

Key trends and issues: ACC claims

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Outline

- Trends in road claims to ACC
- Perception of road risk study
- Impact of the petrol prices
- Look at some data
- Integrated with CAS to determine severity



Maybe we need to make behaviour change fun....





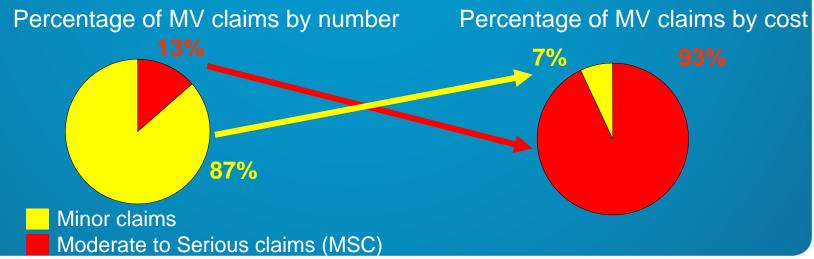
Background

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- Claims updated monthly and on average 14 day delay between crash and ACC claims being registered.





Example of ACC coverage

ETER'S CAR is a wreck — and so is he. He's collided with a logging truck after reaching speeds of 120km/h.

His mates both died after being thrown out of the vehicle. His sister, Jenny, 16, was luckier. She escaped with just a knee injury.

But apart from the pain and endless suffering resulting from this crash, there are the seemingly endless costs. ACC estimates a fictional accident like this would cost it — and indirectly motorists — \$384,644. And that's not counting the social cost. The Ministry of Transport calculates the cost to society of a teenager dying in a car crash is almost \$3 million. For a teenager — or anyone else who is seriously injured, the country suffers a social and economic cost of \$490,000.

These stark averages may seem clinical, but each teenage road death causes an average of \$5400 in emergency services and medical bills, \$7700 in legal and court costs, and \$4400 in property damage.

Ministry of Transport economist Joanne Leung said the social-cost formula was established to allow transport officials to work out how much people would pay to reduce the chances of death, serious and minor injury, pain, grief and suffering resulting from road crashes.

On that basis, the ministry estimated crashes caused by 15- to 24-year-olds cost just over \$1 billion in the year to June — almost a quarter of the social costs of all car accidents. And ACC, the Government agency that covers the cost of road camage, says more than a fifth of its \$354 million bill for car accidents covered crashes involving young drivers.

Ms Leung estimates the deaths of four Hawke's Bay teenagers three weeks ago, and the serious injuries of two of their friends, would carry a social cost of around \$12 million.

In its latest report on the social cost of road crashes, the ministry has broken down the cost of crashes depending on whether they occur on rural or urban roads, and the type of accident. If a teenager is seriously injured on a Gisborne or Northland road, that will cost more in medical bills and emergency services, for example, than if the crash happened on a stretch of road in Auckland, Otago or Southland.

The fictional crash ACC created for the *Herald on Sunday* involved four teenagers on a remote central North Island road and was based on costs typically incurred. Gary, 19, who was killed, left his partner and baby daughter. His death brought other costs — his partner received a \$4815 funeral grant, a \$5162 survivor's grant, \$168,000 in Gary's wages paid in weekly instalments, and, for his young daughter, \$35,000 in childcare, a \$2581 survivor's grant and \$78,000 of his wages until she turned 18.

Emergency-service costs for Gary's workmate, Peter, 19, were nearly \$3000 — and Peter spent 12 nights in hospital at a cost of \$4560.

Once discharged, there was ongoing medical care — wound dressings, \$4000; physiotherapy, \$1300; pain therapy, \$1440; transport for treatment, \$800; equipment and splints, \$1300; and an artificial lower limb, \$4500; along with a variety of other medical costs covered by ACC.

Peter was also given a \$13,740 lump-sum payment for his impairment, and 40 weeks' compensation of \$19,720 for being off work.

The total to ACC is \$75,830.

