



# Compensation Claims

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The information provided herein is a summary and is made available for the convenient use of UNHCR staff members. The rules are numerous and complex: the purpose of this booklet is to assist the reader in understanding a benefit that is available in case the need arises. Further references are cited in the text.

## Definition

Appendix D to United Nations Staff Rules provides the rules governing compensation in the event of **death, injury or illness** which is determined to be **attributable to the performance of official duties** on behalf of the United Nations. Therefore, in order for a Claim to be considered under the Appendix D to the Staff Rules, a direct link between the accident, incident and/or the illness and the performance of official duties must be established. Refer to *consolidated text of the Appendix D to the United Nations Staff Rules* for information on the conditions under which compensation may be granted.

When a staff member sustains an injury or suffers an illness which he or she considers to be attributable to the performance of official duties, the staff member should observe the following procedure:

- Report the **accident/incident** without delay to the Field Safety Section (hqfs00@unhcr.org). This can also be made through the Head of Office, Administrative Officer and/or Field Safety Advisor.
- In case of an absence from work due to an accident/**illness**, report it to the Medical Service (hqms00@unhcr.org), through the Head of Office, Administrative Officer and/or Field Safety Advisor.
- It is important to note that personal information of medical nature must be addressed exclusively to the Medical Service, and such information should not be communicated to any other parties.
- For any specific situations or queries on Appendix D procedures, please contact your Administrative Officer in the Field or PAPS/HQs Liaison & Compensation Unit (hqappdx@unhcr.org).

# How to submit a claim for compensation?

1. Staff members wishing to file a Claim for compensation under the Appendix D to the Staff Rules must do so **within four months of the date of the injury or the onset of the illness**, by completing the Claim for compensation form (*P.72 revision 6*) in English or in French. In the event of death, please refer to paragraph 11 below.

2. If all the required documentation and/or bills are not initially available, the Claim should nevertheless be submitted within the statutory four-month time-limit. The remaining documentation can be supplemented once available. Incomplete files will, however, take more time to adjudicate.

3. If a Claim is submitted after four months from the onset of the illness, injury, or death, the Claim will automatically be rejected, unless written justification is provided requesting the Secretary-General to waive Article 12 (on time-limit for entering Claims) of the Appendix D to the Staff Rules. **The Secretary General may grant a waiver only in exceptional circumstances.**

## Supporting documentation

4. It is of utmost importance that the Claim be substantiated with all the information which may establish the existence of a causal link between the illness or the accident/incident and the staff member's performance of official functions.

5. In all cases, a fully completed P.72 Revision 6 form must be submitted to HQs Liaison & Compensation Unit, PAPS. The P.72 form may initially be submitted via email, in order to meet the 4-month deadline for filing a claim.

6. As per Article 15 of the Appendix D to the Staff Rules, every person claiming compensation under the Appendix D shall furnish such documentary evidence as may be required by the Secretary-General for the purpose of determination of entitlements. The additional information listed in the paragraphs below is based on past claims experience and is usually required by the Compensation Claims Service/Advisory Board on Compensation Claims in the determination of a Claim.

Their submission at the early stages fulfils a two-fold objective: to allow for faster processing / determination, and optimize the possibilities to have it considered favorably.

7. In the case of **an incident/accident**, the following additional information should be submitted:

- Copy of initial report provided to/by the Administrative Officer or Head of Office and/or Field Safety Section
- Official working hours (certified by direct supervisor)
- In cases of accidents occurring on public road (see box) detailed map indicating:
  - Where the accident occurred
  - Where the staff member lives and
  - Where the Office is located
- Detailed police report, if accident was reported and investigated by police, on circumstances of the accident and responsibilities
- In cases of accident occurring during an official mission:  
Copy of PT8 and settled travel claim related to the mission during which claimant allegedly sustained his/her injuries.

### **Accidents occurring on public road**

*It should be noted that the Appendix D may act as a subsidiary coverage in case of an accident while commuting directly to/from the principle residence and work. This includes travels in a motorized or non-motorized vehicle (including public transport) or by foot. The staff member shall first file a claim with the relevant car or civil liability insurance company for the reimbursement of medical and related expenses.*

*Should the insurance refuse coverage (justified in writing), a claim may then be made under the Appendix D.*

# Supporting documentation (cont.)

8. For **an illness** occurring during an official mission, the following additional information is required:

- Copy of PT8 and settled travel claim related to the mission during which the staff member claims to have contracted the illness.

9. As regards Claims arising out of work-related stress and/or conflict at the workplace, the ABCC may request, in addition to the assessment by the Medical Service, a further supporting statement by a third party as to the possible cause of the illness with the informed consent of the claimant. A third party includes the Staff Welfare Section, Office of the Ombudsman and the Inspector's General Office.

