He Kaupare. He Manaaki. He Whakaora.
prevention. care. recovery.

22 November 2023

[redacted]

Kia ora [redacted]

Your Official Information Act request, reference: GOV-028805
Thank you for your email of 6 November 2023, asking for the following information under the Official Information Act 1982 (the Act):

> *- Has ACC paid or does pay permanent injury (lump sum) compensation for death caused by sepsis due to treatment injury?*
> *- if a person died before assessment for permanent impairment takes place, are they only eligible for funeral, survivors grants and weekly compensation (i.e. no lump sum for permanent injury - death);*
> *- any policies relating to the same*.

Our response
Permanent Injury (lump sum) Compensation is based on the whole person impairment, not the injury. It cannot be paid on a fatal claim; the client must be alive or have had their whole person impairment assessed prior to death under the *rapidly deteriorating* process. If a client has not been assessed, they are not eligible for Permanent Injury (lump sum) Compensation.

For further information, please refer to the *Lump Sum Eligibility Criteria* Policy and *Escalate Permanent Injury Compensation application for rapidly deteriorating client*, attached. As names were not requested, they have been deemed out of scope of your request and removed.

As this information may be of interest to other members of the public
ACC has decided to proactively release a copy of this response on ACC's website. All requester data, including your name and contact details, will be removed prior to release. The released response will be made available www.acc.co.nz/resources/#/category/12.

If you have any questions about this response, please get in touch
You can email me at GovernmentServices@acc.co.nz.

If you are not happy with this response, you can also contact the Ombudsman via info@ombudsman.parliament.nz or by phoning 0800 802 602. Information about how to make a complaint is available at www.ombudsman.parliament.nz.

Ngā mihi

Sara Freitag
Acting Manager Official Information Act Services
Government Engagement

Lump Sum Eligibility Criteria Policy v8.0

Summary

Objective
When a client submits an application for a lump sum assessment or reassessment we must check their eligibility.

Owner out of scope

Expert out of scope

Policy

1.0 Eligibility to a lump sum entitlement

a Clients may be eligible for a lump sum if their claim has all of the following:
- an accepted cover decision
- a whole person impairment rating of over 10%
- a date of injury (or date of last event where relevant) is on or after 1 April 2002

NOTE **What if the injury was willfully self-inflicted?**
Refer to the 'Ineligibility if Suicide or Wilfully Self-inflicted Injury' Policy. The claim will need to be considered for disentitlement. If the injury meets the criteria in the policy and disentitlement hasn't previously been considered - guidance should be sought from Technical Services.
PROCESS Ineligibility if Suicide or Wilfully Self-inflicted Injury

NOTE **What if the injury was sustained while committing a crime?**
Refer to the 'Injured Committing Crime Policy'. The claim will need to be considered for disentitlement. If the injury meets the criteria in the policy and disentitlement hasn't previously been considered - guidance should be sought from Technical Services.
PROCESS Injured Committing Crime Policy

NOTE **What if I need to seek guidance from Technical Services on disentitlement?**
Refer to the 'Seek Internal Guidance' process
PROCESS Seek Internal Guidance

b See the full list of lump sum eligibility criteria in the business rule below.

Lump sum eligibility requirements

c See also the transitional provisions for impairment entitlements in the AC Act 2001, Schedule 1, part 3, clauses 54 and 55.

2.0 Impairment assessment and whole person impairment rating

a To determine the whole person impairment rating of a client, the client must have an impairment assessment.

b To be eligible for an initial impairment assessment, the client must meet the criteria listed in the following business rule, which includes having medical certification of a permanent and stable impairment.

Eligibility to an initial impairment assessment

c An impairment assessment can only be completed by an impairment assessor who meets the criteria in the business rule below.

Requirements for an assessor to perform an impairment assessment

d In some situations the whole person impairment rating must take into account any previous whole person impairment ratings. See the following business rule.

Determining the whole person impairment rating by taking into account a previous rating

3.0 Medical certification of permanent and stable impairment

a A person must be considered to have medical certification of a permanent impairment for a lump sum entitlement if a medical practitioner supplies the relevant information to ACC. The relevant information is listed in the business rule below.

Information needed to confirm medical certification of a permanent impairment for a lump sum entitlement

b The ACC554 Application medical certificate form is used to capture the relevant information needed.

ACC554 LSIA Medical certificate

ACC554 required method for supplying medical information for an impairment assessment

c You must decline the client's application if the information provided on the ACC554 does not meet the criteria for assessment.

