

PHYSIOTHERAPISTS SCHEDULE OF FEES EFFECTIVE 1 JULY 2018



Australian Government
Department of Veterans' Affairs

DEFINITIONS

Initial Consultation

- Up to three can be claimed in a 12 month referral period. Each initial consultation must be for a new episode of care or a new and unrelated condition and for which a new referral has been issued.
- Treatment for White Card holders must be related to an accepted disability. Eligibility must be established prior to commencement of treatment.

Standard Consultation

- Cannot be claimed on the same day as an initial consultation for the same patient.
- Should be claimed for ongoing treatment of a condition.
- Two consultations cannot be claimed on the same day. #

in certain exceptional circumstances, DVA may pay for two subsequent consultations provided on the same day in circumstances where it is for treatment of a short term acute onset condition such as treatment of an admitted entitled person with acute pneumonia or for joint mobilisation immediately following surgery. The length of time for providing these services should not exceed five days without contacting DVA. When claiming, providers should indicate am or pm next to each consultation or the time of each consultation to allow processing by Department of Human Services.

Extended Consultation

- For treatment of two acute and unrelated areas.
- For treatment of an acute condition when a chronic condition needs ongoing treatment.
- Treatment of related areas, or treatment of multiple, chronic musculo-skeletal conditions, should **NOT** be claimed as an extended consultation.

Shaded item numbers require prior financial authorisation from DVA. To obtain prior financial authorisation, please contact DVA using the contact details at the end of this Schedule.

FURTHER INFORMATION TO ASSIST YOU WHEN TREATING MEMBERS OF THE VETERAN COMMUNITY IS CONTAINED IN THE 'NOTES FOR PHYSIOTHERAPISTS' AVAILABLE ON THE DVA WEBSITE AT:

<http://www.dva.gov.au/providers/allied-health-professionals>

ROOMS

ITEM NO.	DESCRIPTION	GST STATUS ++	
PH10	Initial Consultation	\$ 64.25	GST-free
PH20	Standard Consultation	\$ 64.25	GST-free
PH30	Extended Consultation	\$ 68.10	GST-free

HOME

ITEM NO.	DESCRIPTION	GST STATUS ++	
PH11	Initial Consultation	\$ 69.05	GST-free
PH21	Standard Consultation	\$ 64.25	GST-free
PH31	Extended Consultation	\$ 80.70	GST-free

HOSPITALS

PUBLIC

The Department will only pay for health care services carried out in public hospitals in exceptional circumstances, and only where DVA has given prior financial authorisation.

Only one 1st Patient claim applies in the same facility (i.e. PH12 or PH22)

ITEM NO.	DESCRIPTION	GST STATUS ++	
PH12	Initial Consultation – 1 st Patient	\$ 69.05	GST-free
PH16	Initial Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free
PH22	Standard Consultation – 1 st Patient	\$ 64.25	GST-free
PH26	Standard Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free

PRIVATE

The Department will only pay for health care services carried out by providers in private hospitals when the contract between DVA and the hospital does not already cover these services. It is the provider's responsibility to determine whether or not health care services are included in the bed-day rate under the DVA contract, before providing services. This can be done by contacting the Veteran Liaison Officer at the hospital or DVA.

Only one 1st Patient claim applies in the same facility (i.e. PH13 or PH23)

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
PH13	Initial Consultation – 1 st Patient	\$ 69.05	GST-free
PH17	Initial Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free
PH23	Standard Consultation – 1 st Patient	\$ 64.25	GST-free
PH27	Standard Consultation - 2 nd & Subsequent Patients	\$ 64.25	GST-free

RESIDENTIAL AGED CARE FACILITIES (RACFs)

The level of care an entitled person receives in a RACF refers to the health status and classification of the eligible veteran, as determined under the *Classification Principles 2014*, not the facility in which they reside.

SERVICES REQUIRING PRIOR APPROVAL IN A RACF ≠

Prior Financial authorisation is required before providing clinically necessary allied health services to an eligible person in a RACF classified as requiring a greater level of care as described in paragraph 7(6)(a) of the *Quality of Care Principles 2014*.

