



HICAPS Medicare Australia Easy Claim

user guide for specialist,
ancillary health care and
dental service providers



HICAPS Pty Ltd ABN 11 080 688 866
68548A1008

medicare
easyclaim

table of contents

1.	Medicare Australia Easyclaim provider setup	4
1.1	adding a new provider	4
1.2	changing and deleting providers	8
2.	Medicare merchant setup	9
2.1	setting up EFTPOS to Medicare	9
3.	specialist, ancillary health care and dental claims	10
3.1	fully paid claim	10
3.2	part paid claim	16
3.3	un-paid claim	22
3.4	bulk bill claim	28
4.	HICAPS Easyclaim special features	33
5.	using your provider number for other claim types	33
6.	item number descriptor programming	34
6.1	adding new item numbers	34
6.2	editing item numbers	35
6.3	delete item numbers	37
6.4	delete all item numbers	38
6.5	print all item numbers	39
7.	reports and settlement	41
8.	error screens and conditions	41
8.1	errors for rebate transactions	41
8.2	rebate failed	41
8.3	decline Medicare Easyclaim transaction	42
8.4	error codes and actions	42
8.5	bulk bill claims cancelled by the practice or patient	42
8.6	general	42
9.	helpdesk telephone numbers	43

1. Medicare Australia Easyclaim provider setup

Note: To add providers you will need to contact HICAPS in writing. A **'Change of Practice Details' form** will need to be completed and sent to HICAPS. This form is available from the HICAPS website www.hicaps.com.au or from the HICAPS Helpdesk on **1300 650 852**. You will receive notification from HICAPS in writing once the providers have been registered.

Merchant **Function 54** is used for Provider Setup.

1.1 adding a new provider

step 1

Press the **[FUNCTION]** key.

step 2

Enter **[5] [4]** and press **[ENTER]**.

step 3

Select a Not Assigned provider field by entering the number and pressing **[ENTER]** or by scrolling up or down to highlight the Not Assigned provider field and pressing **[ENTER]**.

step 4

Enter the provider's name by pressing 'sel' and using the **[1]** to **[9]** keys.

To select an alpha character entry either press the 'sel' button on the left hand side of the screen or press the Alpha **[#]** key on the keyboard.

Pressing the Alpha **[#]** key again will change from upper case to lower case and symbols. E.g.

PROVIDER NAME		
Dr J_____		
sel 1_QZ	2ABC	3DEF
4GHI	5JKL	6MNO
7PRS	8TUV	9WXY
0\+?		CLEAR

PROVIDER NAME		
Dr Jones_____		
sel 1_qz	2abc	3def
4ghi	5jkl	6mno
7prs	8tuv	9wxy
0.,"		CLEAR

After entering the provider's name press the **[ENTER]** key.

SELECT PROVIDER	
1. Dr Smith	A
2. NOT ASSIGNED	
3. NOT ASSIGNED	
4. NOT ASSIGNED	
5. NOT ASSIGNED	
6. NOT ASSIGNED	

PROVIDER NAME		
sel _____		
1	2	3
4	5	6
7	8	9
0		CLEAR

step 5

Key the provider number for this location then press **[ENTER]**. This is the 8-character number supplied by Medicare or Medibank Private. If your provider number is shorter than 8 characters you will need to include leading 0's to make up 8 characters. Alpha character entry is entered the same as for entering the provider's name.

PROVIDER NUMBER		
123456AJ		
sel 1	2	3
4	5	6
7	8	9
0		CLEAR

step 6

Select the Merchant name for processing EFTPOS payments for this provider from the list presented then press **[ENTER]**. The list can contain up to 26 merchant details so please ensure you select the correct merchant from the list.

SELECT MERCHANT	
▲	1. A – Smith St Practice
	2. B – Dr Smith
	3. C – Dr Jones
	4. D – Dr Brown
	5. E – Dr White
▼	6. F – Dr A. Smith

step 7

This option will enable the terminal to prompt to automatically start an EFTPOS transaction for the gap amount. Select the appropriate option for this provider.

PROVIDER SETUP	
CLAIM TO SALE ENABLED	
ENABLE	DISABLE

CURRENT

step 8

Note: If a Claim to Sale is disabled the Claim Deposit is not displayed. This option will enable the terminal to prompt for deposits (optical only).

PROVIDER SETUP	
CLAIM TO DEPOSIT DISABLED	
ENABLE	DISABLE

step 9

Select Item memory enabled or disabled for this provider. Item memory enables the terminal to recall the last amount entered for this item number.

PROVIDER SETUP	
ITEM MEMORY DISABLED	
ENABLE	DISABLE

step 10

Clear item memory will clear all amounts stored for item numbers.

PROVIDER SETUP

CLEAR ITEM MEMORY?

NO YES

step 11

Confirmation that the item memory will be cleared if Yes was selected at Clear Item Memory.

PROVIDER SETUP

ITEM MEMORY WILL BE CLEARED!

NO YES

step 12

Select if you want automatic HICAPS settlement enabled for this provider.

PROVIDER SETUP

HICAPS AUTO SETTLE DISABLED

ENABLE DISABLE

step 13

Select if you want a HICAPS transaction listing to print when automatic settlement takes place.

PROVIDER SETUP

HICAPS SETTLE TXN LISTING DISABLED

ENABLE DISABLE

step 14

Key the four digit security password for this provider then press [ENTER]. It is used to protect access to the provider table.

PROVIDER SETUP

PROVIDER PASSWORD <NO PASSWORD SET>

← [] CLEAR

step 15

This option will tell the terminal to prompt for either a clinical code or tooth number, or no prompt at all. Select whichever is appropriate for this provider, or press [ENTER] to accept the highlighted option.

SELECT PROMPT OPTION

▲ 1. CLINICAL CODE

2. TOOTH NUMBER

3. NO PROMPT ▼

step 16

This option lets you select the type of provider you are for processing Medicare Australia Easyclaim transactions. Select whichever is appropriate for this provider, or press [ENTER] to accept the highlighted option.

If you do not want to process Medicare Australia Easyclaim transactions select option 6. Not applicable.

ENTER PROVIDER TYPE

1. GENERAL PRACTICE

2. OPTOMETRICAL

3. SPEC/AH/DENT

4. DIAGNOSTIC

5. PATHOLOGY

6. NOT APPLICABLE ▼

step 17

This option when completed will pre-populate the Payee Provider Number when completing a claim. Use the 0-9 keys to enter provider number and press [ENTER] or press [ENTER] to bypass.

PROVIDER NUMBER

123456AJ

sel

1	2	3
4	5	6
7	8	9
0		

← CLEAR

step 18

The provider has now been added, a confirmation receipt will be printed and the terminal will display a provider summary, press [ENTER] to finish.

1.2 changing and deleting providers

Note: To alter provider details you will need to contact HICAPS in writing. A 'Change of Practice Details' form will need to be completed and sent to HICAPS. This form is available from the HICAPS website www.hicaps.com.au or from the HICAPS Helpdesk on 1300 650 852.

step 1

Press the **[FUNCTION]** key.

step 2

Enter **[5] [4]** and press **[ENTER]**.

step 3

Select the provider that you want to change by entering the number and pressing **[ENTER]** or by scrolling up or down to highlight the provider and pressing **[ENTER]**.

Note: The password that was keyed when the provider was originally entered into the terminal is required to amend any of the provider details.

step 4

The Provider summary screen will be shown, use the down arrow to go to page 3 and press **[CLEAR]** to enable you to modify the provider's details.

step 5

Once you have entered the modify provider function follow the steps used for adding a provider.

