

Undertaking a clinical panel review

Gathering claim information

- ✓ Employees

- ✓ Employers

- ✓ Requesting information from medical and allied health practitioners

- ✓ Independent medical examiners

- ✓ Clinical panel

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Introduction

The Clinical Panel consists of a team of medical and allied health professionals. They are available for more complex clinical advice and reviews to ensure employees receive the most appropriate treatment for their injury and/or illness.

The panel also offers advice to medical practitioners and allied health professionals to adopt clinically justified treatment and evidence-based practices. It aims to improve sustainable decision making and ultimately improve health and return to work outcomes for employees.

The panel consists of experienced and independent medical and allied healthcare professionals, including:

- audiologist
- medical practitioners
- physiotherapists
- pharmacists
- psychiatrists
- psychologists
- specialist prosthodontist and
- consultant physician in rehabilitation/pain medicine

These professionals are experts in their fields and, being currently active clinicians, they can assist with decision making about clinical issues during claim management.

Types of Clinical Panel Review

There are two types of Clinical Panel Review, a **full review** and a **Walk Up** referral.

A **full review** is appropriate for more complex questions related to treatments and interventions including surgery and/or hospital admissions, and claims. It takes place once you have submitted a request for Clinical Panel Review (or when a claim is identified by the Clinical Panel team as requiring review). The Clinical Panel reviews the information you and the Injury

Manager have provided on the claim (via the Clinical Panel Review Form) and notifies you when they have completed their review.

Clinical Panel **Walk-Up referrals** are brief video conferences between you, the Injury Manager, and a Clinical Panel Doctor concerning less complex medical queries. Walk-Up referrals provide you the opportunity to ask questions without the need for a full Clinical Panel Review. See [Clinical Panel Medical Walk Up referrals](#) for more information.

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Role of Clinical Panel vs Injury Managers

Injury Managers are the first line of support for Claims Managers who have questions about medical and psychological treatment. Injury Managers are all allied health professionals. They work within the Claims Operations teams and use their clinical and rehabilitation knowledge to help optimise return to health and work outcomes.

The Clinical Panel is the next line of support. The panel is made up of a team of medical and allied health professionals. They can give more complex clinical advice and conduct reviews of planned treatments to ensure employees receive the most appropriate treatment for their injury or illness.

In **all cases**, you need to first consult an Injury Manager for advice on medical or psychological treatment and/or intervention for an employee. Additionally, some situations **require** you to consult the Clinical Panel (consult with your Injury Manager first). See the section on [What to refer](#) for more information.

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Purpose of a Clinical Panel Review

The focus of a review by a member of the Clinical Panel is to ensure treatment is **clinically justified**.

The [Clinical Framework for the Delivery of Health Services](#) provides more information about the meaning of **clinically justified** in its Purpose Statement and in Principle One.

The review may require peer discussion between the treating practitioner and a member of the Clinical Panel. In all discussions, the aim is to agree on an appropriate treatment for the employee which is in line with the Clinical Framework principles.

These communications are documented by the Clinical Panel member in the [Clinical Panel Review form \(CPR\)](#).

Where consensus cannot be reached, it is likely the panel will recommend that an Independent Medical Examination should be conducted. For further guidance, refer to the [Independent medical examinations](#) page.

As part of the clinical review process, the Clinical Panel will ask treating practitioners to discuss information about an employee who has a claim. Comcare's Privacy statement advises employees that Comcare can collect relevant information about employees from healthcare professionals where the employee has provided authority.

Selection of claims for Clinical Panel Review

Claims may be recommended for Clinical Panel review in the following ways:

- you and the Injury Manager agree that a Clinical Panel Review is required for a particular claim
- the Clinical Panel identifies claims based on certain criteria and data, including treatment type, frequency, duration, or treatment provider (this may be based on business priorities or because an issue has been identified).

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What to refer to the Clinical Panel for review

The following are examples of items that could be appropriate to refer to the Clinical Panel. This list is not exhaustive. Please contact [Clinical Panel Support](#) for assistance if you are unsure. All referrals should first be discussed with the appropriate Injury Manager.

Mandatory referral

The following **must** be referred to the panel:

- Major surgeries, any surgery involving a joint, or any other surgery where Clinical Panel input may be useful (for further guidance, refer to the [Surgery](#) page).
- Medicinal cannabis (for further guidance, refer to the [Medication, pharmaceuticals and medicinal cannabis](#) page).
- NENET (non-established and new emerging therapy) including Platelet Rich Plasma (PRP) injections and stem cells.
- Pain therapies, Implantable Pain Therapies (IPTs), stem cells, ketamine infusions, spinal injection therapies and similar pain interventions (for further guidance, refer to the [Pain Therapy](#) page).
- Assistance Dogs.

