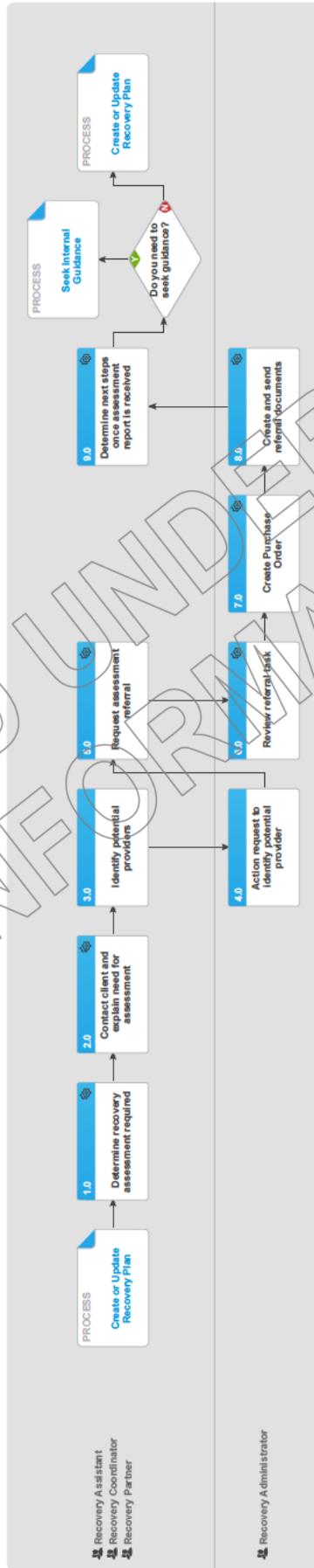




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Summary

Objective

To create and send a medical assessment referral in order to provide the most appropriate support for our clients throughout their recovery.

A medical assessment is a way to establish if the treatment/rehabilitation for the clients injury that they have been receiving is suitable. It nominates a doctor who specialises in that specific area to assess what the most appropriate treatment and rehabilitation options ACC should be offering.

Medical Single Discipline Assessments (Medical SDA) are used to obtain an opinion from an alternative practitioner when we're unable to get this from the client's current treating practitioner.

Key features:

• MSDA is used when:

(1) Cover or entitlement is not in question

(2) Where treatment options are not clear or rehabilitation has stalled despite input from the treating practitioner

- The provider must be a different treating practitioner who is a medical specialist
- The provider may order tests or investigations if necessary for them to be able to provide to an opinion. They can also make recommendations for tests or investigations
- Provides treatment and rehabilitation recommendations from a specialist outside of that available from the treating practitioner
- Medical SDAs are purchased under the Clinical Services contract.

Owner [REDACTED]

Expert [REDACTED]

Procedure

PROCESS

Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner

1.0 Determine recovery assessment required

Recovery Assistant, Recovery Coordinator, Recovery Partner

a Confirm client's eligibility for the Medical Single Discipline (MSD) assessment.

NOTE When are clients eligible for a MSDA?


They have an accepted claim for cover for a personal injury.

NOTE When would you consider referring for a MSDA?

When you need to get a recommendation for the best onward treatment or rehabilitation specific to the clients injury, including obtaining advice from the Treating Practitioner (TP) ie Geriatric Assessment. Refer to the Medical assessments quick reference guide below.

For additional information seek Recovery Support guidance, refer to (NGCM) Seek Internal Guidance.

PROCESS Seek Internal Guidance

 Medical Assessment Quick Ref Guide_updated.pdf

NOTE What are the different types of MSDA you can refer a client for?

- standard
- complex

NOTE When would you refer for a complex MSDA?

- the client's injury is of unusual complexity
- there are co-morbidities that appear to be affecting the client's recovery from injury
- the review or assessment will be undertaken in two parts while results of investigations are obtained.

NOTE When would you use an 'exceptional code' in MFP?

The 'complex' code plus an hourly rate payable under the Clinical Services Contract (all codes are in MFP). ie large volume of reading required, complex injury/non injury factors.

b Ensure current medical notes are on file so they can be sent to the MSDA provider.

NOTE What if current medical notes are not on file?

You will need to obtain these before the referral is sent to the provider. Refer to (NGCM) Request Clinical Records.

