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SPECIAL SUPPLEMENT

ERRATUM

THE order published in *New South Wales Government Gazette* No. 127, dated 16 December 2011, Folios 7200-7203, under the heading Workers Compensation (Chiropractic Fees) Order 2012, was incorrect. The following order replaces that in full and the gazettal date remains the same.

WORKERS COMPENSATION (CHIROPRACTIC FEES) ORDER 2012

under the

Workers Compensation Act 1987

I, JULIE NEWMAN, Acting Chief Executive Officer of the WorkCover Authority of New South Wales, pursuant to section 61 of the Workers Compensation Act 1987, make the following Order.

Dated this 13th day of December 2011.

JULIE NEWMAN,
Acting Chief Executive Officer,
WorkCover Authority

Explanatory Note

Treatment by a registered chiropractor is one of the categories of medical and related treatment covered under the Workers Compensation Act 1987. This Order sets the maximum fees for which an employer is liable under the Act for treatment by a chiropractor of an injured worker's work related injury.

Schedule A to this Order provides for maximum fees for chiropractors generally. Schedule B to this Order provides higher maximum fee levels for WorkCover approved chiropractors. WorkCover approved chiropractors have participated in training courses approved or run by WorkCover.

This Order makes provision for chiropractic management plans and the approval by workers compensation insurers of certain chiropractic services. This Order makes provision for chiropractic management plans and the approval by workers compensation insurers of certain chiropractic services. Injured workers are not liable for the cost of any medical or related treatment. Employers are liable for the cost of treatment. Employers are only liable to pay the amounts for chiropractic services set out in this order.

1. Name of Order

This Order is the Workers Compensation (Chiropractic Fees) Order 2012.

2. Commencement

This Order commences on 1 January 2012.

3. Definitions

In this Order:

Case Conference means a face-to-face meeting or teleconference with the nominated treating doctor, workplace rehabilitation provider, employer, insurer and/or worker to discuss a worker's return to work plan and / or strategies to improve a worker's ability to return to work. File notes of case conferences are to be documented in the chiropractor's records indicating discussion and outcomes. This information may be required for invoicing purposes. Discussions

between treating doctors and practitioners relating to treatment are considered a normal interaction between referring doctor and practitioner and are not to be charged as a case conference item.

Chiropractor means a chiropractor registered under the Health Practitioner Regulation National Law Act 2009.

Chiropractic Management Plan means a document used by the chiropractor to indicate treatment timeframes and anticipated outcomes for an injured worker to the relevant workers compensation insurer.

A chiropractic management plan provides the mechanism to request approval from the relevant workers compensation insurer for treatment beyond:

- (a) the initial eight (8) consultations (when an injured worker has not attended for any previous treatment of a physical nature for this injury) or
- (b) the initial consultation/treatment (when an injured worker has attended for previous treatment of a physical nature for this injury).

A chiropractic management plan can request approval for up to an additional eight (8) chiropractic consultations unless otherwise approved by the insurer.

Chiropractic services refer to all treatment services provided by a registered chiropractor and listed in Schedules A and B.

Complex treatment means treatment related to complex pathology and clinical presentation including, but not limited to, extensive burns, complicated hand injuries involving multiple joints and tissues and some complex neurological conditions, spinal cord injuries, head injuries and major trauma. Provision of complex treatment requires pre-approval from the insurer. It is expected that only a small number of claimants will require treatment falling within this category.

Group/class intervention occurs where a chiropractor delivers a common service to more than one person at the same time. Examples are exercise and education groups. Maximum class size is six (6) participants. A chiropractic management plan is required for each worker participant.

GST has the same meaning as in the New Tax System (Goods and Services Tax) Act 1999 (Cth).

Home visit applies in cases where, due to the effects of the injuries sustained, the worker is unable to travel. The home visit must be the best and most cost-effective option allowing the chiropractor to travel to the worker's home to deliver treatment. Provision of home treatment requires pre-approval from the insurer.

Initial consultation and treatment means the first session provided by the chiropractor in respect of an injury which includes:

- history taking,
- physical assessment,
- diagnostic formulation,
- goal setting and planning treatment,
- treatment/service,
- clinical recording,
- communication with referrer, and
- preparation of a Chiropractic Management Plan when indicated.

Normal practice means premises in or from which a chiropractor regularly operates a chiropractic practice and treats patients. It also includes facilities where service may be delivered on a regular or contract basis.

Report Writing occurs when a chiropractor is requested by the insurer to compile a written report other than the Chiropractic Management Plan, providing details of the worker's treatment, progress and work capacity. The insurer must provide pre-approval for such a service.

Standard consultation and treatment means treatment sessions provided subsequent to the Initial consultation and includes:

- re-assessment,
- treatment/service,
- clinical recording, and
- preparation of a Chiropractic Management Plan.

The Act means the Workers Compensation Act 1987.

