

Obtaining a medical certificate

Gathering claim information

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- ✓ Requesting information from medical and allied health practitioners

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What is a medical certificate?

A [medical certificate](#) is the primary form of medical evidence used by employees to support claims for medical treatment, incapacity payments and other benefits.

A medical certificate must be provided by a [legally qualified medical practitioner \(LQMP\)](#), unless the employee is only claiming for medical treatment.

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What does a completed medical certificate look like?

The SRC Act does not specify what form a medical certificate is to take (refer section 54(2)(b)).

Comcare's [Certificate of capacity](#) is the preferred form. Comcare's Certificate of capacity enables GPs to consider work as part of recovery and focuses on what employees can do at work. Comcare will use worker's compensation medical certificates from state schemes, as well as any other type of medical certificate that has been issued by a legally qualified medical practitioner (LQMP).

To support proper management of the claim, a medical certificate should normally have the following information:

- contain the employee's details
- provide the date of actual examination
- state the precise diagnosis
- contain the date(s) when the patient is (or was) unfit for work
- contain a review date
- list the treatment required
- be signed by the LQMP who examined the employee
- include the practice stamp or contact details.

When you are referring to a medical certificate to support decision making, the focus should be on the information provided by the LQMP, rather than the format or technicalities of the certificate.

Where you think a medical certificate is non-compliant, please visit the ['Just Ask' process](#) page for further information.

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What happens when a worker's compensation medical certificate is not available or partially completed?

If there is a problem with a medical certificate, you need to display empathy, sensitivity and sound judgment in deciding the correct course of action.

Late certificate

An employee claiming income support must provide a supporting medical certificate from a LQMP. However, you may encounter a situation where a medical certificate has expired, and the employee has not provided a new certificate despite regular contact with you or your predecessor.

Where there is a reasonable delay due to issues such as the availability of a LQMP, Comcare may, having regard for the merits of the case, temporarily extend a treatment plan based on other current medical information. This could include:

- recent independent medical examination (IME) reports
- treating practitioner or specialist reports.

You should support the employee to obtain a medical certificate as soon as possible and stay in regular communication.

Partially completed certificate

You may receive a claim for compensation that is supported by a medical certificate that does not provide certain specific information. In this case, you should make an assessment and not defer a compensation decision due to technicalities. However, if you are unable to determine compensation due to a lack of information, then you should refer to the [What is medical treatment?](#) and/or [Incapacity for work](#) pages and discuss the claim with your Assistant Director. You may need to gather more information from the employee, the LQMP or other sources to make the decision.

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Can I use a medical certificate from an allied health provider?

If an employee is only claiming for treatment from an [Allied health professional](#), they can provide a medical certificate from the allied health provider stating a precise diagnosis and cause for the injury or illness.

The allied health provider must be registered under the law of a state or territory that provides for the registration of health services. This includes:

- occupational therapist
- acupuncturist
- chiropractor
- osteopath
- audiologist
- psychologist
- podiatrist
- radiologists
- speech therapist
- optometrist
- physiotherapist.

The provider should only issue a certificate recommending treatment in their field of practice.

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Can I use a retrospective medical certificate?

A retrospective medical certificate is signed and dated on the consultation date but certifies that in the LQMP opinion, the employee was unwell prior to the day of the consultation.

Example: A LQMP sees the employee on 22 October and signs the medical certificate on 22 October, but states the person was unable to work from 11 October.

A retrospective medical certificate is valid and should generally be accepted. In the unlikely event there is insufficient medical evidence to explain the certificate, consult with your Assistant Director and/or arrange a triage meeting to review the matter further.

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Can I use a backdated medical certificate?

A backdated medical certificate is one where a LQMP signs and dates a certificate as if the consultation occurred on a prior date.

Example: A doctor sees an employee on 30 September but indicates on the certificate that the consultation occurred on 15 September.

In general, compensation should not be paid based on a backdated certificate. Any backdating of certificates is discouraged by the Australian Medical Association. You should discuss a back-dated medical certificate with your Assistant Director or the Injury Management team.

Are certificate fees compensable?

Comcare will only pay a certificate fee in NSW and the NT for an initial consultation. This is in line with standard billing arrangements in these states. Further certificate fees after the initial consultation are not payable. All other states incorporate the cost of certificates into their fee structures.

Procedure for actioning a medical certificate

The following procedure details what to do with a medical certificate before a determination concerning liability is made.

Step 1: Check the medical certificate.