PROCESS Request Clinical Records

2.0 Contact client and explain need for assessment

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a** Check that the client has granted ACC the authority to collect medical and other records.

View Client Consent

NOTE What if the client has not granted ACC authority to collect medical and other records?

You will need to obtain the client's authority to collect medical and other records. Refer to (NGCM) Obtain Client Authority to Collect Information.

PROCESS Obtain Client Authority to Collect Information

- b** Contact the client and confirm you are speaking with the right person by asking ACC's identity check questions.

Identity Check Policy

- c** Explain why you are referring them to this assessment and what the assessment will do, as well as what the client's responsibilities are. Check for their preference of provider, date, and time.

Medical Case Review and Medical Single Discipline Assessment Service Page

Client Legislative Rights and Responsibilities Policy

Client choice of providers Policy

NOTE What else do you need to discuss with the client?

- we will send the appointment details through to you
- that there is no cost for the appointment, that we can contribute or arrange travel
- they are welcome to have a support person accompany them
- the specialist will send us a report which we will send to appropriate parties.

Ensure your client understands the purpose of the assessment and the possible outcomes.

NOTE What if the client does not agree to participate?

Find out why the client does not want to participate and consider their reasoning and alternatives. Go to (NGCM) Seek Internal Guidance if your unsure how to proceed.

PROCESS Seek Internal Guidance

- d** In Salesforce, add a contact note as a record of the conversation.

- e** Add the agreed intervention to the Recovery Plan.

NOTE How do you update the Recovery Plan?

Go to (NGCM) Create or Update Recovery Plan.

PROCESS Create or Update Recovery Plan

3.0 Identify potential providers

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a** Contact the provider to check their availability and their willingness to conduct the assessment.

NOTE What if you are unsure of the correct provider to use?

Refer to (NGCM) Seek Internal Guidance for the most suitable provider.

PROCESS Seek Internal Guidance

- b** When the provider confirms that they can undertake the assessment, go to step 5.0 Request Assessment Referral.

NOTE What if you don't know or don't obtain confirmation from a provider to request an assessment referral?

Send a NGCM - Admin Request Task to Administration Recovery, this is so Recovery Administrators can advise you of potential providers and their availability.

Enter the following information into the task:

- identify potential type of provider for the MSDA eg neurologist, orthopaedics or pain specialist
- a brief summary of client's injury history, this is because providers will ask this, so they can confirm whether they can take the referral or not
- client's availability i.e. if the client prefers a morning or afternoon appointment, the date range, if the client travel
- timeframe i.e. how urgent the referral needs to be done, or whether it needs to be completed within a specific time range.

NOTE What if a medical specialist opinion is needed and there is no suitable specialist available under the Clinical Services contract?

You can use a non-contracted medical specialist to provide the service and use the non-contracted purchase order codes to pay the non-contracted provider (this should only be done when there is no suitable contracted option available).

You must send the SMR14 Medical SDA non-contracted agreement - vendor letter of agreement and ensure the provider signs and returns it before making the purchase order.

Any requests for a variation of the rate or a complex rate must be referred to the Portfolio Manager in the Provider Service Delivery.

NOTE How do you manage participants on a claim?

The Recovery Team Member must ensure all known participants are loaded on the file and then removed when they are no longer relevant. For information on how to manage participants, refer to the link below

 Manage Participants

<http://thesauce/team-spaces/eos-online-help/how-to/working-with-claims/claims/manage-participants/index.htm>

4.0 Action request to identify potential provider

Recovery Administrator

a Open NGCM - Admin Request Task.

b Search for 5 potential providers.

NOTE How do you search for providers?

Use google search using the required specialty in the task eg orthopaedic surgeon (if specific – area of body), neurologist, pain specialist etc.

c Contact potential vendors to check their availability. Contact providers who live in the clients location first.

Before you call the provider ensure you have:

- Clients NHI number
- Injury description
- Clients location.

NOTE What do you ask when seeking vendor availability?

- Availability
- Location of assessment – advise where client is based
- ACC Vendor ID
- Preference to receive referrals eg physical or electronic.

NOTE What if you are unable to contact a vendor?

