What is reasonably necessary treatment and care?

What does ‘reasonably necessary’ mean?

- The workers compensation legislation outlines what is ‘reasonably necessary’ treatment and care for your workplace injury. icare Workers Care Program reviews each claim for treatment and care to make sure claims meet measures outlined in the Workers Compensation Act 1987.

The icare Workers Care Program considers the following information when reviewing a request for reasonably necessary treatment and care:

- **Injury related.** How is the treatment related to your workplace injury?
- **Appropriateness of the particular treatment for you.** How does it help you with your goals for improved functioning and participation in daily life?
- **The cost of treatment.** Is the treatment and care cost effective?
- **Effectiveness.** The actual or potential effectiveness of the treatment. How will it benefit you?
- **Alternatives.** Are there other treatments available?
- **Acceptable practice.** Is the treatment considered to be effective and reasonable by medical experts? Each request/claim is considered on a case-by-case basis. What is determined reasonably necessary for one worker may not be considered reasonably necessary for another worker with a similar injury.

What treatment and care services does the icare Workers Care Program pay for?

The icare Workers Care Program pays for treatment and care for workplace injury. Services Workers Care can fund include:

- Medical treatment (such as hospital stays and doctor’s appointments).
- Rehabilitation treatments (such as physiotherapy, occupational therapy or speech therapy).
- Aids, equipment and assistive technology (such as wheelchairs).
- Home modifications (such as ramps or bathroom rails).
- Vehicle modifications (such as hand controls or mirrors).
- Attendant care services, including personal care, domestic assistance and registered nursing.
Workplace rehabilitation services, including return to work programs and modifications. What does the icare Workers Care program not pay for?

Examples of services and items the icare Workers Care Program can't pay for include:

- Services for injuries or medical conditions you had before your workplace accident, unless you were suffering from a previous disease that was aggravated, accelerated, exacerbated or deteriorated as a result of your workplace incident.
- General household items such as standard furniture, linen, household appliances accommodation costs (for example rent or bond on rental properties).
- Treatment, rehabilitation, medical services, equipment and modifications not related to your workplace injury.
- Extra expenses in hospital or rehabilitation, such as additional food, newspaper or magazines.
- Treatment and care services for members of your family.

It is important to note that the icare Workers Care Program won't manage the payment of your wages or weekly benefits. Wages and weekly benefits will continue to be managed and paid by your employer's insurance agent.

There may be other examples to those listed above. Contact your icare Workers Care coordinator if you have any questions.

What if my needs and goals change?

Your treatment and care services will be reviewed regularly to make sure they are helping with your goals for functioning, participating in daily life and returning to work. If your goals or needs have changed, speak to your treating team, your rehabilitation case manager or your icare Workers Care coordinator.

Who can I contact for more information?

Speak to your icare Workers Care coordinator. They can provide information about anything that relates to your treatment and care needs. If you have questions about any other aspects of your claim, including your weekly entitlements, you should contact the insurance agent. Also, you can contact our Customer Support Team on 13 44 22.

For more information or to contact the icare Workers Care Program

Address  GPO Box 4052, Sydney NSW 2001  Phone  1300 738 586  Fax  1300 738 583
Email  enquiries.workers-care@icare.nsw.gov.au  Web  www.icare.nsw.gov.au