SELECT PROVIDER	
1. Dr Smith	A
2. NOT ASSIGNED	
3. NOT ASSIGNED	
4. NOT ASSIGNED	
5. NOT ASSIGNED	
6. NOT ASSIGNED	

PROVIDER SUMMARY	
PROV	Dr Smith
PROV NUM	123456AJ
MID	Dr Smith
CLAIM TO SALE	ENA
CLAIM DEPOSIT	DIS
ITEM MEMORY	DIS
AUTO SETTLE	ENA

PROVIDER SUMMARY	
SETTLE TXN LIST	DIS
PASSWORD	DIS
PROMPT	None
Press REPORTS	to Print
Press CLEAR	to Modify
Press ENTER	To Finish

2. Medicare merchant setup

2.1 setting up EFTPOS to Medicare

EFTPOS to Medicare is an option that enables the terminal to request a Medicare card after processing an EFTPOS transaction.

step 1

Press the **[FUNCTION]** key.

step 2

Enter **[5] [6]** and press **[ENTER]**.

step 3

Select option number 5. Medicare Options by pressing 5 and **[ENTER]** or scrolling down to highlight option 5 and pressing **[ENTER]**.

step 4

Select the merchant that you want EFTPOS to Medicare to be enabled/disabled by entering the number and pressing **[ENTER]** or by scrolling up or down to highlight the merchant and pressing **[ENTER]**.

step 5

Select option 1 and press **[ENTER]**.

step 6

Enable EFTPOS to Medicare by pressing the button to the left of enable on the screen or to disable pressing the button to the right of disable on the screen.

EFTPOS SETUP	
▲	1. SETTLEMENT
	2. AUTO SETTLE NAB
	3. AUTO SETTLE MEDI
	4. MERCHANT OPTIONS
	5. MEDICARE OPTIONS
▼	

SELECT MERCHANT	
▲	1. A – Smith St Practice
	2. B – Dr Smith
	3. C – Dr Jones
	4. D – Dr Brown
	5. E – Dr White
▼	6. F – Dr A. Smith

MEDICARE OPTIONS	
	1. EFTPOS TO MEDICARE

MEDICARE OPTION	
	EFTPOS to Medicare ENABLED
ENABLE	DISABLE

3. specialist, ancillary health care and dental claims

3.1 fully paid claim

step 1

After a successful payment transaction. Terminal will display:

To proceed with a Medicare Transaction, Press the Yes / **[ENTER]** key or press the No / **[CLEAR]** to finish.

Note: This screen will appear if EFTPOS to Medicare is enabled.

step 2

Swipe a Medicare Card or Key Enter the Medicare Card Number and press the **[ENTER]** key.

step 3

Key Patient IRN Number and press **[ENTER]** (the number to the left of the Patient's name on the Medicare card).

step 4

Select 1 or scroll to option 1 and press **[ENTER]** for a Fully Paid Claim.

Note: If a Medicare card is swiped from the idle screen transaction types 3 Un-Paid and 4 Bulk Billed will also be displayed.

step 5A

If the Patient and Claimant are the same person press **[ENTER]** and go to step 6A, otherwise press **[CLEAR]** and go to step 5B.

MEDICARE

Claim Medicare Rebate ?

NO YES

MEDICARE

Swipe or Key Medicare Card

FULLY PAID CLAIM

Enter Patient IRN Number

CLEAR

SELECT MEDICARE TXN

1. FULLY PAID

2. PART PAID

FULLY PAID CLAIM

Is Patient & Claimant the Same?

NO YES

step 5B

If the Patient and Claimant Medicare cards are the same key the Claimant IRN and press **[ENTER]** and go to step 6A. If the cards are different swipe the Claimant card and go to step 5C.

Note: You can also key enter the different claimant card number.

step 5C

Key Claimant IRN Number and press **[ENTER]**.

Note: This step will only be shown if a Claimant card is swiped at step 5B.

step 6A

Select the Provider by entering the number beside the provider's name and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the provider's name and go to step 7 or to key your Provider number using the keypad select option.

1. Enter Provider # and go to step 6B.

Note: To select an alternate provider type key your provider number and the provider type screen will be displayed.

step 6B

Enter your Servicing Provider number on the alphanumeric keypad and press **[ENTER]**.

step 6C

Select the Provider type by entering the number beside the provider type and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the type of service for the Provider.

Note: If you are a medical provider that is able to provide services for more than one provider (claim) type, the HICAPS solution enables you to do this without entering your provider number for all transactions. Refer to notes in section 5.

FULLY PAID CLAIM

Swipe / Key Claimant MED CRD Or Key Claimant IRN

FULLY PAID CLAIM

Enter Claimant IRN Number

CLEAR

SELECT/ENTER PROVIDER

1. Enter Provider #

2. B – Dr Smith

3. C – Dr Jones

4. D – Dr Brown

5. E – Dr White

6. F – Dr A. Smith

FULLY PAID CLAIM

Enter Servicing Provider Number

CLEAR

ENTER PROVIDER TYPE

1. GENERAL PRACTICE

2. OPTOMETRICAL

3. SPEC/AH/DENT

4. DIAGNOSTIC

5. PATHOLOGY

step 7

Key referring provider number and press [ENTER].

Note: If no referring provider number is required press [ENTER] to go to step 10.

FULLY PAID CLAIM

Enter Referring Provider Number

← CLEAR

step 8

Key referral date and press [ENTER].

FULLY PAID CLAIM

Enter Referral Date

← CLEAR

step 9

Select the Referral Period Code by entering the number beside the Code and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the Referring Period Code and go to step 11A.

REF PERIOD CODE

1. S - Standard

2. I - Indefinite

▼

step 10

Select the Referral Override by entering the number beside the Code and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the Referring Override.

REF OVERRIDE CODE

1. N - Not Applicable

2. L - Lost

3. E - Emergency

▼

step 11A

Select the Item Number by SCROLLING or keying the Item Number and pressing [ENTER] and go to step 12 or key an Item not listed, go to step 11B.

SELECT ITEM _____

23. STD CONSULT

3. BRIEF CONSULT

36. LONG CONSULT

▼

step 11B

Enter the Item Number and press [ENTER].

ENTER ITEM

Enter Item Number

← CLEAR

step 11C

Enter the Item Number descriptor for the new item by using the alphanumeric key pad and press [ENTER].

Note: Pressing the [ENTER] key only will bypass this step and you can then program the description later using Function 41 as detailed in section 4.

ENTER ITEM

Enter Item [#] Description

← CLEAR

step 12

Press [ENTER] to accept consultation charge already set for the item or enter an alternative charge and press [ENTER].

FULLY PAID CLAIM

Item [#] [Item Descriptor]

← CLEAR

step 13

Press the [ENTER] key to accept current date or key in alternative date and press [ENTER].

FULLY PAID CLAIM

Enter Date of Service

← CLEAR

step 14

Select 1. Complete Claim by SCROLLING or keying 1 and pressing [ENTER] if the claim entry is finished and go to step 18, or

Select 2. Next Item by SCROLLING or keying 2 and pressing [ENTER] if another item needs to be entered and return to step 11A, or

Select 3. Extra Item Info by SCROLLING or keying 3 and pressing [ENTER] if Item Override Code and LSPN are required for the item already entered and go to step 15.

EXTRA SERVICE ?

