



# Chiropractic/Osteopathy/Physiotherapy Prior Financial Approval Request form

Please send completed form and any supporting documentation to [health.approval@dva.gov.au](mailto:health.approval@dva.gov.au)

This form is to be used for requesting prior financial approval to provide chiropractic, osteopathy and physiotherapy treatment to eligible veterans. Please note there are specific criteria for the approval of each treatment or service below. Please see the last page of this form for these criteria.

The provider is responsible for ensuring that the client is aware that their personal information is to be forwarded to DVA for determining and/or providing the benefits under the relevant legislation. The information will be treated in a confidential manner. However, it may be used for clinical review, audit or management purposes or disclosed to the client's local medical officer.

## Privacy notice

Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by DVA for the delivery of government programmes for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.  
[Read more: How DVA manages personal information.](#)

Date

## Entitled Person Details

1. DVA File Number

2. Patient name

3. Email address

I have confirmed with the patient that they would like to receive the outcome of the request via the email address provided above

4. Card type

White  Gold

5. Related White Card condition

6. Type of treatment

Chiropractic  Osteopathy  Physiotherapy

7. Type of service (please select the relevant item listed)

Medical Aid  
Is postage required? No  Yes

In Hospital Treatment

In Aged Care facility Treatment

High Care  Low Care  Unknown

Name of Hospital/Aged Care facility

Hospital/Aged Care facility address

POSTCODE

Two consultations in one day (applies to Physio only) – please see information at rear of form for criteria

Other

**8. Description of service and clinical justification for service**


**Imaging Request (Registered Chiropractors only)**

9. Is this form to request approval for imaging? No  Yes

**Referring Provider Details**

10. Provider number

11. Provider name

12. Telephone Number [  ]

13. Email

**Servicing Provider Details**

14. Provider number

15. Provider name

16. Provider address   
 POSTCODE

17. Telephone Number [  ]

18. Email

**19. Details of services requested**

Item number	Description of item	No. of items	Fee per item
			\$
			\$
			\$
			\$
			\$

20. Date of requested service  /  /  to  /  /  Maximum period of 1 year can be requested

Please ensure all information is clearly written, complete and correct as missing or incorrect information, including clinical justification for request, may delay the processing of your request.

## Important information regarding providing services within the DVA prior approval guidelines

<b>2 consultations in one day</b>	Two consultations in one day can only be considered in exceptional circumstances. DVA may pay for two 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 for joint mobilisation immediately following surgery, or for acute pneumonia. The provision of two consultations in one day should not exceed five consecutive days.
<b>Extended consultations</b>	Extended consultations should only be used: <ul style="list-style-type: none"><li>• for treatment of two acute and unrelated areas;</li></ul> OR <ul style="list-style-type: none"><li>• for treatment of an acute condition when a chronic condition concurrently needs ongoing treatment.</li></ul> Treatment of related areas, or treatment of multiple, chronic musculo-skeletal conditions, should not be claimed as an extended consultation.
<b>Treatment for Lymphedema</b>	Only physiotherapists who hold appropriate post graduate certifications recognised by DVA can provide lymphedema treatment to entitled persons.
<b>Travel for treatment</b>	Where the entitled person needs to travel a significant distance for treatment because there is no closer practical provider consideration may be given to providing two consultations in one day.
<b>Referrals</b>	Please ensure the entitled person you are providing treatment to has a current referral in place. It is important to note that: <ul style="list-style-type: none"><li>• only one initial consultation can be provided on a 12 month referral</li></ul> AND <ul style="list-style-type: none"><li>• a new initial consultation must be provided each time a new referral is obtained, even where they are an existing client.</li></ul>

For further information on the guidelines for the provision of allied health services to an entitled person, please see the Notes for allied health providers on the DVA Website <http://www.dva.gov.au/providers/allied-health-professionals>