



Claim validation framework: guide

Treatment Injury Cover Assessment Centre

April 2019

Purpose

This guide supports proficient¹ Treatment Injury Cover Specialists² ‘**Cover Specialists**’ to issue cover decisions without the need for validation, be it managerial or through the peer review process - so long as certain claim requirements have been met.

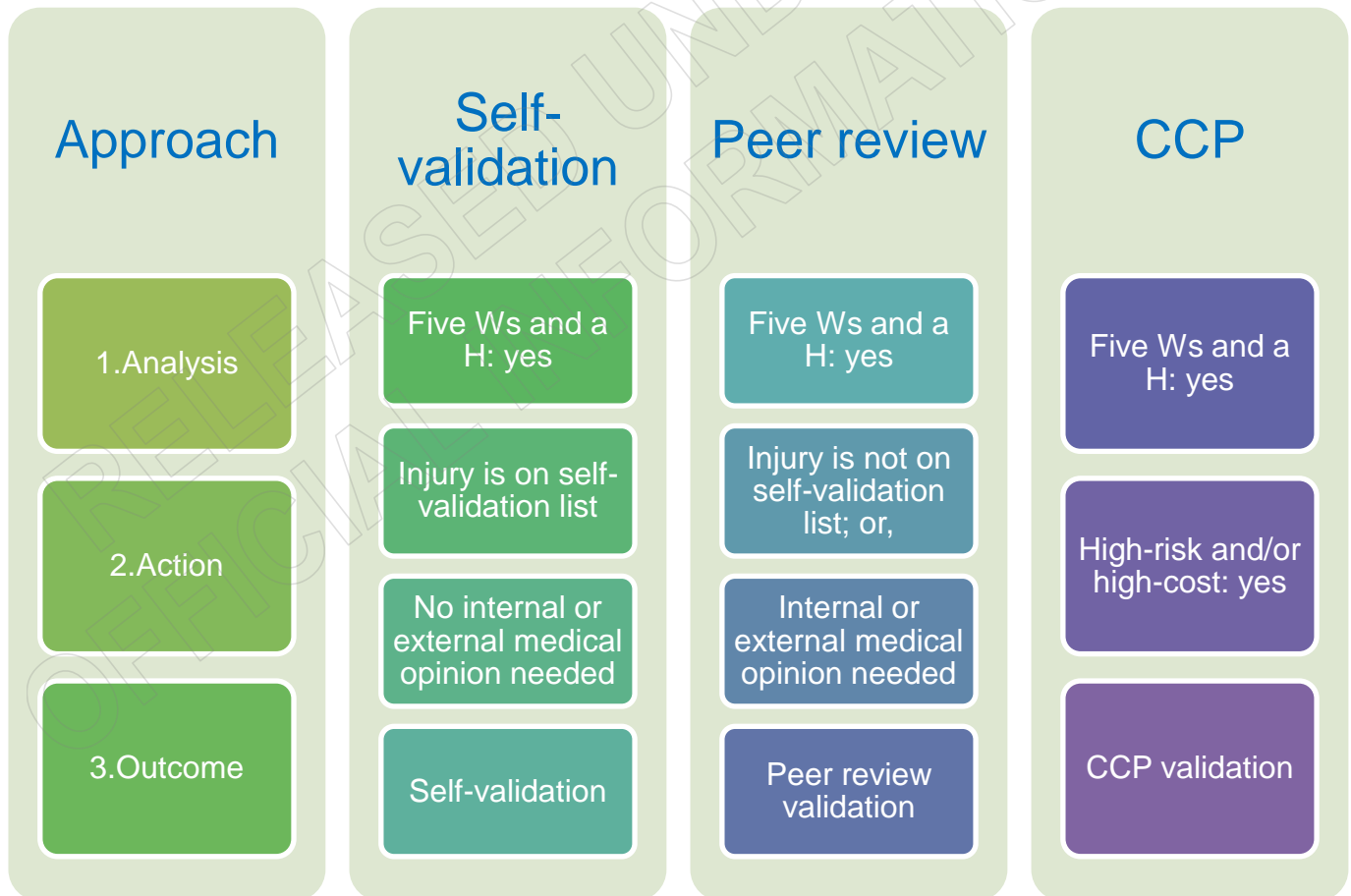
Framework

The Treatment Injury Cover Assessment Centre, over time, has developed a set of business rules related to claim validation for treatment injury claims. This guide now formalises these rules and builds upon them by adopting a framework, which is **structured, logical, and timely**.

