NORTHERN TERRITORY OF AUSTRALIA

MOTOR ACCIDENTS (COMPENSATION) REGULATIONS 1984

As in force at 28 August 2026

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NORTHERN TERRITORY OF AUSTRALIA

As in force at 28 August 2026

MOTOR ACCIDENTS (COMPENSATION) REGULATIONS 1984

Regulations under the *Motor Accidents (Compensation) Act 1979*

1 Citation

These Regulations may be cited as the *Motor Accidents (Compensation) Regulations 1984*.

2 Commencement

These Regulations come into operation on 1 July 2007.

3 Definitions

In these regulations:

CPI means the All Groups Consumer Price Index, being the weighted average of the 8 capital cities, published by the Australian Statistician.

(indexed) indicates that the sum of money to which it relates is to be adjusted to reflect changes in the CPI between 1 July 2007 and 1 July in the financial year in which the relevant motor accident occurred.

4 Guides to the evaluation of permanent impairment

(1) For section 4C(2)(a) of the Act, the American Medical Association Guides to the Evaluation of Permanent Impairment, 6th Edition is prescribed.

(2) The Commission must ensure that a copy of the Guides is available for inspection (in the form of a physical copy or on computer) during ordinary business hours, at the Commission's office in Darwin.

4A Exclusion: driver under influence of alcohol

(1) For section 9(2) of the Act, the prescribed circumstances are that, at the time of the accident, the injured person had a concentration of alcohol:

(a) in his or her breath of 0.08 grams or more per 210 litres of exhaled breath; or

(b) in his or her blood of 0.08 grams or more per 100 millilitres of blood.

(2) If a breath analysis is carried out on the person in accordance with section 29AAC or 29AAD of the *Traffic Act 1987*, the breath alcohol concentration indicated by the analysis is taken to be the concentration of alcohol in the person's breath at the time of the motor accident.

(3) If a sample of the person's blood is taken in accordance with section 29AAK of the *Traffic Act 1987* within 4 hours of the motor accident, the blood alcohol concentration indicated by analysis of the sample is taken to be the concentration of alcohol in the person's blood at the time of the motor accident.

(4) For subregulations (2) and (3), if more than one analysis mentioned in those subregulations is carried out in relation to a person, the analysis that shows the higher concentration of alcohol is to be used.

(5) If the person is required under the *Traffic Act 1987* to submit to a breath analysis or provide a sample of blood and fails to do so, the concentration of alcohol in the person's breath or blood at the time of the accident is taken to exceed the concentration mentioned in subregulation (1)(a) or (b).

(6) However, subregulation (5) does not apply if the Commission is satisfied that the person had a reasonable excuse for the failure to submit to a breath analysis or provide a sample of blood.

(7) If subregulations (2) to (6) do not apply, the Commission may have regard to any relevant information or evidence to determine the concentration of alcohol in the person's breath or blood at the time of the motor accident.

(8) In this regulation:

breath analysis, see section 3(1) of the *Traffic Act 1987*.

4B Motor vehicle incapable of being registered

(1) For sections 9D(1)(d)(i) and 9E(1)(d)(i) of the Act, the following kinds of motor vehicles are prescribed:

(a) a vehicle manufactured on or before 1 January 1971 that:

(i) does not comply with the applicable vehicle safety requirements under the *Motor Vehicles Act 1949* or a corresponding law of another jurisdiction; and

(ii) cannot be registered under the *Motor Vehicles Act 1949* or a corresponding law of another jurisdiction;

(b) a vehicle manufactured during the period from 2 January 1971 to 1 August 1989 that has never had a compliance plate placed on it in accordance with an approval by the body known as the Australian Motor Vehicle Certification Board;

(c) a vehicle manufactured during the period from 2 August 1989 to the RVSA commencement date that has never had a plate or label placed on it in accordance with an approval given under the *Motor Vehicle Standards Act 1989* (Cth) before its repeal;

(d) a vehicle manufactured after the RVSA commencement date that:

(i) has never had a plate or label placed on it in accordance with an approval mentioned in Schedule 3, Part 3, Division 1 of the *Road Vehicle Standards (Consequential and Transitional Provisions) Act 2018* (Cth); and

(ii) has not been entered on the Register of Approved Vehicles kept under section 14(1) of the *Road Vehicle Standards Act 2018* (Cth).