Possible referral required

Consult with your Injury Manager (IM) to confirm if referral is needed in the following cases:

- Clarification of diagnosis or medical information on undetermined claim.
- Employee having high frequency and/or prolonged medical treatment.
- Request for hospital admission.
- Assistance with strategising for a medically complex claim, e.g. review scheduling, questions for treaters, etc.
- Reviewing pharmaceuticals and how/if they relate to the compensable condition.
- Interpreting imaging, clinical notes and complex medical reports.
- Review of evidence provided by the treating and/or assessing practitioner in relation to treatment of the workplace injury.
- Review of evidence provided by the treating and/or assessing practitioner in relation to the causation of the workplace injury and relationship to claimed condition.
- New complex psychological claims that may benefit from early Clinical Panel involvement to assist with strategy, including review of diagnosis and appropriate treatment.
- Requests for treatment where limited clinical justification has been provided.
- Requests for advice on rare or new medical treatment/therapies, especially where the evidence base is not clear. For example, NENET.
- Requesting peer contact due to difficulties in communication with providers, requirement for a complex medical discussion and/or review of the treatment recommendations.
- Reviewing costs of treatments that appear unreasonable.

- Transcranial magnetic stimulation (TMS) requests (for further guidance, refer to the [TMS](#) page).

Please also see the list of the [Top 10 most common conditions](#) at Comcare.

These include:

- Adjustment reaction
- Carpal Tunnel Syndrome
- Major Depressive Disorder
- PTSD
- Lumbar Sprain (Acute low back pain)
- Knee injury
- Sensorineural hearing loss
- Lateral epicondylitis (tennis elbow)
- Shoulder injury
- Anxiety.

The Clinical Panel, along with the Injury Management Team, may also be able to help with decision making and treatment planning for these conditions.

Note:

- Permanent Impairment (PI) - the Clinical Panel can assist with medical clarification but is unable to advise regarding which tables might be the most appropriate to use. See the section on [Permanent Impairment](#) for more guidance.

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Clinical Panel Review process

Submission of a review request

Refer to the [Procedure for referring a claim to the Clinical Panel](#) to submit a request for Clinical Panel review.

When a review request has been submitted, you will receive an email confirmation with an estimated timeframe for the review to be conducted.

You will receive a further notification, in the form of a calendar invitation, once the review has been scheduled. A Clinical Panel consultant will contact you to discuss the Panel's conclusions and recommendations.

The Injury Manager can assist with interpreting and actioning recommendations as needed.

Implementing outcomes

The Clinical Panel Support Officer will upload the completed Clinical Panel review form in Pracsys. The system automatically creates an Action Plan Diary.

The Clinical Panel recommendations need to be actioned by you within **five days** of the recommendation being scanned into Pracsys.

If you disagree with the Clinical Panel recommendations, you need to discuss your reasoning with your Injury Manager and Assistant Director. Ensure that, where a recommendation isn't followed, there are clear notes on the claim file to explain the reasons why.

For further information, refer to the [Procedure for actioning a Clinical Panel Review](#) section below.

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Clinical Panel Medical Walk-Up referrals

Clinical Panel Walk-Up referrals are brief conversations between you, the Injury Manager, and a Clinical Panel Doctor concerning less complex medical queries.

Walk-Up referrals provide you the opportunity to ask questions without the need for a full Clinical Panel Review. They occur weekly, subject to the Doctor's availability.

An allocated timeframe of 20 minutes per claim is scheduled. This consists of 15 minutes to read the documentation and discuss the claim and 5 minutes for the Clinical Panel Doctor to write up their recommendations.

Where the information or question is complex and/or detailed, a full Clinical Panel Review is preferred to allow adequate time for the Doctor to review. The Clinical Panel support team will contact you if it is determined that the request is not suitable for a Walk-Up.

The total maximum of attached documents for review will generally be limited to 10 pages. The Doctor needs to be able to read and absorb the material and discuss the claim, all within the 15-minute time allocation. No pre-reading is done. Too much documentation will make this unreasonable.

Examples of when a Walk-Up referral may be appropriate can include the following:

- Viewing and interpreting medical reports or scans.
- Review of outcome measures for spinal block testing.
- Review of outcome measures following an approved trial period of medicinal cannabis.
- Assistance with what information may need to be gathered prior to referral for a full Clinical Panel review.
- Reasonableness of surgery or injections (if a previous Clinical Panel Review has been completed and further information was recommended, and that information has now been received).

Note: Transcranial magnetic stimulation (TMS) requests cannot be conducted as a Walk-Up and need to be submitted as a Clinical Panel Review.

Psychiatry walk-ups: Psychiatry walk-ups are a service that is **not** being provided by the Clinical Panel at present.

Walk-Up referrals are a quicker alternative to having less complex questions answered. However, they do not replace a Clinical Panel Review. Depending on the case, the Clinical Panel Doctor may recommend the file is referred for a full review. In this instance, you will need to submit a full [Clinical Panel Review form](#).

Following completion of a Walk-Up, the Clinical Panel Doctor will write their recommendation into Pracsys under 'Manage Claim Comment' (MCOM).

