



Who to contact with queries?

Any claim specific requests, e.g. requests for travel, use of telehealth, out of area delivery of services – must be made to the Recovery Partner or Recovery Team managing the claim, not to the Evolution Team.

The Evolution Team will not consider or overturn a case management decision that has been made by a Recovery Partner or Recovery Team. These should be discussed with the Recovery Team Member or Team Leader.

The role of the Evolution Team is implementing the new contract and ensuring transition is complete by 31 May 2025.

A full list of contacts at ACC is available on our website.





Named Service Provider Applications are now open

The Named Service Provider Application process is now open for the term of the contract.

It is open for new providers and for existing providers to make changes to their current approval.

You can find more information on our website.

All applications must be completed through Business Connect. New providers must also complete the ACC6243 and send it to Health.Procurement@acc.co.nz

Please note a named service provider must be approved by ACC and named on a Supplier's contract before they can deliver services.





Requests for amendments to your contract

You can request the following amendments to your contact:

- add approved named service providers
- add additional approved services to an approved named service provider
- add geographical areas
- increase the number of named service providers on your contract (beyond the initial approval limits)
- remove named service providers.

To streamline the approval process, we have created a template to support contract amendment requests. This can be accessed from our <u>Resources</u> page. To avoid unnecessary delays in the approval process, please make sure that you provide all the required information.





Group-based therapy applications

Applications for group therapy have opened.

Tranche one:

- Application open 03 Feb 26 Feb 2025
- Suppliers notified of outcome 14 March 2025
- ACC publish approved groups 28 March 2025

Groups will be approved for the initial term of the contract.

The information published will include: Supplier, group name, location of delivery, and hours.

More information is available on our website (<u>Group-based</u> therapy application)





Transitioning kiritaki to the Sensitive Claims Service

If you have a purchase order that expires on 31 May 2025, you must transition your kiritaki <u>before</u> that purchase order expires.

Where the kiritaki is in Support to Wellbeing Long Term, the natural transition point is either at their next scheduled case conference or Progress Report. A new Wellbeing Plan is required.

Where the needs of the kiritaki require earlier transition, the lead service provider can initiate transition early.

Providers and suppliers should be planning transitioning their caseloads now.

All kiritaki <u>must</u> either be transitioned to the new Sensitive Claims Service, or complete services before 31 May 2025. No ISSC purchase orders can be amended after this date.





Delay in a specialist cover assessment

If there is a delay in starting a specialist cover assessment (e.g. due to the availability of an assessor) this will be managed on a case-by-case basis.

The intent is that as the service embeds more kiritaki will proceed through Cover and Wellbeing, increasing the capacity of assessors.

If all the available hours for the Lead Service Provider have been used and invoiced for, please contact the Recovery Partner managing the claim to confirm:

- when the specialist cover assessment report will be submitted; and
- how many additional hours are needed to support the kiritaki (noting a maximum of one session per week over that period can be approved).

In this instance, additional specialist cover assessment lead service provider hours can be provided.





Wellbeing Plans and SMART Goals

We have heard your feedback and concerns about the number of Wellbeing Plans that are being returned, and your concerns about SMART goals.

We are currently working on:

- Tracking and analysing returned reports to understand themes, insights and areas for improvement
- Adding to the guidance available internally and externally about SMART goals and Wellbeing Plan criteria.
- Delivering additional training internally
- Creating a suite of exemplar SMART goals.

It is important to remember the intent and criticality of the Wellbeing Plan. This is key information needed for decision making and approval of service and supports.





Use of other named service providers under another supplier

There may be times when your Lead Service Provider requires the services of another Named Service Provider (under another supplier) to support their kiritaki (e.g. a specialist in EMDR).

In this situation, Named Service Providers under another supplier can be used. ACC will issue separate purchase orders to each supplier. Each supplier will invoice for the hours used by their Named Service Provider (as per the 'Invoicing' section of the Operational Guidelines).

The Wellbeing Plan must be clear which Recovery Goals the additional Named Service Provider will be contributing to.





Outcome measures

The technical teams have resolved what we believe to be the cause of the outcome measure errors.

If providers receive an email to say that outcomes could not be recorded, we believe this message has been sent correctly. Providers should now re-submit the outcome measures.

Providers will only receive this message where they:

- use the link from acc.co.nz (not the personalised link via email); and
- have incorrectly entered kiritaki information (name, DOB, claim number).

If providers believe that they have received a prompt to resubmit outcome measures in error, please encourage them to take screenshots and forward these to isscevolution@acc.co.nz.







