

# How to write a successful surgical ARTP for medical specialists

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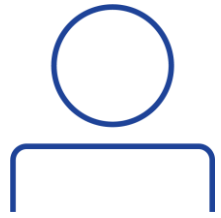


**He Kaupare. He Manaaki.  
He Whakaora.**  
prevention. care. recovery.



# Nau mai, Haere mai. Welcome to :

## How to write a successful surgical ARTP for medical specialists



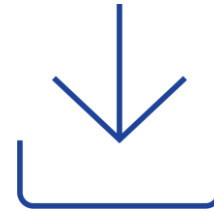
Meet the team

Vernon Finch  
Greg Kassel  
Kylie Brown &  
Hamish Johnson



Questions

Use the Q&A at the  
top of your screen



Download the  
webinar

We'll email the  
webinar and slides



Feedback

Let us know what  
you think

# Agenda

1

Why the ARTP is important

2

Cover and diagnosis

3

Establishing causation

4

A closer look at the ARTP

5

Examples

6

Questions?

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# Why ARTP is important

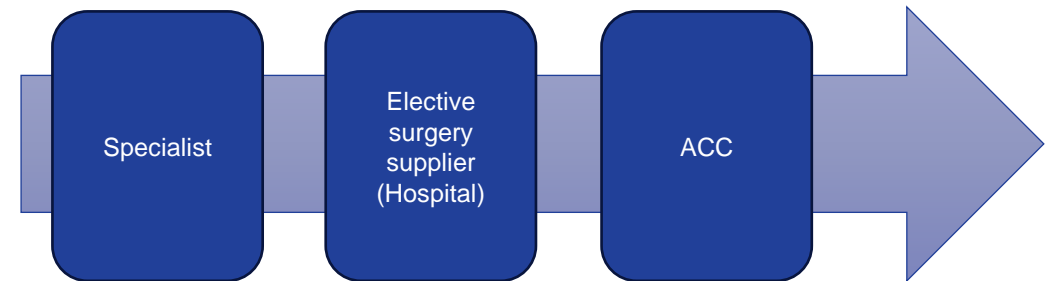
# 1

# The ARTP

- ✓ Used to obtain prior approval for surgery
- ✓ Completed by specialist rooms
- ✓ Assessed first by non-clinical staff

What about Non-prior approval (NPA) codes?

Having the right information means we can make decisions quicker.



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# Cover and diagnosis

# 2

# Cover – what is a covered injury?

- ✓ An injury has evidence of physical damage, caused by an accident

- ✗ Symptoms alone - pain, numbness, weakness
- ✗ Pre-existing developmental or bio-mechanical abnormalities
- ✗ injuries caused by the ageing process (degeneration)

[Understanding claims and cover \(acc.co.nz\)](https://acc.co.nz/understanding-claims-and-cover)

[Understanding complex cover \(acc.co.nz\)](https://acc.co.nz/understanding-complex-cover)

# Cover – what is an accident?

An event, or series of events\*, that involves:

- ✓ an application of a force external to the body (including gravity)
- ✓ a sudden movement of the body to avoid a force (including gravity)
- ✓ a twisting movement.

\*A series of events over a set period of time can cause a one-off physical injury.

[Understanding claims and cover \(acc.co.nz\)](https://acc.co.nz)



# Cover and diagnosis – why it's important?

Cover is accepted for a specific accident and resulting injury

Surgery requested must be treating the covered injury

You may need to update diagnosis – this can be done via the ARTP

Example:

- Patient has cover for a knee sprain
- Your diagnosis is a meniscal tear requiring arthroscopic surgery
- Cover needs to be updated to a meniscal tear

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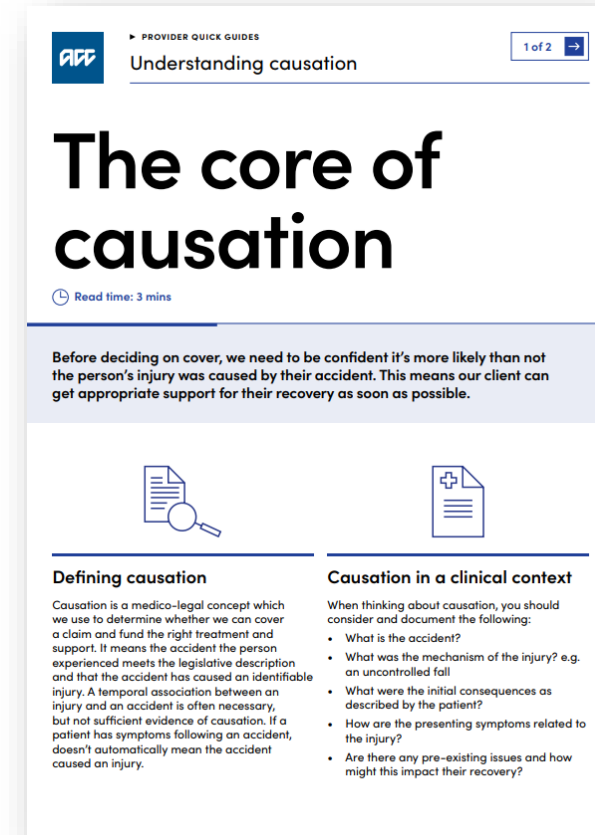
# Establishing causation