(2) In this regulation:

RVSA commencement date means the day on which section 15 of the *Road Vehicle Standards Act 2018* (Cth) commences.

4C Determination of rights of benefits

(1) For section 12 of the Act, the Commission may require a person making a claim for benefits under the Act to provide the Commission with the following:

(a) documents related to the person's injury or treatment, including medical, hospital, dental or other health records;

(b) documents related to the person's medical history before the accident;

(c) taxation records in relation to the person, to the extent they relate to the claim;

(d) documents related to the person's employment both before and after the motor accident;

(e) any other information reasonably related to the claim.

(2) For section 12 of the Act, the Commission may require a health practitioner or approved allied health professional to:

(a) examine a person who has made a claim for benefits under the Act; and

(b) prepare a treatment plan or rehabilitation plan for the person.

(3) The cost of examining a person and preparing a plan under subregulation (2) is to be borne by the Commission.

(4) In this regulation:

approved allied health professional means a person who practices an allied health profession and is approved by the Commission.

health practitioner, see section 5 of the Health Practitioner Regulation National Law.

4D Necessary and reasonable medical and rehabilitation expenses

(1) For section 12(1A) of the Act, in determining whether medical and rehabilitation services are reasonable and necessary in relation to an eligible person under section 18(1) of the Act, the Commission must consider each of the following:

(a) the extent to which the services will be of benefit to the person;

(b) the appropriateness of the services having regard to:

(i) the nature and severity of the injury; and

(ii) the likely effectiveness of the services;

(c) any alternatives to the provision of the services;

(d) whether the service provider is appropriate to provide the services;

(e) the cost effectiveness of providing the services to the person;

(f) how long the services are to be provided for;

(g) any other relevant considerations.

(2) In considering the extent to which services will be of benefit to the person, the Commission must consider each of the following:

(a) the extent to which the services are likely to:

(i) promote or maintain the person's recovery or independence; or

(ii) improve the person's functional autonomy;

(b) the short- and long-term benefits of the services;

(c) the extent of any potential risks related to the provision of the services.

(3) In considering whether the service provider is appropriate to provide the services to the person, the Commission must consider each of the following:

(a) whether the provider possesses the necessary qualifications and experience to provide the services;

(b) the accessibility of the provider to the person.

4E Eligibility: benefits for long-term attendant care services

(1) For section 18BC(1)(c) of the Act, the prescribed criteria are:

(a) the person has suffered an injury of a kind listed in Schedule 1; and

(b) either subregulation (2) or (3) applies.

(2) This subregulation applies if:

(a) the criteria set out in Schedule 1 for that kind of injury are satisfied; and

(b) the injury is permanent and stable.

(3) This subregulation applies if subregulation (2) does not apply but, in the opinion of the Commission, exceptional circumstances exist in relation to the person which warrant the payment of benefits for attendant care services.

(4) The Commission must obtain a certificate from a medical specialist approved by the Commission stating:

(a) the medical specialist has assessed the injured person; and

(b) whether the person has an injury of a kind listed in Schedule 1; and

(c) if the person does have such an injury, whether, at the time the certificate is given, subregulation (2) applies.

(5) For the avoidance of doubt, in assessing whether a person is eligible for benefits under section 18BC, the Commission must be satisfied that the criteria in subregulation (1) are met on the date the Commission assesses the person's eligibility.

(6) In this regulation:

medical specialist means a medical practitioner who holds specialist registration under the Health Practitioner Regulation National Law in a recognised speciality that is relevant to the injury.

4F Eligibility: benefits for interim attendant care services

(1) For section 18BD(1)(c) of the Act, the prescribed criteria are:

(a) the person has suffered an injury of a kind listed in Schedule 1; and

(b) either subregulation (2) or (3) applies.

(2) This subregulation applies if:

(a) the criteria set out in Schedule 1 for the injury (excluding any requirements as to the permanency of the injury) are satisfied; and

(b) the person's condition at the date of assessment is not permanent and stable.

