Resolve Provider Competency Issue v15.0

Triggers & Inputs

Cover Assessor
Lodgement Administrator
Senior Cover Assessor

1.0 Check diagnosis codes

Cover Assessor
Senior Cover Assessor

2.0 Contact client

Linked Process
Contact Client or Provider for Information at Lodgement

3.0 Create purchase order

4.0 Send form

5.0 Monitor progress

6.0 Update claim and purchase order

Linked Process
Assess Claim for Cover :: Simple PICBA claim

ACC > Claims Management > Manage Claim Registration and Cover Decision > Validate Claim > Resolve Provider Competency Issue
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Summary

Objective
To ensure the provider who lodged the claim is approved by ACC and is qualified to submit the injury Read code(s) so that a cover decision can be made.

Background
Eos has checked the claim and identified that the provider who lodged the claim is unable to submit the Read code(s) on the claim. It has raised a Provider Competency Failed information requirement for someone to resolve.

Owner   Name withheld

Expert   Name withheld

Procedure

1.0 Check diagnosis codes
Cover Assessor, Lodgement Administrator, Senior Cover Assessor

a Open the provider's party record and confirm their provider type.

b Review the diagnosis codes on the claim.

c Open the 'Who can lodge claims for different injuries' webpage below and search using the provider type and Read Code.

    📄 Who can lodge claims for different injuries?
https://www.acc.co.nz/for-providers/lodging-claims/wh

d If you can't find the Read Code under the provider type, first consult with a colleague to confirm and if you are unable to confirm the provider competency has failed.

> **NOTE**   **What if the Read Code is in the list?**
> If the Read Code is in the list, then the provider competency has passed. Return to Assess Claim for Cover. This process ends.
> 📄 **PROCESS**   Assess Claim for Cover :: Simple PICBA claim

2.0 Contact client
Cover Assessor, Senior Cover Assessor

a Contact the client and explain that their lodging provider is unable to diagnose the injury they have submitted. Advise that they need to see their GP, who must fill in the ACC125 Additional information on diagnosis form and return it to ACC before the claim can continue to be considered for cover. Go to the Contact Client or Provider for Information process below to do this.

> **NOTE**   **What if the client doesn't answer after two attempts?**
> Go to step 6.0 to post the form to them.

b Confirm whether they want to have the ACC125 Additional information on diagnosis form emailed or posted to them. Check that their postal address is valid and that they have a verified email address on file so it can be sent.

c Add a contact to note the conversation and to advise if the form is being emailed or posted.

    📄 Add a client contact

📄 **PROCESS**   **Contact Client or Provider for Information at Lodgement**
Cover Assessor, Senior Cover Assessor

3.0 Create purchase order
Cover Assessor, Senior Cover Assessor

a Create a purchase order for the future GP to invoice ACC using the system steps below. Use the default vendor ID (J99966) for this purchase order.

    📄 Create a purchase order

b Add the relevant document to the purchase order.

    📄 Generate a purchase order document

4.0 Send form
Cover Assessor, Senior Cover Assessor

a Add the CVR04 Diagnosis questionnaire request letter in Eos.

    📄 Upload an Incomplete Electronic Document

    📄 CVR04 Diagnosis questionnaire request - claimant

b Edit the form and letter with the relevant information, including a return email address. Ensure that you've specified they must see their GP and not their original lodging provider.

c Mark the letter as Complete in Eos.

d Print and send the letter with a pre-paid envelope.

> **NOTE**   **What if the client asked for the form to be emailed?**
> Send the form via Email Toolset if the client has a verified email address in Eos.

5.0 Monitor progress
Cover Assessor, Senior Cover Assessor

a After the 5 working day target, check the claim and call the client to ask when their appointment is to see the GP.

b If the client needs more time, extend the target date on the task.

> **NOTE**   **What if the information I've requested can't be provided before the cover decision due date?**
> Extend the cover decision timeframe. Go to the Extend Cover Decision Timeframe process to do this.
> 📄 **PROCESS**   Extend Cover Decision Timeframe

> **NOTE**   **What if there's no contact from the client and the form isn't returned within 21 days of the claim lodgement date?**
> Decline the claim due to lack of information. Go to the Decline Claim process below to do this. This process ends.
> 📄 **PROCESS**   Decline Claim

6.0 Update claim and purchase order
Cover Assessor, Senior Cover Assessor

a Once the ACC125 Additional information on diagnosis form has been returned, check that the new provider is able to lodge the Read codes written on the form.

b Upload the ACC125 form to the claim.

    📄   File an inbound email

c Add the new provider as a participant on the claim.

    📄   Add a participant

d Update the purchase order by replacing the default vendor ID with the new provider's vendor ID number so they can invoice for the appointment.

    📄   Edit a party within a purchase order

e If needed, update the claim with any new information such as other Read codes.

    📄   Edit claim details - general

f Make a cover decision. Go to the Assess Claim for Cover: PICBA process below to do this.

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📄 **PROCESS**   **Assess Claim for Cover :: Simple PICBA claim**

                       Cover Assessor, Senior Cover Assessor

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