# 3

# Cover – causation

- ✓ We need to be confident it's more likely than not the person's injury was caused by their accident.
- ✓ The link between the injured person's personal injury and the accident is known as causation.

Sometimes the initial symptoms of a condition coincide with an accident event, however correlation is not causation.



# Link the surgery with the covered injury

- ✓ Clear causal link statement
- ✓ How the accident has caused the condition requiring surgery
- ✓ Specific to this patient
- ✓ Explains the mechanism of injury, and presentation

The patient sustained a valgus, high force wrenching injury to the thumb when holding onto the rope of the sea biscuit, they presented the same day to the A and E and had instability on exam consistent with a rupture of the ulnar collateral ligament of the left thumb, this is confirmed on an MRI scan done 2 weeks later that shows an acute rupture of the ligament and oedema consistent with an acute injury.

# Causal link – not clear

Where causal link is difficult to determine  
we'll likely need more time and information

If you can't describe the causal link - don't  
submit the ARTP to us



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# A closer look at the ARTP

# 4

# ARTP

- ✓ History (mechanism of injury)
- ✓ Causal link
- ✓ Pre-existing factors
- ✓ Priority
- ✓ Prognosis

The image shows two overlapping forms used for accident response and treatment. The top form is titled "Accident Response and Treatment Form (ARTP)" and contains several sections for recording patient information, history, examination, and management. The sections visible include "Specialist Notes", "History & Examination", "Working, Rehabilitation and Management", and "Prognosis Management & Response". The bottom form is partially obscured but shows similar sections.

[ARTP Template \(www.acc.co.nz\)](http://www.acc.co.nz)

# History, Examination & Diagnosis

- ✓ **History** – ensuring mechanism of injury
- ✓ **Examination** – of the presenting injury
- ✓ **Diagnosis** – short, specific and easily identifiable
- ✓ **Pre-existing factors** - relevance to the presenting condition.
- ✓ **Diagnostic Tests and Imaging** – details on features consistent with injury

History, Examination and Diagnosis	
Type of Assessment ( <i>Simple Assessment/Complex Assessment/Second Opinion/Reassessment/Follow-up visit</i> ):	
History of the current condition	
Causal Medical Link Between Proposed Treatment & Covered Injury:	
Relevant Pre-Existing Factors ( <i>Relevant medical history, presence of degenerative disease, co-morbidities</i> ):	
Clinical Examination ( <i>Outline of findings at clinical examination, progress since previous visits and the indicated clinical pathology</i> ):	
Diagnostic Tests And Imaging ( <i>Provide copies of reports</i> ):	
Specific Diagnosis:	



# Prognosis and recovery expectations

We need to know what the patient may require post-surgery, things like:

- ✓ Physiotherapy & rehabilitation
- ✓ Home help

Expected recovery durations help us to plan and partner with the patient to ensure a smooth return to independence.

Proposed Management & Prognosis	
Prognosis ( <i>Expectations for the client's recovery including expected return to work on modified or alternative duties</i> ):	
Pre/Post Operative Care ( <i>Expectations for preoperative care and any appropriate postoperative care including physiotherapy, assistive devices, home help or vocational assistance</i> ):	

# Assigning a priority

ACC priority classification

Assigning a priority to the ARTP

- ✓ High – within 30 days.
- ✓ Routine – within 6 months

High has 4 subcategories H1-4

H1 – Clinically urgent procedure code

H2 – Home help

H3 – Weekly compensation

H4 – Risk of losing employment

# Supporting documentation

The more that's there, the less we may need to request and the faster we can issue a decision

- ✓ Clinical notes
- ✓ Copy of the referral to you
- ✓ Radiology (especially x-ray/ultrasound)
- ✓ Information on previous surgeries, injuries etc



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# Examples

# 5

# Is causation clear?

There is a direct link between injury sustained and surgery.