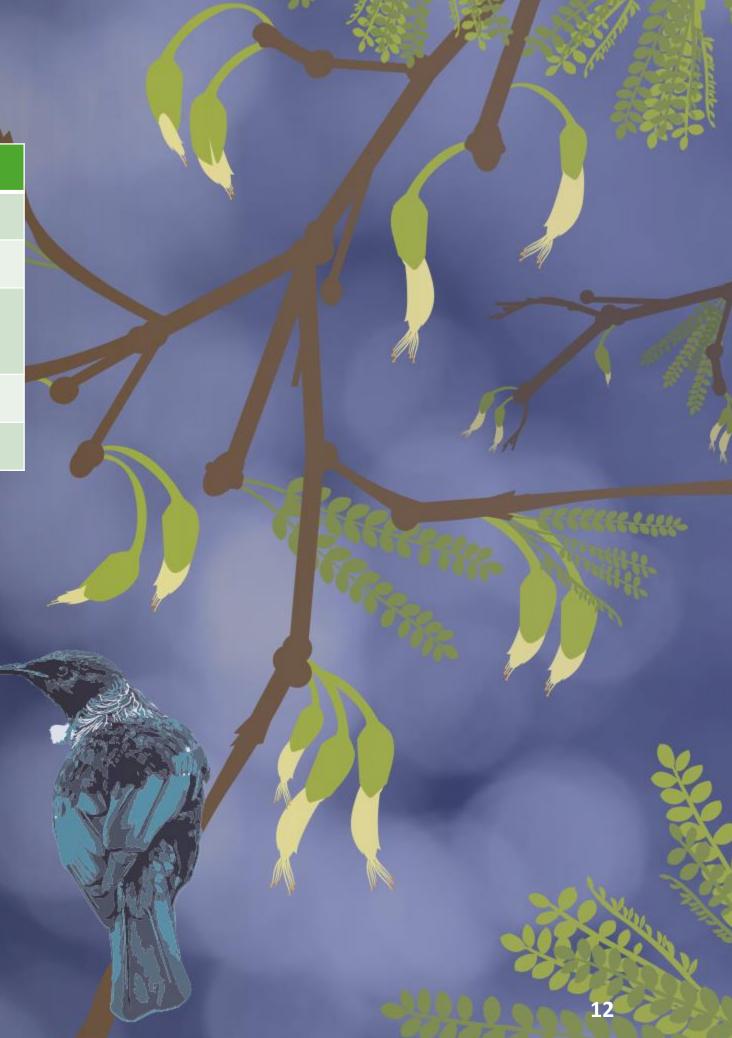
Who to contact with queries?

Type of query	Who in ACC?
Claim specific requests	ACC Recovery Team Members/ Team
Contract queries	Health Procurement
Service delivery, application of the contract and performance	Provider Relationship Team
General provider or supplier queries	Provider Contact Centre
General queries about the service	Mental Health Portfolio Team

A full list of contacts at ACC is available on our website.

Any **claim specific requests**, e.g. requests for travel, use of telehealth, out of area delivery of services – must be made to the Recovery Partner or Recovery Team managing the claim, not to the Evolution Team.

Do not send the same query to multiple places across ACC. This creates inefficiencies and delays in our ability to respond, and increases the risk of variation in advice provided.





Role of the Evolution Team

The role of the Evolution Team is implementing the new contract and ensuring transition is complete by 31 May 2025.

The Evolution Team will not consider or overturn a case management decision that has been made by a Recovery Partner or Recovery Team. These should be discussed with the Recovery Team Member or Team Leader.





SMART goals checklist now available

We've added the checklist used by our recovery teams to review SMART goals in the Sensitive Claims Service Report Guidelines on our <u>Resources</u> page. This is to help you as you develop SMART goals for kiritaki.

We've also made other updates to the Report Guidelines, these include:

- Confirmation that pre-approved services do not need to be included in the planned services section of reports.
- 2. Clarity that goals can be worked on concurrently or sequentially to other goals, as long as each recovery goal is clear.
- 3. The first SMART goal example has been revised to demonstrate best practices in goal creation.
- 4. Clarified instructions on what to include in the 'Total expected package duration of all services listed above' section of the Wellbeing Plan.

We are working on creating a webinar to further support goal development.





Updated Operational Guidelines

We've made some minor updates to the Operational Guidelines in response to questions and feedback we have received.

Its important to use the version of the Operational Guidelines available on our website: <u>Resources</u>

At that link there is also a summary of the updates that have been made called 'Summary of amendments to the Operational Guidelines for the Sensitive Claims Service'.





