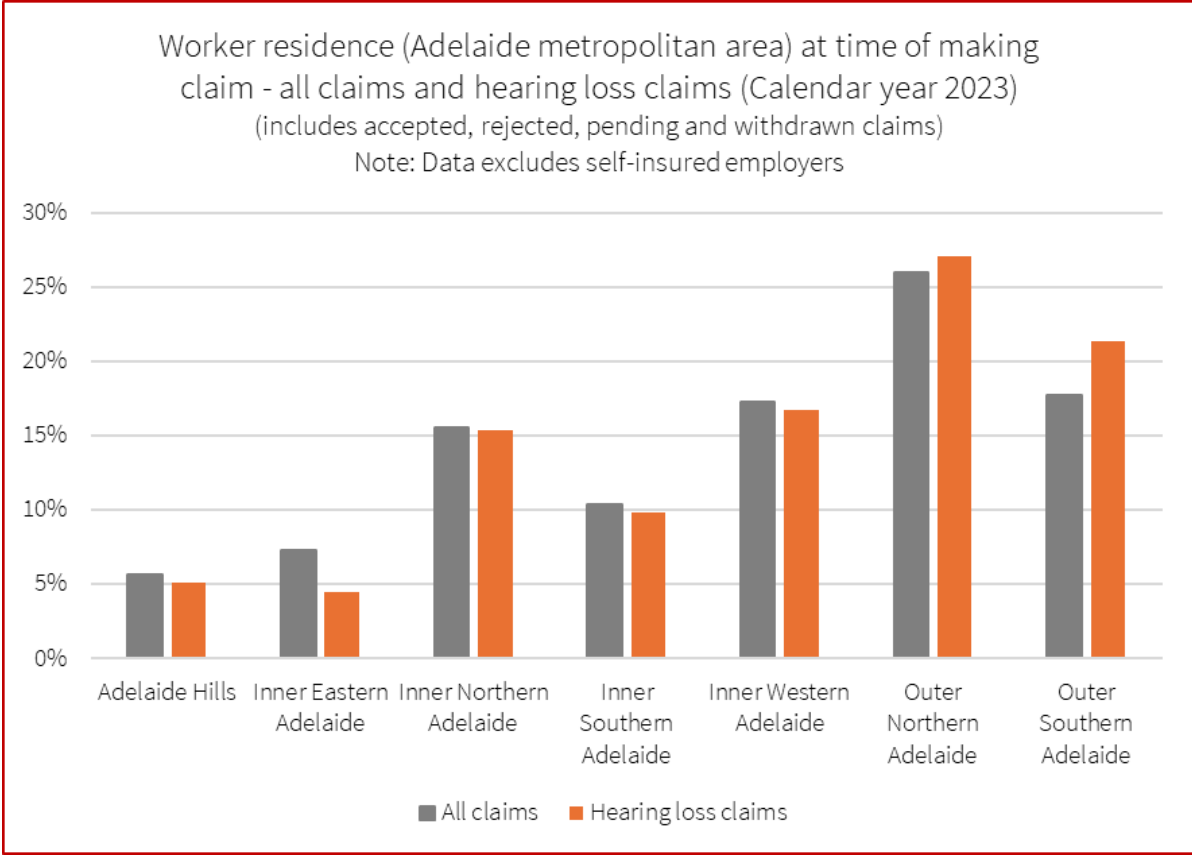