- Email the vendor
- Change the target date of the NGCM-Admin Request Task for 3 working days
- Enter any information you have collected for other potential vendors
- Note which vendor/s you have emailed.

NOTE What information do you email to the vendor?

Use the admin signature email template and enter the Clients NHI number in the subject line of the email

Good morning/afternoon,

I have a client based in (ADD DISTRICT) who is in need of (enter referral type) following their physical injury.

Please advise whether (name of vendor) will accept a referral and if so please provide the dates available, your ACC Vendor ID and how you would like to receive the referral.

d Once the potential providers have been identified close the NGCM - Admin Request Task.

TIP: If potential providers have been identified in the task description copy this before you close the task

e Create a NGCM - General Task to the Recovery Team member.

In the task description, enter the following

'Potential Providers Identified'

- Provider names and dates available or
- No providers available.

If the request to arrange a MSDA is urgent change the priority to 'High' before transferring the task back to the Recovery Team Member.

5.0 Request assessment referral

Recovery Assistant, Recovery Coordinator, Recovery Partner


a In Eos, find all the documents that need to be sent along with the referral.

NOTE What documents do I need to include?

- Current medical certificate
- Previous or most recent Stay at Work (SAW) report
- Previous or most recent Back at Work (BTW) report
- previous or most recent Standalone Workplace Assessment WSA report
- ACC188 Job Task Analysis form (if on file)
- GP notes
- Specialist notes
- Imaging results
- Physio notes
- DHB notes
- Medical records and reports
- Vocational rehabilitation records and reports
- Any information relevant to the client's function eg Physiotherapist's notes
- Recovery Plan (RP) and/or prior to 01/08/19 Individual Rehabilitation Plan (IRP)
- Signed ACC6300 or ACC6300D Authority to collect medical and other records. NOTE: If verbal consent was provided please note this in the task eform for Recovery Admin.

NOTE What do I do if I don't have all the information to complete the referral?

Once you have requested the additional information required, create a reminder action, set the target date for when you expect to receive the information. If you require further information, refer to Gather Additional Information or Advice.

 Gather Additional Information or Advice

b Perform privacy checks on documents.


 Privacy Check Before Disclosing Information Policy

NOTE What do I need to check?

Check documents:


- are relevant to the referral
- do not contain any third party information
- do not contain any other information that needs to be withheld.

For details on what checks you need to complete before sending documents out, refer to NG SUPPORTING INFORMATION Inbound and Outbound Document Checks.

 NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

NOTE What if you find information that needs to be redacted?

Send an email to Recovery Administration (recoveryadmin@acc.co.nz) and include the document to be redacted plus your redaction instructions, before adding the document to the document group.

 NGCM - Redact information from PDF documents

c Create a referral-specific document group and enter 'Medical Single Discipline Assessment' and today's date in the document group description field.

d Add the documents to the group.

NOTE What if there are documents from other claims that are relevant to the assessment?


When a request for a referral is required and the supporting documents are on another claim, it is important to transfer the documents to the relevant claim. This will ensure the right documents support the recovery decisions for each claim.

To transfer documents from one claim to another:

- Create a bulk print of all documents on the other relevant claim and complete mandatory fields and description
- Open PDF document from email link
- File the PDF away to the relevant claim
- Repeat these steps if there is relevant documents on multiple relevant claims

The PDF should also be renamed something short but relevant, and identify which claim number the information came from, so it is included/printed in further referrals or copy files. E.g. Medical records and reports from claim: 100XXXXXXXX


Please do not create a bulk print on one claim and then move it to another claim, renaming it and using it in a referral for advice as it will not appear in any file copy subsequently used.

 Manage document groups

e Generate a Medical Assessment referral task for Recovery Administration for a 'Medical Single Discipline Assessment'.

NOTE How do you refer a task to Recovery Administration?

Please see Referring Tasks to Recovery Administration - Principles for further information and guidance.

 Referring Tasks to Recovery Administration - Principles

 Medical Assessment Referral Templates

NOTE How do I generate and send a referral task to Recovery Administration for a MSDA?

Go to NGCM Create a Referral Task.

NOTE What do you do if Mental Injury Claim information needs to be sent with a Referral from a Physical Injury Claim?