Note: A person in a RACF classified as requiring a greater level of care is described in paragraph 7(6)(a) of the *Quality of Care Principles 2014* as a care recipient in residential care whose classification level under the *Classification Principles 2014* includes any of the following:

- (i) high ADL domain category;
- (ii) high CHC domain category;
- (iii) high behaviour domain category;
- (iv) a medium domain category in at least 2 domains; or
- (v) a care recipient whose classification level is high level residential respite care.

Only one 1st Patient claim applies in the same facility (i.e. PH14 or PH24)

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH14	Initial Consultation – 1 st Patient	\$ 69.05	GST-free
PH18	Initial Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free
PH24	Standard Consultation – 1 st Patient	\$ 64.25	GST-free
PH28	Standard Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free

SERVICES NOT REQUIRING PRIOR APPROVAL IN A RACF ≠

Prior financial authorisation is not required for clinically necessary allied health services provided to an eligible veteran in a RACF classified as requiring a lower level of care who is not referred to in paragraph 7(6)(a) of the *Quality of Care Principles 2014*.

If a provider is in doubt about the classification of an eligible veteran in a RACF who has been referred to them, they must contact the facility. It is the provider's responsibility to ascertain the classification of an eligible veteran before they provide treatment.

Only one 1st Patient claim applies in the same facility (i.e. PH15 or PH25)

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH15	Initial Consultation – 1 st Patient	\$ 69.05	GST-free
PH19	Initial Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free
PH25	Standard Consultation – 1 st Patient	\$ 64.25	GST-free
PH29	Standard Consultation – 2 nd & Subsequent Patients	\$ 64.25	GST-free

LYMPHOEDEMA TREATMENT

- Only physiotherapists with appropriate postgraduate training which is recognised by DVA, in the treatment of lymphoedema, are able to provide this treatment to entitled persons.
- Item PH41 should be claimed for all aspects of clinical treatment.
- Prior approval is not necessary for the maximum of 20 sessions per calendar year
- If treatment outside of the maximum limit is required, contact DVA for prior approval.
- Treatment for lymphoedema cannot be provided to patients concurrently receiving lymphoedema treatment from an occupational therapist.
- Clinically required consumables should be claimed under item PH92 or PH93.
- Clinically required aids and appliances should be claimed under item PH94.
- All other clinically required consumables, aids and appliances should be sourced through DVA's Rehabilitation Appliances Program (RAP).
- Do not claim for items that the entitled person can purchase through a pharmacy or supermarket for on-going self management of conditions.

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH41	Lymphoedema – per session (maximum of 20 sessions per calendar year)	\$136.20	GST-free

GROUP PHYSIOTHERAPY

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH50	Group Physiotherapy (Per Patient)	\$ 28.70	GST-free

AQUATIC PHYSIOTHERAPY

The cost of pool admission for the entitled person is included in the fee.

Physiotherapists are unable to claim travel costs when they travel from their rooms to a pool facility to provide aquatic physiotherapy services.

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH60	Supervised Individual Aquatic Physiotherapy	\$ 64.25	GST-free
PH61	Supervised Group Aquatic Physiotherapy (Per Patient) Claim the actual amount but no greater than the maximum fee	\$ 37.65	GST-free

CLINICALLY REQUIRED CONSUMABLES

Use these items only for the supply of consumables and small items. Please ensure that you retain documentation and/or invoices on file to substantiate claims.

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH92φφ	Consumables clinically required immediately during the consultation/treatment <i>Do not claim for items that entitled persons should purchase through a pharmacy or supermarket for ongoing self-management of conditions e.g. dietary supplements. Claim invoiced cost only, not exceeding the maximum fee.</i>	\$ 51.95	GST-Free φφ
PH93	Consumables clinically required for treatment after consultation <i>Do not claim for items that entitled persons should purchase through a pharmacy or supermarket for ongoing self-management of conditions e.g. dietary supplements. Claim invoiced cost only exclusive of GST, not exceeding the maximum fee. DVA will automatically add GST to the amount claimed.</i>	\$ 51.95	Taxable

SMALL MEDICAL AIDS AND APPLIANCES

(Must be covered by section 38-45 of the GST Act)

Use this item to facilitate the provision of small medical aids and appliances, e.g. soft collar, braces for knee, ankle, elbow or wrist, lumbar corsets etc. All other aids and appliances must be sourced through RAP.