(3) This subregulation applies if subregulation (2) does not apply but, in the opinion of the Commission, exceptional circumstances exist in relation to the person which warrant the payment of benefits for attendant care services.

(4) The Commission must obtain a certificate from a medical specialist approved by the Commission stating:

(a) the medical specialist has assessed the injured person; and

(b) whether the person has suffered an injury of a kind listed in Schedule 1; and

(c) if the person does have such an injury, whether, at the time the certificate is given, subregulation (2) applies.

(5) For the avoidance of doubt, in assessing whether a person is eligible for benefits under section 18BD, the Commission must be satisfied that the criteria in subregulation (1) are met on the date the Commission assesses the person's eligibility.

(6) In this regulation:

medical specialist means a medical practitioner who holds specialist registration under the Health Practitioner Regulation National Law in a recognised speciality that is relevant to the injury.

4G Determination of benefits for attendant care services

For sections 18A(3), 18B(3) and 18BF(1) of the Act, benefits payable for attendant care services are to be determined in accordance with Schedule 2.

4H Necessary and reasonable attendant care services

(1) For section 12(1A) of the Act, in determining whether attendant care services are reasonable and necessary in relation to an eligible person under section 18BE(1)(b)(i) of the Act, the Commission must consider each of the following:

(a) the extent to which the services will be of benefit to the person;

(b) the appropriateness of the services having regard to the person's ability and care needs as assessed by the Commission;

(c) any alternatives to the provision of the services;

(d) whether the service provider is appropriate to provide the services;

(e) the cost effectiveness of providing the services to the person;

(f) how long the services are to be provided for;

(g) any other relevant considerations.

(2) In considering the extent to which services will be of benefit to the person, the Commission must consider each of the following:

(a) the extent to which the services are likely to:

(i) promote or maintain the person's recovery or independence; or

(ii) improve the person's functional autonomy;

(b) the short- and long-term benefits of the services;

(c) the extent of any potential risks related to the provision of the services.

(3) In considering whether the service provider is appropriate to provide the services to the person, the Commission must consider each of the following:

(a) the age and ethnicity of the injured person and any other cultural or linguistic factors;

(b) whether a reasonable person is likely to consider the provider acceptable;

(c) the accessibility of the provider to the person.

(4) If the person is less than 15 years of age, the Commission must also consider the care needs of a typically developing child the same age as the person.

4J Approved providers of attendant care services

For the definition ***approved provider*** in section 18BE(2) of the Act, the prescribed criteria are:

(a) for attendant care services provided within the Territory – that the person:

(i) has a current contract with the Territory to provide services of a nature similar to attendant care services in accordance with the Northern Territory Disability Service Standards; or

(ii) has a current contract with the National Disability Insurance Agency to provide services of a nature similar to attendant care services in the Territory; or

(b) for attendant care services provided in a State or another Territory – that the person:

(i) has a contract with, or has been approved by, the department or agency responsible for the provision of disability care services, to provide services of a nature similar to attendant care services in that State or Territory; or

(ii) has a current contract with the National Disability Insurance Agency to provide services of a nature similar to attendant care services in that State or Territory; or

(c) that the person is, in the opinion of the Commission, appropriate to provide attendant care services.

4K Building alterations

(1) For section 19(2)(b) of the Act, the limitations and qualifications in this regulation apply to benefits for the cost of alterations to a building in which an eligible person resides or proposes to reside under section 19(1)(b)(i) of the Act.

(2) The benefits are limited to alterations to:

(a) access into and throughout the building; and

(b) the following parts of the building:

(i) a bathroom;

(ii) a bedroom;

(iii) a living/dining area;

(iv) a kitchen or food preparation area.

(3) The benefits are not payable in relation to the construction or alteration of a pool, spa or other aqua-therapy facility.

(4) The benefits are payable only if the alterations are approved by the following:

(a) if the building forms part of a unit title scheme:

(i) if the eligible person owns the unit in which the person resides or proposes to reside – the body corporate; or

(ii) if the eligible person does not own the unit in which the person resides or proposes to reside – the owner of the unit and the body corporate;

(b) if the building does not form part of a unit title scheme and is owned by a person other than the eligible person – the owner of the building;

(c) all persons whose approval of the alterations is required by a law of the Territory or State or other Territory in which the building is located.