Out of area approval prior to engaging a kiritaki

We've been asked when should a Supplier get approval from ACC to deliver services outside of their approved geographical areas when approached by a kiritaki.

We have now confirmed that approval must be sought from ACC <u>prior</u> to confirming with the kiritaki acceptance of the referral and lodgement of an Engagement Form. Any requests made prior to the lodgement of an Engagement Form must be sent to sensitiveclaims@acc.co.nz

Full guidance is available in the <u>Sensitive-Claims-Service-Operational-Guidelines.pdf</u>

There is also guidance on delivery of services through telehealth and travel outside an approved geographical area.





Contract arrangements for Service Providers

Service Provider professions are Registered Nurse, Occupational Therapist, Physiotherapist, Dietitian, Speech Language Therapist, and Social Worker.

Service Providers are not required to be named on a Supplier's contract. They must be a registered ACC Health Provider.

Suppliers must ensure any Service Provider they use to deliver services meet the requirements of their contract (eg Health and Safety, Induction, Vetting requirements).

Service Providers can work across multiple suppliers to support kiritaki. All suppliers are not expected to have a dietitian (for example), but can access those professionals as needed.

Suppliers are required to maintain an updated Service Provider list and submit this annually as part of their Annual Declaration.



Invoicing and Payment to Service Providers

ACC will send a purchase order to the Supplier for approved services (where these are not pre-approved).

The Supplier must manage payment to:

- Named Service Providers on their contract
- All Service Providers and other third parties (such as cultural advisors) even if they are associated with another organisation.

The only exception to this is where a supplier needs to use a named service provider or named assessment provider from another supplier. In this situation, ACC will issue a separate purchase order to the other supplier for the hours indicated.

Separate purchase orders are <u>not</u> issued for Service Providers.





Transitioning kiritaki to the Sensitive Claims Service

Reminder: if you have a purchase order that expires on 31 May 2025, you must transition your kiritaki <u>before</u> that purchase order expires.

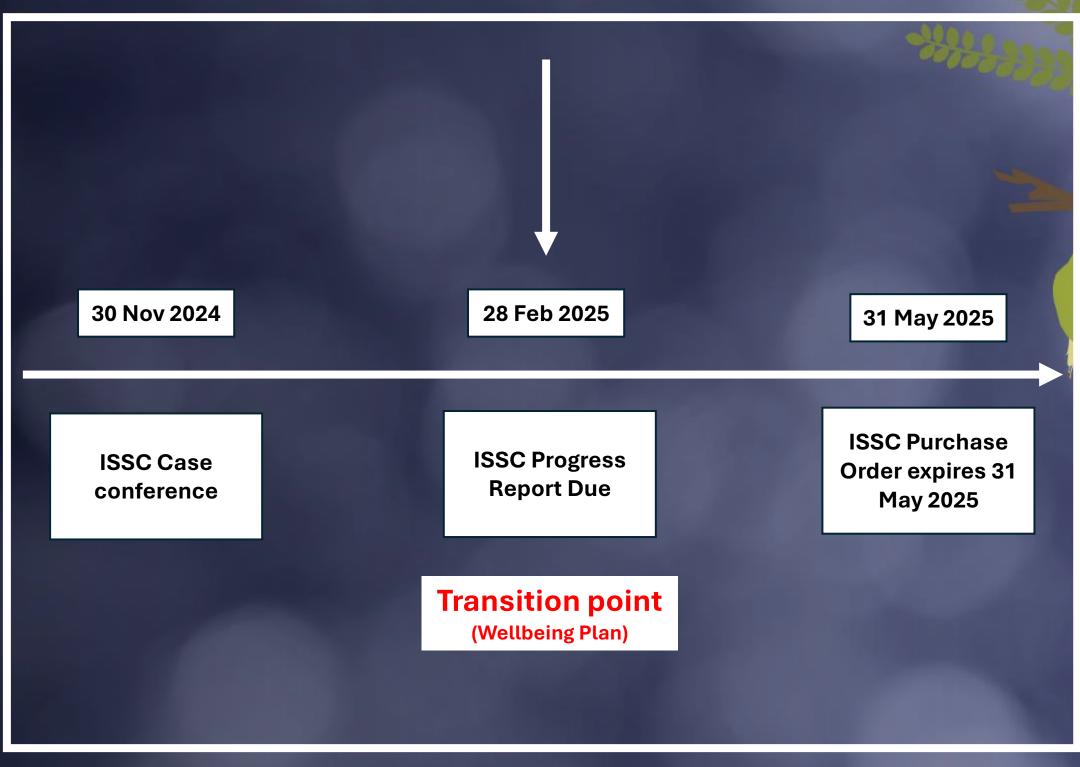
All kiritaki must either be transitioned to the new Sensitive Claims Service, or complete services before 31 May 2025. No ISSC purchase orders can be amended after this date.

