

Health Fund News

AHM – Australian Health Management

They are now paying rebates for telehealth consultations for Nutrition on a permanent basis.

HCF – They advise that the database issue has been resolved but there may be gaps in registration for some providers due to the complexity of the system. Clients can resubmit invoices for assessment.

Defence Health – has requested ATMS to confirm the following to providers active with Defence Health:

1. Defence Health Fund Rules do not permit the payment of benefits if the treated member is a partner, dependent, parent, sibling, or business partner of the servicing provider.
2. By definition, a provider can only perform one initial consultation with a member. Initial consultations attract a higher benefit than a subsequent consult. Providers who charge multiple initial consults receive higher payments from the fund than they should. Please remind your members that only one 'initial consult' is allowed for any patient per condition. Defence Health will seek reimbursement for any overpayments made due to incorrect billing.
3. Over the next 12 months Defence Health wants to build a better understanding of how different practices service members. Defence Health may ask providers to share information and analyse claims data. If Defence Health observes any unusual claiming behaviour, they will notify the provider and may arrange a site visit or audit.

Medibank and AHM: Changes to billing standards

ATMS, along with all other provider associations, has been advised that Medibank and AHM will no longer accept handwritten accounts from 1 April 2021.

From 1 April 2021 full or partial handwritten invoices or receipts will not be accepted by Medibank and AHM.

If providers do not comply with this notice by 1 April 2021, their status as a recognised provider of Medibank and AHM may be reviewed and they may be suspended or cancelled.

Members have until 1 April 2021 to move to electronically issued invoices, through email or print. Invoices must meet Medibank requirements for Ancillary Billing Standards. These details are on our website here:

<https://www.atms.com.au/health-funds/health-fund-terms-conditions/>

BUPA: Revised Ancillary Provider Terms

BUPA has updated its Ancillary Provider Terms, and these will come into effect from 1 February 2021. These Terms will apply to all ATMS members who are recognised and lodge treatment claims with Bupa. These details are on our website here:

<https://www.atms.com.au/health-funds/health-fund-terms-conditions/>

All health funds: Clinic telephone numbers

Please update your clinic telephone number/s with ATMS. Claims will be rejected if no telephone number is available at your active clinic location/s. This is one of the requirements of the health funds.

Health Funds

ATMS is a 'professional organisation' within the meaning of section 10 of the Private Health Insurance Accreditation Rules 2011. This potentially allows ATMS accredited members to be recognised as approved providers by the various private health funds. Approved health fund provider status is, however, subject to each individual health fund's eligibility requirements.

Consequently, membership of ATMS does not automatically guarantee provider status with all health funds. Please also note that several health funds do not recognise courses done substantially by distance education, or qualifications obtained overseas.

Additional requirements for recognition as a provider by health funds include:

- *Clinic Address (Full Street Address and telephone number must be provided – Please note that some health funds may list your clinic address on their public websites)*
- *Current First Aid Cert (HLTAID003 or HLTAID011)*
- *Current Professional Indemnity Insurance (some health funds require specific minimum cover amounts. Please refer to the individual health fund terms and conditions for further information)*
- *Compliance with the ATMS Continuing Education Policy along with any additional continuing education requirements stipulated by the health fund*
- *Current National Registration (where applicable)*
- *Compliance with the Terms and Conditions of Provider Status with the individual health funds.*

ATMS must have current evidence of your first aid and insurance on file at all times.

ATMS now recommends all members renew First Aid or insurance at least 14 days before the expiry date. It is important that you notify ATMS of these changes promptly so that the information is updated to the health funds and claims can continue to be paid out to your clients without interruption.

Additional Information:

If you are treating minors in your clinics, health funds require a copy of your Working with children/Working with vulnerable people card.

Please forward these details to ATMS so this information is updated to the health funds.

When you join or rejoin ATMS, or when you upgrade your qualifications, you will need to fill out the ATMS Health Fund Application and Declaration Form available on the ATMS website. Once this is received, along with any other required information for health fund eligibility assessment, details of eligible members are sent to the applicable health funds on their next available listing. The ATMS office will also forward your change of details, including clinic address details to your approved health funds on their next available list. Please note that the health funds can take up to one month to process new providers and change of details as we are only one of many health professions that they deal with.

Lapsed membership, insurance or first aid will result in a member being removed from the health funds list.

As health funds change their provider eligibility requirements at any given time, upgrading qualifications may be necessary to be re-instated with some health funds.

TERMS AND CONDITIONS OF PROVIDER STATUS

Many of the Terms and Conditions of Provider Status for the individual health funds are located on the ATMS website. For the Terms and Conditions for the other health funds, it will be necessary to contact the health fund directly.

BEING A PROVIDER IMPLIES ACCEPTANCE OF THE TERMS AND CONDITIONS FOR THE HEALTH FUNDS.