1. COMPLETE CLAIM

2. NEXT ITEM

3. EXTRA ITEM INFO

▼

step 15

Select the Item Override Code by SCROLLING or keying the number next to the code and pressing **[ENTER]** or select 1. None to bypass this step.

ITEM OVERRIDE CODE	
1. NONE	
2. AP - Not Dupl Service	
3. AO - Not Norm Aftercar	
4. NC - Not for Compariso	

step 16

Enter the LSPN Number and press **[ENTER]**.

Note: Pressing the **[ENTER]** key only will bypass this step.

FULLY PAID CLAIM	
Enter LSPN Number	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 17

Select 1. Complete Claim by SCROLLING or keying 1 and pressing **[ENTER]** if the claim entry is finished and go to step 18, or

Select 2. Next Item by SCROLLING or keying 2 and pressing **[ENTER]** if another item needs to be entered and return to step 11A.

EXTRA SERVICE ?	
1. COMPLETE CLAIM	
2. NEXT ITEM	
3. EXTRA ITEM INFO	

step 18

Hand the terminal to the Claimant and ask them to press the YES / **[ENTER]** key to accept the rebate.

step 19A

If the Medicare claim has followed an EFTPOS payment.

Ask the Claimant if they would like the rebate processed back to the same account as the payment.

If they say Yes Press the **[ENTER]** key to rebate into the same DEBIT account and go to step 20, or press the **[CLEAR]** key to Rebate to a different Account and go to step 19B.

Note: This screen will only be displayed if “EFTPOS to Medicare” function is enabled for the merchant.

FULLY PAID CLAIM	
Benefit Rebate	
Benefit Amount	
\$x.xx	
Accept Rebate	
<input type="button" value="NO"/>	<input type="button" value="YES"/>

BENEFIT REBATE	
Rebate to the Same Account ?	
<input type="button" value="NO"/>	<input type="button" value="YES"/>

step 19B

To rebate to a different account / or if the Claim did not follow a payment transaction.

Swipe the claimant’s debit card.

REBATE	
SWIPE CUSTOMER CARD	

step 19C

Ask the Claimant which account they would like their rebate sent to, Cheque or Savings?

SELECT ACCOUNT	
<input type="button" value="CHEQUE"/>	
<input type="button" value="SAVINGS"/>	

step 19D

Hand the terminal to the Claimant and ask them to enter their PIN number and press **[ENTER]**.

MEDICARE REBATE	
TOTAL	\$42.02
KEY PIN AND ENTER	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 20

This screen will be displayed if the rebate was successful.

REBATE	
APPROVED	

step 21

Press **[ENTER]** to print a customer receipt.

RECEIPT	
DO YOU REQUIRE CUSTOMER COPY?	
<input type="button" value="NO"/>	<input type="button" value="YES"/>

3.2 part paid claim

step 1

After a successful payment transaction. Terminal will display:

To proceed with a Medicare Transaction, Press the Yes / **[ENTER]** key or press the No / **[CLEAR]** to finish.

Note: This screen will appear if EFTPOS to Medicare is enabled

step 2

Swipe a Medicare Card or Key Enter the Medicare Card Number and press the **[ENTER]** key.

step 3

Key Patient IRN Number and press **[ENTER]** (the number to the left of the Patient's name on the Medicare card).

step 4

Select 2 or scroll to option 2 and press **[ENTER]** for a Part Paid Claim.

Note: If a Medicare card is swiped from the idle screen transaction types 3 Un-Paid and 4 Bulk Billed will also be displayed.

step 5A

If the Patient and Claimant are the same person press **[ENTER]** and go to step 6A, otherwise press **[CLEAR]** and go to step 5B.

MEDICARE

Claim Medicare Rebate?

NO YES

MEDICARE

Swipe or Key Medicare Card

PART PAID CLAIM

Enter Patient IRN Number

← CLEAR

SELECT MEDICARE TXN

1. FULLY PAID

2. PART PAID

▼

PART PAID CLAIM

Is Patient & Claimant the Same?

NO YES

step 5B

If the Patient and Claimant Medicare cards are the same key the Claimant IRN and press **[ENTER]** and go to step 6. If the cards are different swipe the Claimant card and go to step 5C.

Note: You can also key enter the different claimant card number.

step 5C

Key Claimant IRN Number and press **[ENTER]**.

Note: This step will only be shown if a Claimant card is swiped at step 5B.

step 6A

Select the Provider by entering the number beside the provider's name and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the provider's name and go to step 7A or to key your Provider number using the keypad select option.

1. Enter Provider # and go to step 6B.

Note: To select an alternate provider type key your provider number and the provider type screen will be displayed.

step 6B

Enter your Servicing Provider number on the alphanumeric keypad and press **[ENTER]**.

step 6C

Select the Provider type by entering the number beside the provider type and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the type of service for the Provider.

Note: If you are a medical provider that is able to provide services for more than one provider (claim) type, the HICAPS solution enables you to do this without entering your provider number for all transactions. Refer to notes in section 5.

PART PAID CLAIM

Swipe / Key Claimant MED CRD Or Key Claimant IRN

PART PAID CLAIM

Enter Claimant IRN Number

← CLEAR

SELECT/ENTER PROVIDER

▲ 1. Enter Provider #

2. B - Dr Smith

3. C - Dr Jones

4. D - Dr Brown

5. E - Dr White

▼ 6. F - Dr A. Smith

PART PAID CLAIM

Enter Servicing Provider Number

← CLEAR

ENTER PROVIDER TYPE

1. GENERAL PRACTICE

2. OPTOMETRICAL

3. SPEC/AH/DENT

4. DIAGNOSTIC

5. PATHOLOGY

▼

step 7A

Press the NO / [CLEAR] key if no additional claim details are required and go to step 8.

Note: Press the YES / [ENTER] key if Account Reference number and/or Payee Provider details are required to be processed for this Patient’s claim, go to step 7B.

If payee provider number is entered in function 54 (refer section 1.1 step 17) step 7A will not be displayed.

PART PAID CLAIM

Additional Claim Data Required?

NO YES

step 7B

Key Account Reference Number – If required and Press [ENTER].

Note: Pressing the [ENTER] key only will bypass this step.

PART PAID CLAIM

Enter Acc Reference Number (optional)

[Input Field]

[Back Arrow] CLEAR

step 7C

Key Payee Provider number of the practitioner who is to be paid for the service. Only required if the payee provider is not the servicing provider.

Note: Pressing the [ENTER] key only will bypass this step. If payee provider number is entered in function 54 (refer section 1.1 step 17) step 7C will be pre populated with the payee provider number.

PART PAID CLAIM

Enter Payee Provider Number (optional)

[Input Field]

[Back Arrow] CLEAR

step 8

Key requesting provider number and press [ENTER].

Note: If no requesting provider number is required press [ENTER] to go to step 11.

PART PAID CLAIM

Enter Requesting Provider Number

[Input Field]

[Back Arrow] CLEAR

step 9

Key request date and press [ENTER].

PART PAID CLAIM

Enter Request Date

dd/mm/yy

[Back Arrow] CLEAR

step 10

Select the Referral Period Code by entering the number beside the Code and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the Referring Period Code and go to step 12A.

REF PERIOD CODE

1. S - Standard

2. I - Indefinite

▼

step 11

Select the Referral Override by entering the number beside the Code and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the Referring Override.

REF OVERRIDE CODE

1. N - Not Applicable

2. L - Lost

3. E - Emergency

▼

step 12A

Select the Item Number by SCROLLING or keying the Item Number and pressing [ENTER] and go to step 13 or key an Item not listed, go to step 12B.