Travel occurs when the most appropriate clinical management of the patient requires the chiropractor to travel away from their normal practice. Travel costs do not apply where the chiropractor provides contracted service to facilities such as a private hospital, hydrotherapy pool, workplace or gymnasium. Where multiple patients are being treated in the same visit, it is expected that the travel charge will be divided accordingly. The insurer must provide pre-approval for such a service.

Two distinct areas means where two separate compensable injuries or conditions are assessed and treated and where treatment applied to one condition does not affect the symptoms of the other injury e.g. neck condition plus post fracture wrist. It does not include a condition with referred symptoms to another area.

WorkCover means the WorkCover Authority of New South Wales.

WorkCover approved chiropractor means a chiropractor who has participated in the WorkCover Training Courses and any other course approved by WorkCover (if any) for the purpose of this Order.

Work Related Activity assessment, consultation and treatment means a one hour session provided on a one to one basis for Work Related Activity delivered to a patient that is new to the practice and includes:

- review of the previous treatment,
- assessment of current condition including functional status,
- goal setting,
- treatment / work related activity planning,
- clinical recording,
- communication with key parties, and
- preparation of a management plan when indicated.

4. Application of Order

This Order applies to treatment provided on or after 1 January 2012 whether it relates to an injury received before, on or after that date.

5. Maximum fees for chiropractic treatment generally

- (1) The maximum fee amount for which an employer is liable under the Act for treatment of an injured worker by a chiropractor, being treatment of a type specified in Column 1 of Schedule A to this Order, is the corresponding amount specified in Column 2 of that Schedule.
- (2) If it is reasonably necessary for a chiropractor to provide treatment of a type specified in any of items CHX005, CHX006, CHX071, CHX072 or CHX073 in Schedule A at the worker's home, the maximum fee amount for which an employer would otherwise be liable under the Act for that type of treatment is increased by an amount calculated at the rate per kilometre (for the number of kilometres of travel reasonably involved) specified for item CHX009 in Column 2 of Schedule A.
- (3) This clause does not apply to treatment by a WorkCover approved chiropractor.

6. Higher maximum fees for treatment by WorkCover approved chiropractors

- (1) The maximum fee amount for which an employer is liable under the Act for treatment of an injured worker by a chiropractor, who is a WorkCover approved chiropractor, being treatment of a type specified in Column 1 of Schedule B to this Order, is the corresponding amount specified in Column 2 of that Schedule.
- (2) If it is reasonably necessary for a chiropractor to provide treatment of a type specified in any of items CHA005, CHA006, CHA071, CHA072 or CHA073 in Schedule B at the worker's home, the maximum fee amount for which an employer would otherwise be liable under the Act for that type of treatment is increased by an amount calculated at the rate per kilometre (for the number of kilometres of travel reasonably involved) specified for item CHA009 in Column 2 of Schedule B.

7. Goods and Services Tax

- (1) Chiropractic treatment services provided by a registered Chiropractor directly to a worker are GST free.
- (2) Case conference, report writing and travel services provided by a chiropractor are subject to GST.

SCHEDULE A – Maximum Fees for Chiropractors Generally

<i>Item</i>	<i>Column 1 Type of Treatment</i>	<i>Column 2 Maximum Amount (\$) (excl GST)</i>
Normal Practice		
CHX001	Initial consultation and treatment	50
CHX002	Standard consultation and treatment	40
CHX031	Initial consultation and treatment of two (2) distinct areas	75
CHX032	Standard consultation and treatment of two (2) distinct areas	60
CHX033	Complex treatment	80
CHX010	Group/class intervention	30/participant
CHX004	Spine X-rays performed by a chiropractor	99.20
Home Visit		
CHX005	Initial consultation and treatment	62
CHX006	Standard consultation and treatment	50
CHX071	Initial consultation and treatment of two (2) distinct areas	94

<i>Item</i>	<i>Column 1 Type of Treatment</i>	<i>Column 2 Maximum Amount (\$) (excl GST)</i>
CHX072	Standard consultation and treatment of two (2) distinct areas	75
CHX073	Complex treatment	100
Other		
CHX081	Case conference	100/hour
CHX082	Report writing	100 (maximum)
CHX009	Travel	1.00 per kilometre

SCHEDULE B – Maximum fees for WorkCover approved Chiropractors

<i>Item</i>	<i>Column 1 Type of Treatment</i>	<i>Column 2 Maximum Amount (\$) (excl GST)</i>
Normal Practice		
CHA001	Initial consultation and treatment	81.00
CHA002	Standard consultation and treatment	68.50
CHA031	Initial consultation and treatment of two (2) distinct areas	122.10
CHA032	Standard consultation and treatment of two (2) distinct areas	103.40
CHA033	Complex treatment	137.00
CHA010	Group/class intervention	48.60/participant
CHA004	Spine X-rays performed by a chiropractor	123.60
Home Visit		
CHA005	Initial consultation and treatment	99.70
CHA006	Standard consultation and treatment	79.70
CHA071	Initial consultation and treatment of two (2) distinct areas	147.00
CHA072	Standard consultation and treatment of two (2) distinct areas	125.80
CHA073	Complex treatment	161.90
Other		
CHA081	Case conference, Report writing	161.90/hour 161.90 (maximum)
CHA082	Work Related Activity assessment, consultation and treatment	161.90 (maximum)
CHA009	Travel	1.50/kilometre

Note: Where fees are incorrectly claimed, WorkCover may take action to recover the amount of the overpayment. Fees will only be paid after services have been rendered.