Our framework recognises where information clearly supports issuing a decision and the level of clinical complexity is low, we entrust our proficient Cover Specialists to issue a decision which is: accurate, well-considered, and timely.

Where internal or external medical opinion is sought (or the injury event is not on the self-validation – injury event list), this signals that clinical complexity or how the treatment injury provisions apply to the claim is not straightforward. As such it makes sense to discuss the claim at a decision-validation forum. This’ll ensure the decision issued is accurate, well-considered, and timely.

Figure one: our framework for claim validation



¹ Proficiency means: the Team Manager is confident the Cover Specialist can consistently meet the requirements of the role and can self-validate (e.g. the degree of confidence will be determined by a Team Manager’s understanding of their team member’s performance, the quality marking they do and from regular coaching).

² All of whom are qualified healthcare professionals.

A high certainty approach to self-validation

To self-validate a proficient Cover Specialist must be able to confidently answer the following questions (**five Ws and a H**):

- What happened (**the claimed injury**)?
- Where did it happen (**the anatomical location**)?
- Why did it happen (**the cause**)?
- How did it happen (**context: was the injury necessary or ordinary**)?
- When did it happen (**date of injury**)?
- Who was involved (**a registered health professional**)?

And:

- the treatment injury event is on the **self-validation – injury event list**; and,
- **no medical opinion** (internal or external) was needed; and,
- the claim is **not considered high-cost and/or high-risk**.

Where all these requirements are met, a Cover Specialist can issue a decision without the need for validation, i.e. managerial validation or peer review. This approach only applies to proficient Cover Specialists. **Proficiency is determined by Team Managers.**

If the injury event is not on the validation guide or medical opinion (internal or external) was needed, then the claim will need to be validated at Peer Review, unless it is considered high-cost and/or high-risk.

What high-cost and high-risk means

If a claim is considered high-cost and/or high-risk it must be referred to Complex Claims Panel (**CCP**) for decision validation. CCP ensures consistent, accurate and well-considered decisions are issued, and where a claim is covered, ACC has a better understanding as to what assistance we can offer our client.

High-cost means:

- the claim may be coverable as a treatment injury; and
- there is clear evidence that the treatment injury has resulted in significant disability, which will require ongoing support.³

Where the claimed treatment injury event or the decision has the potential to attract attention externally, this is considered high-risk.

Noting points – for the triage team

1. The ACC2184 **does not** need to be completed if the claim is an **accept** decision (and on the self-validation guide) – the key information will be captured by completing the Eos treatment injury decision tabs. A contact must be added outlining the rationale for the decision for entitlement purposes.
2. However, if the decision is a **decline** or **partial accept** then the ACC2184 and Eos treatment injury tabs need to be completed.

Managerial sign-off



Date: 24/04/2019

³ If unsure a Cover Specialist can seek direction from their Team Manager.

Self-validation – injury event list

Self-validation – injury event list			
The claimed injury (event) is...	And there...	Accept	Decline
Allergic/anaphylactic reaction resolved with no other injuries		√	√
Acute sprain, with clear evidence and strong temporal link (< 10 days) to treatment		√	√
Back strain following normal vaginal delivery			√
Bladder neck stenosis, urethral stricture, urethral damage from straightforward TURP	was no other treatment for the underlying prostate condition or complicating patient factors	√	
Blisters/infected blisters from cryotherapy	are no underlying health conditions	√	√
Burns		√	√
Cellulitis		√	√
Contact dermatitis		√	√
Dental injury with clear evidence and strong temporal link (< 10 days) to treatment		√	
Diagnosed and identified nerve injury	is a direct causal link to treatment and no relevant underlying health condition or similar pathophysiology, i.e. Carpal Tunnel Syndrome	√	√
Adverse reaction to vaccination		√	√
Extravasation		√	√
Early failure of joint replacement due to technical factors, e.g. metallosis	is clear evidence confirming a physical injury and treatment cause	√	
Fat atrophy secondary to steroid injections		√	
Foreign body/retained equipment with need to surgically remove		√	
Foreign body/retained equipment with no need to surgically remove and there is no injury, excluding surgical mesh			√
Fractures during/following straightforward surgeries		√	√