Please note that whilst there is no law or regulation requiring patient clinical notes to be taken in English, many of the major health funds do require patient clinical notes to be taken in English. **Failure to do this will be a breach of the Health Funds Terms and Conditions and may result in the practitioner being removed as a provider for that health fund.**

For health funds to rebate on the services of Accredited members, it is important that a proper invoice be issued to patients. The information which must be included on an invoice is also listed on the ATMS website. It is ATMS policy that only Accredited members issue their own invoice. An Accredited member must never allow another practitioner, student or staff member to use their provider details, as this constitutes health fund fraud. Misrepresenting the service(s) provided on the invoice also constitutes health fund fraud. Health fund fraud is a criminal offence which may involve a police investigation and expulsion from the ATMS Register of Members.

It is of note that the health funds require practitioners to be in private practice. Some health funds will not recognise claims where accommodation, facilities or services are provided or subsidised by another party such as a public hospital or publicly funded facility. Rebates are only claimable for the face to face consultation (not the medicines or remedies); however this does not extend to mobile work including markets, corporate or hotels.

MOBILE SERVICES ARE NOT RECOGNISED FOR HEALTH FUND REBATES.

Health Funds that do not allow mobile services for rebates are: AHM, ARHG, BUPA, HCF and Medibank.

ONLINE OR PHONE CONSULTATIONS ARE NOT RECOGNISED FOR HEALTH FUND REBATES.

Please be aware that whilst a health fund may indicate that they provide a rebate for specific modalities, this rebate may only be claimable if the client has the appropriate level of health cover with that fund and has not exceeded any limits on how much they are eligible to claim back over a certain period of time.

Please note : All health funds require minimum \$5 million Professional Indemnity Insurance & \$10 million for Public Liabilities Insurance for all Acupuncture & Chinese Herbal Medicine practitioners.

Australian Health Management (AHM)

Please note - details above regarding telehealth consultations.

Names of eligible ATMS members will be sent to AHM each month. AHM's eligibility requirements are listed on the ATMS website www.atms.com.au. ATMS members can check their eligibility by checking the ATMS website or by contacting the ATMS Office on 1800 456 855. Please contact AHM on 13 42 46 for your provider number.

Australian Regional Health Group (ARHG)

This group consists of the following health funds:

- ACA Health Benefits Fund Ltd
- CUA Health Limited
- Defence Health ▼
- GMHBA ▼ (*Including Frank Health Fund & Health.com.au*)
- HBF (*Including GMF Health*) ▼
- Health.com.au
- Health Care Insurance Limited
- Health Partners
- HIF WA
- Hunter Health (*previously known as Cessnock DHB*)
- Latrobe Health Services (Federation Health)
- Mildura District Hospital Fund
- AIA Health ▼ (*previously known as MyOwn Health*)
- Navy Health Fund
- Nurses & Midwives Health
- Onemedifund
- Peoplecare Health Insurance
- Phoenix Health Fund
- Police Health Fund (*Including Emergency Services*)
- Queensland Country Health Fund Ltd
- Railway and Transport Fund Ltd
- Reserve Bank Health Society
- St Luke's Health
- Teachers Health
- Teachers Union Health
- Transport Health
- Westfund

▼ Special condition applies for Remedial Massage

Details of eligible members, including member updates are sent to ARHG by ATMS monthly. The details sent to ARHG are your name, address, telephone and accredited discipline(s). These details will appear on the ARHG websites. If you do not wish your details to be sent to ARHG, please advise the ATMS office on 1800 456 855.

The ARHG provider number is based on your ATMS number with additional lettering. To work out your ARHG provider number please follow these steps:

- 1 Add the letters AT to the front of your ATMS member number
- 2 If your ATMS number has five digits go to step 3. If it has two, three or four digits, you need to add enough zeros to the front to make it a five digit number (e.g. 123 becomes 00123).
- 3 Add the letter that corresponds to your accredited modality at the end of the provider number;
 - A Acupuncture
 - C Chinese Herbal Medicine
 - U Nutrition

If ATMS member 123 is accredited in Acupuncture, the ARHG provider number will be AT00123A.

- 4 If you are accredited in several modalities, you will need a different provider number for each modality (e.g. if ATMS member 123 is accredited for Chinese Herbal Medicine and Nutrition, the ARHG provider numbers are AT00123C and AT00123U).

ARHG - REMEDIAL MASSAGE AND CHINESE MASSAGE

Remedial Massage and Chinese Massage therapists who graduated after March 2002 must hold a Certificate IV or higher from a registered training organisation.

Members who are accredited for Remedial Massage or Chinese Massage, will need to use the following letters.