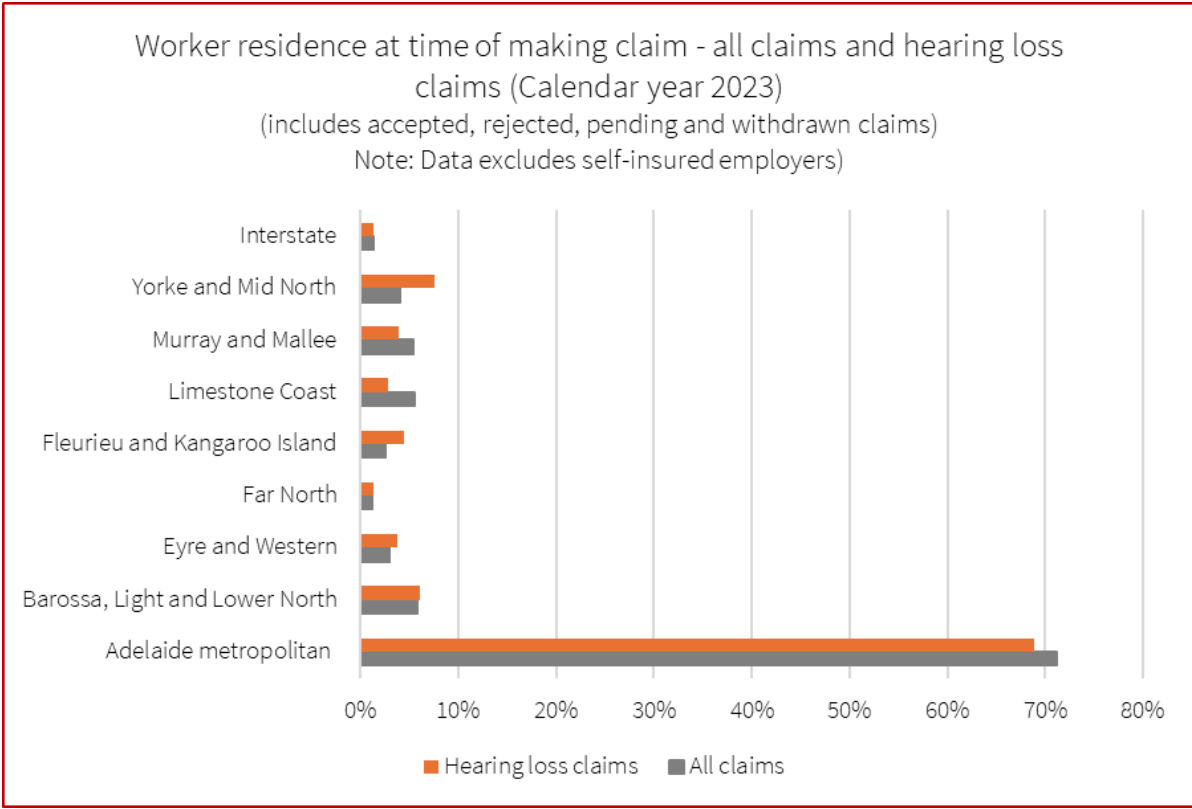
Scheme design

