

29 April 2021

William T Francis

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Tēnā koe William

Your Official Information Act request, reference: GOV-010038

Thank you for your request of 29 March 2021, asking the following, under the Official Information Act 1982 (the Act):

*Please confirm whether or not Chronic Fatigue Syndrome is considered a disability by ACC,
... leveraging these MoH guidelines
... Chronic Fatigue Syndrome (Read Code F286)*

Response to your request

You have asked us to answer your question regarding Chronic Fatigue Syndrome.

Under the Act, a distinction exists between a request for information already known and held by an agency (official information), versus a request for an agency to form an opinion or provide an explanation or comment, and thus create new information to answer a request (not official information).

You are asking ACC to provide a comment on whether an injury diagnosis is a disability. Accordingly, we are refusing to respond to this question. Further information about official information requests can be found in the Ombudsman's guide *Making official information requests*. This is available on the Ombudsman's website, here: www.ombudsman.parliament.nz/resources/making-official-information-requests-guide-requesters.

However, to assist you understand how the Scheme works, I am providing you the information below.

How ACC determines the appropriate support(s) for a client

Below is information about how ACC determines the appropriate support(s) for a client, such as a client with an injury diagnosis of Chronic Fatigue Syndrome (Read Code F286).

The support, treatment and rehabilitation ACC provides clients takes into account our legislative requirements, and consideration of the specific circumstances of each person and the effect the covered injury has on them. To make decisions, we rely on the professional advice and assessments of health professionals, and apply staff's expertise in the provisions of our legislation.

Read codes

Chronic Fatigue Syndrome (Read Code F286) is an injury diagnosis.

Read codes, such as this one, are used when a qualified health practitioner lodges an ACC45 injury claim form or updates a diagnosis on an existing claim. Further information about the process of lodging an ACC claim, including the use of Read Codes is available on the ACC website here: www.acc.co.nz/providers/lodging-claims/lodging-a-claim-for-a-patient/.

ACC's definition of serious injury

The severity of disability definition you provided is specific to the 2001 Household Disability Survey screening questionnaire.

As we are a no-fault Scheme, the severity of an injury is not material for ACC to make a cover decision. Rather than by severity of injury or disability, we classify claims as *serious injury claims, entitlement claims, other* and *medical fees only claims*.

ACC's definition of *serious injury* is an injury, generally a traumatic brain injury or spinal injury, that results in a person having lifelong interactions with ACC.

Entitlement claims generally cover moderate to serious injuries and the person is eligible for entitlements. Examples of these entitlements include: compensation for loss of earnings; allowances for attendant care and childcare, and provision of wheelchairs and other equipment.

Medical fees only claims are those where ACC has made payments for treatment, such as that provided by a GP, physiotherapist or dentist, but where the client has not received any entitlements.

How to contact us

If you have any questions, you can email me at GovernmentServices@acc.co.nz.

Nāku iti noa, nā



Sasha Wood

Manager Official Information Act Services
Government Engagement & Support