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH94	Small Medical Aids and Appliances <i>Use this item to facilitate the provision of small medical aids and appliances covered by section 38-45 of the GST Act. Claim the invoiced cost only, not exceeding the maximum fee, and attach the invoice to the patients file.</i>	\$ 104.15	GST-free ϕϕ
PH98	Small Medical Aids and Appliances – Postage/Freight <i>Use this item to claim an actual amount of postage or freight directly attributable to an item purchased for a veteran and claimed under PH94. Restriction: This item cannot be claimed separately, i.e. it can only be claimed in conjunction with Item PH94.</i>	\$ 12.70	Taxable

SPLINTS/CASTS

Use these items only for the supply of splints and casts that are covered by section 38-45 of the GST Act.

NOTE: *Prior financial authorisation must be sought from DVA if the cost of a static splint or cast exceeds \$89.70, or exceeds \$192.35 for a dynamic splint. Splints may also be sourced through RAP.*

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH95	Static Splint/Cast <i>Claim the invoiced amount only, not exceeding the maximum fee.</i>	\$ 91.05	GST-Free ϕϕ
PH96	Dynamic Splint <i>Claim the invoiced amount only, not exceeding the maximum fee.</i>	\$ 195.25	GST-Free ϕϕ

DIRECT SUPPLY TO DVA

(Subject to prior financial authorisation)

Use item number PH99 only when DVA contacts you directly to request that you provide:

- a written report; or
- a consultation or assessment to entitled persons, either separately or in conjunction with a written report.

For example, this may occur when DVA requires a second opinion concerning treatment for an entitled person. DVA will give financial authorisation and advise the fee at the time of the request, according to the above schedule items. The kilometre allowance is included in the fee, and is **not** to be claimed in addition to the fee.

Please note: This item does not cover the supply of clinical notes, care plans or other information requested by DVA as part of monitoring activities, as these are provided free-of-charge under DVA requirements.

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
PH99	Report or service specifically requested by DVA	Fee specified at time of request	Taxable

KEY

++Recognised Professional	Paragraph 38-10(1)(b) of the (Goods and Services Tax) GST Act states that only a 'recognised professional' can supply GST-free health services as listed in section 38-10. Please refer to section 195-1 of the GST Act for the definition of 'recognised professional' for GST purposes.
φφ GST-free consumables	Please refer to sections 38-10(3), 38-20(3), 38-45, 38-47 of the 'A New Tax System Act 1999' (GST Act) to determine the status of the health good, and GSTR2001/8 for determining the GST status and whether apportionment is required if there are GST-free and taxable components in a supply.

DVA CONTACTS

Further information on allied health services may be obtained from DVA. The contact numbers for health care providers requiring further information or prior financial authorisation for all States & Territories are listed below:

PHONE NUMBER:

1800 550 457 (Select Option 3, then Option 1)

POSTAL ADDRESS FOR ALL STATES AND TERRITORIES:

Health Approvals & Home Care Section
Department of Veterans' Affairs
GPO Box 9998
BRISBANE QLD 4001

DVA WEBSITE:

<http://www.dva.gov.au/providers/allied-health-professionals>

DVA email for prior financial authorisation:
health.approval@dva.gov.au.

The appropriate prior approval request form can be found at: <https://www.dva.gov.au/providers/services-requiring-prior-approval>.

CLAIMS FOR PAYMENT

For more information about claims for payment visit: www.dva.gov.au/providers/how-claim

Claim Enquiries: 1300 550 017
(Option 2 Allied Health)

Claiming Online and DVA Webclaim

DVA offers online claiming utilising Medicare Online Claiming. DVA Webclaim is available on the Department of Human Services (DHS) [Provider Digital Access \(PRODA\) Service](#). For more information about the online solutions available:

DVA Webclaim\Technical Support enquiries:

Phone: 1800 700 199 or email:

eBusiness@humanservices.gov.au

Billing, banking and claim enquiries: Phone: 1300 550 017

Visit the Department of Human Services' website at:

<https://www.humanservices.gov.au/organisations/health-professionals/subjects/doing-business-online-health-professionals>

Manual Claiming

Please send all claims for payment to:

Veterans' Affairs Processing (VAP)
Department of Human Services
GPO Box 964
ADELAIDE SA 5001

DVA provider fillable and printable health care claim forms & service vouchers are also available on the DVA website at:

<http://www.dva.gov.au/providers/forms-service-providers>