

Skin Cancer Treatment

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Contents

Policy	3
1. Purpose.....	3
2. Legislative Reference.....	3
3. Eligibility for Skin Cancer Treatment	3
4. Applications for Skin Cancer Treatment	3
5. Approving Skin Cancer Treatment	3
6. Prior Approval for Skin Cancer Treatment.....	3
7. Skin Cancer treatment that Veterans' Affairs will cover.....	4
8. Use of Mohs surgery for skin cancer treatment.....	4
9. Skin Cancer treatment that Veterans' Affairs will not cover.....	5
10. Veterans who travel overseas for skin cancer treatment.....	5
11. Veterans Living Overseas	5
12. Second Opinion.....	5
13. Reimbursement of Skin Cancer Treatment Costs	5
14. Reviews, Appeals and Complaints.....	5
15. Transitional Arrangements	5
Glossary	6

Policy

1. Purpose

- 1.1 The purpose of this document is to provide policy on administering eligibility to skin cancer treatment under the Veterans' Support Act 2014 (the Act). The general policy on *Treatment*, and policies on reimbursement of *Travel for Treatment and Rehabilitation*, on *Temporary Increase in Disablement Pension* (for when treatment requires absence from home or work, and on *Treatment for Veterans Living Overseas* are covered in separate papers.

2. Legislative Reference

- 2.1 The relevant legislation is the Act, sections 51, 107 to 111, and the Veterans' Support Regulations 2014 Regulations 64 to 70.

3. Eligibility for Skin Cancer Treatment

- 3.1 **Go to section 3 of separate paper on Treatment.**

4. Applications for Skin Cancer Treatment

- 4.1 **Go to section 4 of separate paper on Treatment.**

5. Approving Skin Cancer Treatment

- 5.1 **Go to section 5 of separate paper on Treatment**

6. Prior Approval for Skin Cancer Treatment

- 6.1 A veteran must see his/her GP first for skin cancer treatment. If the GP is unable to treat the condition the veteran should be referred to a skin cancer specialist who operates in the publicly funded health care system. If the treatment cannot be arranged within the publicly funded health care system, either because the length of time that a veteran would need to wait to receive treatment is too long or the veteran cannot get enough points to get on the waiting list, then the veteran can request private treatment funding. If approved, Veterans' Affairs will advise what costs it can contribute towards (see also **section 6 of separate paper on Treatment and section 7 of the separate paper on Private Hospital Treatment**).

Section 107 of the Veterans' Support Act 2015

- 6.2 Veterans' Affairs will seek an independent assessment of the veteran's skin cancer before approving treatment.

7. Skin Cancer treatment that Veterans' Affairs will cover

7.1 Subject to prior approval a veteran may qualify for the payment of or contribution towards skin cancer treatment that other agencies are not already funding for the following accepted disabilities:

- Seborrhoeic Keratosis
- Malignant Melanoma of the Skin
- Basal Cell Carcinoma
- Squamous Cell Carcinoma
- Skin Cancers

7.2 The surgical treatment or treatment must be supported by the veteran's **health practitioner** or specialist. Veterans' Affairs will assess:

- the nature and severity of the disability and the impact it has on quality of life;
- whether short or long-term intervention is required;
- the proposed treatment regime;
- the number of treatment sessions required;
- whether the veteran must travel to attend the provider or if there is a provider in the veteran's local community;
- the **generally accepted means of treating** the injury or illness in New Zealand; and
- the proposed benefit/risks of the treatment and the likely outcome of the treatment.

7.3 All skin cancer treatment sessions will need pre-approval from Veterans' Affairs. The amount of treatment sessions authorised will be determined after reviewing the specialist's recommendations. Where the **treatment provider** requests treatment sessions that do not appear to meet a clinical need, Veterans' Affairs may decline to fund or may seek a second medical opinion.