At the next Supplier Drop In session on 14 March we will focus exclusively on transition from the ISSC to the Sensitive Claims Service.

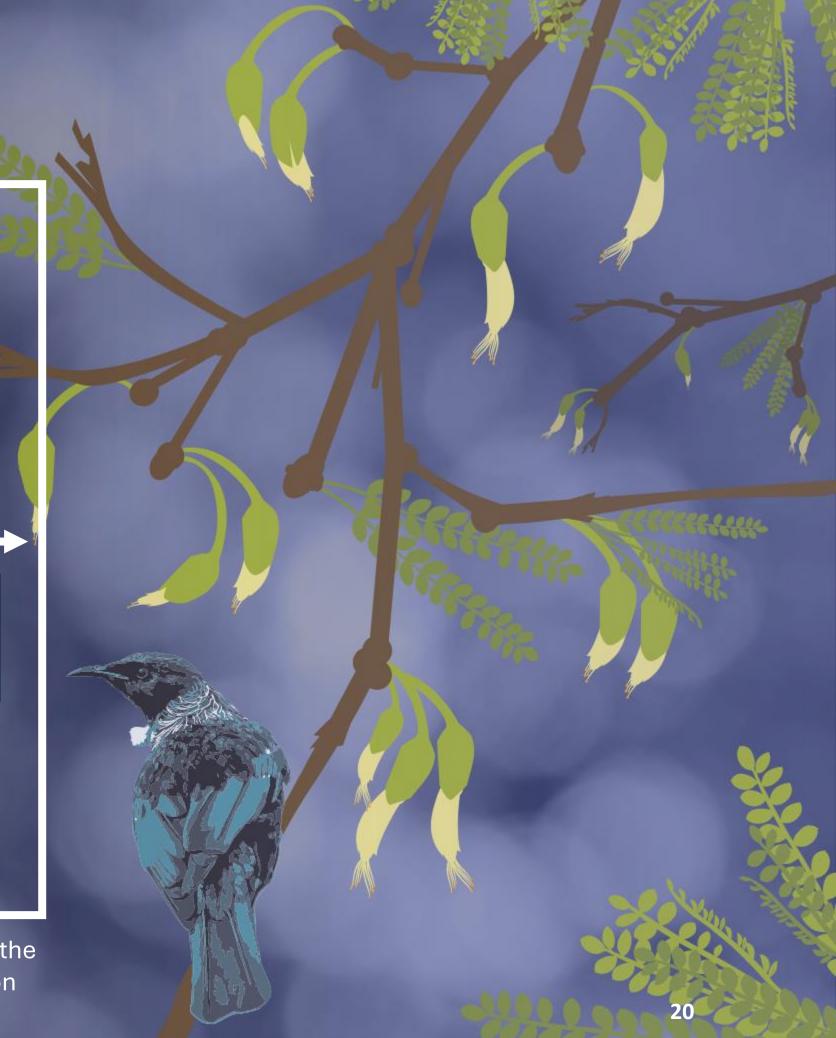


Example of a transition point

ISSC Support to Wellbeing Long term



Transition should occur at the next scheduled case conference or Progress Report. Where the needs of the kiritaki require earlier transition, the lead service provider can initiate transition early.





How we are tracking with transition

We have 27,233 kiritaki to transition to the Sensitive Claims Service from the ISSC.

Since 1 December 2024 we have transitioned 34% (9,202) of these kiritaki.

This means we still have 66% (18,031) of kiritaki to transition before 31 May 2025.

The majority of these kiritaki have a purchase order that expires 31 May 2025, however, they must be transitioned at their next check in or progress report being due.

There is only 13 weeks left to transition – it is critical suppliers are working with their providers to ensure they can complete all the necessary steps to transition their kiritaki.





Processing Wellbeing Plans

Our Assisted Recovery Team is working hard to review all the new Wellbeing Plans that are being submitted.

Due to the volume that are now starting to come in to initiate transition, there may be at times some delays with processing these.

We continue to endeavour to meet our service level agreement of 10 business days to approve a Wellbeing Plan or return it where it does not meet ACC quality standards.

It is critical that these continue to come in at the natural transition point to avoid further delays and impact on payments at the end of May.





Upcoming Supplier Drop In Sessions

Friday 14 March, 12pm

(focus on transition from the ISSC to the Sensitive Claims Service)

Friday 28 March, 12pm

(final Supplier Drop In session)