10. Incidents of work-related harassment and abuse of authority may constitute misconduct within the meaning of Chapter X of the Staff Regulations and Rules. Staff members filing in this context Claims for compensation under the

Appendix D are required to report corresponding allegations to the Office of the Inspector General ([inspector@unhcr.org](mailto:inspector@unhcr.org)). Claims for compensation relating to misconduct will only be referred to the Advisory Board on Compensation Claims (ABCC), when IGO has determined that the allegations are established. However, this does not guarantee that the Claim will be considered as attributable to the performance of official functions by the ABCC.

11. In the event of staff member's death, the Office should initiate the process under the Appendix D, on behalf of the staff member's surviving family members. The following information is required:

- All five pages of P.72 Revision 6 duly completed
- As appropriate, copy of initial incident report, the UN security and/or police report into the circumstances of the death if death resulted following an accident/incident

- Written declaration of witness(es) either direct and/or indirect
- Copy of the post-mortem and death certificate
- Original medical bills and/or bills relating to funeral expenses and corresponding confirmation of payment
- In case the death is due to an accident/incident which occurred *while commuting directly to/from the principle residence and work* detailed map indicating:
  - Where the accident occurred
  - Where the staff member lives and
  - Where the Office is located
- Detailed police report/UN security report on circumstances of the accident and responsibilities
- In case the death occurred during an official mission:
  - Copy of PT8 and settled travel claim related to the mission during which claimant passed away.

## Medical bills

12. Only the medical bills which are deemed to be related to the claimed injuries or illnesses should be submitted, together with corresponding proofs of payment. They should be listed under page 4 of the P.72 form and submitted in **original form** along with proof of payment to HQs Liaison and Compensation Unit. **Medical bills in relation to a Claim should not be sent directly to the medical insurances (MIP or UNSMIS) or Medical Service.**

13. Staff members are personally responsible for the payment of all medical expenses incurred. Medical insurances, either MIP or UNSMIS,

are not required to provide coverage for service-related injuries or illnesses. However, in order to financially assist the claimant, advances may be requested by the staff member to HQs Liaison and Compensation Unit, pending consideration under the Appendix D. If a staff member is insured privately, no advance can be made.

14. In order to avoid a staff member receiving compensation from various sources for the same incident, compensation awarded under the rules of the Appendix D shall take into account any compensation payments received by the staff member. This is complemented by the provisions of

Article 6 of Appendix D which require staff entitled to Appendix D compensation to assign to the UN any rights of action / claims for liability against third parties.

15. Consequently, and as set out in Article 3 of Appendix D, the compensation awarded pursuant to Appendix D shall be the sole and comprehensive compensation received by a staff member in respect of one incident.

# To whom the Claim should be submitted?

**16.** The original Claim should be sent to the HQs Liaison and Compensation Unit. The last page of the P.72 is to be completed by the claimant's treating physician and should to be sent directly to the Medical Service. Please note that if the P.72 form is not duly completed, the Claim will be returned for further completion.

## Main Compensation Elements

**17.** Depending on the nature of the clinical elements and circumstances, staff members may be entitled to receive reimbursement of medical expenses. Please refer to above paragraphs 12-14.

**18.** In cases where a permanent loss of functions is established, staff members may be entitled to lump-sum compensation.

**19.** In cases where hardship is occasioned by the prior use of sick leave as a result of injury or illness attributable to service, a special sick leave credit may be granted. In this context, the staff member may request a special sick

leave credit only when he or she is about to exhaust the entitlement to sick leave on full-pay, or already has exhausted the entitlement. In such a case, the updated leave records for the last four years (for staff members who have completed three years or more of continuous service) or last year of service (for staff members who have completed less than three years of continuous service) should be submitted, together with the staff member's written request for special sick leave credit.

It should be noted that only the days taken in direct relation with a service-related injury or illness may be considered.

## Who is responsible for considering Claims for compensation under the Appendix D?

**20.** The determination of applicability is made either by the Advisory Board on Compensation Claims (ABCC) at UN Headquarters, New York and/or the Compensation Claims Service (CCS) at the United Nations Office at Geneva (UNOG).

**21.** Staff members should be aware that not all deaths, injuries or illnesses that occur or are contracted while at work or on a mission assignment are automatically considered to be attributable to the performance of official duties.

**22.** As claims are considered on their merits, it is of utmost importance that they be substantiated as much as possible, and that all factual information be submitted, in order to allow the Board(s) to establish a direct link between the illness or accident/

# How long does it take for a compensation Claim to be processed?

23. The time needed to process a Claim varies greatly depending on its complexity. However, based on past experience, the minimum time frame is approximately nine to twelve months. While all claims are treated as quickly as possible, it can take longer to process a claim.

## Statistics - Type of claims filed under Appendix D