Haematoma/bleeding/contusion	are no underlying health conditions	√	√
Iatrogenic organ damage/injury/perforation caused by straightforward procedure/surgery/IUCD		√	√
Jadelle implant migration requiring surgical removal		√	√
Lacerations/abrasions		√	√
Perineal tears following normal or instrumental vaginal delivery		√	√
PICBA claims		√	
Post-operative deep vein thrombosis (DVT) – excluding orthopedics	are no underlying health conditions	√	
Post-operative pulmonary embolism (PE)	are no underlying health conditions	√	
No post-operative pulmonary embolism (PE), confirmed by imaging			√
Pressure injury		√	√
Scarring following a minor straightforward procedure	are no underlying health conditions		√
Swallowing of dental files and there is no injury			√
Thrombophlebitis		√	√
Wound infection/abscess	are no contributing factors such as a dirty treatment procedure i.e. surgical drainage of an abscess	√	√
Wrong medication – no injury			√
Wrong medication – with injury		√	



BUSINESS RULE

Enterprise Business Rules Portal

Criteria for a valid overseas practising certificate for providers who caused a treatment injury

*Business
Rule*

Rule Purpose To ensure that New Zealand residents receive the appropriate cover for a treatment injury that occurs while they are overseas.

A practising certificate of an overseas health care provider that provided treatment [causing a treatment injury] must be considered to be valid if all of the following are true:

- the practising certificate is issued by a registration authority from the country the treatment [causing the treatment injury] occurred
- at least one of the following is true:
 - the registration authority has a record of the practising certificate in an online register
 - a copy of the practising certificate is provided to ACC
- the practising certificate specifies all of the following:

- an expiry date that is after the date of the treatment [causing the treatment injury]
- at least one of the following:
 - a full name exactly the same as the full name of the health care provider
 - a professional registration number exactly the same as the professional registration number of the health care provider

Business Terms

[Practising certificate](#)[Health care provider \[causing a treatment injury\]](#)[Treatment injury](#)[Treatment \[causing a treatment injury\]](#)[Registration authority](#)

Tags

[Cover](#)[TIQ](#)

Related Policy

[Cover criteria for treatment injury Policy](#)Other Data **Owner**

[Out of Scope]

Approvers

[Out of Scope]

Reviewers

[Out of Scope]



[Out of Scope]



[Feedback](#)

Approval Date: 16/12/2021

RELEASED UNDER THE
OFFICIAL INFORMATION ACT



BUSINESS RULE

Enterprise Business Rules Portal

Cover acceptance criteria for a treatment injury claim when the treatment occurred in New Zealand but the resulting treatment injury is identified overseas

*Business
Rule*

Rule Purpose To ensure that New Zealand residents receive the appropriate cover for a treatment injury that occurs while they are overseas.

A personal injury caused by a treatment injury to a person seeking or receiving treatment [for the symptoms of that treatment injury] at an overseas location may receive an accepted cover decision only if all of the following are true:

- the injury meets the criteria for acceptance of cover for all of the following:
 - a personal injury
 - a treatment injury
- the treatment [causing the treatment injury] occurred at a location within New Zealand

- the health care provider [causing that treatment injury] was a New Zealand registered health professional on the date that treatment was provided
- the person sought or received treatment [for the symptoms of the treatment injury] while overseas
- the person was ordinarily resident in New Zealand on the date of the treatment injury.