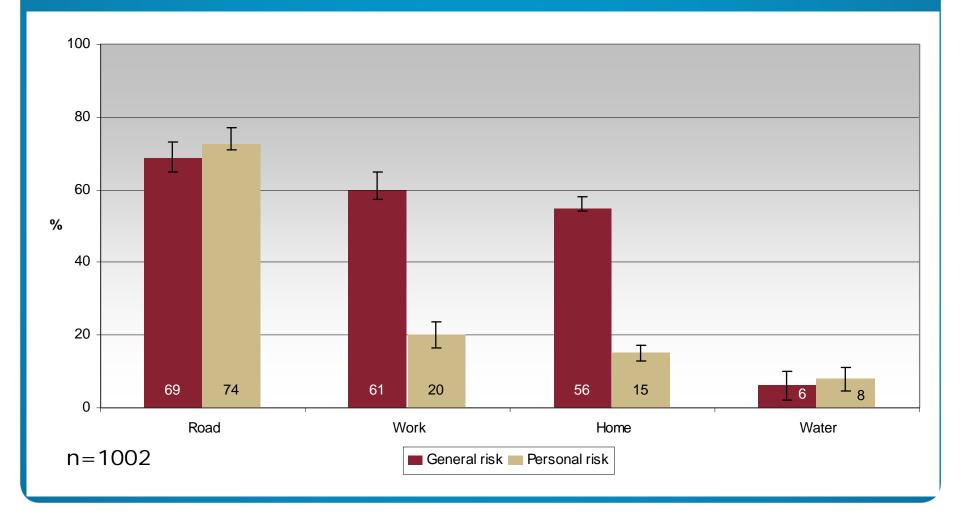
Friend Paul is also killed and his grieving family is entitled to a funeral grant. Jenny, 16, eventually needs knee surgery, but her bills are at the lower end of the scale at just \$9640.

Transport Safety Minister Harry Duynhoven said he did not believe New Zealanders truly understood the financial cost of car crashes.

"Obviously everyone appreciates the costs in terms of carnage, but people aren't thinking about the hospital costs, emergency service costs and disruption."

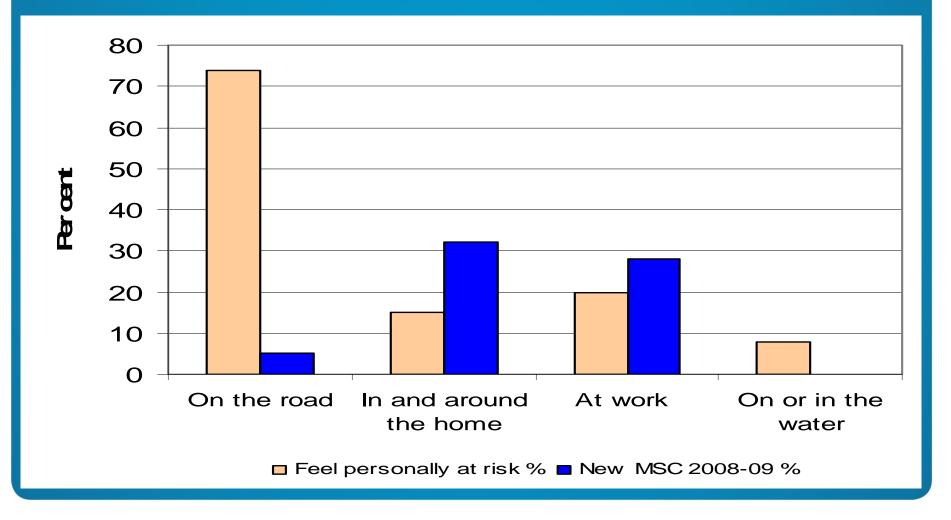


Where do we believe injuries are happening most frequently?





How do our beliefs compare with ACC statistics?





