

# 18 September 2015

D Lohr

fyi-request-2932-df029989@requests.fyi.org.nz

Dear Mr Lohr

## **Official Information Act Request**

Thank you for your emails of 14 July 2015 via the FYI website requesting information under the Official Information Act 1982 (the Act). We have made a decision to combine your questions as they were all sent to ACC on the same day. For ease of response we are responding to all your questions under FYI request number 2932-df029989. Your requests have been numbered as below and responded to in that order. We have interpreted audit to mean fraud or suspected fraud investigation:

- 1. What are the average annual payments made to clinics and providers that are "investigated for fraud" by ACC, before and after the investigation? Please answer for the years 2007 to present.
- 2. What are the average annual payments made to clinics and providers that are "audited" by ACC, before and after the investigation? Please answer for the years 2007 to present.
- 3. What other measures of "success" would ACC incorporate into its audit measures, and how are audit staff rewarded for good work?
- 4. What is the average number of ACC claimants that any provider treats on an annual basis, where that provider has been audited by ACC, both before and after the start of the audit? Please answer for the years 2007 to present.
- 5. What is the average number of ACC claimants that any provider treats on an annual basis, where that provider has been investigated for fraud by ACC, both before and after the start of the investigation? Please answer for the years 2007 to present.
- 6. What amount of ACC's budget has been/is devoted to the investigation of fraud by ACC? Please answer for the years 2007 to present.
- 7. How does ACC measure the success of the fraud investigation division, previously know (sic) as the "Fraud Unit," then the "Investigation Unit," and now "Integrity Services?"
- 8. What amount of funds for the detection of fraud was allocated to the the (sic) investigation of doctors and registered treatment providers? Please answer for the years 2007 to present
- 9. What amount of funds for the detection of fraud was allocated to the investigation of injured claimants? Please answer for the years 2007 to present
- 10. How many doctors are registered with ACC, as providers? Please answer for the years 2007 to present

11. How many injured people are there that were ACC claims? Please answer for the years 2007 to present

Thank you also for your email of 21 August 2015 which provided proof of address required by ACC in order to proceed with your request.

In response to each question ACC advises the following:

# Questions 1 and 2

ACC will not be providing the requested information as the Corporation does not calculate the average annual payments made to clinics and providers being audited or investigated. The requested information is not held by the Corporation, and not believed to be held by another department. This decision complies with section 18(g) of the Act.

#### **Questions 3**

ACC does not routinely investigate clinics therefore it does not have a standard measure of success incorporated. ACC can undertake both reactive and proactive clinical reviews to determine how well a contract is being applied. If an issue is identified with a provider, a review would be undertaken to determine the nature and cause of the issues. Measures used in such reviews focus on the quality of work undertaken and timeliness.

#### Questions 4 and 5

The information requested cannot be made available without substantial collation or research and this part of your request is therefore refused under section 18(f) of the Act. This is because the Integrity Services Team closed 1,288 provider investigations between 1/1/07 and 21/8/15 and would need to recreate a report in order to provide this information. To recreate the report would require a manual search through those files.

## Question 6, 8 and 9

ACC is unable to provide the requested information as the Corporation does not calculate the average annual funding specifically allocated to fraud detection, investigating doctors and registered treatment providers or the injured claimants. The requested information is not held by the Corporation, and not believed to be held by another department. This decision complies with section 18(g) of the Act.

What ACC can provide is the annual budgeted amounts for administration costs for the Integrity Services team, who are responsible for conducting investigations on behalf of ACC as per Appendix One.

## **Question 7**

Please refer to Appendix Two – Integrity Services Draft Process Design Principles document for the current measure of success for Integrity Services.

## **Question 10**

Please refer to Appendix Three – Active Medical Professionals registered with ACC as of July each year.

#### **Question 11**

ACC can only provide information on injured persons who lodge a claim. For information on numbers of ACC claims please refer to ACC's Annual Report which is publicly available and can be on <a href="https://www.acc.co.nz">www.acc.co.nz</a> under About ACC and Reports and Strategy. This complies with section 18(d) of the Act.

# ACC is happy to answer your questions

If you have any questions, ACC will be happy to work with you to answer these. You can contact us at <a href="mailto:GovernmentServices@acc.co.nz">GovernmentServices@acc.co.nz</a> or in writing to Government Services, PO Box 242, Wellington 6140.

Yours sincerely

Janine McGruddy

Senior Advisor, Government Services