Business Terms

Personal injury Health care provider [causing a treatment injury] Cover Treatment injury
Treatment [causing a treatment injury] Treatment [for the symptoms of a treatment injury]
Ordinarily resident in New Zealand New Zealand Registered health professional
Date of injury [for a treatment injury]

Tags

Cover TIO

Related Policy

Cover criteria for treatment injury Policy

Other Data ▾

Owner

Approvers

Reviewers

[Out of Scope]

[Out of Scope]

[Out of Scope]

Feedback

Approval Date: 16/12/2021

RELEASED UNDER THE
OFFICIAL INFORMATION ACT



BUSINESS RULE

Enterprise Business Rules Portal

Cover acceptance criteria for a treatment injury claim when the treatment occurred overseas *Business Rule*

Rule Purpose To ensure that New Zealand residents receive the appropriate cover for a treatment injury that occurs while they are overseas.

A personal injury caused by a treatment injury to a person at an overseas location must receive an accepted cover decision only if all of the following are true:

- the personal injury meets the criteria for acceptance of cover for all of the following:
 - a personal injury.
 - a treatment injury.
- the date of the treatment [causing the treatment injury] is **on or after 1 July 2005**
- the treatment [causing the treatment injury] occurred at a location not in New Zealand

- the overseas health care provider [causing that treatment injury] was **not** a New Zealand registered health professional on the date that treatment was provided
- the person that received the treatment [causing the treatment injury] was ordinarily resident in New Zealand on the date on which that treatment occurred
- the treatment [causing the treatment injury] was within the scope of practice of the overseas health care provider providing that treatment
- that overseas health care provider holds qualifications within that scope of practice
- there is a registration authority for that scope of practice in New Zealand
- that registration authority confirms those qualifications as being equivalent to New Zealand qualifications for that scope of practice via one of the following methods:
 - online documentation provided by that registration authority
 - written confirmation from that registration authority
- the overseas health care provider [causing the treatment injury] holds a practising certificate that meets the criteria for being a valid overseas practising certificate for that treatment provider

Business Terms

Personal injury.Practising certificateHealth care provider [causing a treatment injury]CoverTreatment injuryTreatment [causing a treatment injury]Ordinarily resident in New ZealandNew ZealandRegistration authority.Registered health professionalScope of practiceAccepted cover decision

Tags

CoverTIO

Related Policy

Cover criteria for treatment injury Policy.

Other Data ∨

Owner

[Out of Scope]

Approvers

[Out of Scope]

Approval Date: 16/12/2021

Reviewers

[Out of Scope]

Feedback

RELEASED UNDER THE
OFFICIAL INFORMATION ACT



REFERENCE

Determining overseas equivalent of Registered Health Professional

[Out of Scope]

Published 6/12/2023

Introduction

Cover Assessors and Specialist Cover Assessors obtain the necessary information to determine if an overseas treatment provider meets the requirement of Section 22(4)(a) of the Accident Compensation Act 2001 (the Act):

*'the treatment is given by a person who has qualifications that are the same as or **equivalent** to those of a registered health professional'* (emphasis added)

In other words, whether or not the overseas treatment provider has qualifications that are the same as or equivalent to those of a Registered Health Professional (RHP) in New Zealand.

In New Zealand, RHP under the Act means that all practitioners from each occupational group are registered with their relevant regulatory authority and have an up-to-date practising certificate, in accordance with the Health Practitioners Competence Assurance Act 2003 (HPCA Act 2003). These professional requirements predominately relate to educational

achievements and continuing competency which act as a mechanism to ensure that patients are not placed at undue risk of harm. As a result it offers assurance that individual practitioners are suitably qualified, and fit to practice in their chosen field.

It would be difficult to conclude that individual overseas treatment providers who work within a comparable health system overseas are not the equivalent to a New Zealand RHP. Given that individual overseas treatment providers are largely subjected to the similar types of professional standards and on going professional development that are in place in New Zealand.

Where a country's health system is not considered comparable to New Zealand's there may still be evidence to show that the overseas treatment provider would provide the same or equivalent treatment to those of a RHP in New Zealand, based on their educational achievements and continuing competency.