Doing water blasting caused direct loading to the rotator cuff

Causal Medical Link Between Proposed  
Treatment & Covered Injury:

Picking cherry caused direct loading to the wrist

Specific Diagnosis:

Carpal tunnel syndrome

Missing key factors:

- Mechanism of accident and how it caused the injury
- Presenting symptoms and timing that fit with acute
- Imaging findings that fit with acute

# Is causation clear?

## Causal Medical Link Between Proposed Treatment & Covered Injury:

In [REDACTED] case he has a clear episode of trauma with a significant external force applied to the AC joint when he lost control of the weight in May 2021. He had immediate pain in the AC joint which has persisted, and MRI confirms post-traumatic distal clavicle osteolysis.

Therefore while AC joint problems can be a gradual process condition, [REDACTED] history, clinical examination, and MRI findings are more consistent with a post-traumatic cause secondary to the injury when he lost control of the weight in 2021.



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# Questions

# 6

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Any questions/pātai?





# Consideration factors

## 1. [Hand and wrist](#)

- a. First cmc arthrosis
- b. TFCC
- c. Wrist ganglion
- d. CTS
- e. Ulnocarpal abutment
- f. Ulnar Styloid triquetral abutment
- g. Scaphoid SNAC
- h. Scaphoid SLAC

## 2. [Foot and ankle](#)

- a. Lateral collateral ligament
- b. Post Traumatic OA

## 3. [Spine](#)

- a. Lumbar disc injury
- b. Fusion
- c. Adjacent segment disease

## 4. [Knee](#)

## 5. [Shoulder](#)

## 6. [Rotator Cuff](#)

## 7. [Hip Labral tear](#)

## 8. [General](#)

# Resources for you

The screenshot shows the ACC website homepage. At the top, there's a navigation bar with links like 'About us', 'Preventing injury', 'Resources', 'Contact us', and 'Log in'. Below this, a search bar and a breadcrumb trail 'Home > Health providers > Getting started' are visible. The main heading is 'Getting started' with the Māori phrase 'Hei timatanga'. A subtext says: 'Whether you've recently registered with us as a health provider, have a new employee joining your practice or simply need a refresher, you'll find all the information and resources you need to get started with us, quickly.' Below this is a video player for 'Welcome to ACC 101' featuring Megan Main, Chief Executive Officer. A 'Watch on YouTube' button is present. At the bottom, a link says 'Watch more provider videos'.

This block displays three overlapping 'Provider Quick Guides' from ACC. The top guide is 'Understanding treatment injury cover' with the title 'In case of the unexpected'. The middle guide is 'Getting started as a medical specialist' with the title 'Welcome to the team'. The bottom guide is 'Understanding causation' with the title 'The core of causation'. Each guide includes a 'Read time' of 3 mins and a '1 of 2' indicator.

The screenshot shows the 'Provider Education Webinars' page on the ACC website. It features a list of 7 webinars, each with a thumbnail, title, and view count. The webinars are:

- Webinar: Welcome to the team - for he ACC New Zealand • 251 views • 1 month ago
- Webinar: The Beginner's Guide to ACC ACC New Zealand • 491 views • 6 months ago
- Webinar: Cultural Competency Guidelines for Providers ACC New Zealand • 948 views • 5 months ago
- Webinar: Introduction to ACC for Mental Injury Providers - Part 1 ACC New Zealand • 419 views • 6 months ago
- Webinar: The Beginner's Guide to ACC for Mental Injury Providers - Part 2 ACC New Zealand • 339 views • 5 months ago
- Webinar: The Beginner's Guide to Maternal Birth Injury for Hospitals ACC New Zealand • 81 views • 5 months ago
- Webinar: A Midwife's Guide to ACC's Maternal Birth Injury Cover ACC New Zealand • 104 views • 5 months ago

[Getting started with ACC \(acc.co.nz\)](https://www.acc.co.nz)

[Online learning modules \(acc.co.nz\)](https://www.acc.co.nz/for-providers/)

# Contact us

## **Secondary & Tertiary Services Portfolio:**

[Elective.services@acc.co.nz](mailto:Elective.services@acc.co.nz)

## **ProviderHelp:**

Call 0800 222 070

[providerhelp@acc.co.nz](mailto:providerhelp@acc.co.nz)

## **Suggestions & feedback:**

Contact Provider Education Lead—

[Provider.Education@acc.co.nz](mailto:Provider.Education@acc.co.nz)

[Contact our provider relationship team](#)

HEADLINE

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# End message