(5) The benefits are not payable unless:

(a) an occupational therapist approved by the Commission certifies the building is appropriate for the injured person or is capable of being altered so that it is appropriate for the injured person; and

(b) the Commission has approved the proposed alterations before the alterations are commenced.

(6) The certificate and approvals mentioned in subregulations (4) and (5) must be obtained:

(a) if the alterations are to a building in which the person was living at the time of the motor accident – before the alterations commence; or

(b) if the alterations are to another building:

(i) before the person commits to moving to the building; and

(ii) before the alterations commence.

(7) In this regulation:

body corporate means:

(a) a body corporate as defined in section 5 of the *Unit Title Schemes Act 2009*; or

(b) a corporation as defined in section 4(1) of the *Unit Titles Act 1975*; or

(c) a body corporate or owners corporation (however described) of a unit title scheme.

unit title scheme means:

(a) a unit title scheme as defined in section 5 of the *Unit Title Schemes Act 2009*; or

(b) a units plan as defined in section 4(1) of the *Unit Titles Act 1975*; or

(c) a strata plan (however described) under the legislation of a State or other Territory.

4L Necessary and reasonable building alterations

For section 12(1A) of the Act, in determining whether alterations to a building mentioned in section 19(1)(b)(i) of the Act are necessary and reasonable, the Commission must consider each of the following:

(a) the amount of benefits already paid to the person under section 19(1)(b)(i) of the Act;

(b) the extent of any financial gain or loss as a result of alterations previously paid for under section 19(1)(b)(i) of the Act;

(c) the nature and extent of the alterations;

(d) the likely future circumstances of the person, including how long the person is likely to reside or continue residing in the building;

(e) any other relevant considerations.

4M Reduction of benefits for influence of alcohol

(1) For section 20A(2) of the Act, the prescribed circumstances are that, at the time of the accident, the qualifying person had a concentration of alcohol:

(a) in his or her breath of 0.08 grams or more per 210 litres of exhaled breath; or

(b) in his or her blood of 0.08 grams or more per 100 millilitres of blood.

(2) If a breath analysis is carried out on the person in accordance with section 29AAC or 29AAD of the *Traffic Act 1987*, the breath alcohol concentration indicated by the analysis is taken to be the concentration of alcohol in the person's breath at the time of the motor accident.

(3) If a sample of the person's blood is taken in accordance with section 29AAK of the *Traffic Act 1987* within 4 hours of the motor accident, the blood alcohol concentration indicated by analysis of the sample is taken to be the concentration of alcohol in the person's blood at the time of the motor accident.

(4) For subregulations (2) and (3), if more than one analysis mentioned in those subregulations is carried out in relation to a person, the analysis that shows the higher alcohol concentration is to be used.

(5) If the person is required under the *Traffic Act 1987* to submit to a breath analysis or provide a sample of blood and fails to do so, the concentration of alcohol in the person's breath or blood at the time of the accident is taken to exceed the concentration mentioned in subregulation (1)(a) or (b).

(6) However, subregulation (5) does not apply if the Commission is satisfied that the person had a reasonable excuse for the failure to submit to a breath analysis or provide a sample of blood.

(7) If subregulations (2) to (6) do not apply, the Commission may have regard to any relevant information or evidence to determine the concentration of alcohol in the person's breath or blood at the time of the motor accident.

(8) In this regulation:

breath analysis, see section 3(1) of the *Traffic Act 1987*.

5 Commutation of compensation for loss of earning capacity

(1) The Commission may commute a liability to pay compensation for loss of earning capacity.

(2) A commutation may be made under this regulation:

(a) on the application of the eligible person; or

(b) if the amount of the compensation to which the eligible person is entitled does not justify, in the Commission's opinion, the administrative cost of making periodic payments.

(3) In determining the amount for which an entitlement to future benefits should be commuted, a discount rate of 6% will be applied.

(4) The payment of the amount assessed on commutation discharges the Commission from further liability to pay benefits of the kind to which the commutation relates.

