



1. Introduction

- 1.1. These Operational Procedures form part of your contract with Medibank Health Solutions Pty Ltd (**MHS**). Please familiarise your staff with them. Your practice must comply with them when providing services to Australian Defence Force (**ADF**) Entitled Personnel (**EP**).
- 1.2. Medibank may change these Operational Procedures from time-to-time and we will advise you by placing a notice together with an updated document on the provider section of our website at medibankhealth.com.au/garrisonhealthservices. You should regularly check this website for any such changes.

2. Entitled Personnel

- 2.1. Your ADF patients are known as 'Entitled Personnel' (**EP**).

3. ADF On-base Medical Officer

- 3.1. The Medical Officer (**MO**) at the ADF Health Centre will conduct the initial consultation with an EP and decide if further treatment or referral to another health or allied practitioner is necessary. If such further treatment is required, and there is no capacity to conduct this treatment on the ADF base, then the MO will ask Garrison Health Services (**GHS**) to make the appointment with the appropriate Off-base provider.
- 3.2. The MO is your contact point for the exchange of EP health information, approval of on-referrals and approval for further treatment.

4. How appointments are made with you

- 4.1. The GHS Central Appointments Team (**CAT**) schedules initial appointments with Medical Specialists, Allied Health practitioners and Dental practitioners.
- 4.2. The CAT will act as a central contact point for all initial appointments and general enquires. It will not exchange EP's health information unless it is necessary when making an appointment.
- 4.3. When the appointment is scheduled, please ensure that the CAT is informed of any special instructions that need to be passed on to the EP where relevant.
- 4.4. Usually once the CAT makes an initial appointment with you the EP will then be given your direct contact point for rescheduling or cancelling appointments.

5. Why the Referral Form is important

- 5.1. The Referral Form authorises the EP to see you for treatment. It will be completed by the referring MO, and will contain the Defence Approval Number (**DAN**), which you need to quote in all dealings with GHS about the EP.
- 5.2. An EP must bring a Referral Form and related health information (including relevant medical records) with them to all appointments with you. Should a Referral Form not be available at the time of EP attendance, please contact the CAT.
- 5.3. EP should only present without a Referral Form in an emergency.
- 5.4. You must ensure an EP has an approved Referral Form at the time of consultation as this form also serves as the approval for service provision. Given the importance of this form, if there is no Referral Form (and it is not an emergency), then GHS may not be able to pay you.
- 5.5. The Referral Form will usually specify the number of appointments that it authorises you to provide. If your treatment plan requires additional appointments, then you must obtain the approval of the referring MO to extend the validity of the referral before the existing number of referrals expire. You need to keep a written record of this approval. GHS reserves the right not to pay (or to recover payments made) for treatments provided in excess of a Referral Form if you are unable to prove that it was authorised.

6. If EP requires further treatment or an on-referral

- 6.1. Referrals for further treatment should only be made in accordance with currently accepted clinical protocols. If you need to refer an EP for further treatment you must provide to the specialist the DAN supplied on the original referral. A list of preferred suppliers for Pathology, Imaging, Radiology and Optical services are provided on the reverse page.
- 6.2. You must use reasonable efforts to ensure that all prescriptions you make are filled at the pharmacies On-base. Manufacturer samples of medicines, which are not otherwise routinely available to EP, must not be provided to EP without the prior approval of ADF.

