

Workers Care Program

How to request treatment and care services

Workers Care pays for the reasonably necessary treatment and care services you need as a result of your workplace injury. Information sheet W04: *What is reasonably necessary treatment and care?* has more details on this topic.

How do I request treatment and care services?

To make a claim for treatment and care services, discuss your needs with your case manager or your Workers Care contact to make sure the treatment and care is considered reasonably necessary.

It is important to get approval from us before organising any services. You should be involved in preparing the request. To help you when you ask for services, specific forms have been developed. Your Workers Care contact can provide the forms to your case manager. These will be submitted by your case manager on behalf of you and your service providers (for example, your occupational therapist, psychologist, physiotherapist and so on).

You are also able to send in your own claim, however having the support of your case manager when preparing a request may make the process easier.

What information should be included?

Each request will include information about:

- your injury-related needs
- your current abilities
- the things you want to do and achieve in your life (your goals)
- how the service requested addresses these goals and meets the reasonably necessary criteria
- who you have selected to provide the service and why, when, where, and how the service will be provided
- how long the service will continue
- costs associated with the service

If services have already been provided to help you achieve your goals, information is also required on the outcome of these. Your case manager or service provider will talk to you and provide this information to us.

How is a decision made?

We will review each request on a case-by-case basis to decide if the service or services asked for are related to your workplace injury and meet the reasonably necessary criteria for treatment and care.

How will I be informed of the decision?

We will send you our decision in writing, called a notice of decision, within 21 days of receiving the request. If approved, the notice will include details of approved services. If not approved, the notice will include reasons for

the decision. Payment codes and approval numbers are included for use by your service providers.

We will also send a copy of the approval notice to your case manager, who will send it to your service providers, so they know what services are approved.

All approvals and supporting information will be provided to your employer's workers compensation insurance agent.

You will be advised in writing if, after careful review, we decide that Workers Care cannot fund the service or item requested because:

- it is not injury-related treatment and care
- and/or it is not reasonably necessary

Your Workers Care contact will also call you to discuss the decision and the reasons for the decision.

What if I disagree with a decision?

icare has processes for responding to complaints and disputes that are open and robust. If you disagree with a decision, talk to your Workers Care contact first. It is likely they will be able to resolve your concerns. They might contact other people involved with you, such as your service provider who requested the treatment. Your Workers Care contact may suggest arranging a meeting to discuss the issues with your service provider and agree on solutions.

If you cannot reach a resolution you can:

- Ask us to review our decision by completing the *SIRA Review form – application for review by the insurer* attached to your decision notice. Your Workers Care contact can provide you with the form if you no longer have a copy.
- Lodge a dispute with the Personal Injury Commission, with or without a completed review (even if already requested) from Workers Care Program. You can go to the Commission directly, or with assistance from your lawyer.

Phone: 1800 742 679

Email: help@pi.nsw.gov.au

Website: www.pi.nsw.gov.au

- Speak to The Independent Review Office (IRO), which is an independent government agency that provides a complaints resolution service for workers who are unhappy with a decision made by their insurer. You can contact IRO directly by:

Phone: 13 94 76

Email: at.complaints@iro.nsw.gov.au

Website: [Persons Injured at Work or in a Motor Vehicle Accident | IRO \(nsw.gov.au\)](http://Persons%20Injured%20at%20Work%20or%20in%20a%20Motor%20Vehicle%20Accident%20|%20IRO%20(nsw.gov.au))

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