(5) However, the Commission has a discretion to re-open a commutation under this regulation if:

(a) the commutation was made without the eligible person's consent; and

(b) there has been a substantial deterioration of the eligible person's medical condition since the date of the commutation.

6 Commutation of benefits where eligible person resides or is about to reside outside Australia

(1) This regulation applies to statutory benefits of the following kinds:

(a) compensation for loss of earning capacity under section 13 of the Act;

(b) compensation for the reasonable cost of medical and rehabilitation services under section 18 of the Act;

(c) long-term benefits for attendant care services under section 18B of the Act.

(2) The Commission may, on application by an eligible person, commute a liability to pay statutory benefits to which this regulation applies if satisfied that:

(a) the eligible person is ordinarily resident outside Australia or is about to leave Australia to take up residence, for a substantial period, outside Australia; and

(b) the eligible person is entitled to benefits of the kind for which commutation is sought; and

(c) the eligible person has suffered a permanent impairment as a result of the injury received in, or as a result of, the relevant motor accident and the degree of the permanent impairment (as assessed by the Commission) is 15% or more; and

(d) the eligible person's medical condition has stabilised to a point where it is possible to predict the future course of the condition (i.e. the nature and extent of future amelioration or deterioration of the condition) with reasonable certainty.

(3) For determining the amount for which an entitlement to future benefits should be commuted:

(a) the amount of the future benefits will be assessed on the assumption that the eligible person will remain in Australia; and

(b) the probable future amelioration or deterioration of the eligible person's medical condition will be taken into account (and, for this purpose, it will be assumed that the eligible person will receive the benefit of rehabilitative services equivalent to the best that would have been available to the eligible person if he

or she had remained in Australia); and

(c) a discount rate of 6% will be applied.

(4) The total amount for which statutory benefits are commuted under this regulation cannot exceed $1million (indexed) and the component of such an amount representing compensation for the reasonable cost of medical and rehabilitation services cannot exceed $300 000 (indexed).

(5) The payment of the amount assessed on commutation discharges the Commission from further liability to pay benefits of the kind to which the commutation relates.

Schedule 1 Criteria for benefits for attendant care services

regulations 4E and 4F

1 Spinal cord injury

Injury Acute traumatic lesion of the neural elements in the spinal canal (spinal cord and cauda equina)

Criteria The injury has resulted in:

(a) a permanent neurological deficit – determined in accordance with the ISNCSCI classification tool and evidenced by a score of A to D on the ASIA Scale at the date of assessment; or

(b) significant residual impact on the functioning of the person's autonomic nervous system (with particular reference to resultant bladder and bowel dysfunction) – evidenced by a score of 0 in any of the elements of the ISAFSCI assessment tool.

Definitions

In this item:

ASIA means the American Spinal Injury Association.

ASIA Scale means the American Spinal Injury Association Impairment Scale published by the ASIA.

ISAFSCI assessment tool means the International Standards to document remaining Autonomic Function after Spinal Cord Injury assessment tool.

ISNCSCI classification tool means the International Standards For Neurological Classification of Spinal Cord Injury classification tool published by the ASIA.

2 Brain injury

Injury Traumatic brain injury

Criteria

1 If the eligible person is 8 or more years of age at the date of assessment – the injury has resulted in the eligible person:

(a) having either of the following:

(i) 7 days or more of post-traumatic amnesia – measured using a recognised PTA scale;

(ii) a significant brain imaging abnormality; and

(b) having a score of 5 or less on any item in the FIM Guide at the date of assessment.

2 If the eligible person is 3 or more, but less than 8, years of age at the date of the assessment – the injury has resulted in the eligible person:

(a) having one of the following:

(i) a score of less than 9 on the Glasgow Coma Scale – assessed within 24 hours of the motor accident;

(ii) 7 days or more of post-traumatic amnesia – measured using a recognised PTA scale;

(iii) a significant brain imaging abnormality; and

(b) having a score of at least 2 less than the age norm for the eligible person on any item on the WeeFIM Instrument at the date of assessment.

3 If the eligible person is less than 3 years of age at the date of the assessment – as a result of the injury, the person will probably have a permanent impairment which will have a significant adverse impact on their normal development, as determined by a medical practitioner specialising in paediatric rehabilitation.

