



WorkCoverSA

Gymnasium provider fee schedule and guidelines

South Australian workers compensation gymnasium
provider services

Effective date: 1 January 2012

Returning to work and the role of the provider

Why a return to work is important

Getting back to work can be a crucial part of an injured worker's rehabilitation. It helps to reduce the financial and emotional impact on the worker and their family. With a positive approach and the right support, an injured worker can recover and return to normal life. Helping improve South Australia's return to work rate is everyone's responsibility, and we all have a role to play.

The provider's role in the recovery process

Staying at home until completely recovered is often not the best thing for an injured worker. As a provider, you have a vital role to play in helping injured workers stay at or return to work. You can help by focusing on what a worker can do rather than what they can't. To help make a difference, ensure you:

- screen for risk early
- adopt a whole-person approach
- make enough time for clinical management
- contact the workplace where appropriate.

For more information, visit the health provider tab at: www.workcover.com.

How to use the *Gymnasium provider fee schedule and guidelines*

This document contains information about fees and standards for services that apply to gymnasium providers who provide services to South Australian workers compensation claimants.

The *Gymnasium provider fee schedule and guidelines* dated 1 July 2011 is hereby rescinded and replaced by the *Gymnasium provider fee schedule and guidelines*, effective 1 January 2012.

Pursuant to section 32(2)(i) of the *Workers Rehabilitation and Compensation Act 1986* (the Act), WorkCover hereby authorises, as a class of costs, the costs of gymnasium provider services that meet all the criteria and conditions as contained within this document.

All services and fees in this schedule are effective 1 January 2012.

The document is divided into three sections as follows:

1. Recommended fee schedule

This section includes a description of all services, item codes and maximum fees chargeable.

2. Service description guidelines

This section includes information about services, and details of standards for the provision of services.

3. Accounts and invoicing standards

This section provides information relating to account and invoicing standards, and useful contacts.

Copies of this document can be downloaded from our website at: www.workcover.com>health provider>the workcover system>fee schedules.

If you have any questions, please call WorkCover's Client Services on 13 18 55.

1. Recommended fee schedule

Subject to the operation of section 32(4) and (5) of the Act, a worker receiving gymnasium services that meet all the conditions detailed below shall be entitled to be compensated for the costs of those services to the extent that they:

- are a reasonable amount for the provision of the service; and
- were reasonably incurred by the worker as a consequence of having suffered a compensable disability.

Item number	Service description	Max fee (ex. GST)
GYM05	<p>Initial assessment</p> <p>The purpose of an assessment and preliminary examination of the injured worker is to identify physical restriction, endurance and coordination in relation to the worker's injury/ies, and develop an exercise and physical rehabilitation plan. The plan must also document and make reference to the injured worker's claim details. A copy of this plan must be forwarded to the referring medical expert. An initial assessment should only occur once, and the provider to worker ratio must be 1:1 for the duration of the consultation.</p>	\$66.40
GYM10	<p>Individual gymnasium session (maximum of three)</p> <p>This item provides an assessment and individual assistance to ensure the worker is exercising using correct techniques. This session is held with a gymnasium provider who supervises for the duration of the consultation. If additional services are required, the provider must obtain prior approval from the case manager.</p>	\$53.10
GYM20	<p>Group gymnasium session</p> <p>A group session must be planned and supervised by the gymnasium provider. A session of this type may involve a group performing their own individualised programs. The group member to provider ratio cannot exceed 8:1.</p>	\$15.90

Item number	Service description	Max fee (ex. GST)
GYM60	<p>Progress report</p> <p>A progress report must be forwarded to the referring medical expert, self-insured employer or case manager upon request. The report must:</p> <ul style="list-style-type: none">• include baseline goals, objectives and progress achieved• provide recommendations in relation to extending the program, including duration and outcome anticipated• list any barriers that are impacting on achieving the desired outcome, for example, recent surgery/work training• be typed or word-processed in a neat and clear manner.	\$53.10
Note 1:	'Consultation' means actual contact time a gymnasium provider spends with a patient.	
Note 2:	WorkCover may, as part of an audit program, initiate discussions with a gymnasium provider and/or their patients in relation to the duration and content of a service.	

Please note that the above fees do not cover costs for facility entry fees, and that entry fees are not associated with these guidelines. For facility entry fees, please see the *Aquatic and gymnasium facilities fee schedule and guidelines*, dated 1 July 2012.