SELECT ITEM _____

23. STD CONSULT

3. BRIEF CONSULT

36. LONG CONSULT

▼

step 12B

Enter the Item Number and press [ENTER].

ENTER ITEM

Enter Item Number

[Input Field]

[Back Arrow] CLEAR

step 12C

Enter the Item Number descriptor for the new item by using the alphanumeric key pad and press [ENTER].

Note: Pressing the [ENTER] key only will bypass this step and you can then program the description later using Function 41 as detailed in section 4.

ENTER ITEM

Enter Item [#] Description

[Input Field]

[Back Arrow] CLEAR

step 13

Press **[ENTER]** to accept consultation charge already set for the item or enter an alternative charge and press **[ENTER]**.

PART PAID CLAIM	
Item [#]	
[Item Descriptor]	
	\$55.00
	CLEAR

step 14

Press the **[ENTER]** key to accept current date or key in alternative date and press **[ENTER]**.

PART PAID CLAIM	
Enter Date of Service	
	26/08/08
	CLEAR

step 15

To accept the value displayed, press the **[ENTER]** key or enter the correct contribution amount and then press **[ENTER]**.

Note: If more than one item, apportion the contribution across all items.

PART PAID CLAIM	
Patient Contribution Amt	
	\$0.00
	CLEAR

step 16

Select 1. Complete Claim by SCROLLING or keying 1 and pressing **[ENTER]** if the claim entry is finished and go to step 20, or

Select 2. Next Item by SCROLLING or keying 2 and pressing **[ENTER]** if another item needs to be entered and return to step 12A, or

Select 3. Extra Item Info by SCROLLING or keying 3 and pressing **[ENTER]** if Item Override Code and LSPN are required for the item already entered and go to step 17.

step 17

Select the Item Override Code by SCROLLING or keying the number next to the code and pressing **[ENTER]** or select 1. None to bypass this step.

EXTRA SERVICE ?	
1. COMPLETE CLAIM	
2. NEXT ITEM	
3. EXTRA ITEM INFO	

ITEM OVERRIDE CODE	
1. NONE	
2. AP - Not Dupl Service	
3. AO - Not Norm Aftercar	
4. NC - Not for Compariso	

step 18

Enter the LSPN number and press **[ENTER]**.

Note: Pressing the **[ENTER]** key only will bypass this step.

PART PAID CLAIM	
Enter LSPN Number	
	CLEAR

step 19

Select 1. Complete Claim by SCROLLING or keying 1 and pressing **[ENTER]** if the claim entry is finished and go to step 20, or

Select 2. Next Item by SCROLLING or keying 2 and pressing **[ENTER]** if another item needs to be entered and return to step 12A, or

EXTRA SERVICE ?	
1. COMPLETE CLAIM	
2. NEXT ITEM	
3. EXTRA ITEM INFO	

step 20

This screen will be displayed if the rebate was successful.

PART PAID CLAIM	
CLAIM SUBMITTED	

step 21

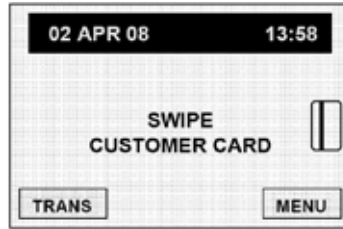
Press **[ENTER]** to print a provider's copy of the Medicare claim receipt.

PART PAID CLAIM	
PRINT PROVIDER COPY ?	
NO	YES

3.3 un-paid claim

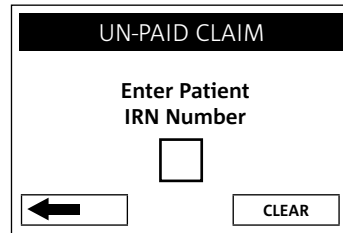
step 1

Swipe a Medicare Card or Key Enter the Medicare Card Number and press the **[ENTER]** key.



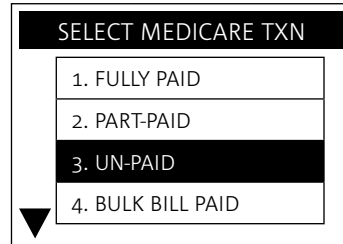
step 2

Key Patient IRN Number and press **[ENTER]** (the number to the left of the Patient's name on the Medicare card).



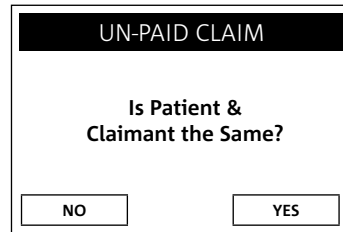
step 3

Select 3 or scroll to option 3 and press **[ENTER]** for an Un-Paid Claim.



step 4A

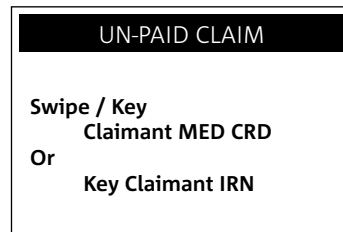
If the Patient and Claimant are the same person press **[ENTER]** and go to step 5A, otherwise press **[CLEAR]** and go to step 4B.



step 4B

If the Patient and Claimant Medicare cards are the same key the Claimant IRN and press **[ENTER]** and go to step 5A. If the cards are different swipe the Claimant card and go to step 4C.

Note: You can also key enter the different claimant card number.



step 4C

Key Claimant IRN Number and press **[ENTER]**.

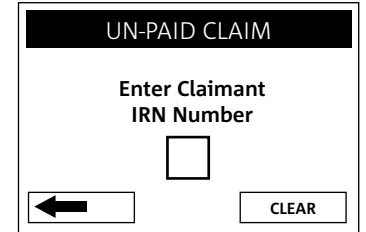
Note: This step will only be shown if a Claimant card is swiped at step 4B.

step 5A

Select the Provider by entering the number beside the provider's name and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the provider's name and go to step 6 or to key your Provider number using the keypad select option.

1. Enter Provider # and go to step 5B.

Note: To select an alternate provider type key your provider number and the provider type screen will be displayed.



step 5B

Enter your Servicing Provider number on the alphanumeric keypad and press **[ENTER]**.

step 5C

Select the Provider type by entering the number beside the provider type and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the type of service for the Provider.

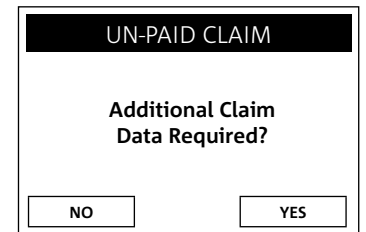
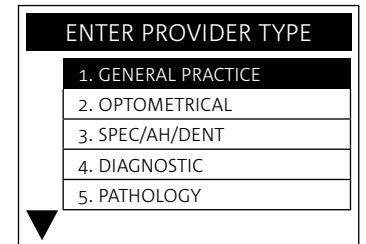
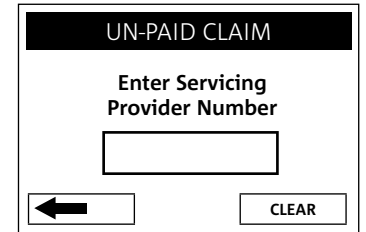
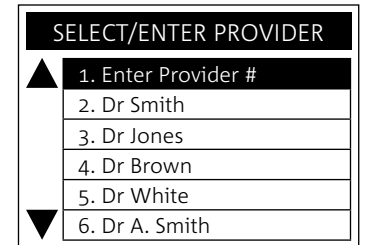
Note: If you are a medical provider that is able to provide services for more than one provider (claim) type, the HICAPS solution enables you to do this without entering your provider number for all transactions. Refer to notes in section 5.

step 6A

Press the NO / **[CLEAR]** key if no additional claim details are required and go to step 7.