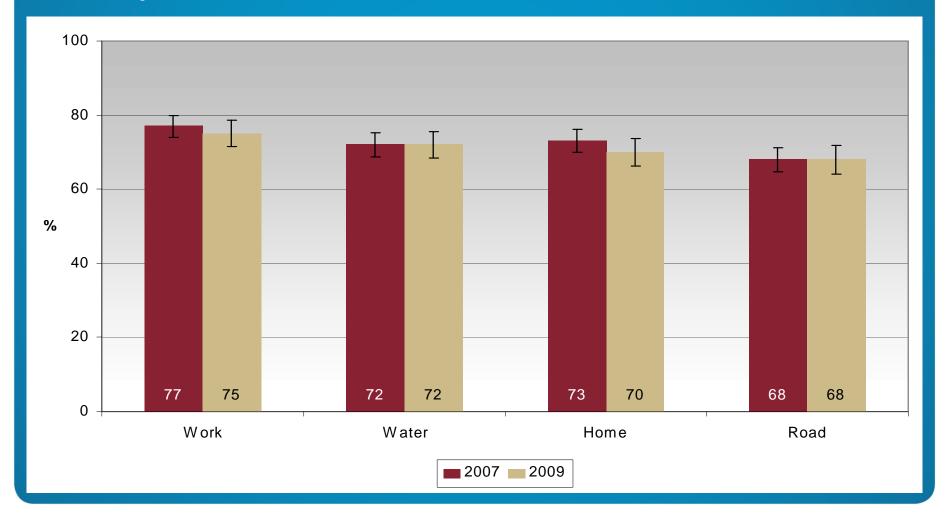
Where do people believe New Zealanders are most at risk of accident or injury?

Road

- On the open road (58%)
- At intersections (32%)
- In cities or towns (25%)