In Eos, manually transfer the Referral Task generated to the Recovery Administration department with the Sensitive Claims Administrator Role

 NGCM Create a Referral Task

NOTE What information do you need to include in the referral task?

- Geographic location
- Vendor preference, if applicable
- Recommendations from Recovery Support, including any questions
- Reason for the referral
- Confirm delivery method (email/courier)
- Provide the correct service code. Refer to the Purchase Order guidelines.

 NG GUIDELINES Purchase Order Details - Medical Single Discipline Assessment

NOTE What if the request is urgent and needs to be completed that day?

- Call Recovery Administration
- Give the Recovery Administrator who answers the call the claim number
- The Recovery Administrator will open the claim in Eos and find the task on the claim
- Transfer the task into the Recovery Administrator's name. This will move it to their personal Eos queue and stop it from being reallocated by Salesforce.

NOTE What if the request is required in the future?

If the request is required in the future, set a reminder task for the future date when the service will be required. When the reminder task comes up send a task to Recovery Administration to continue with the process. Consider the contract timeframes and SLAs as specified in the service page

NOTE What are the SLAs?


The referral tasks route to the Recovery Administration team with an SLA of 24 hours.

- f** Complete all the mandatory fields and any additional information to be included in the referral form including questions received via written guidance or hotline advice from Recovery Support and the standard questions supporting reason for referral or assessment request.

NOTE What if your client has a Care indicator?

You need to clearly outline this in the e-form.

Refer to Disclosure of Care Indicator Information to Third Parties Policy for more information on how information is disclosed.

 Disclosure of Care Indicator Information to Third Parties Policy

NOTE Use the relevant code to pay for the service.

- If they're a specialist, use the Clinical Services contract codes for reassessment.

NOTE Additional information required

- If you wish to use exceptional codes, you must request approval from the Secondary and Tertiary Portfolio Manager/Advisor via email. Include a brief reason why you need to use the exceptional code.

- If you're paying for disbursements, use the relevant non-contracted codes.

- Use the Cost of Treatment Regulations (CoTR), or medical notes codes.

- If you frequently need to use the same non-contracted provider and letter of agreement (LOA), refer them for a contract with Health Procurement for a negotiated contracted vendor at Health.Procurement@acc.co.nz.

- If you are purchasing under the Clinical Services contract, use one of the following PO codes when completing the referral form.

- If you have a signed letter of agreement (LOA), use one of the following Clinical Services PO codes when completing the referral form. The pricing for this code is the same as the contracted service equivalent. This is to ensure consistency for services provided by suppliers providing MSDA services under the LOA. If considering an hourly-rate code or a fixed fee under such a code, a rate of between \$550 and \$600 per hour + GST is suitable for a Vocationally Registered Physician. The price should be agreed before the client is formally referred, although the specialist may request a notes review prior to proposing a fee.

6.0 Review referral task

Recovery Administrator

- a** Following the task assignment in Salesforce, navigate to Eos and select 'Do Task' from your task queue.

- b** Review the task to ensure it has all the information you need to proceed.



NOTE What if I don't have all the information I need?

If required information is missing from the task, or you need guidance on working within the Administration Team, refer to NG PRINCIPLES Working in the Administration Team.

7.0 Create Purchase Order

Recovery Administrator

- a** In Eos, generate a Purchase Order for the specified referral.

-  NGCM - FINAL Request Authorisation for a Purchase Order - System Steps
-  NG GUIDELINES Purchase Order Details - Medical Single Discipline Assessment

- b** Identify and select the vendor as specified by the Recovery Team Member.

NOTE What if a vendor not been identified?

Contact the Recovery staff member for the appropriate vendor.

- c** Approve Purchase Order.

NOTE What if the purchase order requires a higher delegation?

Save the purchase order. Create and send a Request Authorisation task to a Recovery Leader for a purchase order approval.

Refer to the link below.

-  NGCM - FINAL Request Authorisation for a Purchase Order - System Steps

NOTE What if you get a limited payment error message when authorising the purchase order?

If you have received a request to amend a purchase order or create a purchase order for client reimbursements, change the limited payment indicator.







- 1). In Eos, go to the 'Validations' tab, select 'Edit' and update the Limited Payment List Indicator to 'No'.
- 2). Select 'OK'.
- 3). Go back to the purchase order to authorise.