Note: Press the YES / **[ENTER]** key if Account Reference number and/or Payee Provider details are required to be processed for this Patient's claim, go to step 6B.

If payee provider number is entered in function 54 (refer section 1.1 step 17) step 6A will not be displayed.



step 6B

Key Account Reference Number – If required and press **[ENTER]**.

Note: Pressing the **[ENTER]** key only will bypass this step.

UN-PAID CLAIM	
Enter Acc Reference Number (optional)	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 6C

Key Payee Provider number of the practitioner who is to be paid for the service. Only required if the payee provider is not the servicing provider.

Note: Pressing the **[ENTER]** key only will bypass this step. If payee provider number is entered in function 54 (refer section 1.1 step 17) step 6C will be pre populated with the payee provider number.

UN-PAID CLAIM	
Enter Payee Provider Number (optional)	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 7

Key referring provider number and press **[ENTER]**.

Note: If no requesting provider number is required press **[ENTER]** to go to step 10.

UN-PAID CLAIM	
Enter Referring Provider Number	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 8

Key referral date and press **[ENTER]**.

UN-PAID CLAIM	
Enter Referral Date	
<input type="text" value="dd/mm/yy"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 9

Select the Referral Period Code by entering the number beside the Code and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the Referring Period Code and go to step 11A.

REF PERIOD CODE	
1. S - Standard	
2. I - Indefinite	
<input type="button" value="▼"/>	

step 10

Select the Referral Override by entering the number beside the Code and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the Referring Override.

REF OVERRIDE CODE	
1. N - Not Applicable	
2. L - Lost	
3. E - Emergency	
<input type="button" value="▼"/>	

step 11A

Select the Item Number by SCROLLING or keying the Item Number and pressing **[ENTER]** and go to step 12 or key an Item not listed, go to step 11B.

SELECT ITEM _____	
23. STD CONSULT	
3. BRIEF CONSULT	
36. LONG CONSULT	
<input type="button" value="▼"/>	

step 11B

Enter the Item Number and press **[ENTER]**.

ENTER ITEM	
Enter Item Number	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 11C

Enter the Item Number descriptor for the new item by using the alphanumeric key pad and press **[ENTER]**.

Note: Pressing the **[ENTER]** key only will bypass this step and you can then program the description later using Function 41 as detailed in section 4.

ENTER ITEM	
Enter Item [#] Description	
<input type="text"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 12

Press **[ENTER]** to accept consultation charge already set for the item or enter an alternative charge and press **[ENTER]**.

UN-PAID CLAIM	
Item [#] [Item Descriptor]	
<input type="text" value="\$55.00"/>	
<input type="button" value="←"/>	<input type="button" value="CLEAR"/>

step 13

Press the [ENTER] key to accept current date or key in alternative date and press [ENTER].

UN-PAID CLAIM

Enter Date of Service

26/08/08

← CLEAR

step 14

Select 1. Complete Claim by SCROLLING or keying 1 and pressing [ENTER] if the claim entry is finished and go to step 18, or

Select 2. Next Item by SCROLLING or keying 2 and pressing [ENTER] if another item needs to be entered and return to step 11A, or

Select 3. Extra Item Info by SCROLLING or keying 3 and pressing [ENTER] if Item Override Code and LSPN are required for the item already entered and go to step 15.

EXTRA SERVICE ?

1. COMPLETE CLAIM

2. NEXT ITEM

3. EXTRA ITEM INFO

▼

step 15

Select the Item Override Code by SCROLLING or keying the number next to the code and pressing [ENTER] or select 1. None to bypass this step.

ITEM OVERRIDE CODE

1. NONE

2. AP - Not Dupl Service

3. AO - Not Norm Aftercar

4. NC - Not for Compariso

▼

step 16

Enter the LSPN number and press [ENTER].

Note: Pressing the [ENTER] key only will bypass this step.

UN-PAID CLAIM

Enter LSPN Number

← CLEAR

step 17

Select 1. Complete Claim by SCROLLING or keying 1 and pressing [ENTER] if the claim entry is finished and go to step 18, or

Select 2. Next Item by SCROLLING or keying 2 and pressing [ENTER] if another item needs to be entered and return to step 11A, or

EXTRA SERVICE ?

1. COMPLETE CLAIM

2. NEXT ITEM

3. EXTRA ITEM INFO

▼

step 18

This screen will be displayed if the rebate was successful.

UN-PAID CLAIM

CLAIM SUBMITTED

step 20

Press [ENTER] to print a provider's copy of the Medicare claim receipt.

UN-PAID CLAIM

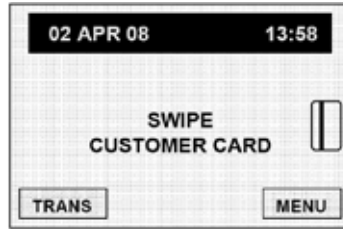
PRINT PROVIDER COPY ?

NO YES

3.4 bulk bill claim

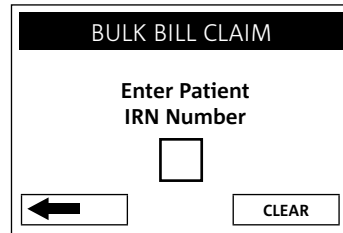
step 1

Swipe a Medicare Card or Key Enter the Medicare Card Number and press the **[ENTER]** key.



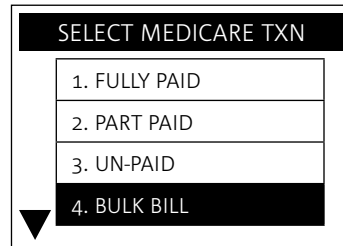
step 2

Key Patient IRN Number and press **[ENTER]** (the number to the left of the Patient's name on the Medicare card).



step 3

Select 4 or scroll to option 4 and press **[ENTER]** for a Bulk Bill Claim.



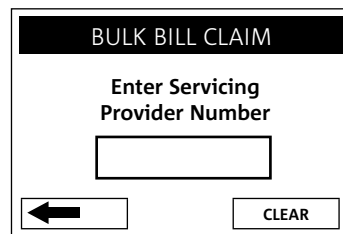
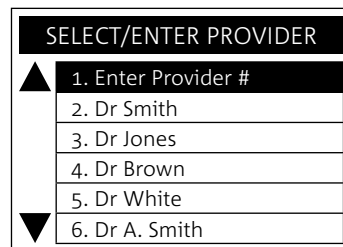
step 4A

Select the Provider by entering the number beside the provider's name and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the provider's name and go to step 5A or to key your Provider number using the keypad select option 1. Enter Provider # and go to step 4B.

Note: To select an alternate provider type key your provider number and the provider type screen will be displayed.

step 4B

Enter your Servicing Provider number on the alphanumeric keypad and press **[ENTER]**.



step 4C

Select the Provider type by entering the number beside the provider type and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the type of service for the Provider.

Note: If you are a medical provider that is able to provide services for more than one provider (claim) type, the HICAPS solution enables you to do this without entering your provider number for all transactions. Refer to notes in section 5.

step 5A

Press the NO / **[CLEAR]** key if no additional claim details are required and go to step 6.