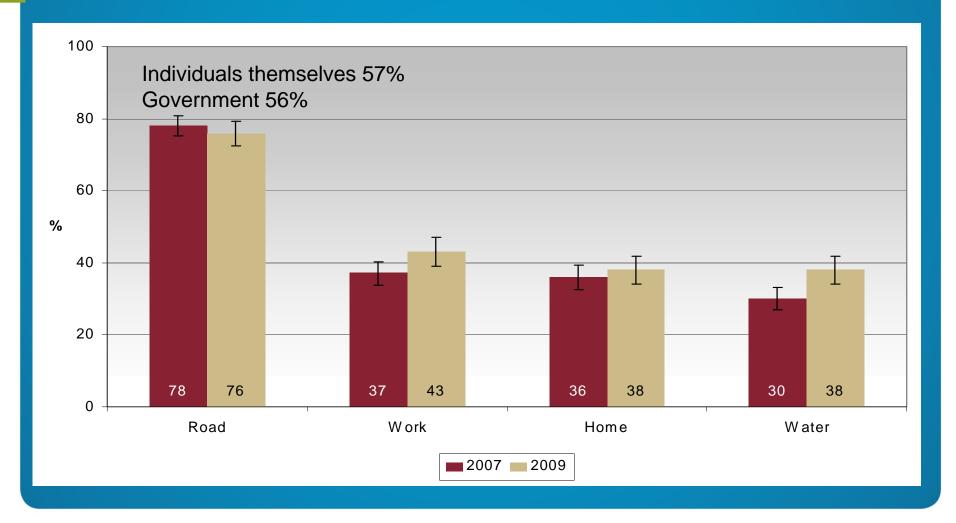


We believe accidents and their injuries are preventable

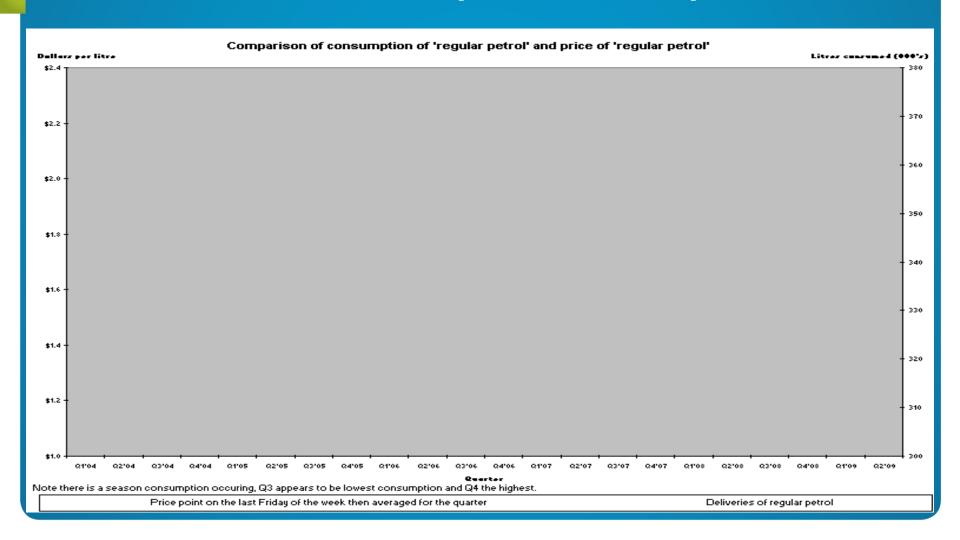




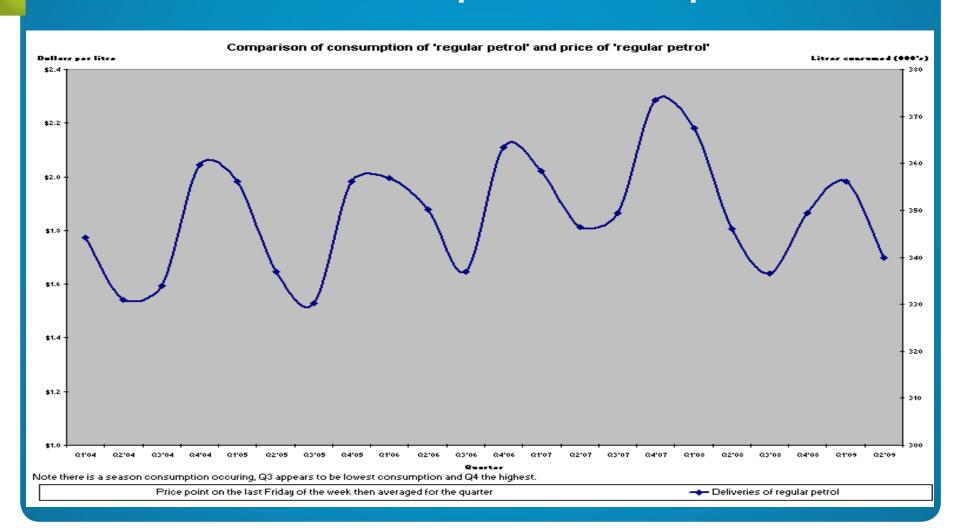
Where should the focus be placed in the future, and who is responsible?