- M Massage Therapy
- R Remedial Therapy

The letter at the end of your provider number will depend on your qualification, not the modality in which you hold accreditation*. All members who meet the ARHG eligibility requirements, who hold a Diploma of Remedial HLT50302, HLT50307 or HLT52015 or a Diploma of Chinese Remedial Massage HLT50102, HLT50107 or HLT50112 will be able to use both the 'M' and 'R' letters. It is recommended to use the 'R' as often as possible, but as not all health funds under ARHG cover 'Remedial Therapy', it will be necessary to use the 'M' at the end of the provider number for those funds only. All other eligible Remedial Massage Therapists who do not hold the Diploma of Remedial HLT50302, HLT50307 or HLT52015 or a Diploma of Chinese Remedial Massage HLT50102, HLT50107 or HLT50112 are required to use the 'M' at the end of their provider number.

**Members accredited for Remedial Therapies and approved for ARHG for this modality under their previous criteria will continue to be recognised under Remedial Therapy and will be fine to use the 'R' in their provider number. Should members in this situation lapse membership, first aid or insurance etc they will then be required to meet the current ARHG criteria.*

Please note : as of 1 July 2020, ARHG requires all providers to have a minimum of \$2 million Professional Indemnity Insurance & \$10 million for Public Liabilities for Nutrition and remedial massage.

HBF HEALTH – Hypnotherapy

Names and details of eligible ATMS members will be sent to HBF for this modality only each month.

Australian Unity

Names and details of eligible ATMS members will be sent to Australian Unity each month. ATMS members will need to contact Australian Unity on 1800 035 360 to register as a provider, after filling out the Australian Unity Application Form located on the ATMS website to activate their provider status. This only needs to happen the first time. The provider eligibility requirements for Australian Unity are located on the ATMS website www.atms.com.au. Your ATMS number can be used as your Provider Number, or you can contact Australian Unity for your Australian Unity generated Provider Number.

Please note that Australian Unity requires Professional Indemnity Insurance (to at least \$2 million) and Public Liability Insurance (to at least \$10 million).

BUPA

Names and details of eligible ATMS members will be sent to BUPA monthly. The provider eligibility requirements for BUPA are located on the ATMS website www.atms.com.au. The Provider eligibility requirements include an IELTS test result of an overall Band 7 or higher for TCM qualifications completed in a language other than English. BUPA will generate a Provider Number after receiving the list of eligible practitioners. BUPA advises ATMS of your Provider Number and ATMS will then advise those members directly.

Please note that BUPA requires all providers to have a minimum of \$2 million Professional Indemnity Insurance. Also, they now have a restriction of maximum four (4) clinic addresses for all modalities.

CBHS Health Fund Limited

Names and details of eligible ATMS members will be sent to CBHS each month. The provider eligibility requirements for CBHS are located on the ATMS website www.atms.com.au. Your ATMS number will be your Provider Number.

Please note: CBHS now no longer accredit Nutrition as of 1 April 2019.

Doctors Health Fund

Names and details of eligible ATMS members will be sent to Doctors Health Fund each month. Please note that Doctors Health Fund only covers Remedial Massage. The provider eligibility requirements for Doctors Health Fund are located on the ATMS website www.atms.com.au. Your ATMS number will be your Provider Number.

HCF

Names and details of eligible ATMS members will be sent to HCF on a fortnightly basis. The provider eligibility requirements for HCF are located on the ATMS website www.atms.com.au. HCF do not issue provider numbers nor use your ATMS number as your provider number. They do however require your ATMS membership details, including your ATMS number, to be clearly indicated on all invoices and receipts issued.

Please note: HCF requires all providers to have a minimum of \$2 million Professional Indemnity Insurance. Also, they now no longer accredit Nutrition as of 1 April 2019.

Medibank Private

Names and details of eligible ATMS members will be sent to Medibank Private on a fortnightly basis. The provider eligibility requirements for Medibank Private are located on the ATMS website www.atms.com.au. Medibank Private requires Clinical Records to be taken in English. Medibank Private generates Provider Numbers after receiving the list of eligible practitioners from ATMS. Medibank Private sends these provider numbers directly to ATMS. ATMS will then forward this information to the provider. Please note that Medibank has placed a restriction of up to a maximum 3 clinic addresses that will be recognised for Remedial Massage. There are no restrictions on the number of recognised clinics for other modalities.

Please refer to our website for updated recognition criteria and standards for Medibank.

NIB including APIA, AAMI Health Insurance, Qantas Health Insurance & GU Health

Names and details of eligible ATMS members will be sent to NIB on a weekly basis. The provider eligibility requirements for NIB are located on the ATMS website www.atms.com.au. NIB does accept overseas Acupuncture and Chinese Herbal Medicine qualifications which have been assessed as equivalent to the required Australian qualification by Vetassess. Your ATMS Membership Number will be your provider number.

HICAPS

ATMS members who wish to activate these facilities need to register directly with HICAPS. *HICAPS do not cover all health funds and modalities. Please go to www.hicaps.com.au or call 1800 805 780 for further information.*