

Provider treatment plans are considered by insurers when deciding whether to fund a service. Treatment should be aimed at function with achievable and measurable goals. Intervention proposed should also reflect current research findings, be consistent with available clinical guidelines and encourage self management.



QUICK GUIDE: COMPLETING PROVIDER TREATMENT PLAN – PHYSICAL

Obtain your client's CTP claim number and the name of the insurance company.



Complete and submit a provider treatment plan. All sections must be completed.



The insurer will communicate a decision in writing within ten calendar days of receipt. The insurer will provide an explanation if the plan is declined in part or in full.



Account for pre-approved treatment expenses should be processed within 21 calendar days of the insurer receiving a valid tax invoice.



Contact the insurer if you have any questions or concerns regarding your client's rehabilitation.

Initial/current subjective and objective assessment

If you have previously completed a treatment plan for your client, these sections are to report on the "current" status (as your client's initial status would have been reported on your initial plan).

Initial/current objective assessment

Include specific range of motion, PBU readings and other relevant objective measures.

Therapist's provisional diagnosis

Your provisional diagnosis is based on your own assessment findings. Comment on relationship of the condition to the MVA.

Functional limitations

Include main limitations of daily tasks and outcome measure results if appropriate.

Treatment progress

Ensure that you comment on both subjective as well as objective measures of progress. Using outcome measures assists in objectively assessing whether a person is making measurable and durable progress. Examples of outcome measures can be found at www.maic.qld.gov.au.

Future treatment goals

Include specific functional goals and timeframes. Include plans to refer on if your patient is not progressing as expected.

Details of treatment proposed

Include concise details of manual techniques, tools to be used, exercises prescribed and functional education to be provided.

Proposed treatment

Duration of a treatment plan during acute and sub-acute stages should be generally less than eight weeks. Beyond eight weeks or in complex cases it is appropriate to reassess progress and prepare a subsequent treatment plan.

Related documents:

- MAIC Guidelines for Compulsory Third Party (CTP) Rehabilitation Providers
- *Road to Recovery* rehabilitation following a motor vehicle accident
- Insurer Rehabilitation Decision Making Tool
- Rehabilitation Standards for CTP Insurers
- Outcome Measures for Physical Treatment Providers