

GUIDELINE

Non-established, new or emerging treatment, care and support

The National Injury Insurance Agency, Queensland (NIISQ Agency) may consider paying the necessary and reasonable costs of non-established, new or emerging treatment, care and support (eg equipment, medications, prostheses, treatment interventions or surgeries) only in exceptional circumstances that are injury related. For a request to be considered by the NIISQ Agency, the requesting practitioner must provide strong independent clinical evidence of the safety and efficacy of the non-established, new or emerging treatment and / or services.

Making funding decisions

In deciding whether to approve funding for non-established, new or emerging treatment, care and support, the NIISQ Agency uses [necessary and reasonable decision making](#). Specific attention will be given to the efficacy and safety of the requested treatment, care and support. This includes consideration to relevant guidelines, research evidence (see levels of evidence below), the Medicare Benefits Schedule, the Department of Health and Ageing Prostheses List, the Pharmaceutical Benefits Schedule and, the Australian Register of Therapeutic Goods.

Where a decision regarding non-established, new or emerging treatment, care and support has been made by relevant bodies, the NIISQ Agency may defer to the decision. Where such decisions do not exist, consideration will only be given to non-established, new or emerging treatments and services requests, where the health practitioner provides strong independent clinical evidence of the safety and efficacy of the treatment and/or service.

What information does the NIISQ Agency require to consider paying for non-established, new or emerging treatments and services?

For the NIISQ Agency to consider paying the reasonable costs of non-established, new or emerging treatments and services, a request must be made in writing to the NIISQ Agency and include the following information:

- diagnosis and relationship to the eligible injury
- independent, high quality evidence that the proposed treatment or service will be safe and effective.
- details of all previously trialled treatments and services for this diagnosis and their measurable outcomes
- if established treatments and services have not been trialled, reasons for going directly to a non-established, new or emerging treatment or service must be given
- clinical indications for requested treatment or service
- description and expected costs of proposed treatment or service
- objective outcome measures to be used and timing of assessment
- expected outcomes from proposed treatment or service, including functional outcomes (such as return to work, increased independence in domestic duties, etc.) how and when effectiveness will be assessed
- future treatments and services planned if proposed treatment or service is successful or unsuccessful
- the urgency of the request
- the name and qualifications of the requesting provider
- the name, qualifications, skills and experience of the provider(s) performing the treatment or service.

A request for non-established, new or emerging treatment, care and support will not be considered without the above information.

The NIISQ Agency may also request advice from an independent expert around the effectiveness and safety of the requested treatment, care or support.

The NIISQ Agency will generally not pay for:

- treatment, care or support which is part of a research trial or on another experimental basis
- treatment, care or support which has a limited evidence base or is not considered best practice in the particular circumstances
- treatment, care or support where there are safety concerns
- telephone calls and telephone consultations between providers and participants, and between other providers, (including hospitals) regarding the proposed non-established, new or emerging treatment or service

Specific examples of treatment, care and support generally not able to be funded through the NIISQ include:

- off-label medication where there is insufficient evidence to support its use
- medicinal cannabis
- any therapeutic good that has been suspended or opposed to registration on the Australian Register of Therapeutic Goods
- complementary and alternative therapies

Levels of evidence

The National Health and Medical Research Council (NHMRC), evidence hierarchy ranks study designs in order of the confidence with which they are able to answer questions about treatment efficacy:

Level I	A systematic review of Level II studies
Level II	A randomised, controlled trial
Level III	i. A pseudo-randomised, controlled trial ii. A comparative study with concurrent controls iii. A comparative study without concurrent controls
Level IV	Case series with either post-test or pre-test/post-test outcomes

The NIISQ Agency may consider funding non-established, new or emerging treatments and services where Level 1 or 2 evidence has been provided.

The information provided in this document is a guideline only and is for general information purposes and is subject to change and does not constitute legal advice or recommendations. It should not be relied upon as constituting legal advice or a recommendation or as applicable to specific circumstances. Please refer to the *National Injury Insurance Scheme (Queensland) Act 2016* and *Regulation 2016* for more details about the National Injury Insurance Scheme, Queensland.

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More information

For more information contact the NIISQ Agency:

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