Once you have authorised the purchase order and notified the vendor please remember to change the Limited Payment List Indicator to 'Yes'.

8.0 Create and send referral documents

Recovery Administrator

- a** Create the appropriate referral documents for MSDA.


-  ACC7395 Referral for medical single discipline assessment or medical review - PO - vendor
-  ACC6246 Relevant documents list
-  SMR11 Medical single discipline assessment appointment - client
-  SMRIS05 Medical single discipline assessment - client
-  SMR14 Medical SDA non-contracted agreement - vendor
-  Admin Template - Medical Single Discipline Assessment

- b** Populate with extra information noted on the referral task. Ensure you have checked that all the relevant information within the task has been captured. When completing the ACC6246 ensure the documents are in chronological order and duplicates removed.


- c** Ensure you have completed the document (to convert the document into a non-editable pdf).

- d** Link the referral to the document group 'Medical Single Discipline Assessment'.

- e** Perform privacy checks using Inbound and outbound document checks.

-  NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

- f** Create email using the Requests and referrals template, attach the referral and document from the group and select the most appropriate email address (commonly listed under General Purchasing).

-  NGCM - FINAL Emailing from Eos using a Template - System Steps

- g** Send the referral and the ACC6246 to the vendor.

NOTE What if the Vendor requires the documents to be sent via courier?

Go to Prepare and Send Client Information by Courier process.

-  **PROCESS** Prepare and Send Client Information by Courier

- h** Send the SMR11 Medical single discipline assessment appointment - client letter to the client with appointment details.

- i** In Salesforce, close the assigned referral task.

9.0 Determine next steps once assessment report is received

Recovery Assistant, Recovery Coordinator, Recovery Partner

- a Receive notification that the MSDA report has been attached to the claim.

NOTE What should I expect from the MSDA?

- A supplier who has agreed to provide the MSDA must perform a clinical examination within eight business days of receiving a referral, unless otherwise agreed by ACC
- If a provider is unable to meet the eight day timeframe to see a client, you can negotiate a timeframe which is acceptable to both parties
- The provider must provide a copy of the report to the case owner within eight business days from the date of the clinical examination

NOTE What if the client fails to attend and/or participate in the MSDA?

If the client fails to attend or take part in the MSDA you should find out why.

In some cases you may need to consider implementing the non-compliance process, seek guidance from Recovery Support and refer to Decline entitlement when client is non-compliant Policy.

PROCESS Decline Entitlement when Client is Non-compliant Policy

- b Perform Privacy and Relevancy checks on the received report.

NG SUPPORTING INFORMATION Inbound and Outbound Document Checks

- c Seek internal guidance to confirm next steps. This will ensure a robust decision is being made prior to issuing any formal decision.

NOTE Refer to (NGCM) Seek Internal Guidance.

PROCESS Seek Internal Guidance

- d Discuss report and next steps with client. Consider if a face-to-face meeting is required.

NG GUIDELINES Client Face to Face Meetings

NOTE What if the client wants to meet face to face?

Refer to (NGCM) Assess Face to Face Client Meeting.

PROCESS Arrange Face to Face Client Meeting

NOTE What else do you need to discuss?

When you receive the MSDA report, have a conversation with the client:

- remind them why the assessment was needed
- discuss the content of the report
- explain what will happen next, any entitlements that may be affected and the various options available.

NOTE What if the client requests that the report is changed or incorrect?

A client can request that information held by ACC is changed or updated if it is factually incorrect (ie: wrong DOB, incorrect name spelling etc). If it is the opinion of an assessor or provider, the client can supply a 'statement of correction' to ACC which is then included with the report. This means that any time the report is sent out, the statement of correction must be sent as well.

Refer to Managing a client's request to change personal information (CHIPS).

Managing a client's request to change personal information (CHIPS)

- e Provide copy of report to client, and key stakeholders as recommended by Recovery Support.

? **Do you need to seek guidance?**

Recovery Assistant, Recovery Coordinator, Recovery Partner

YES.... **PROCESS** Seek Internal Guidance

NO.... Continue

PROCESS Create or Update Recovery Plan

Recovery Assistant, Recovery Coordinator, Recovery Partner