2. Service description guidelines

2.1 Service description for gymnasium providers

2.1.1 The aim of a gymnasium provider program or exercise program is to improve muscular coordination, strength and endurance, joint movement and flexibility.

Exercise programs must be all of the following:

- orientated towards a return to suitable and sustainable employment
- outcome focused
- aimed at restoring an injured worker to their pre-injured state at the lowest overall cost to the community.

2.1.2 WorkCover does not support any gymnasium rehabilitation that is only orientated at maintaining the injured worker's general level of fitness and does not result in an improved capacity to work, except for some workers with chronic back pain (see Section 2.4.4).

2.2 Provider standards

Non-medical experts delivering gymnasium services are expected to have:

- a) A Diploma of Fitness **including** the subject "*Plan and deliver exercise strategies for musculoskeletal rehabilitation* from a nationally Recognised Training Organisation" OR
- b) A relevant higher education degree; ie a Bachelor of Applied Science (Human Movement) **including** the subject "*Physical rehabilitation*", or a graduate physiotherapy qualification including registration as a physiotherapist, from a nationally Recognised Training Organisation.
- c) Professional indemnity insurance (minimum \$5 million in any one claim), and public liability insurance (minimum \$10 million in any one claim).
- e) A recognised and current senior first aid/apply first aid certificate from an accredited body such as Red Cross or St John.

2.3 Guidelines for gymnasium providers

2.3.1 Gymnasium provider services must only be provided following referral by a medical expert as defined in Section 3 of the Act, for example, a physiotherapist or general practitioner. The referral must include the following information:

- how the service will increase the injured worker's function, activity tolerance and capacity to work
- recommendations for the number and duration of the proposed services
- relevant precautions and movements to be avoided relating to the injury
- specified treatment review periods by the referring medical expert.

2.3.2 Following a referral, gymnasium providers must direct information relating to the management of the injured worker to the referring medical expert, who will continue to liaise with the case manager and other involved parties. Any physical rehabilitation program must have prior approval from the case manager before services commence.

- 2.3.3 The gymnasium provider must be outcome-focused, and services must be directly related to the compensable injury/condition and assist with the injured worker's physical recovery and restoration to the workforce and/or community.
- 2.3.4 A gymnasium provider does not have the authority to refer the worker to other services. The gymnasium provider should defer to the treating medical expert for any other services required in the circumstances of the case. In addition, the gymnasium provider must not override or amend recommendations made by a medical expert.
- 2.3.5 If, in the opinion of the gymnasium provider, further gymnasium treatments are required, a progress report should be sent to the referring medical expert. If, in the opinion of the medical expert, further treatments are considered appropriate, the medical expert must complete a repeat referral and submit it to WorkCover's claims agent for approval.
- 2.3.6 A gymnasium provider cannot provide advice about, or supply the injured worker with, therapeutic equipment, drugs, herbal lineaments, ointments, health products, vitamins or food supplements.
- 2.3.7 The gymnasium provider must:
- have an understanding of the principles of the *Workers Rehabilitation and Compensation Act 1986*
 - participate in the Quality Review Program if so requested by WorkCover.
- 2.3.8 WorkCover reserves the right to review or audit a gymnasium provider based on performance, professional conduct, issues raised or complaints.

WorkCover may disallow a gymnasium provider from providing services to workers at any time within 30 days of giving written notice. In some cases, this may take effect immediately. This may occur under any of the following circumstances:

- the gymnasium provider is found guilty, or convicted or fined for a criminal offence involving dishonesty or an offence punishable by imprisonment (disallowment is immediate)
- the gymnasium provider is censured by, or expelled from, an association

2.4 Developing and delivering a gymnasium program

2.4.1 Acute rehabilitation phase: 0–6 weeks from date of injury or surgical intervention

In occurrences when a program is to commence during this phase, it must always be conducted under the direct supervision of a medical expert (for example, a physiotherapist or chiropractor), whereby the medical expert attends the session.

