

DVA Quick Tips for Health Providers for Mental Health Claims

Completing Impairment Assessment forms and Incapacity forms



Australian Government
Department of Veterans' Affairs

Impairment Assessment Forms

An Impairment Assessment aims to determine the impact of any mental health conditions that have been accepted by DVA as service caused.

The forms will ask for information such as:

- **the severity of the disease;**
- **the impact of the condition(s) on various aspects of the Veteran's life;**
- **previous and current treatment;** and
- **the veteran's functional status.**

DVA will send you the appropriate forms to enable assessment under the various Impairment Guides - GARP (for VEA and MRCA) & PIG (Comcare Part 2, for DRCA). DVA will use the information you provide to establish an overall impairment rating and calculate the amount of compensation.

GARP for VEA and MRCA:

- Uses Emotional and Behavioural Functional Tables to assess mental health conditions:
 - Subjective Distress
 - Manifest Distress
 - Functional Effects
 - Occupation
 - Domestic Situation
 - Social Interaction
 - Leisure Activities
 - Current Therapy
- These tables are only to be used for the assessment of psychiatric conditions. They should not include the effects of non-psychiatric conditions (e.g. pain, dementia).
- The ratings are threshold levels that demonstrate the spectrum of disease. Ratings at the extreme high or low should be quite uncommon.
- Ratings may differ for the various sections, reflecting the variable impact of mental health conditions and unique protective factors. However, they need to be logically consistent. E.g. a veteran in "obvious continual distress" is unlikely to still be working in customer service.

When conducting a medical assessment:

A condition that has **fluctuating impairment** can still be assessed for permanent impairment. In this situation **describe the average impairment.**

An unusual or severe impairment may require a **more comprehensive assessment and explanation.**

You may wish to consider the presence of other conditions if the impairment is inconsistent with the usual effects of the accepted mental health condition.

This is not a one-off process. If the condition later deteriorates, the veteran can request that another assessment is undertaken at that time, and more compensation may be payable.

Permanent Impairment Guide for DRCA PI

- Uses Table 5.1 Personality Disorders, psychoneuroses and psychoses etc to assess mental health conditions.
- Note that a rating of >10% impairment requires that the Veteran needs some supervision and direction in activities of daily living as defined by the Permanent Impairment Guide.

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Permanent

means 'likely to continue indefinitely'.

- Most chronic mental health conditions would be considered permanent from the date of diagnosis.
- Acute mental health conditions (e.g. acute stress disorder, adjustment disorder) are not usually considered permanent. If there is ongoing impairment, consider additional diagnosis.

Stability or Stable

means the condition is unlikely to improve to a significant degree.

A condition is not likely to be considered stable if:

- there has been a recent exacerbation of symptoms,
- the condition is inadequately treated,
- there is a significant change in treatment regime.

A condition can still be considered stable if it has a fluctuating course (e.g. Generalised Anxiety Disorder), or if it presents intermittently (e.g. Panic Disorder).

The 'date of stability' is when the current level of impairment was reached.

Apportionment

Under MRCA and VEA, **all conditions contributing to an impairment need to be identified**, and their relative contribution to the impairment estimated. This process is known as **apportionment**. You may be asked to apportion all conditions individually, or between groups of conditions. The forms will guide you as to what apportionment is required.

Assessing in Isolation

Under DRCA, we need to assess the impact of the condition '**in isolation**'; that is, as if the veteran is otherwise healthy and normal. This can be a clinically non-intuitive process, but it is a legally necessary one.

In both cases, we are seeking a reasonable estimate based on your clinical judgement. Factors to consider might include the nature of the symptoms from each condition, the severity of pathology, treatment requirements and the specific activities most affected.

Treatment Recommendations

The veteran remains eligible for treatment, regardless of the level or permanence of impairment.

You may be asked to:

- **identify any treatments which are likely to reduce impairment or improve function.** *More severe impairment may require consideration of more intensive treatment.* E.g. Veteran has only been trialled on a short course of a single anti-depressant or SSRI for severe chronic depression with recurrent suicidal ideation. Other treatment options should be considered before deciding that no improvement is possible.

And/or

- (if treatment is ongoing), **indicate the likely level of impairment following completion.** This allows us to provide some compensation for this condition while treatment is being undertaken.

Incapacity forms

Incapacity payments are **compensation for economic loss due to the inability** (or reduced ability) **to work**. These payments are only available if one or more service caused conditions are contributing to the incapacity. Incapacity payment recipients also receive assistance with vocational rehabilitation, coordination of medical management, and psychosocial support.

When detailing the **cause of Incapacity**, list:

- the **specific diagnoses** (i.e. not the generic "medical condition" or symptoms), and
- **all conditions which are affecting the capacity for work.**

Note that:

- more detail may be required if a condition listed does not usually cause incapacity for work.
- good work can have a positive affect on mental health.