7. Restricted services

- 7.1. Section 9 of the Terms and Conditions sets out what are the 'Restricted Services' that you cannot provide, except in exceptional circumstances.
- 7.2. If a Restricted Service is specifically requested by a MO in the original Referral Form then you are deemed to have the MO's approval for the purposes of clause 9.2(a) of the Terms and Conditions.
- 7.3. When requesting the MO's prior approval of a Restricted Service (under clause 9.2(a) of the Terms and Conditions), you must provide to the MO (and not Medibank) details of:
 - the proposed service;
 - the name, qualifications and expertise of the proposed service provider (for proposed referrals);
 - an estimated cost for the provision of the service (showing GST separately); and
 - the justification for the service being proposed.
- 7.4. If a Restricted Service is not requested on the original Referral Form, but you subsequently obtain the referring MO's approval to provide it, then you must keep a written record of this approval. GHS reserves the right not to pay (or to recover any payment made) for a Restricted Service if you are unable to prove that it was authorised (unless the exception in clause 9.2(b) of the Terms and Conditions applies).
- 7.5. If you provide or refer an EP for a Restricted Service without prior approval from the MO, then (for the purposes of clause 9.3 of the Terms and Conditions) you must contact the referring MO as soon as practicable and provide the details set out in paragraph 7.3 above, together with details of the:
 - EP's condition;
 - treatment plan; and
 - reason for proceeding without prior approval.
- 7.6. When invoicing GHS for a Restricted Service, please clearly indicate on the invoice that you have received prior MO approval for this service or you have contacted the referring MO as soon as practicable and provided relevant details if paragraph 7.5 above and paragraph 9.2(b) of the Terms and Conditions applies, to prevent any delays with processing the invoice.

8. If EP change, cancel or do not attend their appointment

- 8.1. There will be times when an EP is unable to attend, or needs to cancel or reschedule an appointment. Where an EP needs to reschedule or cancel an appointment, these arrangements are to be made directly between you and the EP.
- 8.2. If an EP fails to attend an appointment, you may invoice GHS for the service but explicitly mark the invoice as 'Did Not Attend'.
- 8.3. Failure to attend fees should represent the service fee only.

9. Invoicing requirements

- 9.1. Submit your invoice via:

Email: garrison.offbase@medibank.com.au

Fax: 1300 633 227

Mail:

Garrison Health Services
C/- Medibank Health Solutions
PO Box 9999
Melbourne VIC 3001

Tax invoices are to be raised where applicable (including GST).

9.2. The following information is required on all invoices:

Your details	Service details	Other details
ABN	EP's first name, last name	Date of goods/service/treatment
ACN	EP's date of birth	Cost of goods/service/treatment
First name, last name	EP's PMKeyS number	Separately identify the application of GST
Business/practice name	Defence Approval Number (DAN)	If registered for GST, your invoice must be a tax invoice*
Provider number	Referring ADF MO and JHC details	For no shows, mark the invoice as 'Did Not Attend'
Street and postal address	Description of the services/treatment provided, including applicable GHS numbers, and other relevant item numbers such as ADA item number for dental.	For emergencies, where you may not have a Referral Form and all of the required invoice details, clearly mark the invoice as 'Emergency Treatment'.
Phone/fax/email	MBS number	Indicate if any Restricted Treatment has been provided and if so, whether with or without prior approval from the MO.
	ADA item (if required)	

*While Medibank considers that GST will be payable on the services you provide under this contract, GST is the responsibility of the provider and we recommend that you obtain independent advice regarding your obligation to register for GST and your tax liabilities generally.

9.3. Payment will be made upon receipt of a valid, correctly rendered invoice (with GST recorded separately) in accordance with Section 5 of the Terms and Conditions.

9.4. You must repay (within 30 days of a request from GHS) any amount paid to you that GHS determines you're not entitled to. GHS may alternatively deduct any such amount from any future payments which it would have made to you.

9.5. GHS will not pay you if you submit your invoice later than one year after you provide the underlying treatment.

10. Billing for treatment by another practitioner

10.1. You must not allow another person that is different to the practitioner specified in the referral to perform services and invoice GHS or the ADF using your Provider Number (with the exception of services performed by Dental Therapists, Hygienists and Oral Health Therapists and where the law permits this practice).

11. Health information reporting

11.1. As part of treating an EP, you must provide the reports set out below in the timeframes specified. The cost of you preparing the report is included in your service charges (unless a comprehensive report is specifically requested by the MO, in which case the report will be treated as a Restricted Service, as outlined in Section 7).

11.2. If you do not provide a required report, and without the report the EP's operational readiness is affected, then GHS reserves the right not to pay (or recover payment for) for the underlying treatment.

11.3. You must ensure that any Personal Information (including Health Information) that is collected by you or on your behalf or passes through or is stored on your practice management system is managed in accordance with the *Privacy Act 1998* (Cth) and relevant State and Territory Privacy legislation which regulate the management of personal or health information (Privacy Laws).

11.4. All referrals, or requests for reports, must be made via the treating MO at the EP's base. Any results or reports arising from such a referral must only be provided to the referring health practitioner and not to any other person.