Note: Press the YES / **[ENTER]** key if Payee Provider details are required to be processed for this Patient's claim, go to step 5B. If payee provider number is entered in function 54 (refer section 1.1 step 17) step 5A will not be displayed.

step 5B

Key Payee Provider number of the practitioner who is to be paid for the service. Only required if the payee provider is not the servicing provider.

Note: Pressing the **[ENTER]** key only will bypass this step. If payee provider number is entered in function 54 (refer section 1.1 step 17) step 5B will be pre populated with the payee provider number.

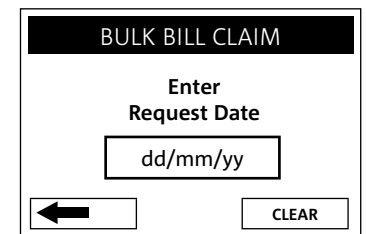
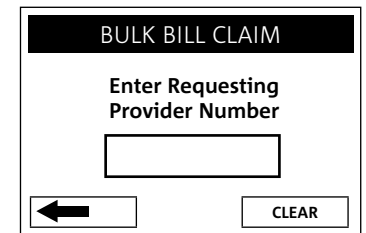
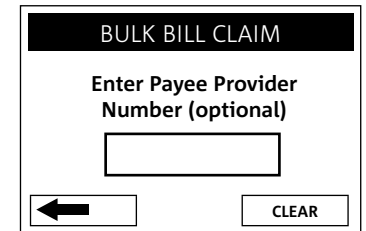
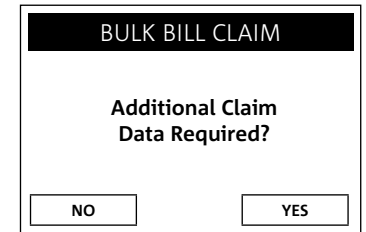
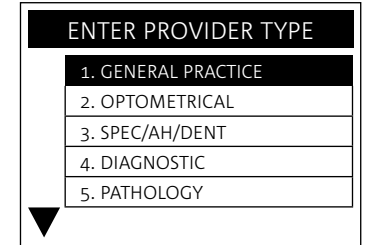
step 6

Key requesting provider number and press **[ENTER]**.

Note If no requesting provider number is required press **[ENTER]** to go to step 9.

step 7

Key request date and press **[ENTER]**.



step 8

Select the Referral Period Code by entering the number beside the Code and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the Referring Period Code and go to step 10A.

REF PERIOD CODE

1. S - Standard
2. I - Indefinite

▼

step 9

Select the Referral Override by entering the number beside the Code and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the Referring Override.

REF OVERRIDE CODE

1. N - Not Applicable
2. L - Lost
3. E - Emergency

▼

step 10A

Select the Item Number by SCROLLING or keying the Item Number and pressing **[ENTER]** and go to step 11 or key an Item not listed, go to step 10B.

SELECT ITEM _____

23. STD CONSULT
3. BRIEF CONSULT
36. LONG CONSULT

▼

step 10B

Enter the Item Number and press **[ENTER]**.

ENTER ITEM

Enter Item Number

◀ CLEAR

step 10C

Enter the Item Number descriptor for the new item by using the alphanumeric key pad and press **[ENTER]**.

Note: Pressing the **[ENTER]** key only will bypass this step and you can then program the description later using Function 41 as detailed in section 4.

ENTER ITEM

Enter Item [#]
Description

◀ CLEAR

step 11

Press the **[ENTER]** key to accept current date or key in alternative date and press **[ENTER]**.

BULK BILL CLAIM

Enter Date of Service

◀ CLEAR

step 12

Select 1. Complete Claim by SCROLLING or keying 1 and pressing **[ENTER]** if the claim entry is finished and go to step 16, or

Select 2. Next Item by SCROLLING or keying 2 and pressing **[ENTER]** if another item needs to be entered and return to step 10A, or

Select 3. Extra Item Info by SCROLLING or keying 3 and pressing **[ENTER]** if Item Override Code and LSPN are required for the item already entered and go to step 13.

EXTRA SERVICE ?

1. COMPLETE CLAIM
2. NEXT ITEM
3. EXTRA ITEM INFO

▼

step 13

Select the Item Override Code by SCROLLING or keying the number next to the code and pressing **[ENTER]** or select 1. None to bypass this step.

ITEM OVERRIDE CODE

1. NONE
2. AP - Not Dupl Service
3. AO - Not Norm Aftercar
4. NC - Not for Compariso

▼

step 14

Enter the LSPN number and press **[ENTER]**.

Note: Pressing the **[ENTER]** key only will bypass this step.

BULK BILL CLAIM

Enter LSPN Number

◀ CLEAR

step 15

Select 1. Complete Claim by SCROLLING or keying 1 and pressing **[ENTER]** if the claim entry is finished and go to step 16, or

Select 2. Next Item by SCROLLING or keying 2 and pressing **[ENTER]** if another item needs to be entered and return to step 10A, or

Note: For step 16 three screens can be displayed depending on whether you asked for a CEV check or not and if the Patient is entitled or not.

EXTRA SERVICE ?

1. COMPLETE CLAIM
2. NEXT ITEM
3. EXTRA ITEM INFO

▼

step 16A

Response when CEV is not requested.

Press Yes / **[ENTER]** to accept the benefit or No/ **[CLEAR]** to decline the transaction.

BULK BILL CLAIM	
Benefit \$x.xx Provider Accept?	
NO	YES

step 16B

Response when Concession Entitlement Verified.

Press Yes / **[ENTER]** to accept the benefit or No/ **[CLEAR]** to decline the transaction.

BULK BILL CLAIM	
Concession Entitlement Verified Benefit \$x.xx Provider Accept?	
NO	YES

step 16C

Response when the Patient does not have concession entitlement.

Press Yes / **[ENTER]** to accept the benefit or No/ **[CLEAR]** to decline the transaction.

BULK BILL CLAIM	
No Concession Entitlement Benefit \$x.xx Provider Override?	
NO	YES

step 17

Hand the terminal to the Patient and ask them to press the Yes / **[ENTER]** key to assign the benefit to you or press the No / **[CLEAR]** key to decline the assignment of the benefit.

BULK BILL CLAIM	
Assign Benefit To Provider?	
NO	YES

step 18

Press **[ENTER]** to print a provider’s copy of the Medicare claim receipt.

BULK BILL CLAIM	
PRINT PROVIDER COPY?	
NO	YES

4. HICAPS Easyclaim special features

A number of special features have been included in the HICAPS implementation of the Medicare Easyclaim solution, these are listed below.

For each provider the terminal remembers the top 10 item numbers used in claims and displays these in the scrolling list of item numbers.

For each provider the value entered for an item the first time is remembered for use in subsequent claims.

The item value remembered can be overridden.

Up to 50 item descriptors can be programmed into the terminal (refer to section 5 below).

Provider names and provider type can be programmed into the terminal (refer to section 1).

5. using your provider number for other claim types

If you are a medical provider that is able to provide services for more than one provider (claim) type, the HICAPS Easyclaim solution enables you to do this without entering your provider number for all transactions.

Where you have programmed your provider details into the HICAPS Easyclaim terminal as a Specialist as this is what you use the majority of the time, instead of selecting your provider name from the “Provider list” when entering a claim, just enter your provider number and then you will be asked to select your provider type:

Select Provider Type

1. General Practitioner
2. Optometrical
3. Spec/AH/Dent
4. Diagnostic
5. Pathology

Select your provider type for this claim, e.g. 3 Diagnostic and continue with the claim details as you would normally.