Definitions

In this item:

FIM Guide means the FIM™ (Guide for the Uniform Data Set for Medical Rehabilitation) published by the Uniform Data System for Medical Rehabilitation.

Glasgow Coma Scale means the Glasgow Coma Scale published by Teasdale and Jennett.

recognised PTA scale means the Westmead Post Traumatic Amnesia Scale published by the Westmead Hospital or a similar clinically accepted, validated scale for post-traumatic amnesia.

WeeFIM Instrument means the WeeFIM® Instrument published by the Uniform Data System for Medical Rehabilitation.

3 Amputations

Injury Amputation or injury equivalent to an amputation

Criteria The injury is one of the following:

(a) brachial plexus avulsion or rupture that is equivalent to an amputation;

(b) single forequarter amputation;

(c) single shoulder disarticulation;

(d) single amputation of lower limb at or above 65% of femur;

(e) 2 or more of the following:

(i) amputation of lower limb at or above 50% of tibia;

(ii) amputation of upper limb at or above the first metacarpophalangeal joint of the thumb and index finger of the same hand.

Measurement procedure for amputations

Percentage loss of length of tibia or femur is:

(a) to be calculated:

(i) using pre- and post-amputation x-ray imaging; or

(ii) if x-ray imaging is not available – by comparison of length of amputated tibia or femur and length of contralateral tibia or femur; or

(b) if calculation under paragraph (a) is not possible in respect of tibia amputation, the percentage loss of length of the tibia is taken to be 50% of tibial length calculated from estimated knee height (based on the person's total height prior to the motor accident).

Definition

In this item:

forequarter amputation means amputation of the humerus, scapula and clavicle.

4 Burns

Injury Burns

Criteria

1 For this item, the criteria in clauses 2 and 3 must be satisfied.

2 One of the following as evidenced by a burn impact score of 50 points on a recognised burns scale:

(a) full thickness burns to:

(i) if the person is more than 16 years of age at the date of the motor accident – at least 40% of the body; or

(ii) if the injured person is aged 16 years of age or less at the date of the motor accident – 30% of the body;

(b) permanent inhalation burns causing long-term significant respiratory impairment;

(c) full thickness burns to the hands, face or genital area.

3 The injury has resulted in the person:

(a) if the person is 8 or more years of age at the date of the assessment – having a score of 5 or less on one or more items in the FIM Guide at the date of assessment; or

(b) if the person is 3 or more, but less than 8, years of age at the date of the assessment – having a score of at least 2 less than the age norm on any item on the WeeFIM Instrument at the date of assessment; or

(c) if the person is less than 3 years of age at the date of the assessment – the person will probably have permanent impairment due to the burns resulting in significant adverse impact on their normal development, as certified by a medical practitioner specialising in paediatric rehabilitation.

Definitions

In this item:

FIM Guide means the FIM™ (Guide for the Uniform Data Set for Medical Rehabilitation) published by the Uniform Data System for Medical Rehabilitation.

recognised burns scale means the Greenwood Burns Scale published by the Royal Adelaide Hospital or a similar clinically accepted, validated scale for burns.

WeeFIM Instrument means the WeeFIM® Instrument published by the Uniform Data System for Medical Rehabilitation.

5 Blindness

Injury Blindness

Criteria Permanent blindness as evidenced by any of the following:

(a) visual acuity on the Snellen Scale after correction by suitable lenses is less than 6/60 in both eyes;

(b) field of vision is constricted to 10 degrees or less of arc around central fixation in the better eye, irrespective of corrected visual acuity (equivalent to 1/100 white test object);

(c) a combination of visual defects resulting in the same degree of visual loss as that mentioned in paragraph (a) or (b).

Schedule 2 Pricing of benefits for attendant care services

regulation 4G

1 Benefits paid directly to an injured person or to any other person

The amount of benefits for attendant care services where benefits are paid directly to an injured person or to any other person (other than an approved provider mentioned in clause 2 or 3) is $52.42 for each hour for which those services are provided.

2 Benefits paid directly to an approved provider for services provided in the Territory

(1) This clause applies if:

(a) benefits for attendant care services are being paid directly to an approved provider of attendant care services; and

(b) the services are being provided in the Territory.