When checking a medical certificate you should check:

- Does the medical certificate relate to the correct claim, as an employee may have multiple claims:
 - If yes, continue

- If no, change the document to the correct claim number as outlined in the [Removing and redacting information from a file](#) page (note: this will send an automatic notification to the correct claims manager).
- Are there any conditions on the medical certificate that have not been accepted?
 - If yes, refer to the [Newly reported conditions page](#)
 - If no, continue.
- Is the medical certificate is substantially completed?
 - If yes, continue.
 - If no, discuss with your Assistant Director, Senior Claims Manager or the relevant Claims Manager. If the certificate requires further information to be actionable, phone the treating practitioner or their office and ask them to complete the missing section/s of the medical certificate.
- Is the medical certificate is backdated?
 - If backdated, discuss with your Assistant Director or the Injury Management team.
 - If no, continue.

Step 2: Action the medical certificate in Pracsys

Go to your personal in-tray and launch the relevant medical certificate (by using the launch function – the medical certificate and CM9 link will be attached to it automatically). This opens 'Create Medical Certificate' (CCMC). Once in CCMC:

- select the next button
- enter the details of the medical certificate
- select the relevant Certificate Type. Note: Only select 'Certificate of Capacity' if Comcare's [Certificate of Capacity](#) is being used. For any other certificate (including another State's Certificate of Capacity), select 'Medical Certificate'
- ensure the Service Provider (e.g., GP) has been identified correctly
- ensure the 'Current' box in the Fit for Work field contains the employee's current work capacity
- enter the hours the employee is fit to work (so any unmet capacity can be addressed)
- if requested, tick the Case Conference box
- in the Comments field, enter details of any work restrictions or treatment recommendations
- select the 'Create' button.

A comment will be created automatically in 'Manage Comments' (MCOM) which will mirror the comments in the CCMC function.

Note: The fitness for work drop-down 'Ceased Employment - Age retirement' should only be selected for employees who have reached retirement age and are no longer claiming incapacity payments.

Step 3: Complete the determination letter

A new medical certificate usually means a decision needs to be made in relation to medical treatment and time off work as recommended by the treating practitioner. Refer to the [What is medical treatment?](#) [What is reasonable medical treatment?](#) and [Incapacity for work](#) pages for guidance on making your determination.

Open the MLET function

- search by letter name or section of the Act where medical treatment is determined
- amend details and save the letter.

Step 4: Next steps

Open ACTP function (also known as Treatment Plan) to update payment approvals in line with your determination. You should either:

- update existing payment approval (click dates to extend or 'Amend' to add details/edit allowed service items) or
- add 'New' treatment

Note: ensure time off work is appropriately extended in the treatment plan if liability has been accepted for incapacity payments. Payments will not be processed if the treatment plan is not extended.

Note: Discretion and good judgment must be exercised when actioning medical certificates that cover an extended period. Comcare requires periodical medical review and so does not extend treatment plans for periods in excess of 12 months, even for permanent injuries. At the end of an accepted period, a new medical certificate will be required. Regular contact will ensure this does not come as a surprise to an injured employee.

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How to action a medical certificate for a rejected claim?

An employee, employer, or a medical practitioner may submit a medical certificate after liability for a claim has been denied under section 14 of the SRC Act. When a claim has been rejected under section 14, there is no liability for any benefits.

Medical certificates for a rejected claim may be received in situations where:

- A new claim was declined but the LQMP continues to issue medical certificates
- An employee has requested a reconsideration concerning the rejection of liability
- An appeal of a reviewable decision is lodged through the Administrative Appeals Tribunal (AAT)

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Procedure for processing a medical certificate on a rejected claim

Step 1: Check the status of the claim

Check if the employee has requested a reconsideration of the determination or if the matter is before the Administrative Appeals Tribunal (AAT) by checking both 'View Reconsideration' (VREC) and 'View AAT Case' (VAAT)

- If yes, continue.
- If no, go to step 3.

Step 2: Contact the employee

Your conversation with the employee should be by telephone and include:

- advice you have received the medical certificate and are aware of any reconsiderations or AAT matters related to the certificate
- advice no action can be taken based on the certificate since the claim is currently rejected
- a reminder to the employee if their claim is accepted following reconsideration/Administrative Appeals Tribunal (AAT) review, they will need to provide documents to support payment of compensation that may be payable to them. They should continue to keep medical certificates, invoices, expenditure receipts and other documents relevant to your claim as this will help us process in a timely way any compensation that may be payable after the reconsideration/AAT matter is resolved.'

Step 3: Enter comment in Pracsys

Go to 'Manage Claim Comment' (MCOM) and enter a comment. Record your conversation. Your comment should include:

- the employee has been notified that no action will occur
- the employee's response

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