

Title Surname	Postal address
Name	
Date of birth Sex Male Female	Home telephone number
YYYY/MM/DD	
ID number / Passport number	Work telephone number
Residential address	Fax number
	Cell
	E-mail
TO BE COMPLETED WHERE THE FUN	
	ND REQUESTS DISPUTE RESOLUTION: Postal address
To BE COMPLETED WHERE THE FUNCTION TO BE COMPLETED	ND REQUESTS DISPUTE RESOLUTION:
Complete available details of the third party: Fitle Surname	ND REQUESTS DISPUTE RESOLUTION:
Complete available details of the third party:	ND REQUESTS DISPUTE RESOLUTION: Postal address
Complete available details of the third party: Fitle Surname Name Date of birth Sex Male Female	Postal address Home telephone number Work telephone number
Complete available details of the third party: Fitle Surname Name Date of birth Sex Male Female	Postal address Home telephone number
Complete available details of the third party: Fitle Surname Name Date of birth Sex Male Female	Postal address Home telephone number Work telephone number



Details of	Fund contact person:	Telephone number
Title	Surname	
		Fax number
Name		E-mail
D ()		
Postal add	ress	Reference
3 INDIC	ATE NATURE OF DISPUTE	RESOLUTION:
3		
Dis	spute of assessment - complete par	agraphs 4 and 6
	pate of accessment complete par	
Dis	spute of rejection of serious injury as	ssessment report - complete paragraphs 5 and 6.
4 ASSE	SSMENT DETAILS:	
\\/\langle = 10 a months		
vvno peno	rmed the assessment?	
Whon was	the assessment performed?	
YYYYM		
	e you advised of the outcome of the	a assessment?
		, assessment:
(Please attach the serious injury assessment report - RAF4)		
(1 10000 01)		
5 REJE	CTION DETAILS:	
		at visio sto d2
	the serious injury assessment repo	n rejected?
YYYY/M		on valentedO
	e you advised that the report has be	en rejected?
YYYY/M		
(Please attach reasons furnished by the Fund)		



et out the grounds upon which you are disputing the ass	sessment / rejection of the serious injury assessment repo
tach all submissions, medical reports and opinions that	you rely upon.
ignature of the person requesting dispute resolution	
ignature of the person requesting dispute resolution	
	Date YYYY/MM/DD
DI FACE CENID TI IIC NOTICE TO	THE REGISTRAR OF THE HPCSA,

faxed or sent per e-mail)



NOTIFICATION OF DISPUTE IN RELATION TO THE ASSESSMENT OF A SERIOUS INJURY

HOW DISPUTE RESOLUTION WILL HELP YOU?

In terms of the Act and the Regulations your claim for non-pecuniary loss must be supported by a serious injury assessment report, indicating that the injury has been assessed as serious by a medical practitioner and the Fund must be satisfied that the injury has been correctly assessed as serious.

What disputes are covered by the dispute resolution service?

Dispute resolution helps you if:

- the medical practitioner has assessed your injury as "not serious"; or
- if the Fund has rejected a serious injury assessment report by a medical practitioner in terms of which your injury has been assessed as "serious".

You must indicate on the form whether you wish to dispute the assessment of the medical practitioner or the rejection of the report by the Fund. If you disagree with either of these, you may lodge a dispute with the Registrar of the Health Professions Council of South Africa ("the HPCSA").

When must a dispute be lodged?

Within 90 days of being notified of the outcome of the assessment or being notified of the rejection of the serious injury assessment report and the reasons therefore, failing which you may apply to the Registrar of the HPCSA for approval (condonation) for late notification.

How does the dispute resolution process work?

- Your notification must be lodged with the Registrar together with all the submissions (argument), medical reports or opinions (expert advice) that you want to rely on.
- b) After you lodge your dispute, the Registrar must then inform the Fund of the dispute and give the Fund copies of all the documentation submitted by you.
- c) The Fund then has 60 days to answer your case by giving the Registrar their submissions, medical reports or opinions.
- d) After this, the Registrar will then inform you about the names of the medical practitioners appointed to decide your dispute. You may object to these appointments if you wish to do so.
- e) If asked to do so, the appeal tribunal may say that legal arguments should be made on certain issues and an attorney or advocate will then be appointed to hear such argument.
- f) The appeal tribunal is given extensive powers under the Regulations to enable them to deal with the dispute:
- The tribunal may tell you that you have to undergo another assessment by a medical practitioner for which the Fund will pay.
- The tribunal may say that you must appear before them so that they can examine your injury for themselves.
- The tribunal may ask you for further submissions or medical records.
- g) If asked to do one of the above, you should comply with the request, otherwise the appeal tribunal may refuse to decide your dispute.
- h) Ultimately, the appeal tribunal will decide your dispute and you will be informed of the outcome by the Registrar. The Fund will be obliged to accept the findings of the appeal tribunal.

How long will it take?

The appeal tribunal, appointed by the Registrar of the HPCSA to consider your dispute, must publish its findings within 90 days from the date that the dispute is referred to it, which will normally be done after the Fund has answered your case.

For further information please phone the Road Accident Fund on ShareCall number: 0860 23 55 23