See AC Act 2001, Schedule 1, part 3, clause 57.

AC Act 2001, Schedule 1, part 3, clause 57.
https://www.legislation.govt.nz/act/public/2001/0049/latest/DLM105415.html

4.0 Client under 16 with a mental injury

a If a client is under 16 years of age and has cover for personal injury that is a mental injury, we must not assess their eligibility for lump sum compensation for the mental injury until the client turns 16, unless we are satisfied that there are compelling reasons for assessing eligibility earlier.

5.0 Reassessment

a See Lump sum reassessment.

Lump sum reassessment Policy
https://go.promapp.com/accnz/Process/e38cf259-ba39-4af3-8182-cf5058c855b2?force=False#

6.0 Overseas clients

a Clients based overseas are eligible to have their impairment assessed or reassessed for a lump sum if:
• they meet the standard eligibility criteria
• the medical practitioner completing the ACC554 medical certificate meets both the following criteria:

- holds registration in the country in which they practise
- holds a medical degree from a medical school approved by the New Zealand Medical Council. This includes universities listed in the WHO World Directory of Medical Schools.

b Financial help for an impairment assessment overseas or for travel to New Zealand for an impairment assessment must be approved by the Technical Services team and must be cost effective. See the following business rule.

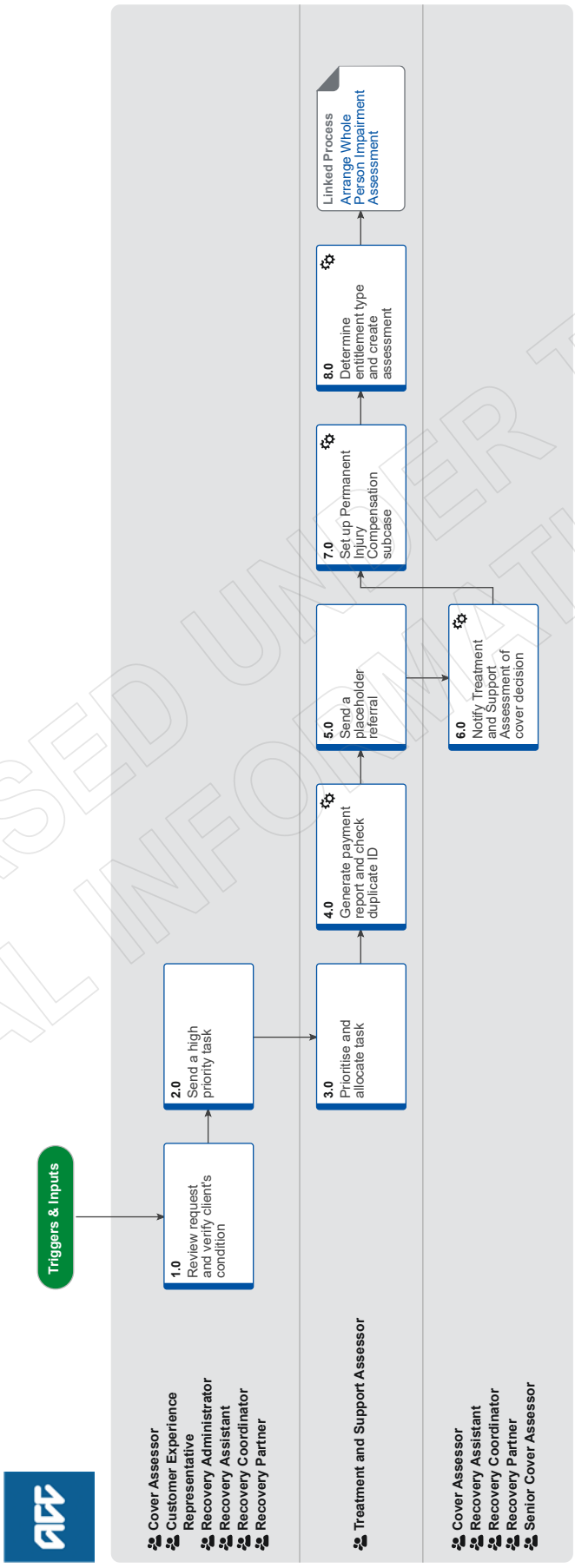
Impairment assessment extended discretion request