11.5. Please ensure all reports are delivered back to the referring practitioner via the fax or postal details provided on the referral. Note that sending reports via email is not currently accepted by the ADF as a secure method of transferring information that is medical-in-confidence.

11.6. You must use reasonable efforts to ensure that reports contain the EP's Identification Number (EPID) or DAN, so that ADF Health Centres can effectively match the incoming report with the referring Medical Officer.

Service provider	Reporting requirements and timeframe
Medical Specialists	After each consultation with an EP you must provide a written report to the referring MO within five business days .
Allied Health providers	A report, including a treatment plan, is required within five business days of your initial consultation with the EP. A further report is required within five business days after the completion of each set of six visits (if there is relevant information to communicate to the referring MO), and when treatment is complete.
Dentists	A report, including a treatment plan, is required within five business days of your initial consultation with the EP. A final report is also required within five business days of the EP completing the treatment plan. Additional reports may be requested as required.

12. Advertising

- 12.1. Other than for clinical reasons, you must not issue, display or communicate any targeted advertising or marketing material directed at EP and/or their families on JHC facilities regarding your products or services.
- 12.2. You may send any advertising or marketing material to an EP via post or email only after receiving their express written consent to do so.

13. GHS's preferred providers for Pathology, Imaging and Radiology

- 13.1. GHS have included a list of partners and preferred providers below.
- 13.2. If you perform Pathology testing and analysis yourself, you must comply with NATA standards and ensure that the Pathology facilities and laboratories you use are accredited with NATA. In addition, if you perform prohibited substance testing, you must collect and handle specimens under the supervision and chain of custody procedures described in AS/NZS 4308:2008 (Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine), and AS 4760:2006 (Procedures for specimen collection and the detection and quantitation of drugs in oral fluid).

State	Pathology – SDS	Imaging and Radiology – I-MED	Optical – Specsavers
Queensland	QML Pathology	Southern X-Ray Clinics, Clarke & Robertson Radiology, Wesley Medical Imaging, Queensland X-Ray, Cairns Diagnostic Imaging	Specsavers
New South Wales	Laverty Pathology	Ultrascan Radiology, South East Radiology, North Shore Radiology, Hunter Imaging Group, Illawarra Radiology Group, Castlereagh Imaging, Penrith Imaging	Specsavers
Australian Capital Territory	Laverty Pathology	National Capital Diagnostic Imaging	Specsavers
Victoria	Dorevitch Pathology	MIA Victoria, Regional Imaging Limited, Goulburn Valley Imaging	Specsavers
Tasmania	Dorevitch Pathology	Regional Imaging Tasmania	Specsavers
South Australia	Abbott Pathology	Dr Jones & Partners Medical Imaging	Specsavers
Western Australia	Western Diagnostic	Perth Radiological Clinic	Specsavers
Northern Territory	Western Diagnostic	NT Medical Imaging, Katherine Diagnostic Imaging	Specsavers

14. Privacy

- 14.1. You must not transfer any Personal Information held in relation to your provision of services to EP outside Australia, or allow any person outside Australia to have access to, use or disclose Personal Information that you hold without the written prior consent of GHS. 'Personal Information' has the same meaning as in section 6 of the Privacy Act 1988 (Cth), that is, information or an opinion (including information or an opinion forming part of a database) whether true or not, and whether recorded in a material form or not, about a natural person whose identity is apparent, or can reasonably be ascertained, from the information or opinion. You must promptly inform MHS as soon as you become aware or suspect that there has been a breach of Privacy Laws or of this prohibition.

15. Glossary

ADF means the Australian Defence Force.

CAT means the Medibank Central Appointments Team, it acts as a central contact point for all initial appointments, invoicing and general enquires you may have.

EP means an Entitled Personnel, who are your ADF patients.

GHS means Garrison Health Services.

JHC means Joint Health Command.

MHS means Medibank Health Solutions Pty Ltd.

MO means the ADF On-base Medical Officer, who effectively acts as the ADF GP.

For further information:

Call: **1300 126 420**

Email: adfenquiries@medibank.com.au

Go to: medibankhealth.com.au/garrisonhealthservices