



Position Statement

Provision of multiple or concurrent same day allied health treatment

This statement outlines our position on treatment provided to the same client on the same day from one or any combination of specified treatment providers¹ (also referred to as allied health providers in this document) under Schedule 1, Part 1 of the AC Act 2001.

Allied health treatment

We expect that most self-limiting musculoskeletal injuries will only need treatment from one allied health provider per day to deliver an outcome. Treatment from more than one allied health provider per day is considered exceptional. We only fund one allied health treatment per client per day if that treatment meets our legislative requirements, such as being:

- needed because of an injury
- clinically justified, safe and effective (necessary and appropriate for that injury, based on best current evidence and of the quality required for that purpose)
- delivered only on the number of times needed and for the duration needed
- given at a time or place that is appropriate (such as a clinic)
- of a type normally provided by a treatment provider

Considerations

Same day second treatment, same allied health provider – we may fund a second treatment from the same allied health provider where the treatment meets our legislative requirements and it is a clinically justified exception. Examples include when the client initiates the second consultation or has a subsequent injury on that day.

In these cases, allied health providers must:

- document the clinical rationale to justify further assessment, and follow up/or treatment on the same day
- ensure all relevant professional standards are met
- invoice us only for the episode of care, rather than invoicing us separately for multiple injuries treated during that consultation

Same day treatment, two or more allied health providers - we may fund treatment from more than one allied health provider if it is a clinically justified exception, likely to achieve or maintain a measurable

¹ As specified in the *Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003* as acupuncturists, chiropractors, occupational therapists, osteopaths, physiotherapists, podiatrists and speech therapists.

functional improvement, and is safe and effective. Each allied health provider must:

- obtain and document client consent to share their health information with another provider
- document the referral process between each provider and ensure all relevant professional standards are met
- document the clinical rationale to justify further assessment and follow up/or treatment on the same day
- document evidence that assessment and/or treatment is provided in a co-ordinated way by providers working towards shared treatment goals for the client
- only invoice us for the time direct treatment² was provided to treat the covered injury. You cannot invoice us for treatment delivered concurrently or for non-direct treatment
- only invoice us for the episode of care, rather than invoicing separately for multiple injuries treated during that consultation

Number of treatments

We expect clients to achieve the best outcome from their covered injury within the clinically appropriate number of treatments usually provided by a single allied health provider.

Where we find the criteria for same day allied health provider services have not been met, and it is not clinically justified, we will seek reimbursement of any payments made.

Further information

Please contact performancereviewteam@acc.co.nz if you have any questions about this position statement.

² Regulation 4(3) For the purposes of this regulation, and Regulation 5, **direct treatment** means the time during which a treatment provider is directly applying his or her expertise to a claimant's treatment. Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003.