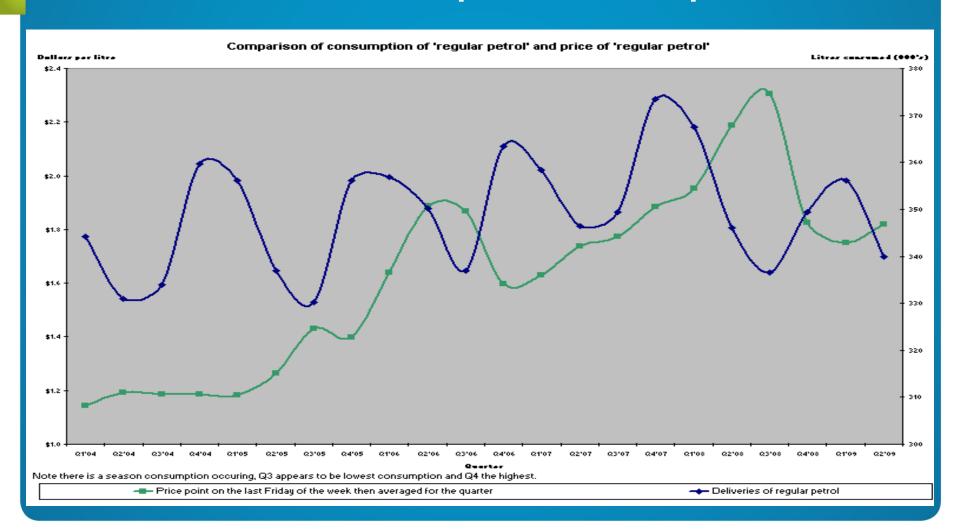




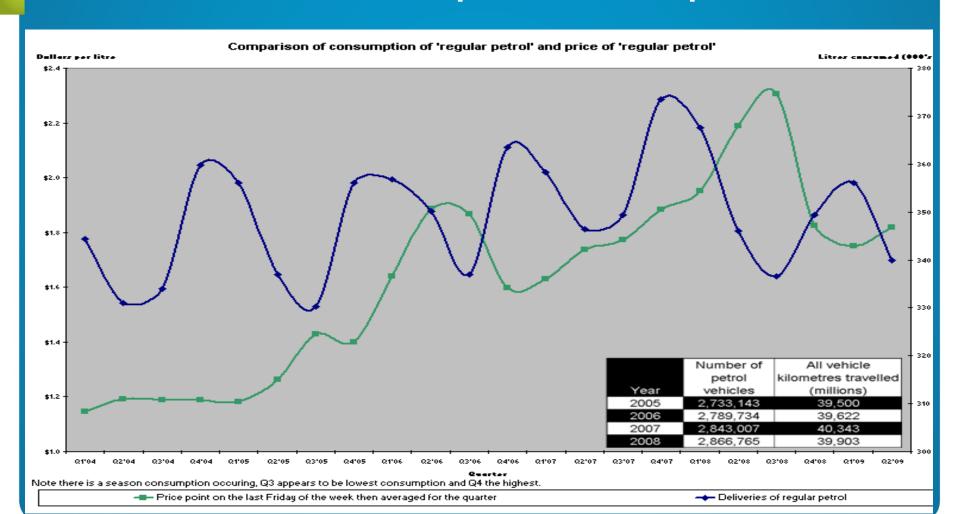










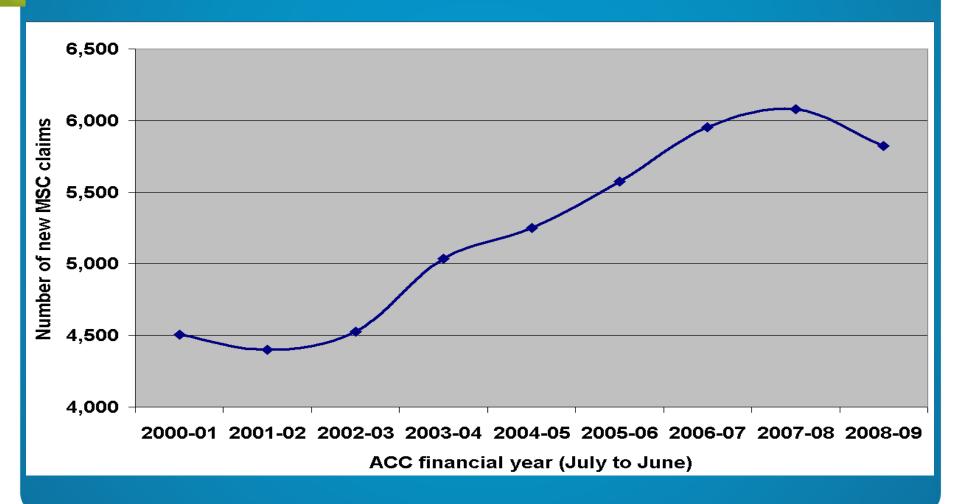




ACC data trends

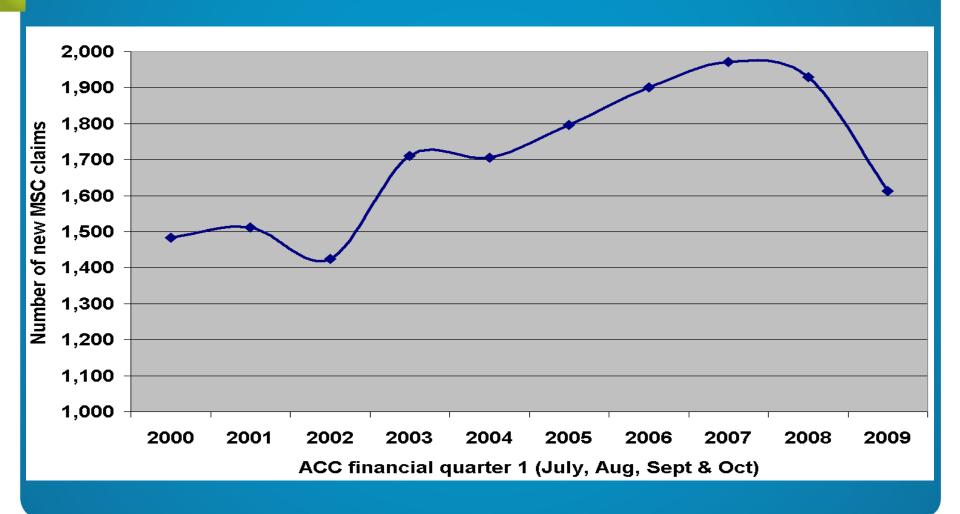


New motor vehicle MSC



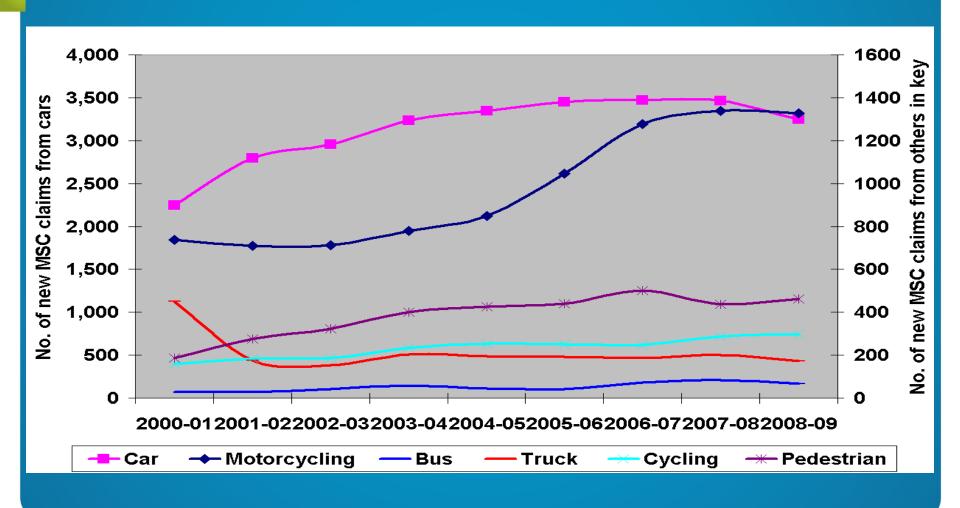