8. Use of Mohs surgery for skin cancer treatment

8.1 Mohs surgery is not considered to be the generally accepted means of treating skin cancer in New Zealand.

8.2 Mohs surgery is most suitable for skin cancer on the face where maximum conservation of tissue is desirable in cosmetically sensitive areas (e.g. the eyes and eyelids) and scalp, and where the margins are hard to define on clinical macroscopic view such as the nose or nasolabial fold.

- 8.3 Veterans' Affairs will ordinarily only fund or contribute to the cost of standard treatment relevant to the particular condition, but for skin cancer on the face and scalp may consider a contribution to Mohs surgery.

9. Skin Cancer treatment that Veterans' Affairs will not cover

- 9.1 Veterans who are declared by independent assessment as having reached the stage of completion of skin cancer treatment in terms of treatment for their **service-related** condition will not have further skin cancer treatment for that condition covered by Veterans' Affairs.
- 9.2 If a veteran receives additional unapproved skin cancer treatment this treatment will be at the veteran's expense.

10. Veterans who travel overseas for skin cancer treatment

- 10.1 Veterans' Affairs will not pay or contribute funding for skin cancer treatment for which the veteran has opted to travel overseas.

11. Veterans Living Overseas

- 11.1 **Go to section 20 of the separate paper on Treatment.**

12. Second Opinion

- 12.1 **Go to section 22 of the separate paper on Treatment.**

13. Reimbursement of Skin Cancer Treatment Costs

- 13.1 **Go to separate paper on Treatment, section 17, for general principles on Reimbursement of Treatment Costs and section 18 for Reimbursement of Ancillary Costs.**
- 13.2 Reimbursement of skin cancer treatment will not be made unless prior approval for the treatment has been sought. Veterans' Affairs may consider reimbursement in the case of urgent or acute admission.

14. Reviews, Appeals and Complaints

- 14.1 If the veteran disagrees about a decision concerning eligibility for an entitlement or service **go to separate policies on Reviews and Appeals**. If the veteran is concerned about Veterans' Affairs' administration of an entitlement or service **go to separate policy on Complaints**.

15. Transitional Arrangements

- 15.1 **Go to section 24 of the separate paper on Treatment.**

Glossary

accepted disability [policy definition]

Means an injury, illness or condition that Veterans' Affairs accepts as being service-related.

generally accepted treatment in New Zealand means treatment supported by evidence-based research which is accepted in New Zealand by the Ministry of Health and is common practice in New Zealand.

health practitioner [section 7]

Has the same meaning as in section 5(1) of the Health Practitioners Competence Assurance Act 2003.

medical practitioner [section 7]

Has the same meaning as in section 5(1) of the Health Practitioners Competence Assurance Act 2003.

service-related [section 7]

In relation to an injury, an illness, a condition, or a whole-person impairment, means an injury, an illness, or a whole-person impairment caused by, contributed to by, or aggravated by qualifying service.

treatment provider [section 7]

- (a) means a chiropractor, dentist, medical laboratory technologist, nurse, nurse practitioner, occupational therapist, optometrist, osteopath, physiotherapist, podiatrist, or medical practitioner; and
- (b) includes a member of any occupational group as added for the purposes of this definition by regulations made under section 265 and subject to any criteria specified in those regulations, including (but not limited to) whether and, if so, the extent to which members of an occupational group are recognised by the Accident Compensation Corporation as treatment providers for the purposes of the Accident Compensation Act 2001.

veteran [section 7]

Means:

- (a) a member of the armed forces who took part in qualifying operational service at the direction of the New Zealand Government; or
- (b) a person:
 - (i) who has been:
 - (A) appointed as an employee of the Defence Force under section 61A of the Defence Act 1990; or
 - (B) seconded to the Defence Force with the permission of the Chief of Defence Force; and
 - (ii) who took part in qualifying operational service at the direction of the New Zealand Government; or
- (c) a person who, immediately before the commencement of Part 3 of this Act, is eligible for a pension under the following provisions of the War Pensions Act 1954:
 - (i) section 19 (but only if the person was a member of the forces);
 - (ii) section 55 or 56;
 - (iii) Parts 4 and 5