(2) The amount of benefits is the lesser of the following:

(a) the amount charged by the provider of the attendant care services for the provision of services;

(b) the amount for the provision of services determined using the rates in the Table to this subclause, increased (if applicable) in accordance with clause 4.

Item	Type of service	Hours during which service performed	Rate per hour (unless otherwise specified) exclusive of GST
1	Household services	All hours	$65.66
2	Personal services (other than services provided as part of inactive sleepover or night monitoring)	Monday to Friday 6 am to 8 pm	$65.66
		Monday to Friday 8 pm to 12 am	$72.62
		Monday to Friday 12 am to 6 am	$74.01
		Saturday (all hours)	$93.50

		Sunday (all hours)	$121.34
		Public Holidays (all hours)	$149.19
3	Inactive sleepover or overnight monitoring		$279.88 per session

(3) In this clause:

inactive sleepover or overnight monitoring means an attendant care service provider staying overnight at the same place as the injured person, and includes up to 1 hour of assistance provided to the injured person.

3 Benefits paid directly to an approved provider for services provided outside the Territory

(1) This clause applies if:

(a) benefits for attendant care services are paid directly to an approved provider of attendant care services; and

(b) the services are provided in a State or another Territory.

(2) The amount of benefits is the lesser of the following:

(a) the amount charged by the provider of the attendant care services for the provision of services;

(b) the amount determined using the rates specified in the "Support Clusters and Associated Pricing" documents (published by the National Disability Insurance Agency) for provision of comparable services:

(i) in the State or Territory in which they are provided; or

(ii) if a rate is not specified for that State or Territory – in New South Wales.

4 Benefits for attendant care services provided in certain regions

(1) If attendant care services are provided to an approved provider in the Territory in a remote region or very remote region, the amount determined under clause 2(2)(b) is increased by the following percentage:

(a) for services provided in a remote region – 15%;

(b) for services provided in a very remote region – 21%.

(2) In this clause:

Independent Hospital Pricing Authority means the Independent Hospital Pricing Authority established under section 29 of the *National Health Reform Act 2011* (Cth).

remote region means a region classified as remote in accordance with the National Efficient Price Determination published by the Independent Hospital Pricing Authority.

very remote region means a region classified as very remote in accordance with the National Efficient Price Determination published by the Independent Hospital Pricing Authority.

ENDNOTES

1 KEY

Key to abbreviations

amd = amended
app = appendix
bl = by-law
ch = Chapter
cl = clause
div = Division
exp = expires/expired
f = forms
Gaz* = *Gazette
hdg = heading
ins = inserted
lt = long title
nc = not commenced
od = order
om = omitted
pt = Part
r = regulation/rule
rem = remainder
renum = renumbered
rep = repealed
s = section
sch = Schedule
sdiv = Subdivision
SL = Subordinate Legislation
sub = substituted

2 LIST OF LEGISLATION

***Motor Accidents (Compensation) Rates of Benefit Regulations* (SL No. 38, 1984)**

Notified	29 June 1984
Commenced	1 July 1984 (r 2, s 2 *Motor Accidents (Compensation) Amendment Act (No. 2) 1984* (Act No. 8, 1984) and *Gaz* S34, 29 June 1984)

***Amendments of the Motor Accidents (Compensation) Rates of Benefits Regulations* (SL No. 37, 1986)**

Notified	1 October 1986
Commenced	1 October 1986 (r 2, s 2 *Motor Accidents (Compensation) Amendment Act 1986* (Act No. 32, 1986) and *Gaz* S70, 1 October 1986, p 2)

***Amendments of the Motor Accidents (Compensation) Rates of Benefit Regulations* (SL No. 29, 1989)**

Notified	8 November 1989
Commenced	8 November 1989 (r 1, s 2 *Motor Accidents (Compensation) Amendment Act (No.2) 1989* (Act No. 61, 1989) and *Gaz* G44, 8 November 1989, p 3)

