

DVA Claiming Guide

1 July 2021 to 30 June 2022*



Australian Government
Department of Veterans' Affairs

SERVICE	FOR/WHEN	SERVICE TYPE	ITEMS	DVA GP FEE†	TOOL/SUPPORT	
One off Veteran Health Check	Former ADF members who have served at least one day Don't require veteran card	Brief < 30 mins	701	\$71.05	Veteran Assessment Tool Search for 'ADF post-discharge GP Health Assessment' in Best Practice or MedicalDirector or visit: dva.gov.au/providers/health-programs-and-services-our-clients/veterans-health-check-providers	
		Standard < 45 mins	703	\$165.05		
		Long < 60 mins	705	\$227.70		
		Prolonged > 60 mins	707	\$321.70		
Annual Veteran Health Check For first 5 years post-transition	Former ADF members who have moved to civilian life from 1 July 2019 and served at least one day Have a Veteran Card	Brief < 30 mins	MT701	\$77.65		
		Standard < 45 mins	MT703	\$167.95		
		Long < 60 mins	MT705	\$228.25		
		Prolonged > 60 mins	MT707	\$318.50		
Coordinated Veterans' Care (CVC) Program	<ul style="list-style-type: none"> Veteran Gold Card holders who have a chronic health condition, and Veteran White Card holders who have an accepted mental health condition, <i>who are at a risk of unplanned hospitalisation.</i> <p>They cannot be a:</p> <ul style="list-style-type: none"> resident of a residential aged care facility Veteran White Card holder without an accepted mental health condition, including those with only Non-liability health care (NLHC) cover for mental health. <p><i>Where enrolment eligibility continues, care is provided in ongoing 90 day periods of care; claims are submitted following the end of each period.</i></p>	GP with practice nurse			The CVC Toolbox cvctoolbox.dva.gov.au <i>includes:</i>	
		Initial assessment and program enrolment	UP01	\$448.05		<ul style="list-style-type: none"> an eligibility tool (currently Veteran Gold Card holders only) a claim calculator how to create a Comprehensive Care Plan and Care Plan template (currently Veteran Gold Card holders only) when and how to claim
		Completion of 90 day period of care- review of care plan eligibility	UP03	\$467.55		
		GP without practice nurse				
		Initial assessment and program enrolment	UP02	\$280.05		
		Completion of 90 day period of care- review of care plan eligibility	UP04	\$210.25		
Pharmaceuticals under the Pharmaceutical Benefits Scheme (PBS) and Repatriation PBS (RPBS)	<ul style="list-style-type: none"> Gold or Orange card holders for any assessed clinical need under RPBS criteria. White Card holders if the assessed clinical need relates to a condition covered by their card. 	PBS	See full schedule of items at pbs.gov.au	N/A	<ul style="list-style-type: none"> ‡ 24 hour Veterans' Affairs Pharmaceutical Advisory Centre (VAPAC) 1800 552 580 or email ppo@dva.gov.au Order PBS or RPBS computer prescriptions forms (for all eligible prescribers) with form PB229 through servicesaustralia.gov.au 	
		RPBS including wound care				
Medication Management Reviews	Eligible Gold or White card holders for whom you have not claimed this item in the last 12 months unless there's been a significant change in the patient's condition or medication plan.	Domiciliary (for patients living in a community setting)	900	\$185.30	mbsonline.gov.au	
		Residential (for aged care facility residents)	903	\$126.85		
DVA Dose Administration Aid (DAA) Veterans' Six Month Review (VSMR)	Eligible Gold or White card holders every 6 months after receiving VSMR from pharmacist.	Assess and review VSMR	CP42	\$50.00	dva.gov.au/providers/health-programs-and-services-our-clients/help-clients-access-our-medicine-organiser	

Medical attendances and consultations provided by GPs – paid at 115% of the listed MBS benefit plus the relevant MRCA or Veterans' Access Payment (VAP) or where applicable the Rural Enhancement Initiative (REI) loading. For our full and current fee schedules go to dva.gov.au/providers/notes-fee-schedules-and-guidelines

*Fees will change from 30 June 22 – a new guide will be available as soon as possible after 1 July each year.

To access the current DVA Claiming Guide visit dva.gov.au/providers/notes-fee-schedules-and-guidelines.

†If a client uses a **Medicare Card** instead of a Veteran Card **only the MBS rate will be paid.**