

24 November 2020

Bridget Morison

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Tēnā koe Bridget

**Time Extension of your Official Information Act request, reference: GOV-007536**

Thank you for your request of 28 October 2020, asking for the following information under the Official Information Act 1982 (the Act):

*Within a claims summary file report a claim may result in more than 1 injury which has a diagnosis and other information assigned. In relation to these injury details, please provide policy, purpose, use, guidelines and other explanatory information that relates to how this data is assigned, and what it means. Please also include information relevant to input used where it relates to data transferred from previous systems and paper files.*

1) Code type:

*(a) what are the different values assigned to "type" and reasons why? (Types currently known of include "READ" and "Diagnosis")*

*(b) I'm assuming READ uses values (@5) and descriptions (@2) from the xls file available from ACC website? Is READ an acronym and if so for what?*

*(c) What is "Diagnosis" when was it used, is it still currently used?*

*(d) What "types" have been and/or are still currently used?*

2) Description:

*(a) I'm assuming this refers to Code value @5 (below)?*

3) Outcome status: (Approved, Provisional etc)

*(a) List all inputs that can be used including their meaning/use eg: What does "Provisional" mean, when is it used and how does it impact a claim for cover and entitlements.*

4) Start date of injury code:

*(a) What reasons would a start date not be defined where previous injury was accepted for cover and entitlements eg this may (or may not) be relevant to historic claims only*

5) Code value:

*(a) I'm assuming this relates to "Description" @2 as above. Please provide information on how the current ACC system deals with code values and descriptions assigned for historic claims under previous systems.*

6) End date of injury code:

*(a) When is an end date assigned and how does this impact claim for cover and entitlements? When and how is an end date defined including why the era of a claim would influence this (yet claimant still has accepted cover).*

**ACC needs extra time**

The Act requires that we advise you of our decision on your request no later than 20 working days after the day we received your request. Unfortunately, it will not be possible to meet that time limit and we are therefore writing to notify you of an extension of the time to make our decision, to 16 December 2020.

This extension is necessary because your request necessitates a search through a large quantity of information and meeting the original time limit would unreasonably interfere with our operations. As such, a proper response cannot reasonably be made within the original time limit.

**If you have any questions**

Please contact me on [Government.Services@acc.co.nz](mailto:Government.Services@acc.co.nz) if you would like to talk about this extension. I will be happy to answer any questions or, if you have any concerns, work with you to resolve these.

If you are not happy with this extension, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz) or by phoning 0800 802 602.

Nāku iti noa, nā



Sasha Wood

**Manager Official Information Act Services**  
Government Engagement & Support