7.0 Deceased clients

a Estates may be eligible to receive payments for deceased clients. Different rules apply depending on when a client has died, the type of support applied for, and the stage in the request process. Information is available at: lump sum deceased clients

Deceased client Policy
https://go.promapp.com/accnz/Process/ceda722c-753b-424c-9bb3-432a7125d2aa

Escalate Permanent Injury Compensation application for a rapidly deteriorating client v9.0



Escalate Permanent Injury Compensation application for a rapidly deteriorating client v9.0

Summary

Objective
To assess whether you need to fast track a Whole Person Impairment assessment for clients with an imminent terminal condition, and are rapidly deteriorating, or send a Permanent Injury Compensation application pack to the client to complete and return.

Background
When a client makes a claim for a Lump Sum / Independence Allowance entitlement they must first request and complete the Permanent Injury Compensation application pack documentation.

ACC is able to fast track the Whole Person Impairment assessment process if the client has been assessed with an imminent terminal condition, and are rapidly deteriorating condition.

ACC can request an assessment of the client's impairment based on the medical documents available rather than the client seeing an assessor. This will enable ACC to pay the client more quickly if they are eligible for an entitlement.

Owner out of scope

Expert out of scope

Procedure

1.0 Review request and verify client's condition

Cover Assessor, Customer Experience Representative, Recovery Administrator, Recovery Assistant, Recovery Coordinator, Recovery Partner

a Determine that the client has a rapidly deteriorating condition by checking the client's injury diagnosis. Refer to the 'Clients with rapidly deteriorating conditions Policy' for more information.

- Identify Claims for Rapidly Deteriorating Clients
- Clients with rapidly deteriorating conditions Policy
- Rapidly deteriorating terminal conditions

NOTE **What if the client is not considered to have a rapidly deteriorating condition?**
The client must submit an application. Follow the "Send a Permanent Injury Compensation application pack" process.
PROCESS Send a Permanent Injury Compensation application pack

- PIC01 Application for Permanent Injury Compensation

2.0 Send a high priority task

Cover Assessor, Customer Experience Representative, Recovery Administrator, Recovery Assistant, Recovery Coordinator, Recovery Partner

a Contact the client or their contact person by phone to explain the process for assessment and the requirements for eligibility, in particular three part test from 'Clause 54 of Schedule 1, AC Act 2001.'

- Identity Check Policy
- Clause 54. Schedule 1, AC Act 2001
  http://www.legislation.govt.nz/act/public/2001/0049/latest/DLM105410.html

b Validate the client's address to ensure this is up to date.

- View or maintain party address details

c Send a Rapidly deteriorating task to the "Centralised Permanent Injury Compensation - Requests" queue.
• Edit the task and note any relevant details to the rapidly deteriorating circumstances of the client.
• If you are unsure call the Treatment & Support Assessment PIC Hunt Line (ext 50104) to alert them to the task.

3.0 Prioritise and allocate task

Treatment and Support Assessor

a Determine if an urgent impairment assessment should be arranged.

NOTE **When should an urgent impairment assessment be arranged?**
If the client's condition is rapidly deteriorating and it is likely that they may die before being able to attend an impairment assessment under normal circumstances, an urgent impairment assessment should be arranged. The client does not need to submit an application.

NOTE **What if the impairment assessment is not urgent?**
The client must submit an application. Follow the "Send a Permanent Injury Compensation application pack" process.
PROCESS Send a Permanent Injury Compensation application pack

PIC01 Application for Permanent Injury Compensation

b Edit task description and enter '#Rapid'.

c Prioritise and allocate task to a Treatment and Support Assesssor to action. If it is marked URGENT and it has a priority flag of High, this must be actioned immediately on receipt.

4.0 Generate payment report and check duplicate ID

Treatment and Support Assessor

a In Eos, locate the client's Party ID.

b In InFact, generate a '4.09 Lump Sums and Independence Allowance Payment Report' which will show the clients compensation history for Lump Sum / Independence Allowance entitlements. Save the document to a secure location as you will need to upload this to Eos later.

InFact

c Check the clients overpayment summary for outstanding overpayments.

NOTE **What if the client has outstanding overpayments?**
Contact Payments (for Eos debt) or Collections and Recoveries (for Oracle debt) and confirm whether the overpayment should be recovered if the client is eligible for PIC.

View overpayment information

d Check if client has a duplicate party/deleted party ID.