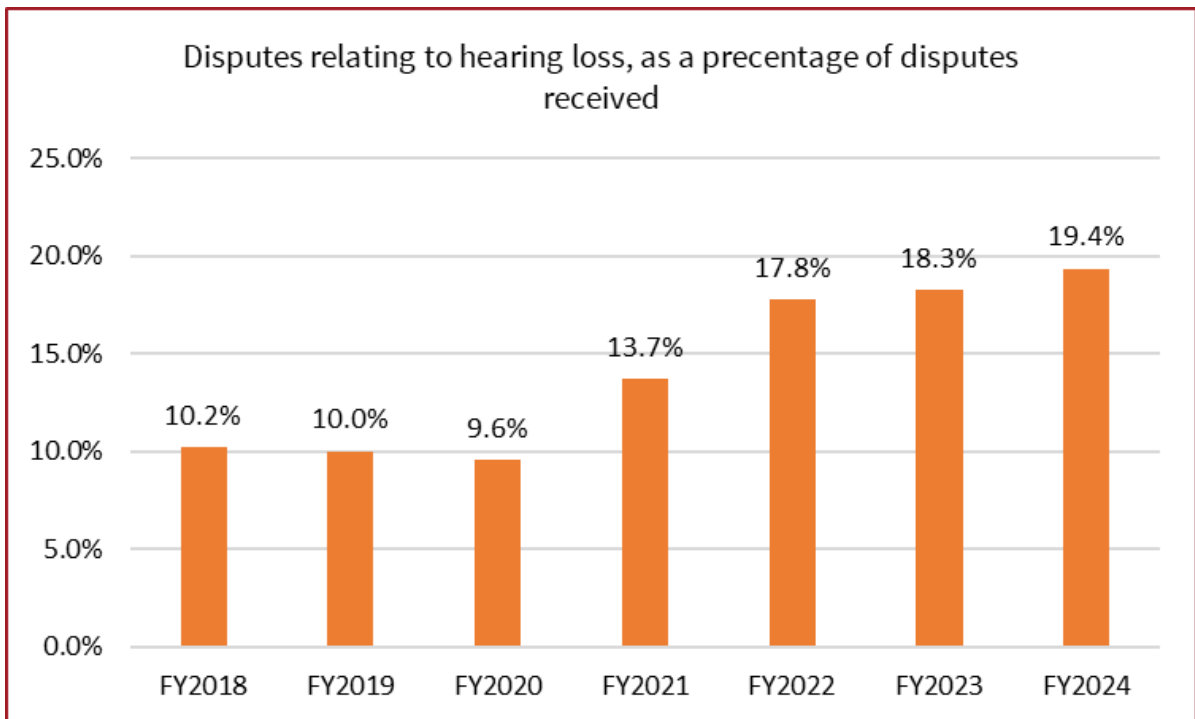
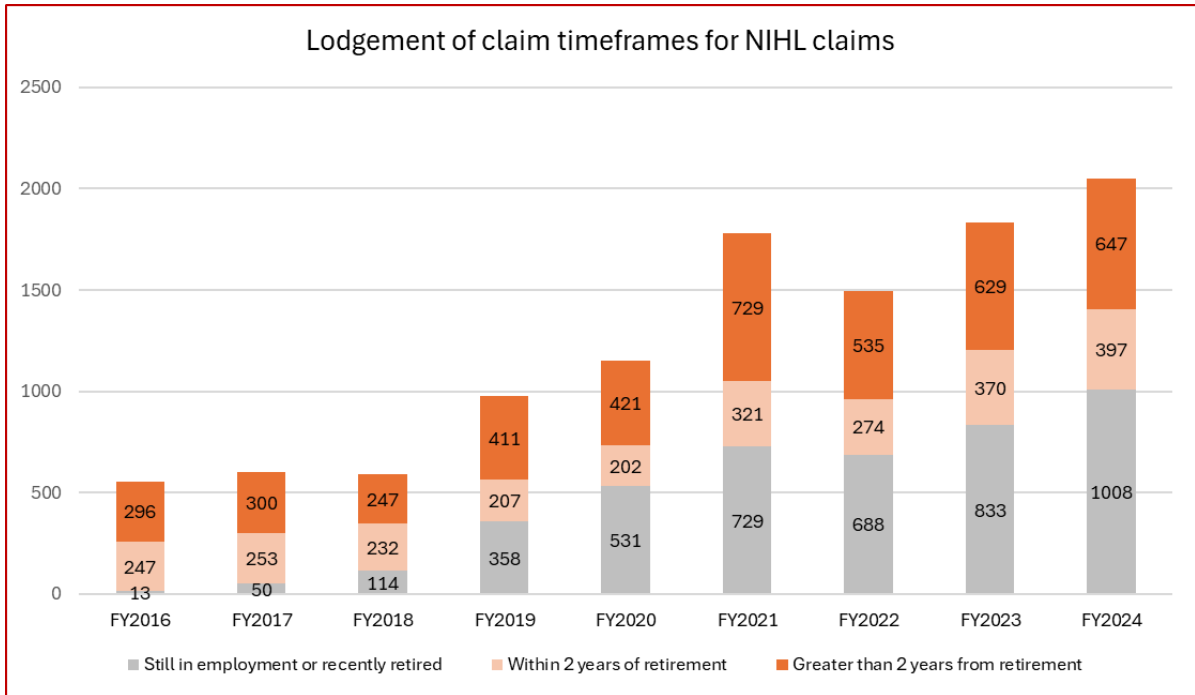
- Q8. Please provide your feedback regarding the hearing service proposal currently being considered.
- Q9. What other changes to the Scheme, if any, should ReturnToWorkSA consider to improve the claim service and experience for injured workers with NIHL claims?
- Q10. Do you have any other comments or suggestions?

