

Medical Support Panel (MSP) fact sheet for employers

What is the Medical Support Panel?

The Medical Support Panel (MSP) is a team of specialist Occupational and Environmental Physicians and Psychiatrists with the expertise to review case files and make medical strategy recommendations to assist in assessing treatment requests and making timely decisions to support recovery and return to work, and assist guide medical strategy towards injury recovery and return to work.

How the MSP works

Case Manager refers a claim to the MSP



If a Case Manager/Injury Management Specialist has questions about a medical aspect of a claim, they'll refer it to the MSP.



MSP specialist reviews the claim

MSP Specialists will consider information presented by the Case Manager/Injury Management Specialist and highlight any further concerns identified as a result of the review.

MSP provides their recommendations to the Case Manager



5 business days
for portal referrals

1 business day
for consult referrals

Once the claims service provider receives the MSP recommendation, they apply the legislation, and the claims management decision making framework, together with the MSP recommendation, to make a decision on the claim.



The Case Manager will explain the MSP's recommendation and their final decision to stakeholders.

The MSP pathways

The Case Manager/Injury Management Specialist will refer a claim to the MSP through the most appropriate pathway for the particular claim and its circumstances.

There are two referral pathways to the MSP:

In-depth referral (Portal)

Medical guidance for complex claims that will require more time to review extensive documentation, speak to stakeholders as required and provide a more in-depth medical claims review.

Consult

An individual phone appointment with an MSP specialist to discuss medical concerns on a claim. These appointments are up to 30 minutes in duration and can be booked by a Case Manager/Injury Management Specialist.

Items out of scope for the MSP

The MSP is not able to make recommendations on the following:

- » certificate of capacity restrictions
- » whole person impairment (WPI)
- » dental treatment requests
- » home modifications
- » for psychological claims, the application of Section 11A

How long does it take for the MSP to review a claim?

The MSP has a target of no more than five business days for portal referrals and one day for consults once a completed referral is received.

If an incomplete referral is received, the MSP will be unable to commence a review until all information is provided and the referral is completed by the Case Manager/Injury Management Specialist.

The Claims Service Provider is responsible for referring claims to the icare MSP for advice in relation to treatment and medical causation where required.

When is a claim referred to the MSP for review?

A claim can be referred to the MSP at any point in the claim's lifecycle. A claim can be referred to the MSP more than once – as a worker's treatment progresses, or where a review of medical concerns is required. A review can also be referred if there are questions around ongoing medical causation or an additional body part is added to the claim. The MSP can also provide a medical strategy review and provide other strategies and options to help the worker's progress.

How will I know if a claim has been referred to the MSP?

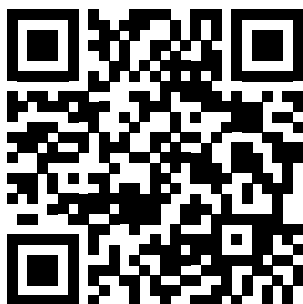
The Case Manager/Injury Management Specialist will communicate the initiation of an MSP referral to the worker and relevant stakeholders. They will also ask if there is any information the employer and worker would like included for consideration by the MSP specialist who reviews the referral.



For further information regarding the MSP processes, please visit our website where you will find a helpful FAQ:

The MSP process and FAQs from the icare website

<https://www.icare.nsw.gov.au/msp>



An innovative approach to treatment for injured workers

<https://www.youtube.com/watch?v=KcjmbIcsQ5Y>