***Amendments of the Motor Accidents (Compensation) Rates of Benefit Regulations* (SL No. 67, 1992)**

Notified	11 November 1992
Commenced	11 November 1992

***Motor Accident (Compensation) Rates of Benefit Amendment Regulations 2007* (SL No. 13, 2007)**

Notified	23 May 2007
Commenced	23 May 2007

Territory Insurance Office and Other Legislation Amendment Act 2010 **(Act No. 35, 2010)**

Assent date	18 November 2010
Commenced	pt 4: 1 January 2011; rem: 18 November 2010 (s 2)

Motor Accident (Compensation) Amendment Regulations 2014 **(SL No. 19, 2014)**

Notified	1 July 2014
Commenced	1 July 2014

Territory Insurance Office (Sale) Act 2014 **(Act No. 41, 2014)**

Assent date	28 November 2014
Commenced	pt 6, divs 1 and 2: nc (exp without commencing); pt 6, div 3: 00:01hrs 1 January 2015 (*Gaz* S131, 19 December 2014, p 8); rem: 28 November 2014 (s 2)

Motor Accident (Compensation) Amendment Regulations (No. 2) 2014 **(SL No. 39, 2014)**

Notified	24 December 2014
Commenced	24 December 2014

Transport Legislation Amendment Act 2020 **(Act No. 23, 2020)**

Assent date	10 July 2020
Commenced	1 July 2021 (*Gaz* G23, 9 June 2021, p 1)

Amending Legislation

Statute Law Revision Act 2020 **(Act No. 26, 2020)**

Assent date	19 November 2020
Commenced	20 November 2020 (s 2)

Motor Accident (Compensation) Amendment Regulations 2026 **(SL No. 25, 2026)**

Date made	27 August 2026
Commenced	28 August 2026 (r 2)

3 SAVINGS AND TRANSITIONAL PROVISIONS

r 11 *Amendments of the Motor Accidents (Compensation) Rates of Benefit Regulations* (SL No. 29, 1989)

4 GENERAL AMENDMENTS

General amendments of a formal nature (which are not referred to in the table of amendments to this reprint) are made by the *Interpretation Legislation Amendment Act 2018* (Act No. 22, 2018) to: rr 1, 4A, 4K and 4M.

5 LIST OF AMENDMENTS

r 1	sub No. 13, 2007, r 3 amd No. 19, 2014, r 4
r 2	sub No. 13, 2007, r 3
r 3A	ins No. 29, 1989, r 3 rep No. 13, 2007, r 3
r 3	amd No. 29, 1989, r 4 rep No. 67, 1992 ins No. 13, 2007, r 3

r 4	amd No. 29, 1989, r 5 rep No. 67, 1992 ins No. 13, 2007, r 3 amd Act No. 35, 2010, s 49 sub No. 19, 2014, r 5 amd Act No. 41, 2014, s 53
r 4A	ins No. 29, 1989, r 6 rep No. 13, 2007, r 3 ins No. 19, 2014, r 5 amd Act No. 41, 2014, s 53
r 4B	ins No. 29, 1989, r 6 rep No. 67, 1992 ins No. 19, 2014, r 5 sub Act No. 23, 2020, s 76
rr 4C – 4F	ins No. 19, 2014, r 5 amd Act No. 41, 2014, s 53
r 4G	ins No. 19, 2014, r 5
rr 4C – 4M	ins No. 19, 2014 r 5
r 4N	ins No. 19, 2014, r 5 rep No. 39, 2014, r 3
r 5	sub No. 37, 1986, r 4 amd No. 29, 1989, r 7 rep No. 67, 1992 ins No. 13, 2007, r 3 amd Act No. 35, 2010, s 49; Act No. 41, 2014, s 53
r 6	rep No. 37, 1986, r 5 ins No. 13, 2007, r 3 amd Act No. 35, 2010, s 49Act No. 41, 2014, s 53
r 7	amd No. 37, 1986, r 6; No. 29, 1989, r 8 rep No. 67, 1992
r 8	amd No. 37, 1986, r 7; No. 29, 1989, r 9 rep No. 67, 1992
r 9	amd No. 37, 1986, r 8; No. 29, 1989, r 10 rep No. 67, 1992
sch 1	ins No. 19, 2014, r 6
sch 2	ins No. 19, 2014, r 6 amd No. 25, 2026, r 4