6. item number descriptor programming

There are two options for adding the descriptors for items, one when you use the Item Number for the first time as detailed in the sections above and two by programming the descriptors as detailed below.

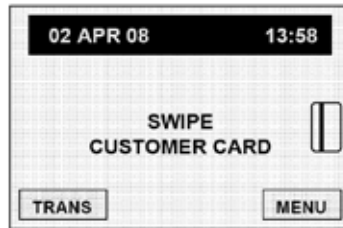
6.1 adding new Item numbers

step 1

Press the [FUNCTION] key.

step 2

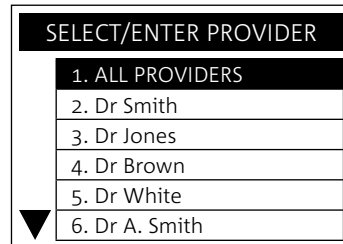
Enter [4] [1] and press [ENTER].



step 3

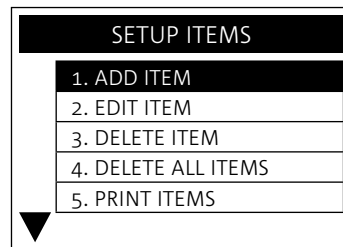
Select the Provider by entering the number beside the provider's name and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the provider's name.

Note: Item Descriptors can be programmed either for all providers or by each individual provider. Typically you would choose the 1. All Providers.



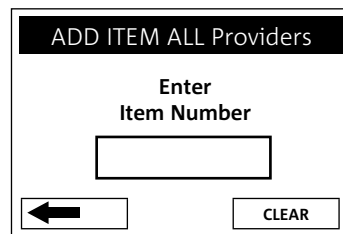
step 4

Select 1. ADD ITEM by entering the number beside the ADD ITEM and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the ADD ITEM.



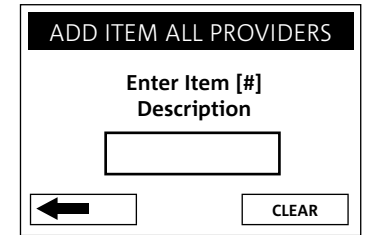
step 5

Enter the Item Number and press [ENTER].



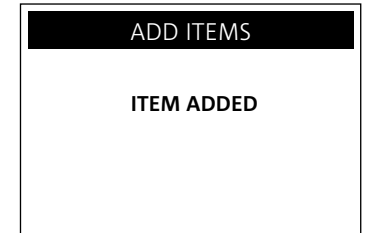
step 6

Enter the Item Number descriptor for the new item by using the alphanumeric key pad and press [ENTER].



step 7

Adding the new item is now complete.



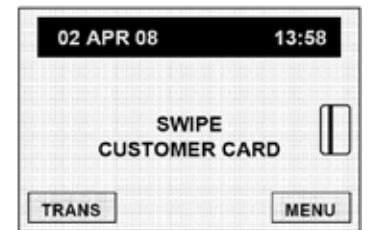
6.2 editing item numbers

step 1

Press the [FUNCTION] key.

step 2

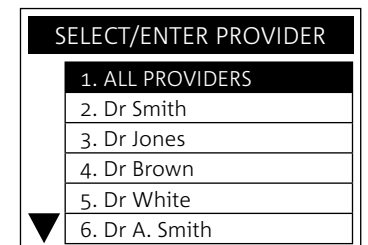
Enter [4] [1] and press [ENTER].



step 3

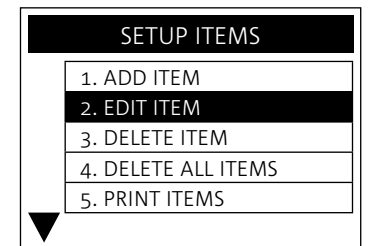
Select the Provider by entering the number beside the provider's name and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the provider's name.

Note: Item Descriptors can be programmed either for all Providers or by each individual provider. Typically you would choose the 1. All Providers.



step 4

Select 2. EDIT ITEM by entering the number beside the EDIT ITEM and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the EDIT ITEM.



step 5A

Select an Item by entering the number beside the item and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the item. Then go to step 6.

Note: This will only display if you selected a provider in step 3.

SELECT ITEM _____

23. STD CONSULT
3. BRIEF CONSULT
36. LONG CONSULT

▼

step 5B

Enter the Item Number and press **[ENTER]**.

EDIT ITEM ALL PROVIDERS

Enter Item Number

← CLEAR

step 6

Enter the Item Number descriptor for the item by using the alphanumeric key pad and press **[ENTER]**.

ADD ITEM ALL PROVIDERS

Enter Item [#] Description

← CLEAR

step 7

Confirm that the item is to be edited for all Providers.

EDIT ITEM ALL PROVIDERS

CONFIRM EDIT OF ITEM # FOR ALL PROVIDERS

NO YES

step 8

Editing the item is now complete.

EDIT ITEMS

ITEM EDITED

6.3 delete item numbers

step 1

Press the **[FUNCTION]** key.

step 2

Enter **[4] [1]** and press **[ENTER]**.

step 3

Select the Provider by entering the number beside the providers name and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the provider's name.

Note: Item Descriptors can be programmed either for all providers or by each individual provider. Typically you would choose the 1. All Providers.

step 4

Select 3. DELETE ITEM by entering the number beside the DELETE ITEM and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the DELETE ITEM.

step 5A

Select an Item by entering the number beside the item and press **[ENTER]** or SCROLLING and pressing **[ENTER]** once you have highlighted the item. Then go to step 6.

Note: This step will only display if you selected a provider in step 3.

step 5B

Enter the Item Number and press **[ENTER]**.

02 APR 08 13:58

SWIPE CUSTOMER CARD

TRANS MENU

SELECT/ENTER PROVIDER

1. ALL PROVIDERS
2. Dr Smith
3. Dr Jones
4. Dr Brown
5. Dr White
6. Dr A. Smith

▼

SETUP ITEMS

1. ADD ITEM
2. EDIT ITEM
3. DELETE ITEM
4. DELETE ALL ITEMS
5. PRINT ITEMS

▼

SELECT ITEM _____

23. STD CONSULT
3. BRIEF CONSULT
36. LONG CONSULT

▼

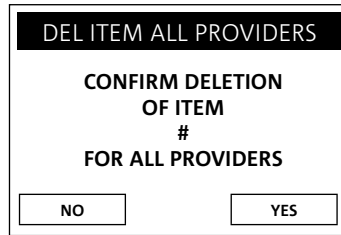
DEL ITEM ALL PROVIDERS

Enter Item Number

← CLEAR

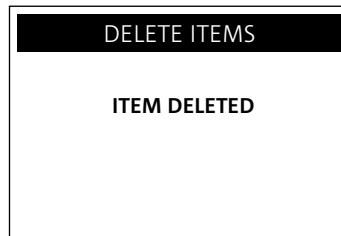
step 6

Confirm that the item is to be deleted for all Providers.



step 7

Deleting the item is now complete.



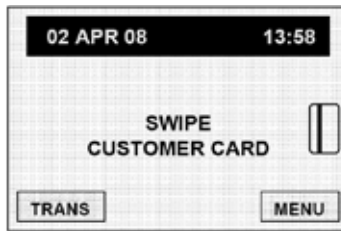
6.4 delete all item numbers

step 1

Press the [FUNCTION] key.

step 2

Enter [4] [1] and press [ENTER].



