

Sensitive Claims Service Supplier Drop In

13 December 2024



General reminders

- The Engagement Form remains the same – providers need to make sure they are selecting the correct Sensitive Claims Service supplier from the drop-down list.
- The Service Provider applications remain open through Business Connect.
- The Named Service Provider applications open on 3 Feb.
- We have updated the Operational Guidelines, make sure you are using the website for the latest version.



Pre-approved services

There are a number of services that are pre-approved under the new contract.

These pre-approved services will not be listed on the Purchase Orders you receive from ACC, but you can still invoice for them.

The Operational Guidelines have been updated to show these services more clearly. There is now a table listing the services in pre and post cover that are pre-approved (Section 14).

Just a note, if you have questions about how these pre-approved services should be listed within your Client Management or invoicing system, please direct these to the organisation that provides that system.



New Purchase Orders

We know that some of you have received new purchase orders without the report writing hours backdated, where kiritaki are transitioning to the new service.

We apologise for this error, and the additional work to get this sorted.

We have worked with our teams to make sure that you are getting purchase orders with the correct services on them.

Please send any instances of this through to our inbox, and we will follow up to make sure the purchase order is corrected as soon as possible.



Continuity requests

We have been receiving a number of requests for additional hours or continuity to allow providers time to familiarise themselves with the new templates.

These requests will not be approved as the reports and report guidelines have been available since September for provider to familiarise themselves with.



Outcome measures

Thank you for your patience and understanding as we work through some technical glitches with outcome measures.

There are a couple of things happening that are leading to some incorrect responses from the system, and we are working to identify and correct these.

Please continue to submit outcome measures. We have some advice that will help with this process.

If a provider receives an email that says outcome measures were not able to be recorded, they can disregard this message and do not need to resubmit the measures.

In most instances the information is available in our system and will be linked to the claim. We don't require providers to do any re-work.



Outcome measures timing and process

The first prompt for an outcome measures is when providers submit an Engagement Form. Due to the timing in our system, a provider may receive this before the purchase order for the next stage of services – this is expected.

From here prompts are sent at regular time-based intervals, 3 or 6 monthly depending on the pathway.

At the completion of services providers need to ‘pull’ the link from our website to submit the last outcome measure, before a completion report will be accepted. Note - this is not the case if completion is the transition point.

The timeframe is 15 business days, but if this is not clinically feasible then the outcome measures should be sent at the next most appropriate time before the next link is received. The email link will stay active.



Outcome measures advice for providers

- Don't use the email link to familiarise yourself or to print the screens. A paper version of the measures is available on our website.
- Only click the email link when you are ready to submit the measures.
- Choose today's date – even if you collected the measures a few days ago.
- You only need to 'pull' the outcome measure link from our website when kiritaki complete services (and their completion is NOT their transition point), or you have lost the original link.
- You only need to complete one of the secondary outcome measures. The selected measure should then stay the same throughout, for that kiritaki.



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Invoicing for pre-approved services

Pre-approved services will not be listed on the Purchase Orders you receive from ACC, but you can still invoice for them. The Operational Guidelines (Section 14) list the services that are pre-approved. You can find the relevant codes and suffixes in the Service Schedule.

When invoicing for these services, you need to make sure you are meeting the service schedule requirements in terms of when these can be paid.

We have had some queries asking what Purchase Order number is needed to invoice for these pre-approved services. This is not an ACC invoicing requirement.

Please contact the organisation that supplies your Client Management system or invoicing system for what to add in the system if this is a number you need.



Tailored Support to Wellbeing Flexibility

You will receive a Tailored Support to Wellbeing Purchase Order based on the goals in the Wellbeing Plan (for example SCSWA for 50 hours over 18 months).

When you invoice you add the provider suffix to ensure the correct pay rate.

Where kiritaki needs change, if the total hours and duration remain the same, (i.e. you are moving hours between provider types) you don't need a new Purchase Order.

You do need to update the Recovery Team member with the change (via email or progress check-in etc).

A new Purchase Order is only required when the total requested hours or duration change or when you are now requesting hours to access another supplier's Named Service Provider.



SMART Goals

A reminder that goals need to be SMART. Specific. Measurable. Action Orientated. Relevant and Timely.

Goals should be clear, based on the information known at the time, acknowledging that needs may change and there is a process to amend or add goals through the progress report, progress check-ins or at any time with the Recovery team member.

We are seeing instances of requests for hours or provider types added ‘just in case’ as well as hours and durations that don’t reflect the goals. These are being returned for amendment.

The Report Guidelines have a framework and guidance to support writing SMART Goals, as well as 3 examples of what this might look like in practice.



Group therapy applications

Applications for group therapy will open on 3 Feb. The application form will be online and the applications will open in tranches moving forward. Groups will be approved for the initial term of the contract.

First tranche:

- Application open 03/02/2025 – 26/02/2025
- Suppliers notified of outcome - 14/03/2025
- ACC publish approved groups - 28/03/2025

The information published will include:

- Supplier, group name, location of delivery, hours.

We will provide more information to help you prepare for the application after Jan 20.





Future Group therapy applications

The future group application dates are:

Application Open Date	Application Close Date
01 July	20 July
01 October	20 October
01 January	20 January
01 April	20 April

ACC will have 10 working days from closure to review and determine the outcome of group applications.

If applications are submitted beyond the close date, these will be assessed in the following quarter



Request for a Progress Report

Some providers may have received a reminder from a recovery team member that a progress report is due.

This was sent to Providers working with kiritaki who are still receiving ISSC Support to Wellbeing Long Term and had a progress report due under the ISSC.

The timing of the reminder was correct, but it should have said that a Sensitive Claims Service Wellbeing Plan (or Completion Report) is due.

We have sent a reminder to our teams, and the wording has been updated.

If your provider received this reminder, please remind them of the transition guidance, and support them to transition the kiritaki to the new service.



Outcome measures

We are continuing to work through the technical glitches with outcome measures. We have solved one issue, and we know what the other issue is, but it won't be fixed this side of Christmas.

We appreciate your continued patience, as we work through this.

Please ask your providers to continue to submit outcome measures.

If they receive an email that says outcome measures were not able to be recorded, they can disregard and delete this message.

They do not need to resubmit the measures, the information is available in our system and will be linked to the claim.

