

# ACC cover for allergic reactions as personal injury caused by accident (PICBA)

## A guide to ACC cover

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ACC provides cover for allergic reactions as a result of an accident in some circumstances:

- **The reaction is part of a PICBA**, eg a person suffers a puncture to the skin from a bee sting, and has a local allergic reaction. The puncture from the bee sting is a covered personal injury, and this extends to the local allergic reaction.
- **The reaction itself is a PICBA**, eg anaphylaxis from ingestion of shellfish.
- **The reaction is a personal injury consequential to a covered personal injury**, eg when a person suffers a **systemic** anaphylactic reaction to a sting or hypoxic brain injury from anaphylaxis after eating shellfish.

### What are the cover criteria for PICBA?

Under the ACC Scheme, cover is provided when a personal injury is caused by an event described in the legislation. This includes where an accident has caused a personal injury. A personal injury is defined as including death or physical injury.

To provide cover for allergic reactions, ACC needs to be able to identify the allergen, the means by which it contacted the body (which must meet the definition of “accident”), and the resulting physical injury.

#### What accident has caused the reaction?

Occurrences which may be an “accident” relevant to allergic reactions include:

- a specific event involving the application of force external to the body, eg a bee sting
- inhalation of a solid, liquid or gas on a specific occasion (but not a virus, bacteria, protozoan organism or fungus)
- oral ingestion of a solid, liquid, gas or fungus on a specific occasion (but not a virus, bacteria, or protozoan organism)
- absorption of a chemical through the skin – the period of absorption must not be more than one month.

### When do claims for allergic reactions not meet cover criteria?

ACC does not cover:

#### 1. Underlying health conditions

There is no cover for rhinitis, asthma or atopy or similar underlying conditions.

#### 2. Chronic inflammatory conditions

There is no cover for:

- asthma or exacerbations, eg cough, wheeze, shortness of breath alone. Asthma is a chronic inflammatory disease of airways, not an allergic reaction
- atopy or atopic dermatitis, which is a chronic, relapsing, itchy inflammatory skin disease.

### 3. Allergic conditions

There is no cover for allergic conditions such as allergic rhinitis and allergic conjunctivitis.

Allergic rhinitis is common, with symptoms such as sneezing, a runny nose and stuffy nose (congestion). Allergic conjunctivitis manifests as red, itchy eyes with a discharge, and light sensitivity. The causes for both these conditions are varied and difficult to identify in individual cases, but could include:

- grasses or trees
- outdoor mould spores
- weeds (such as ragwort)
- dust mites
- indoor moulds
- animal dander
- pollens.

### 4. Where the allergen, or the process by which it contacted the body to cause a physical injury, cannot be identified

For example, there is no cover if the allergen is unknown (idiopathic anaphylaxis).

## Does ACC cover allergy?

Allergy is an underlying health condition, not an injury caused by accident.

The exception to this is where the allergy itself was caused either by a work-related gradual process disease or infection or by treatment administered by a registered health professional. A special assessment will be required if the condition may have been caused by a work-related situation or treatment injury.

To find out more:

- clients go to <http://www.acc.co.nz/making-a-claim/how-do-i-make-a-claim/index.htm>
- providers go to <http://www.acc.co.nz/for-providers/lodge-and-manage-claims/index.htm>

## Assessing reimbursement requests for adrenalin self-injection devices for covered claims

ACC does not purchase adrenalin self-injection devices. ACC can reimburse some costs to a client for a device where it has been used for acute management of an allergic reaction and this is covered by ACC.

The Australasian Society of Clinical Immunology and Allergy (ASCIA) Action Plan includes steps to manage mild/moderate allergic reactions and anaphylaxis and to seek urgent medical attention. A person with a previous allergic reaction or anaphylaxis to an identified allergen should follow that ASCIA Action Plan when a further exposure to the allergen occurs with early signs of an allergic reaction. This includes giving the adrenalin injection before waiting for the full reaction to develop.

If a person has a current ASCIA Action Plan<sup>1</sup> to address an allergic reaction/anaphylaxis and then uses their adrenalin self-injection device (eg EpiPen) in keeping with the ASCIA Action Plan, ACC may accept the use of an adrenalin self-injection device is for an allergic reaction or anaphylaxis and contribute to the cost.

1. A New Zealand-registered doctor or nurse practitioner can complete the ASCIA Action Plan – see <http://allergy.org.au>

To assess requests for reimbursements of adrenalin self-injection devices, ACC will need to:

- know what the accident and allergen were
- cover the allergic reaction as a physical injury caused by an accident
- have a copy of the pre-accident ASCIA Action Plan (where one exists)
- have copies of the clinical records from the medical visit after the accident event and allergic reaction
- have a copy of the receipt for the adrenalin self-injection device.

If the person does not have a current ASCIA Action Plan, ACC may accept the following as indicating allergic reaction after exposure to an identified allergen and covered accident event:

- acute onset of a reaction (minutes to hours) with involvement of skin, mucosal tissue, or both (such as generalised hives, pruritus, flushing, or swelling of lips, tongue or uvula) and **at least one of:**
  - respiratory compromise (such as dyspnoea, stridor, wheezing, or hypoxemia)
  - reduced blood pressure or collapse
  - symptoms of end-organ dysfunction (such as fainting or incontinence)
  - vomiting or abdominal pain.

## Guide development

This guide was developed by ACC and Allergy New Zealand, with clinicians representing the New Zealand Clinical Immunology Group.

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This document provides guidance on when ACC is likely to cover allergic reactions.

These guidelines provide general guidance only. The Accident Compensation Act 2001 takes precedence over these guidelines. Each case will be considered on its own facts by ACC.

