SOCIAL WORKERS SCHEDULE OF FEES EFFECTIVE 1 JULY 2018



DEFINITIONS

Initial Consultation

- Up to two 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.
- Treatment for White Card holders must be related to an accepted disability. Eligibility must be established prior to commencement of treatment.

Subsequent 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 subsequent consultations cannot be claimed on the same day.

Shaded items marked with an asterisk * require prior financial authorisation from DVA. To obtain prior financial authorisation, please contact the DVA office for your state or territory using the contact details on page 3.

ITEM	DESCRIPTION	FEE	GST STATUS
NO.			++

ROOMS

SW01	Initial Consultation	\$ 64.25	GST-free
SW15	Subsequent Consultation	\$ 64.25	GST-free

HOME

SW02	Initial Consultation	\$ 77.60	GST-free
SW16	Subsequent Consultation	\$ 64.25	GST-free

PUBLIC HOSPITAL

The Repatriation Commission will only pay for allied health services carried out in public hospitals in exceptional circumstances, and when DVA has given prior financial authorisation.

SW03*	Initial Consultation – 1 st Patient	\$ 77.60	GST-free
SW10*	Initial Consultation – 2nd & Subsequent Patients	\$ 64.25	GST-free

SW17*	Subsequent Consultation – 1 st Patient	\$ 64.25	GST-free
SW25*	Subsequent Consultation – 2nd & Subsequent Patients	\$ 64.25	GST-free

PRIVATE HOSPITAL

The Repatriation Commission will only pay for allied health services carried out by DVA-contracted 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 allied health services are included in the bed-day rate under the DVA contract, before providing services, by contacting the Veteran Liaison Officer at the hospital or the DVA office in the State or Territory.

SW04	Initial Consultation – 1st Patient	\$ 77.60	GST-free
SW11	Initial Consultation – 2nd & Subsequent Patients	\$ 64.25	GST-free
SW18	Subsequent Consultation – 1 st Patient	\$ 64.25	GST-free
SW26	Subsequent Consultation – 2nd & 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.

Authorisation will be given only in exceptional circumstances.

SW05*	Initial Consultation – 1 st Patient	\$ 77.60	GST-free
SW12*	Initial Consultation – 2nd & Subsequent Patients	\$ 64.25	GST-free
SW19*	Subsequent Consultation – 1 st Patient	\$ 64.25	GST-free

SW27* Subsequent Consultation – 2nd & Subsequent Patients \$ 64.25
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SERVICES NOT REQUIRING PRIOR APPROVAL IN A RACF \neq

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.

SW06	Initial Consultation – 1 st Patient	\$ 77.60	GST-free
SW13	Initial Consultation – 2nd & Subsequent Patients	\$ 64.25	GST-free
SW20	Subsequent Consultation – 1 st Patient	\$ 64.25	GST-free
SW28	Subsequent Consultation – 2nd & Subsequent Patients	\$ 64.25	GST-free

DIRECT SUPPLY TO DVA

(Subject to prior financial authorisation)

Use this item number SW99 only when DVA contacts you directly to request that you provide:

- a written report; or
- a consultation to an eligible veteran or war widow/widower, either separately or in conjunction with a written report.

For example, this may occur when DVA requires a second opinion concerning treatment for a veteran. 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 contractual obligations.

SW99*	Report or service specifically requested by DVA	Fee specified at time of	Taxable
		request	

KEY

++Recognised Professional Paragraph 38-10(1)(b) of the 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.
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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 OLD 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