



General Manager  
Social Policy Division  
The Treasury  
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Dear Sir/Madam

It is with pleasure that MS Queensland provides a submission to the National Injury Insurance Scheme: Motor Vehicle Accidents Consultation Regulation Impact Statement for your consideration.

MS Queensland appreciates the opportunity to share important information reflecting on the intention of the National Injury Insurance Scheme (NIIS) which is intended to complement the National Disability Insurance Scheme (NDIS) to provide lifetime care and support to people who sustain a catastrophic injury from a motor vehicle, workplace, medical treatment injury or general accident.

Please find recommendations included in the attached National Injury Insurance Scheme: Motor Vehicle Accidents Consultation Regulation Impact Statement submission. I would be happy to answer any queries that you may have or provide any further information and may be contacted on 3840 0801.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Lincoln Hopper', enclosed in a thin black rectangular border.

Lincoln Hopper  
CEO

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## About MS Queensland

MS Queensland is a non-profit organisation that aims to be the first-choice for multiple sclerosis (MS) information, education, treatment, care and support across Queensland. Our vision is a world free from MS and its devastating impact. We exist to help people living with MS to get the best out of life; to advocate for change and to search for a cure.

Access economics estimates MS costs Australians \$2bn/year. MS is a lifelong progressive neurological disease affecting all aspects of a person's life. More than 23,000 Australians have MS with almost 4,000 living in Queensland. Some 19,000 people live with a Progressive Neurological Disease<sup>[1]</sup> (PND) in Queensland.

Across these specific disease types, common needs exist amongst this large population and consequently there is a need to ensure that recommended policy issues are highlighted to support the needs of people living with PND to remain socially and economically active members of their community.

The recommendations provided in the MS Queensland submission support and further inform the vision for the NIIS.

<sup>1</sup> includes Alzheimer's Disease; Friedreich Ataxia; Huntington's Disease; Muscular Dystrophy; Multiple Sclerosis; Motor Neurone Disease; Parkinson's Disease

## **MS Queensland Response to the Consultation Regulation Impact Statement for Motor Vehicle Accidents (NIIS)**

### **Recommendations:**

1. For a truly national scheme to exist where every Australian regardless of where they live receives the same care and support the critical issue of Queensland and Western Australia not having no-fault motor vehicle schemes in operation must be rectified.
2. With limited ability to promote the need of the simultaneously recommended insurance scheme of the NIIS, and needed system, we are faced with another 'sleeper' issue. Steps must be taken to address this issue.
3. The aged pension age will increase to 70 by 2035. For consistency, cohesion and fairness it is remiss for the NDIS not to include people who are over 65. This is particularly the case under the NIIS.

## **MS Queensland Response to the Consultation Regulation Impact Statement for Motor Vehicle Accidents (NIIS)**

Just as any Australian can be affected by disability or injury, MS Queensland provides information to reflect the needs the whole community.

More cohesion between Government departments will be essential under the NDIS for cost effectiveness and maximum efficiencies to be achieved. The same system that is essential for the functioning of the NDIS should be simultaneously adapted to the NIIS.

MS Queensland supports the premise of the NDIS for people to receive the same care regardless of where they live under a jointly funded programme which largely replaces and enhances existing disability support services provided by the Commonwealth and the States, eligible participants will have a disability support plan that is intended to meet an individual's current and future support needs.

As highlighted in section 2.5 of the NIIS: Motor Vehicle Accidents Consultation Regulation Impact Statement '...the NDIS will provide support for some catastrophic motor vehicle injuries in those jurisdictions that are currently fault based, but not those in no-fault jurisdictions.' This inequity must be addressed at this crucial time of implementation.

Uniform principles are being designed which must include the uniform adoption of no-fault Compulsory Third Party (CTP) vehicle insurance cover as already exists in Victoria, NSW and Tasmania. From July 1 2014, South Australia will move to no fault status as will ACT by joining with the NSW scheme. The scheme is currently under consideration for the Northern Territory.

**For a truly national scheme to exist where every Australian regardless of where they live receives the same care and support this critical issue of Queensland and Western Australia not having no-fault motor vehicle schemes in operation must be rectified.**

This change is essential to remove the cost shift from the flawed Queensland CTP scheme to public health system and disability services to benefit every Queenslanders – including people living with MS and other PND disease.

The NIIS is an important part of the financial underpinnings of the NDIS – so the collection of increased premiums for a no fault scheme in Queensland (and Western Australia) takes the pressure off the taxation funding for the NDIS.

As is the circumstance of the NDIS, people over 65 are not eligible of accessing neither the NDIS nor the NIIS. The scheme therefore does not provide support for every Australian should they require it and will face an uncertain future working completely contradictory to what the principles of the Disability Care and support that is one of choice, certainty and participation.

For people living with MS and all people who suffer a catastrophic injury or live with a disability and are over 65 they do not have the same care needs as someone who is in need of care due to the natural ageing process, nor are there established systems set up to deal with people with catastrophic injury.

Instead integrated referral pathways are needed for people living with a medical condition and or catastrophic injury including disability, health, rehabilitation and age appropriate accommodation.

As with people with MS, the cause of a disability is not at all relevant when the consequences are so devastating as to necessitate the provision of lifetime care, medical services, or out of home care. Ultimately, as a community we pay for these injuries and

their consequences one way or another; whether it is through blocked aged care and hospital beds, increased medical costs across a lifetime, carers and families being forced to give up work to provide unpaid care, or if we are smart – by making provision through the yearly CTP charge to cover the lifetime costs.

As the NDIS has clearly illustrated unless you have experience of someone living with a disability we are ignorant to the unmet need and demands that must be met every day for the person, carer and family.

In general, Australians have assumed that appropriate care is automatically provided when a need presents itself. It has only been through community support that the NDIS has resulted. **With limited ability to promote the need of the simultaneously recommended insurance scheme of the NIIS, and needed system, we are faced with another 'sleeper' issue.**

Steps must be taken now to address this issue which when undertaken will dramatically increase the circumstance for the 45% of people living with disability in Australia live in or near the poverty line, double the OECD average.

As at May 2014, the support for the full implementation of the NDIS by COAG Governments has been greeted with great support and enthusiasm.

**During this time it has also been announced that the aged pension age will increase to 70 by 2035. For consistency, cohesion and fairness it is remiss for the NDIS not to include people who are over 65. This is particularly the case under the NIIS.**

Hosting one of Queensland's biggest charity fundraising Bike Ride – the MS Brissie to the Bay bike ride over 5,000 riders of all ages participate. It is understood that many people have insurance with organisations such as Bicycle Queensland; however this certainly does not incorporate all bike riders.

Unfortunately, accident and injury will and can continue to happen to anyone in our community. The inequity that is experienced must not continue, particularly at this time of great change in the disability sector.

The introduction of the NDIS has introduced the perfect time for Government departments to work together inclusively to achieve greater efficiencies, productivity and ultimately cost effective results for individuals should they become injured (medical injury, workers compensation, general injury). People suffering catastrophic injury are not excluded.

It is well understood that the success of the NDIS becoming a reality is due to the collaborative approach taken by the disability community to share their stories and actively work together to share the understanding of why a National Disability Insurance Scheme was needed. As this once in a generation chance for change is a task that has never been undertaken before in Australia, as recommended in the Productivity Commission report the simultaneous introduction of a National Injury Insurance Scheme which complements the NDIS is recommended.