ERRATUM

THE order published in *New South Wales Government Gazette* No. 127, dated 16 December 2011, Folios 7253-7254, under the heading Workplace Injury Management and Workers Compensation (Injury Management Consultants Fees) Order 2012, was incorrect. The following order replaces that in full and the gazettal date remains the same.

WORKPLACE INJURY MANAGEMENT AND WORKERS COMPENSATION (INJURY MANAGEMENT CONSULTANTS FEES) ORDER 2012

under the

Workplace Injury Management and Workers Compensation Act 1998

I, JULIE NEWMAN, Acting Chief Executive Officer of the WorkCover Authority of New South Wales, make the following Order pursuant to section 339 of the Workplace Injury Management and Workers Compensation Act 1998.

Dated this 13th day of December 2011.

JULIE NEWMAN,
Acting Chief Executive Officer,
WorkCover Authority

Workplace Injury Management and Workers Compensation (Injury Management Consultants) Order 2012**Part 1 Preliminary****1. Name of Order**

This Order is the Workplace Injury Management and Workers Compensation (Injury Management Consultants) Order 2012.

2. Commencement

This Order commences on 1 January 2012.

3. Definitions

In this Order:

the Act means the Workplace Injury Management and Workers Compensation Act 1998;

GST means the goods and services tax payable under the GST Law; and

GST Law has the same meaning as in the A New Tax System (Goods and Services Tax) Act 1999 (Cth).

Injury Management Consultant is a Medical Practitioner appointed by the WorkCover Authority under section 45A of the Act to perform the functions as outlined in the WorkCover Guidelines on injury management consultants (2011).

Medical Practitioner means a person registered under the Health Practitioner Regulation National Law (NSW) No 86a in the medical profession, who is appointed by the WorkCover Authority of New South Wales as an injury management consultant under s45A of the Act.

4. Application of Order

This Order applies to an examination or report provided on or after the commencement date of this Order, whether it relates to an injury received before, on or after that date.

Part 2 Fees for injury management consultants**5. Maximum Fees for injury management consultants**

- (a) For the purposes of section 339 of the Act, the maximum hourly fee for the provision of services by an injury management consultant in respect of the provision of any report for use in connection with a claim for compensation or work injury damages and an appearance as a witness in proceedings before the Workers Compensation Commission or a court in connection with a claim for compensation or work injury damages is as set out in Schedule 1; and
- (b) An injury management consultant may not charge for more than 3 hours of work in the absence of express written agreement from the relevant insurer or the Workers Compensation Commission.
- (c) An injury management consultant may charge a cancellation fee specified in item IIN 106 where a worker provides 2 days' notice of cancellation.
- (d) An injury management consultant may charge a cancellation fee specified in item IIN 107 where a worker provides less than 2 days' notice of cancellation or fails to attend their scheduled appointment without notice.
- (e) An injury management consultant's report is to be provided to the referrer within 10 working days of the examination, or in the case where no examination has been conducted, within 10 working days of the request having been received, or within a different timeframe if agreed between the parties.
- (f) The incorrect use of payment classification codes can result in penalties, including the medical provider being asked to repay monies to WorkCover that the provider has incorrectly received.

6. Goods and Services Tax

- (1) An amount fixed by this Order is exclusive of GST. An amount fixed by this Order may be increased by the amount of any GST payable in respect of the service to which the cost relates, and the cost so increased is taken to be the amount fixed by this Order. This clause does not permit a Medical Practitioner to charge or recover more than the amount of GST payable in respect of the service to which the cost relates.

SCHEDULE 1 – Rates for Injury Management Consultants

<i>Payment Classification Code</i>	<i>Service Description</i>	<i>Fee</i>
IIN 105	Assessments, examinations, discussions and report.	\$286.50 per hour to a maximum of 3 hours unless authorised by the insurer or Workers Compensation Commission.
IIN 106	Cancellation with 2 days notice.	\$143.20
IIN 107	Cancellation with less than 2 days notice or non attendance at scheduled appointment.	\$286.50
IIN 108	Examination conducted with the assistance of an interpreter.	\$358.10 per hour (examination only). Discussions with other parties and report to be charged under IIN105 at \$286.50 per hour.