2.4.2 Subacute rehabilitation phase: 6–12 weeks from date of injury or surgical intervention

A gymnasium provider can develop and deliver a program based on medical expert advice and a referral that adheres to the following:

- An initial measurement of function is carried out as an essential component before commencing any program
- The program must have set goals and measurements
- Subacute exercise rehabilitation programs are conducted initially, on a one-to-one basis for up to three sessions. If more than three individual sessions are required, case manager approval must be obtained prior to delivery
- The program may be advanced to a group of no more than a ratio of eight people to one service provider
- Ongoing file notes are maintained throughout the program, listing the outcomes achieved
- If there is no improvement in function (within 4–6 weeks) further physical rehabilitation must be substantially changed or ceased
- Outcome measurements must include a combination of
 - objective and subjective methods
 - objective indices, including muscle strength
 - range of movement and endurance
 - practical measures, including pain level, changes in function and sense of wellbeing.

2.4.3 Chronic/recurrent rehabilitation phase: greater than 12 weeks

A gymnasium provider can develop and deliver a program based on medical expert advice and a referral that includes the same measures as listed in Section 2.4.2.

2.4.4 Chronic/recurrent back pain

There is evidence to show that injured workers with chronic back pain can benefit from programs beyond 12 weeks duration in order to decrease pain, improve function levels, maintain their current level of fitness and prevent an aggravation or recurrence. A program can be developed and maintained by a medical expert or gymnasium provider.

3. Accounts and invoicing standards

All amounts listed in this booklet are exclusive of GST. If applicable, WorkCover will pay to the provider an amount on account of the provider's GST liability in addition to the GST-exclusive fee. Suppliers should provide WorkCover with a tax invoice where the amounts are subject to GST.

For all invoices, whether a tax invoice or not, the following information should be provided:

- provider details—name, provider number and location
- invoice number
- Australian Business Number (ABN)
- worker's surname and given name/s
- claim number, if known
- name of worker's employer, if known
- brief description of the injury to which the services relate
- each service for which payment is sought itemised separately with
 - date of consultation/attendance/service and commencement time
 - service item number in accordance with this fee schedule
 - meaningful service description in accordance with this fee schedule
 - duration of service in hours/minutes where required for a service described in this fee schedule
 - charge for the service in accordance with this fee schedule
 - total charge for invoiced items and any GST that may be applicable.

Invoices are to be submitted within six weeks of service. Invoices for services displaying the information set out above will allow for prompt and efficient processing of accounts. Payment for services, including reports, will not be made in advance.

WorkCover's claims agent is unable to pay on 'account rendered' or statement invoices. Payment will be made, where appropriate, on an original account or duplicate/copy of the original.

Invoices that do not meet these standards may be returned to the provider for amendment.

Please note: WorkCover pays via electronic funds transfer (EFT). Therefore, bank account details are also required.

GST

For all GST-related queries, please contact the Australian Tax Office on 13 24 78 or your tax advisor.

Changes to provider details or adding new providers

For changes to provider details (such as an Australian Business Number, address or payee electronic funds transfer details) please complete an *Application and EFT form* available from: www.workcover.com by searching '*Application and EFT form*' or phone: 13 18 55. The *Application and EFT form* must then be faxed to WorkCover on: (08) 8233 2479.

Where payment is outstanding

Please contact Employers Mutual or the self-insured employer if the compensation claim has been accepted and the payment is outstanding. If the claim has not been accepted, responsibility for payment of the account rests with the worker.

WorkCover details

100 Waymouth Street, Adelaide
GPO Box 2668, Adelaide SA 5001
DX660 Adelaide
General enquiries (SA only): 13 18 55
TTY (for deaf/hearing impaired): (08) 8233 2574
Fax: (08) 8233 2990
www.workcover.com

Useful contacts and information

All WorkCover claims (that are not self-insured) are managed by Employers Mutual.

Employers Mutual

26 Flinders Street, Adelaide
GPO Box 2575, Adelaide SA 5001
DX270 Adelaide
Phone: (08) 8127 1100
Fax: (08) 8127 1200

Self-insured employers

For matters relating to self-insured claims, please contact the employer directly.

Allianz Australia SA CTP

All claims relating to motor vehicle crashes are managed by Allianz Australia SA CTP on behalf of the insurer; the Motor Accident Commission.

89 Pirie Street, Adelaide SA 5000,

GPO Box 219, Adelaide SA 5001

Phone: 1300 137 331

Fax: 1300 137 431

Email: SACTPClaims@allianz.com.au

Dated the 1st day of January 2012

Wayne Potter,

General Manager

Regulation & Education

Authorised Delegate