Refer to the section below regarding the [Procedure for arranging a Walk-Up referral](#) for further information.

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Clinical Panel invoice review process

The Clinical Panel has a process in place to review pharmacy invoices for compliance with Comcare's Pharmacy policies. This [FAQ](#) document provides you with information you need to know about this process.

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Procedure for referring a claim to the Clinical Panel

Note: if the matter relates to medical cannabis, first refer to the [Medication, pharmaceuticals and medicinal cannabis](#) page.

To refer a claim to the Clinical Panel, please follow the steps below:

Step 1: Identify the claim for referral and discuss with the Injury Manager.

You must identify and agree with the Injury Manager (IM) on the reason for review.

Step 2: Discuss the matter with the Instructing Officer, where required.

Where there is an active matter before the Administrative Appeals Tribunal, you should consult with the Instructing Officer prior to referring a claim to the Clinical Panel for review.

Step 3: Prepare the file and complete the Clinical Panel Review (CPR) form:

- Prepare the claim file by checking that all relevant information required to conduct the review is in Pracsys.
- Complete the [Clinical Panel Review form](#) (CPR) with the appropriate background information.
- Provide the form/s to your Injury Manager for review prior to submission.

Note: Where there are two or more issues in different disciplines associated with a claim, for example physiotherapy and pharmacy, you must complete separate CPR forms for each discipline.

Step 4: The Injury Manager reviews CPR form/s to ensure:

- completion of all fields on Page 'A' only
- clear referral question/s. Any additional information should be as a separate summary or included in the body of the email. **Note:** the personal opinion of the Injury Manager or Claims Manager should not be included.
- relevant folios are listed (see note below)
- Business Object (BO) report e0873 and/or BO report ci456 (for pharmaceutical reviews only) if relevant is attached
- the most recent Claims Plan, if on file, is attached
- the CPR form remains PDF fillable.

Note:

Where clinical notes need to be reviewed, the Claims Manager must review and collate the specific pages to be reviewed by the panellist.

Where multiple folios are to be reviewed, e.g. more than 10, the Claims Manager should attach a condensed summary of the folios to be reviewed to the Clinical Panel referral email listing the:

- folio number
- date of the document

- document title.

Step 5: Submit the referral to the Clinical Panel.

Submit the completed and reviewed Clinical Panel forms to the [Clinical Panel](#) mailbox.

The subject line of the email should be:

“Employee’s Name SURNAME – claim number – reason for referral”.

Step 6: Inform the employee.

Phone the employee and advise them that their claim has been referred to the Clinical Panel, and the reasons why.

Step 7: Make a record.

Add a comment in Pracsys recording your discussion with the employee using the ‘Manage Claim Comment’ (MCOM) function.

This is the end of the procedure.

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Procedure for actioning a Clinical Panel review

The following procedure outlines how to action a Clinical Panel In-tray notification once you have completed the relevant review outcomes:

Step 1: Complete all relevant review outcomes based on the review information provided by the Clinical Panel.

Step 2: Once you have completed the relevant review outcomes, action the Clinical Panel In-tray notification.

Launch the 'Action Clinical Panel Review' function (ACPR) in Pracsys, enter your claims details and click 'Enter'.

Complete the 5 Questions as applicable:

1. Updated the Action Plan? (Checkboxes: Yes / No / ENTER DATE).
2. Sent a Determination Letter? (Checkboxes: Yes / No / ENTER DATE).
3. Updated the Claim Treatment Plan? (Checkboxes: Yes / No / ENTER DATE).
4. Organised Independent Medical Examination? (Checkboxes: Yes / No / N/A / ENTER DATE).
5. Organised other Medical Evidence? (Checkboxes: Yes / No / N/A / ENTER DATE).

Click 'Amend'.

This is the end of the procedure.

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Procedure for arranging a Walk-Up referral

To arrange a Walk-Up referral, please follow the steps below:

Step 1: Discuss with your Injury Manager and if necessary Clinical Panel team whether the question falls under the 'Walk-Up' category.

- if no, end this procedure.
- if yes, continue.

Step 2: Submit an email to the Clinical Panel mailbox with the following information:

- the subject of the email should be: *"Walk-Up Referral: Name SURNAME Name - claim number"*
- claim details
- the question (i.e. reason for the referral), and
- the relevant documents – these must be attached to the email as PDFs with no folio references. The maximum number of attached documents pages is 10 pages. Please consider the doctor will be reading the documents and providing advice within the 15-minute allocation (no pre-reading is done). Please provide an appropriate amount of detail accordingly.

You will receive a calendar invitation from the Clinical Panel prior to the scheduled appointment with the date and time. Clinical Panel Support staff will facilitate the meeting at the appointed time.

If you, or your Injury Manager are unable to attend the session on the allocated date/time, you must contact the Clinical Panel who will look at rescheduling the appointment. Alternatively, you may wish to nominate someone to attend the meeting in your place.

Following the Walk-Up appointment, complete any recommendations or actions.

This is the end of the procedure.

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