As with all claims, this information is a guide only and ACC staff must consider all claims on their individual merit, in relation to the relevant information or case law that may be available.

It is ACC's role to determine whether the overseas treatment provider meets the criteria of Section 22(4)(a), with information from a New Zealand registration organisation as required. You may need clinical advice in the form of External Clinical Advice (ECA) about the personal injury and the treatment.

DO NOT request advice from an ECA to tell us whether there is overseas equivalence in application of Section 22(4)(a) - an ECA is not in a position to make that decision. The determination about overseas equivalence is a legal decision made by ACC. If at anytime you are uncertain whether the overseas treatment provider is equivalent then please discuss the claim with your Team Leader, and consider seeking internal guidance from a Technical Specialist.

Method

Step 1:

Claim for a treatment injury is received that relates to treatment provided overseas.

Note: First determine if the client is [ordinarily resident in New Zealand](#)

Step 2:

Send request to the overseas treatment provider asking the following questions, this is in addition to the usual questions relating to the treatment injury event:

- What is the name of the body that you are registered with?
- What is your registered qualification in full and where was this gained?
- Have you ever had registration in New Zealand? If so, please provide the dates of that registration.
- Please provide a copy of your current practicing certificate or registration certificate.

Step 3:

Once the above information is received, consider the following:

For all overseas treatment providers

- What health qualifications does the practitioner have?
- When and where were the qualifications gained?
- Is the educational facility internationally recognised?
- Is the practitioner registered with a national/regional authority whose role and function is similar to the New Zealand equivalent?
- Do they have a current practising certificate?
- Is there evidence of continuous professional development that is of reputable standard?
- If not current registered, does the practitioner have a recently issued certificate of good standing (or verification) from a regulatory authority whose role and function is similar to the New Zealand equivalent?

- Is there any other information that supports RHP equivalency?
- Do they have current or previous registration as a registered health professional in New Zealand?

And

- It is important to review the relevant registration organisation criteria for all new claims, because the information can be updated from time to time. Make a note in the claim as to when the qualifications were checked e.g. MCNZ website checked dd/mm/yyyy.
- Contact the relevant registration authority to clarify whether they consider the qualifications to be equivalent to those of a New Zealand RHP if you are unsure.

So, where would we go for information/resources to help us identify an overseas equivalent RHP? A logical start point is to view the information in each occupational group's relevant New Zealand regulatory authority. For example, medical treatment would be the concern of MCNZ. The table below gives examples showing how you might approach occupational group's relevant regulatory authority; see 'Examples: handy information/resources about some RHP occupational groups'.

Examples: handy information/resources about some New Zealand RHP occupational groups

Medical Practitioner

Nurse/Nurse Practitioner

Physiotherapist

Pharmacist

Dentist/Clinical Dental Technician/Dental Technician/Dental Hygienist/Dental Therapist

Medical Laboratory Science Practitioner

Optometrist

Podiatrist

Midwife

Occupational Therapist

Medical Raditation Technologist

Step 4:

If you determine that the overseas treatment provider meets the provisions of section 22(4)(a) - continue to assess claim for cover.

Step 5:

If you are unable to determine if the provisions of section 22(4)(a) and have followed all the steps above and made the relevant enquiries, seek internal guidance from a Technical Specialist.

Step 6:

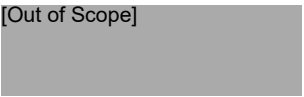
Technical Specialist may seek further internal guidance to progress the claim.

Contact the relevant registration authority to clarify whether they consider the qualifications to be equivalent to those of a New Zealand Registered Health Professional if you are unsure.