NOTE **How do you check if a client has a duplicate party/deleted party ID?**
In Eos, complete Party Searches as follows:
- Initials of the clients first and last name with date of birth
- Initials of alternate names indicated in forms and medical records with date of birth
- NHI number
- IRD number
- Consider reasonable alternative names e.g. nicknames and English/non-English versions

NOTE **What if there is a duplicate ID?**
Create an Action Client Duplicate task and complete the requested fields, this will route to the correct queue automatically.

NOTE **What if there is a deleted party ID which still has claims/documents?**
Create an Action Client Duplicate task and complete the relevant fields, this will route to the correct queue automatically.

5.0 Send a placeholder referral

Treatment and Support Assessor

a Select an assessor who accepts referrals for Rapidly Deteriorating assessment.

Pricing - Impairment Assessments

List of Impairment Assessors

b Email the assessor the client name and claim number.

NOTE **What do you need to include in the email?**
In the body of the email advise the assessor:
- We have a request for impairment assessment for a rapidly deteriorating client
- The diagnosis that ACC has been requested to cover
- We will let them know when a cover decision has been made and forward any additional relevant information at that time

c 'File away' the email contact with the assessor.

File an inbound email

6.0 Notify Treatment and Support Assessment of cover decision

Cover Assessor, Recovery Assistant, Recovery Coordinator, Recovery Partner, Senior Cover Assessor

a In Eos, create a 'Rapidly deteriorating task'.

NOTE **What do you include in the task?**
- Edit the task and note any relevant details to the rapidly deteriorating circumstances of the client.

b Transfer the task to the Treatment & Support Assessor who holds the existing rapid assessment task.

NOTE **What do you do if the task is unallocated?**
Transfer the task to the "Centralised Permanent Injury Compensation - Requests" queue.

c Contact the Treatment & Support Assessor by second method to advise of the cover decision.

NOTE **What if the Treatment & Support Assessor is away?**
Contact the Hunt Line on 50104 to have the work urgently reallocated.

7.0 Set up Permanent Injury Compensation subcase
Treatment and Support Assessor

a In Eos, determine the appropriate ACC45 that the claim should be managed from. This claim will be used to administer all Lump Sum / Independence Allowance activities, including the subcase.

NOTE **What if there is a sensitive claims component to the assessment?**
Manage the request on the sensitive claim, or where multiple sensitive claims exist, the 'master' claim, i.e. the oldest claim or claim where assessment previously applied.

NOTE **What if client has been assessed for this entitlement previously?**
• If new request is lump sum then work on the same claim as previous. If the previous lump sum payment was paid through Pathway you will need to capture the assessment details on the PIC subcase prior to the reassessment. See the 'Migrate Lump Sum details paid through Pathway' system steps linked below.
• If new request is for combined Independence Allowance then work from the same claim as previous.
• If new request is for a single Independence Allowance then work from the claim the ACC554 is for, i.e. the previously assessed claim if this is to be assessed this time.

Previously-assessed injuries must be included in a reassessment of the entitlement.

Migrate Lump Sum details paid through Pathway

NOTE **What if the client has not been assessed for this entitlement previously?**
If the request is for one physical claim always manage on the applicable claim.

If the request is for multiple claims choose a claim that:
• relates to the highest impairment, or
• is currently managed, or
• has had surgery, or
• is the oldest claim listed.

b Set up the Permanent Injury Compensation subcase on the appropriate claim.

Add or edit a rehabilitation action

NOTE **What if multiple claims need to be included in the assessment?**
• Link the additional claims to the subcase

Linking a Claim to PIC Subcase

NOTE **What if the automatic injury description from the injury code is not accurate?**
• Edit the Injury Details with the correct description

Update Injury Details on a PIC Subcase

c In the Permanent Injury Compensation subcase, start the 'Pre-Assessment' task.

8.0 Determine entitlement type and create assessment instance
Treatment and Support Assessor

a In Eos, complete the 'Determine Entitlement Type' E-form. When saved, Eos will generate an Impairment Assessment instance in Eos for the relevant entitlement type.

Update Permanent Injury Compensation Entitlement Details

NOTE **What if an assessment has already been completed and a reassessment is required?**
You can create a reassessment instance in Eos by using the 'copy' function on the previous assessment instance. Refer to the 'Use copy function to create reassessment ' system step.

Use copy function to create reassessment

PROCESS **Arrange Whole Person Impairment Assessment**
Treatment and Support Assessor