



**Australian Government**  

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**Department of Veterans' Affairs**

**NOTES FOR  
ALLIED HEALTH PROVIDERS  
SECTION 2(e)  
DIETITIANS**

This section of the Notes for Allied Health Providers must be read in conjunction with Section 1 – General

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**Providing dietetic services**

These Notes should be read in conjunction with Notes for Allied Health Providers Section One: General.

1. Only a dietitian who is an Accredited Practising Dietitian and has been issued with a provider number by Services Australia at the time of service is eligible to provide services to entitled persons.

**Prior financial authorisation**

2. The specific item numbers requiring prior financial authorisation are indicated by shading and an asterisk (\*) in the DVA *Dietitians Schedule of Fees*. Please refer to this document to identify items requiring prior approval. Fee schedules are available at:  
<https://www.dva.gov.au/providers/notes-fee-schedules-and-guidelines/fee-schedules/dental-and-allied-health-fee-schedules>
3. For information on how to seek prior financial authorisation refer to Notes for Allied Health Providers Section One: General [clauses 51-56].

**Treatment thresholds/limits**

4. For information on treatment thresholds and limits refer to Notes for Allied Health Providers Section One: General [clauses 20-23].

**Treatment Cycle**

5. For information on the treatment cycle arrangements, which came into effect on 1 October 2019, refer to Notes for Allied Health Providers Section One: General.

**Extended consultations (Items DT10-15 and DT30-35)**

6. The extended consultation items should be used when treating an entitled person who presents with difficult or complex clinical needs. The circumstances under which you are able to claim an extended consultation are as follows:
  - for treatment of a separate acute condition when a chronic condition needs ongoing treatment; or
  - for treatment of a complex condition which takes in excess of 60 minutes for an initial consultation, or 30 minutes for a subsequent consultation.
7. A condition is defined as “complex” when management of the condition is compounded by the presence of one or more of the following:
  - unstable or deteriorating condition;
  - development of complications; or
  - co-morbidities are present.

**Assessments (items DT40-45)**

8. These items may be claimed where administered. Examples of assessments include:
- bioimpedence assessment;
  - computerised dietary analysis, when appropriate, performed outside the consultation; and
  - detailed anthropometric assessment, beyond those measurements usually performed in a routine consultation.

**Restrictions on services**

9. While all dietetic services claimed must be in accordance with the patient's clinical need, the following specific restrictions exist:
- only one initial consultation can be claimed per treatment cycle.
  - a subsequent consultation cannot be provided on the same day as an initial consultation is claimed for the same client;
  - only one subsequent consultation item per patient can be provided each day; and
  - an assessment or menu item can be provided on the same day as any initial or subsequent consultation for the same patient if the services are over and above usual services performed within the consultation. An assessment or menu item can also be provided on a day when a consultation item is not provided.

**Prescription of nutritional supplements and/or thickeners**

10. Dietitians are able to prescribe nutritional supplements and thickeners to entitled persons who have a clinical need for them. When prescribing thickeners, you should ensure that a speech pathology assessment is carried out.
11. All nutritional supplements and thickeners are accessed under the Repatriation Pharmaceutical Benefits Scheme (RPBS). If you are unsure which supplements and/or thickeners may be accessed under the RPBS, please contact the Veterans' Affairs Pharmaceutical Advisory Centre (VAPAC). Refer to Notes for Allied Health Providers Section One: General [clause 153] for contact details.
12. The procedure for accessing items under the RPBS is as follows:
- clinical recommendations for the supply of nutrition supplements and/or thickeners should be faxed to VAPAC [see Notes for Allied Health Providers Section One: General clause 128 for contact details] and the entitled person's Medical Practitioner using the Request for Nutritional Supplementation form ([D9165](#))
  - your recommendation needs to include details of the product required, including daily and monthly usage, number of repeats, diagnosis of the problem requiring nutrition supplements and/or thickeners and date of next review;

- the Medical Practitioner completes a prescription based on this recommendation and contacts VAPAC for an approval authority; and
- after approval, the entitled person collects the script from their Medical Practitioner, and has it filled at the local pharmacy.

### **Rehabilitation Appliances Program**

13. Dietitians are recognised prescribers of certain items relating to enteral feeding equipment under DVA's Rehabilitation Appliances Program (RAP). When utilising the RAP scheme, prescribers must issue the RAP item prescription to the appropriate contracted supplier. You should contact the RAP section for more information. Refer to Notes for Allied Health Providers Section One: General [clause 153] for contact details.

### **Out of rooms loading**

14. An out of rooms loading is automatically added to each consultation not performed in rooms when the claim is processed by Services Australia. This item forms part of the fee schedule and is indexed annually.