Attachment 2: Additional scheme statistics

The following data is based on ReturnToWorkSA’s database.







Active disputes for general and NIHL claims – by dispute type, at 30 January 2025				
Dispute type	General claims (*)		Hearing loss claims	
	Number	%	Number	%
Compensability	601	50.4%	150	68.2%
Non-economic loss	207	17.4%	56	25.5%
Income support	149	12.5%	2	0.9%
Medical expenses	139	11.7%	12	5.5%
Seriously injured worker	48	4.0%	0	
Economic loss	27	2.3%	0	
Return to work plans and services	21	1.8%	0	
Total	1,192	100%**	220	100%

(*) General claims excludes hearing loss claims
 (**) Rounding errors may mean there are small differences between the percentages and totals.

Active disputes for general and NIHL claims – by age of dispute, at 30 January 2025		
Length of dispute	% of disputes relating to general claims (*)	% of disputes relating to hearing loss claims
0-11 months	79.9%	93.1%
12-18 months	8.6%	4.1%
19-24 months	2.7%	1.4%
25+ months	8.8%	1.4%

(*) General claims exclude hearing loss claims
 (**) Rounding errors may mean there are small differences between the percentages and totals.
 The lower percentages at 12 months and beyond reflect targeted efforts to revolve longer term NIHL disputes, which is part of current operational strategies.

Attachment 3: Additional Resources for Information

Organisation	Source
Australian Commonwealth Government	The Australian Department of Health and Aged Care's 2019 <i>Roadmap for Hearing Health</i> is being implemented to improve hearing outcomes across the country. Roadmap for Hearing Health Australian Government Department of Health and Aged Care
	The Australian Government through the Hearing Services Program has developed <i>A guide to understanding hearing aid technology</i> . The Guide, which was published in 2024, provides details and explanations about hearing devices. https://www.health.gov.au/resources/publications/hearing-services-program-a-guide-to-understanding-hearing-aid-technology?language=en The list of devices subsidised (partially or fully) under the Government Hearing Services Program can be found at: https://hearingservices.gov.au/hsoViewWEB/file/partially-subsidised-schedule.pdf https://hearingservices.gov.au/hsoViewWEB/file/fully-subsidised-schedule.pdf
	The Australian Competition and Consumer Commission (ACCC) produced a report in 2017 regarding issues around the sale of hearing aids. file:///C:/Users/pntsm/Downloads/Issues%20around%20the%20sale%20of%20hearing%20aids%20-%20Consumer%20and%20clinical%20perspectives%20-%202017.pdf
ReturnToWorkSA	ReturnToWorkSA has a range of material relevant to NIHL on its website. https://www.rtsa.com/claims/noise-induced-hearing-loss-and-hearing-services https://www.rtsa.com/_data/assets/pdf_file/0019/234523/NIHL-information-for-workers_DL-web.pdf https://www.rtsa.com/about-us/news-room/articles/safe-and-sound-is-your-workplace-managing-noise-risks
SafeWork Australia	SafeWork Australia has a range of material relating the preventing and managing noise in the workplace. https://www.safeworkaustralia.gov.au/duties-tool/construction/hazards-information/noise#:~:text=Workers%20must%20not%20be%20exposed,level%20could%20instantly%20damage%20hearing.
SafeWork SA	In South Australia, the Code of Practice: Managing Noise and Preventing Hearing Loss at Work provides practical guidance on achieving WHS standards. This code, which commenced on 24 February 2024, provides practical guidance to identify and manage noise risks and ensure compliance with WHS legislative requirements. https://www.safework.sa.gov.au/_data/assets/pdf_file/0020/136271/Code-of-Practice_-_Managing-noise-and-preventing-hearing-loss-at-work.pdf SafeWork SA also provides a fact sheet, safety tutorial and webinar as part of its resources on preventing NIHL. https://www.safework.sa.gov.au/_data/assets/pdf_file/0004/976756/Hazardous-Noise-Factsheet_FINAL-Jul2024.pdf https://www.safework.sa.gov.au/resources/online-activities/introduction-to-safety-tutorial/introduction-to-safety/safety-tutorial-noise Noise Induced Hearing Loss (NIHL) Webinar 14th May 2024 - YouTube
SIRA	SIRA (regulator of insurance and compensation legislation in NSW) commissioned a rapid review to address diagnosis, treatment and outcomes research questions. The findings are within the 2019 paper <i>Occupational Noise Induced Hearing Loss and Audiometry</i> by Prof Cameron and Dr McBain. https://www.sira.nsw.gov.au/_data/assets/pdf_file/0006/603429/Occupational-Noise-Induced-Hearing-Loss-and-Audiometry-rapid-review.pdf
World Health Organization	The World Health Organization has a focus on deafness and hearing loss. They have material and resources about prevention and prevalence in general settings. https://www.who.int/health-topics/hearing-loss#tab=tab_1



The following free information support services are available:

If you are deaf or have a hearing or speech impairment you can call ReturnToWorkSA on **13 18 55** through the National Relay Service (NRS) www.relayservice.gov.au.

For languages other than English call the Interpreting and Translating Centre on **1800 280 203** and ask for an interpreter to call ReturnToWorkSA on **13 18 55**.

For braille, audio or e-text of the information in this brochure call **13 18 55**.