New motor vehicle MSC for July-Oct





By vehicle type

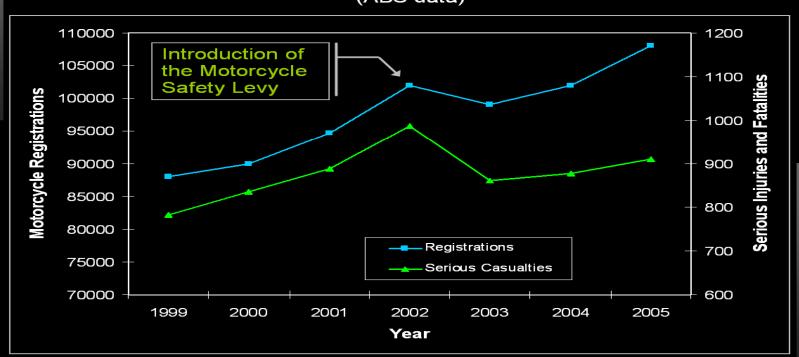




Victoria, Australia Motorcycle safety levy

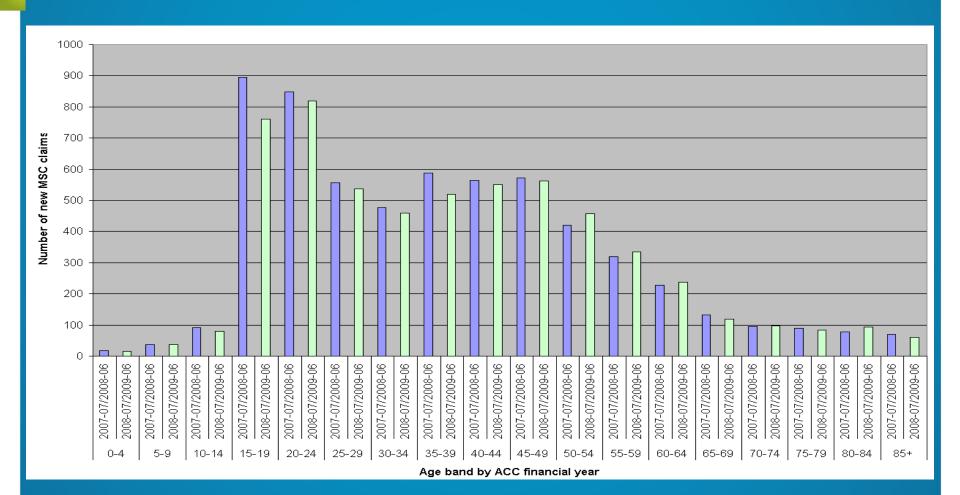
Motorcycle Safety Background

Motorcycle casualty trends against registrations (ABS data)