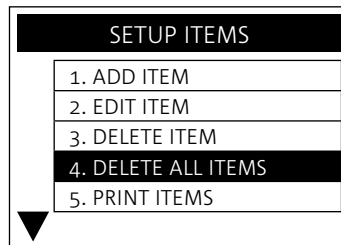
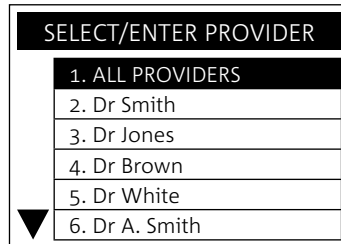
step 3

Select the Provider by entering the number beside the provider's name and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the provider's name.

Note: Item Descriptors can be programmed either for all providers or by each individual provider. Typically you would choose the 1. All Providers.

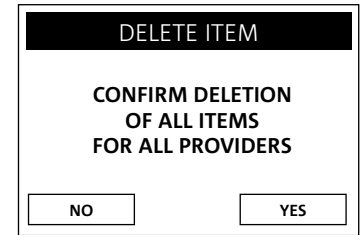
step 4

Select 4. DELETE ALL ITEMS by entering the number beside the DELETE ALL ITEMS and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the DELETE ITEM.



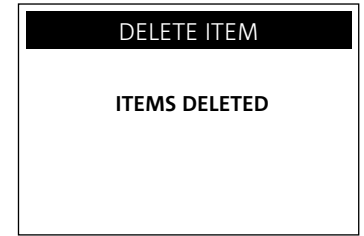
step 5

Confirm that all items for all Providers are to be deleted.



step 6

Deleting all items is now complete.



6.5 print all item numbers

step 1

Press the [FUNCTION] key.

step 2

Enter [4] [1] and press [ENTER].



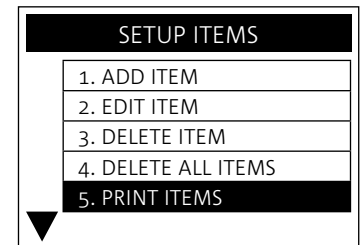
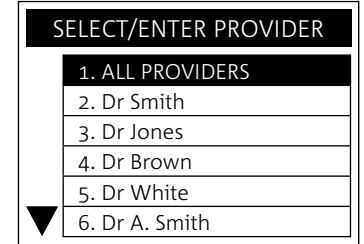
step 3

Select the Provider by entering the number beside the provider's name and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the provider's name.

Note: Item Descriptors can be programmed either for all providers or by each individual provider. Typically you would choose the 1. All Providers.

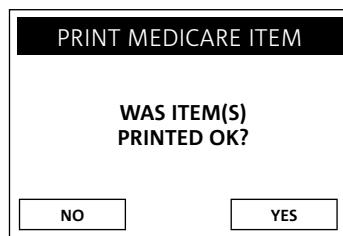
step 3

Select 5. PRINT ITEMS by entering the number beside the PRINT ITEM and press [ENTER] or SCROLLING and pressing [ENTER] once you have highlighted the PRINT ITEM.



step 4

Confirm that all items for all Providers are to be printed.



A terminal screen with a black header bar containing the text "PRINT MEDICARE ITEM" in white. Below the header, the text "WAS ITEM(S) PRINTED OK?" is centered. At the bottom of the screen, there are two rectangular buttons: "NO" on the left and "YES" on the right.

7. reports and settlement

Reports and Settlement functions for Medicare Easyclaim transactions functions the same as detailed in the main T4200 HICAPS User, but accessed by selecting Medicare.

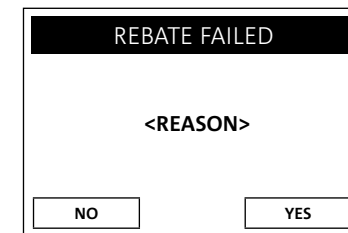
8. error screens and conditions

8.1 errors for rebate transactions

This screen will be displayed when a debit card has been swiped after a successful Medicare claim and the customer has entered incorrect details.

Press the Yes **[ENTER]** key to enable the customer to re-enter their details. If the error is a Pin error, it can be retried three (3) times before the transaction is declined.

After the transaction has been declined or the No **[CLEAR]** key has been pressed the error condition explained at 7.2 will be displayed.



A terminal screen with a black header bar containing the text "REBATE FAILED" in white. Below the header, the text "<REASON>" is centered. At the bottom of the screen, there are two rectangular buttons: "NO" on the left and "YES" on the right.

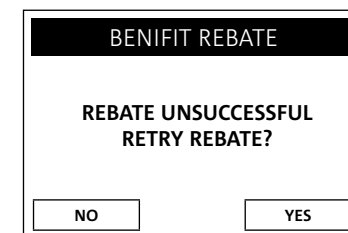
8.2 rebate failed

This screen will be displayed whenever a rebate transaction is unsuccessful for any reason.

This option has been developed to enable the claimant to retry the rebate to a different card, without the medical practice needing to re-enter all the Medicare claim details.

The terminal will continue to come back to this screen until the rebate is successful or the No **[CLEAR]** key is pressed.

If the No **[CLEAR]** key is pressed the Medicare claim will be cancelled as well and the claimant will need to take their receipt to a Medicare office to claim their rebate.



A terminal screen with a black header bar containing the text "BENIFIT REBATE" in white. Below the header, the text "REBATE UNSUCCESSFUL" and "RETRY REBATE?" is centered. At the bottom of the screen, there are two rectangular buttons: "NO" on the left and "YES" on the right.

8.3 decline Medicare Easyclaim transaction

A 4 digit code will be displayed when Medicare declines a claim.

To understand the reason for the error please refer to the error message contained in the Medicare Easyclaim Reference Guide.

If code 9718 is displayed on the terminal please refer to step 7.4.

8.4 error codes and actions

error code 05 – not approved

When processing Bulk Bill transactions this error will occur when the Provider ID or Medicare card number are incorrect.

error code 9718

When this error is displayed you will need to refer to the receipt to identify the individual error codes and then refer to the Medicare Easyclaim Reference Guide for more information.

8.5 bulk bill claims cancelled by the practice or patient

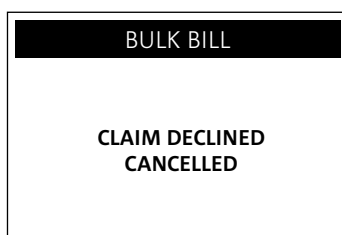
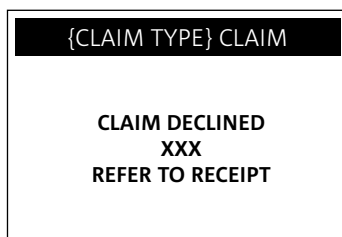
This screen will be displayed whenever the practice or patient cancels a bulk bill claim.

No receipt is printed when the practice cancels the claim.

Only the first part of the Bulk Bill advisement receipt is printed when the patient cancels the claim.

8.6 general

Whenever a Medicare claim fails, is declined or cancelled the claimant will need to take their account and submit it through an alternative Medicare claiming channel.



9. helpdesk telephone numbers

For EFTPOS related issues and questions please contact HICAPS on:

1300 650 852

Medicare Australia Provider Line

24 hours, 7 days

132 150

for practitioner enquiries regarding claim assessment or other enquiries relating to Medicare systems.

Further information is available at

www.medicareaustralia.gov.au

For the convenience of your patients

Medicare Australia Consumer Line

24 hours, 7 days

132 011

for patient or claimant enquiries regarding claim assessment or other general Medicare enquiries.