Page Details

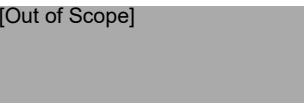
Content Owner

[Out of Scope]



Content Experts

[Out of Scope]



Topic

ACC: Rehabilitation and Treatment

Information Type

Guidance

Relates To

Internal

RELEASED UNDER THE
OFFICIAL INFORMATION ACT



REFERENCE

Comparable country for overseas claim - treatment injury

Introduction ⇄

ACC receives a small but regular number of treatment injury claims that relate to treatment provided outside New Zealand. Most of these claims are about medical treatment. Cover Assessors and Specialist Cover Assessors obtain the necessary information to determine if treatment overseas meets the requirement of Section 22(4)(b) of the Accident Compensation Act 2001 (the Act):

*'the personal injury **would be** personal injury caused by [treatment] if the treatment were given by or at the direction of the **equivalent** of a registered health professional and the person suffered the injury in **New Zealand**' (emphasis added)*

In other words, there is a '*comparison*' between the treatment that was provided outside New Zealand to if that treatment was provided in New Zealand.

In this page, medical treatment is used as an example to highlight the style of thought-process/approach needed to compare treatment in another country. Other health practitioner groups e.g. the Midwifery Council of New Zealand will

compare other countries differently than countries compared by Medical Council of New Zealand (MCNZ).

Not all Regulatory Authorities in New Zealand have publicly available lists of comparable countries. Regulatory Authorities can be asked if an overseas country is comparable to New Zealand. In countries that are not identified to be comparable, factors related to the individual overseas treatment provider's educational achievements and continuing competency need to be taken into account to determine whether the threshold for equivalency has been met and in context of the precise location of where the treatment took place in the overseas country. This type of approach should be applicable to all health practitioner groups that are defined as a Registered Health Professional under the Accident Compensation Act 2001 (the Act).

For example, medical [practice] treatment overseas: is the country 'comparable'?

MCNZ list the following 'comparable' countries [this list is only for: medical [practice] treatment overseas countries]:

- Australia
- Austria
- Belgium
- Canada
- Czech Republic
- Denmark
- Finland
- France
- Germany
- Greece

- Iceland
- Israel
- Italy
- Norway
- Portugal
- Republic of Ireland
- Singapore
- Spain
- Sweden
- Switzerland
- The Netherlands
- United Kingdom
- United States of America

What if the medical [practice] treatment was in a 'comparable' country?

We require a copy of the overseas health professional's current practicing certificate.

What if the medical [practice] treatment was not in a 'comparable' country?

Further information is required about the individual overseas medical professional, precisely where (not just identifying the country - precisely where in that country too) the treatment took place and the treatment that happened.

Note: cover is not declined solely on the basis that medical treatment was not in a 'comparable' country. There still does need to be further assessment to determine if the overseas medical professional (in the 'non-comparable' country) meets the requirement of Section 22(4)(a) of the Act:

'the treatment is given by a person who has qualifications that are the same as or **equivalent** to those of a registered health professional' (emphasis added)

Further information: see in Te Whariki page '*Determining overseas equivalent of Registered Health Professional*'.

How do we think about determining 'equivalency' of overseas treatment in a 'non-comparable' country?

Using **medical** treatment as an example.

Medical treatment in a country not on the MCNZ list of comparable countries:

Example 1 - meets the criteria for equivalency:

Malaysia not on the MCNZ list of comparable countries.

The treatment was at a private hospital (with internet website) in Kuala Lumpur.

The overseas medical professional evidenced:

- Practising certificate from the Malaysian Medical Board.
- Overseas medical professional's curriculum vitae published on a website.
- Certificates (were in the last 2-5 years) from courses/workshops and conferences in Asia Pacific and Australasia regions.
- Delegates and tutors/presenters at the conferences were practising in comparable country health systems.
- Overseas medical professional had done a lot of international travel.

Medical treatment in a country not on the MCNZ list of comparable countries

Example 2 - does not meet the criteria for equivalency:

India - not on the MCNZ list of comparable countries.

Cannot find hospital in the internet - no website.

The overseas medical professional:

- No evidence of a practising certificate.
- No curriculum vitae.
- No evidence of recent continuous professional development.

Page Details

Content Owner

[Out of Scope]

Content Experts

[Out of Scope]

Information Type

Guideline/Guidance

Relates To

Internal

RELEASED UNDER THE
OFFICIAL INFORMATION ACT