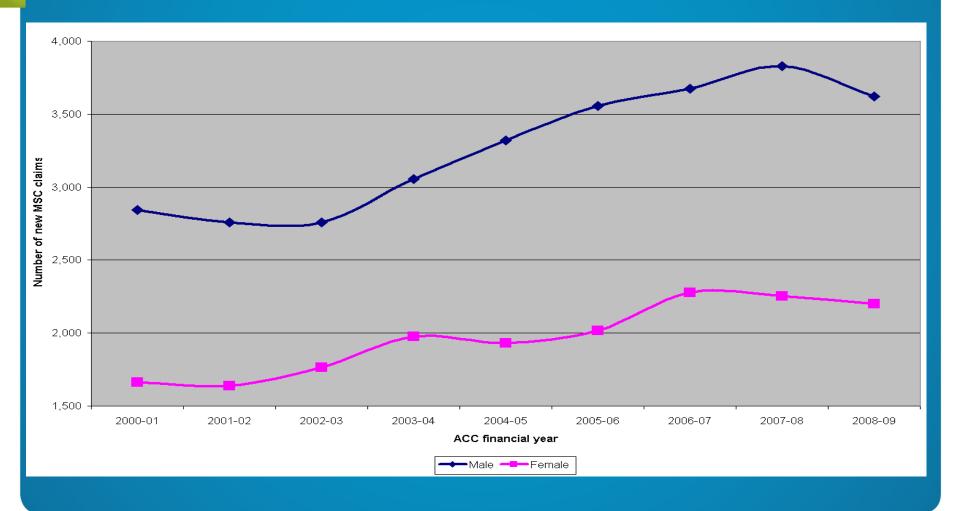


By age of customer



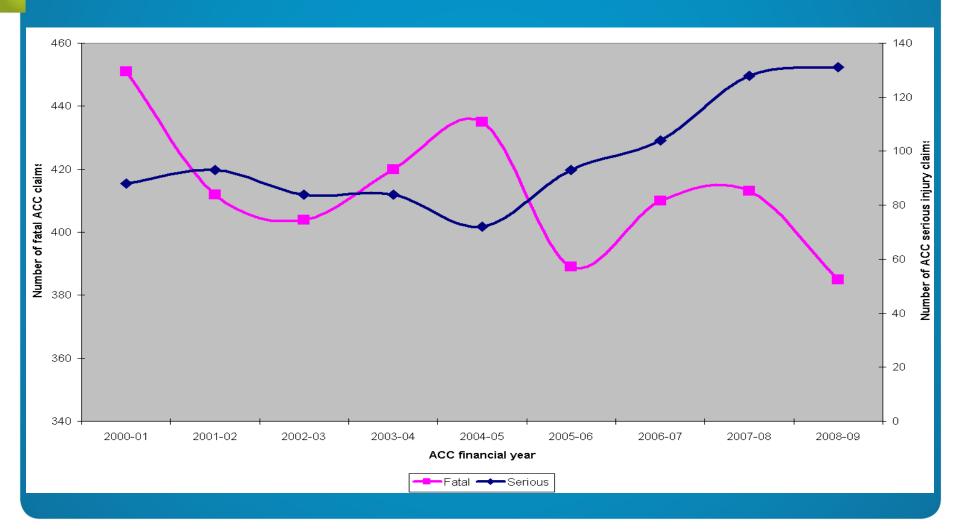


By gender of customer





ACC Fatal vs ACC serious





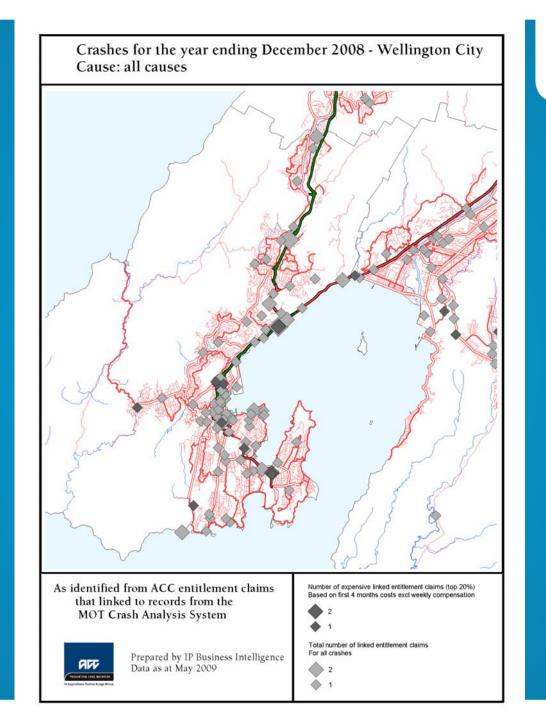
Data integration

- Linked the CAS data to ACC data
- Integrates severity next to the crash
- Severity is determined by a doctor and measured as a cost
- 4 months is used as a proxy as it is reflective of full costs
- ACC is using this in National and local planning

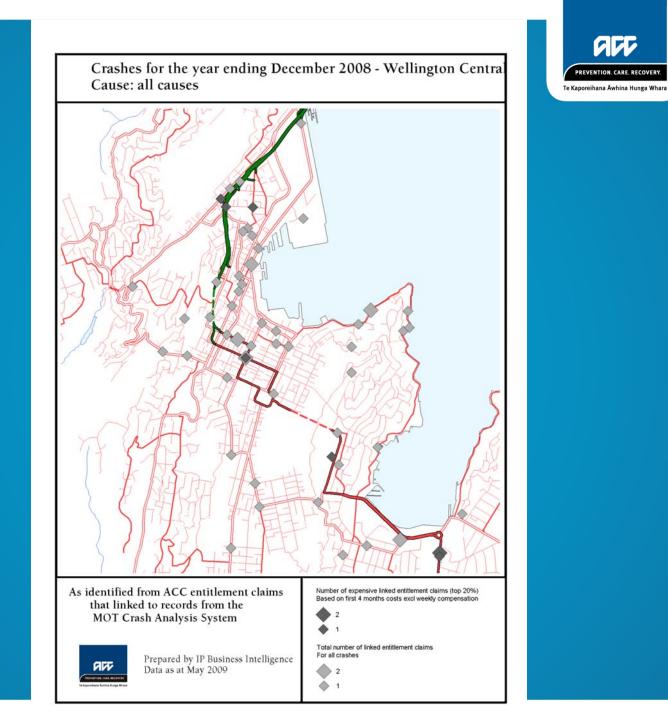


Conversion to ACC entitlement claims

		15-17	
		years	
Crash Cause	Alcohol	olds	Speed
CAS Serious			
Injury	54.5%	50.1%	54.8%
CAS Minor Injury	11.6%	7.8%	10.2%







PREVENTION. CARE. RECOVERY.



Summary table

- Perceived risk on the road is high
- Elasticity of demand of petrol price isn't a significant factor, probably recession is
- Observed a decease in MSC in the last 16 months
- Hospitalisation trends mirrors ACC data trends, but ACC data is reported sooner (monthly).
- 15-44 years old was decrease in claims in 2008/09
- Motorcycles growing trends has levelled off
- No links between ACC serious injury and ACC fatalities
- CAS serious and minor injuries do not correspond with ACC MSC that have a medical diagnosis.
- Using the integrated CAS/ACC data set to assist in planning
- Final thought you might have unintended consequences of your intervention



