



Australian Government  
Department of Veterans' Affairs

## DVA Community Nursing Program

### Bulletin No 9

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#### **Reminder: Adherence to the Notes for Community Nursing Providers**

*The Notes for community nursing providers* (Notes) is **Annexure A** to the Terms and Conditions. They form part of a legally binding agreement setting out the conditions and accountability requirements under which community nursing (CN) providers may provide services to entitled persons under DVA's health care arrangements. The CN provider and all personnel delivering CN services to entitled persons must read, understand and comply with the Notes, and are non-negotiable.

#### **Moisturising cream**

Moisturising cream is not considered a CN consumable item. If an entitled person requires moisturising cream, they can contact their GP for a script or the Veterans' Affairs Pharmaceutical Advisory Centre (VAPAC) on **1800 552 580**.

*Under Attachment D – Section 1.5.6 of the [Notes](#) (page 71)*

CN providers agree not to claim for items that:

- the entitled person should purchase through a pharmacy or supermarket for ongoing non-clinical self-management of conditions (for example moisturiser, over-the-counter medication etc);
- the entitled person has obtained via the RPBS;
- the entitled person has been supplied via RAP; and
- items which are covered in the cost of the visit, including the 'nurse's toolbox'.

#### **Transfer of an entitled person (Section 3.3 of the Notes)**

A CN provider cannot transfer an entitled person to another CN provider once services have commenced unless approval is granted by DVA.

An agreed transfer plan must be in place before any transfer — including agreed wording and approach for notification to the entitled person. The CN provider is required to support a smooth transfer without disruption to an entitled person.

A new referral from a GP will be required if an entitled person is transferred to another CN provider.

## **Second provider change**

Please note the business rules for a Second Provider in a 28-day claim period have been updated as of 1 June 2018 by Department of Human Services (DHS Medicare).

Where a second CN provider, provides community nursing services to an entitled person in a 28-day claim period, prior approval is no longer required and this claim can be processed. Item numbers excluded are below:

- NA99 – Assessment only – no other services required.
- NO65 – Exceptional Case (ECU)
- NO66 – Palliative Care Overnight (ECU)
- N067 – Clinical Assessment (ECU)
- N068 – Second Worker
- NA10 – Additional Travel
- UP05/UP06 – Coordinated Veterans' Care.

## **Updates to provider information**

To assist with the ongoing management of the Community Nursing (CN) program, Community Nursing (CN) providers are required to advise DVA as soon as practical, of any changes to their administrative and service information, including but not limited to:

- the CN provider's organisation (Legal Entity and ABN)
- geographical coverage (LGAs) of CN services
- types of CN services
- subcontracting arrangements
- capacity of providing CN services

Therefore, please email changes to [NMBCN@dva.gov.au](mailto:NMBCN@dva.gov.au), so we can update our records and the [panel of CN providers](#) published on the DVA website (if applicable) accordingly.

## **Thank you for completing the survey**

A thank you to all providers who completed the Service Provider Experience Survey that closed on 30 May 2018. We appreciate the time you took to provide us with valuable feedback that will assist us to continuously improve the Community Nursing Program.

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**Please ensure that all relevant community nursing staff in your organisation  
are made aware of the information contained in this Bulletin.**