

What is the Lifetime Support Scheme?

The Lifetime Support Scheme (LSS) is a no-fault scheme which provides necessary and reasonable Treatment, Care and Support for people with serious injuries as a result of a Motor Vehicle Accident in South Australia.

This SA Government Scheme commenced on 1 July 2014 and is available for children and adults. The Scheme is funded by a levy on motor vehicle registrations.

The Lifetime Support Authority (LSA) is responsible for administering the Scheme in accordance with the *Motor Vehicle Accidents (Lifetime Support Scheme) Act 2013*.

Am I eligible?

If you've sustained serious injuries in a Motor Vehicle Accident on South Australian roads from 1 July 2014 onwards, you may be eligible for the Scheme.

Serious injuries can include:

- spinal cord injuries
- moderate to severe brain injuries
- amputations
- severe burns
- permanent blindness.

To be eligible, you must meet specific criteria for both the injury and the Motor Vehicle Accident, as outlined in the Lifetime Support Scheme (LSS) Rules. The LSS Rules are available on the LSA website.

If you think you or someone that you know may be eligible, phone the LSA on 1300 880 849 or email LSAnotifications@sa.gov.au

What does the Scheme provide?

The LSA will fund necessary and reasonable Treatment, Care and Support needs related to your Motor Vehicle Injury, such as:

- medical treatment including Doctor's appointments, surgery, scans, specialist appointments, X-rays, and Pharmaceutical Products
- dental treatment
- rehabilitation including physiotherapy, occupational and speech therapy
- ambulance services
- respite care
- attendant care and support services including personal care and domestic services
- Assistive Technologies such as wheelchairs, mobility aids, beds, respiratory equipment, and communication devices
- prosthetic and orthotic devices and services
- education and vocational training
- home, vehicle, and workplace modification.

For more information on what 'necessary and reasonable' means under the Scheme, please refer to:

i Information Sheet: Necessary and reasonable Treatment, Care and Support

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What is not funded by the Scheme?

The LSA will only fund services that are necessary and reasonable Treatment, Care and Support once you have been accepted as a Scheme Participant.

The LSA does will not fund expenses that are outside the scope of the Scheme as envisaged in the *Motor Vehicle Accidents (Lifetime Support Scheme) Act 2013*, such as loss of wages or benefits, or extra in-hospital expenses such as TV hire. Nor will the LSA provide income support or pay damages for pain and suffering.

If there is someone at fault, participants in the Scheme will still be able to make a claim for damages from the compulsory third party scheme for their non-economic loss (pain and suffering) and loss or impairment of earning capacity.

How do you access the Scheme?

An application must be made to the LSA within three years of the date of the Motor Vehicle Accident by either you, someone on your behalf, or by an insurer or the nominal defendant. Your application must show that:

- the person applying was injured
- the injury was caused by a motor vehicle
- the Motor Vehicle Accident happened in South Australia
- the injury meets the criteria set out in the LSS Rules.

The LSA has requested that the hospital treating teams and emergency departments contact our Eligibility Specialist when someone sustains the type of injuries that may be covered by the Scheme.

The Eligibility Specialist will work with medical, health and support staff to ensure that you, your Families, and carers are given as much information as possible, as soon as possible.

The LSA will need permission to obtain information and documents related to your injury, Motor Vehicle Accident, hospital records, treating doctor's reports and other information to process an application.

Once the application has been assessed, the LSA will advise whether you are eligible under the Scheme.

In some cases, the LSA may have to wait until your injuries have stabilised before deciding about eligibility under the Scheme. Lifelong injuries that may not be immediately apparent, can be considered for up to three years after the date of the accident.

What happens once an application is accepted?

The Scheme will commence funding necessary and reasonable Treatment, Care and Support services that are related to your Motor Vehicle Injury, from the date you are accepted into the Scheme. LSA Service Planners will work with you, your Families, and carers to ensure you receive the right Treatment, Care and Support services from approved Service Providers.

If you have been accepted as an Interim Participant the LSA will fund Treatment, Care and Support needs that are related to your Motor Vehicle Injury for up to two years from the date of your acceptance into the Scheme. In exceptional circumstances, this Interim Participation timeframe may be extended.

You can be assessed for Lifetime Participation in the Scheme at any time during your interim period. This can occur by asking your Service Planner to commence a lifetime assessment or where it is clear to the LSA, on medical advice, that due to the nature of your injuries you require lifetime care.

What happens if I'm not eligible for Lifetime Participation?

If your injuries stabilise and improve to the extent that you are no longer eligible for Treatment, Care and Support under the Scheme, your Service Planner will help you transition to other services if required.

You may still have your Treatment, Care and Support provided by local public health services or an insurer, if you have a claim (for example, through compulsory third party or workers compensation).

If you disagree with the LSA's decision about eligibility, you can ask for a review.



**For more information,
please contact your Service Planner
or the Lifetime Support Authority.**



Phone: 1300 880 849



Email: lifetime.support@sa.gov.au



Online: lifetimesupport.sa.gov.au