

HICAPS MEDICARE EASYCLAIM User guide





i. Navigation

Your HICAPS Trinity terminal has a touch screen like an Android smart phone. It responds to gestures such as tapping and swiping.

- **Tap** lightly touch to select or launch items
- **Swipe** lightly drag your finger across a screen to swipe. For example, swipe down from the top of the screen to access the apps panel.

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1. MEDICARE AUSTRALIA EASYCLAIM PROVIDER SETUP

1.1 registering a new provider

To add providers, you need to register their details by completing the online form, available on the HICAPS website **hicaps.com.au/forms**.

Once the completed form and supporting documents have been submitted and approved by HICAPS, the provider updates will be registered with the associated health funds and the new provider/s will appear on your HICAPS terminal within 3 business days.

1.2 modify provider

If you wish to make modifications to a provider's configuration settings, you can do so by accessing their provider profile in <u>HICAPS Accounts Online</u>. Simply login and navigate to the Provider page, using the side menu **Providers > View / Modify Provider** and select the changes you wish to enable/disable. Once all modifications have been made you can select **Modify Provider** at the bottom of the page to save the changes.

To register for HICAPS Accounts Online, go to <u>www.hicaps.com.au/forms</u> and select HICAPS Accounts Online Registration.

1.3 deleting a provider

You can **remove a provider**, from your HICAPS terminal if they are no longer practising at your location, by completing the online form available on the HICAPS website **www.hicaps.com.au/forms**.

Once the completed online form has been submitted and approved by HICAPS, the provider updates will be registered with the associated health funds and the requested provider/s will automatically be removed from your terminal within 5 business days.

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. To enable your HICAPS terminal to request a Medicare card to proceed with a claim after the completion of an approved EFTPOS transaction, login to **HICAPS Accounts Online** and follow the steps below.

To register for HICAPS Accounts Online, go to <u>www.hicaps.com.au/forms</u> and select HICAPS Accounts Online Registration.

Step 1

Select **Merchant Search** from the **HICAPS** menu.

Step 2

Enter your Merchant number and click Show Merchant to open Modify Merchant Details screen.

Step 3

Check the **Enable EFTPOS to Medicare Transition** box from the **Merchant Details** to enable the terminal and click submit.

Note: All changes will be updated on the terminal hourly.

Modify Merchant Details

Merchant Details			
Merchant Name	HICAPS DEMONSTRAT	Receipt Line 1	HICAPS DEMONSTRAT
Merchant Number	42657379	Receipt Line 2	MELBOURNE AU
Current Status	Change of Details		
New Status	Change of Details	/	
Phone Number		Contact Name	HICAPS DEMONSTRAT
Email			
Address Info	Click here for Address Info		
Enable EFTPOS to Medicare Transition		Auto Settle Flag	
Enable EFTPOS to Medicare Prompt		Auto Settle Time (AMIS)	00:00 (hh:mm)

Note: If you check the **Enable EFTPOS to Medicare Prompt** box, then a prompt to proceed with a Medicare Easyclaim transaction will display following the completion of a payment transaction.



3. SPECIALIST, ANCILLARY HEALTH CARE AND DENTAL CLAIMS

3.1 fully paid claim – specialist, ancillary health care and dental

Fully paid claims are performed when a patient or claimant has paid their health professional account in full.

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.

Step 2

Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.



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Medicare

HICAPS

Transactions

Submit a claim

Submit a patient claim Request a quote

Cancel a previous claim

Refund an EFTPOS transaction

ne payment applicat

ß

(3) Refund

Request a quote from health fund

Step 2a

Enter a Medicare card number, then tap **NEXT**.

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4

On the Medicare transaction screen, tap Fully paid.

Step 5

If the patient and claimant are the same person, tap **YES** and go to Step 6. Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.



Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

Step 5b

Swipe the claimant card and go to Step 5c.

Note: To enter a claimant card number manually, tap **Enter manually**, enter the card number and tap **NEXT**.



Step 5c

Enter the **claimant's IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 6

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap **Enter the provider manually** and go to Step 6a.

Step 6a

Enter the provider number and tap **NEXT**.





NEXT

Step 6b

Tap Specialist | Allied Health | Dentist.



Step 7

If applicable, select a referring provider from the displayed list or use the search bar to search for a referring provider's name. Tap the referring provider to select them and go to Step 8.

If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 7a.

To create a new referring provider, tap **CREATE MANUALLY** and go to Step 7b.

Note: You can also use the plus icon (+) to add a new referring provider, go to Step 7b.

Step 7a

Select a referral override code from the drop-down list. Tap **NEXT**. Go to Step 9.

Select from the options in the drop down list, *Not required, Lost or Emergency.*





Step 7b

Enter the referring provider name and number in the **Create referring provider** screen.

Tap **NEXT** to select the newly created referring provider.

Step 8

Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

Tap **NEXT**.





Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 10.

To add a new item to the list, tap the plus icon (+) and go to Step 9a.

Step 9a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

•	* 💎 100% 🖬 12	2:30pm				
÷	Select an item	Ð				
Q	Search for an item number or name	в				
Pinned items						
1001	PERIODIC EXAM Periodic Oral Examination	Ŧ				
121	TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment	Ŧ				
222	ROOT PLANING Root planing and subgingival curettage – per tooth	Ŧ				
All ite	ms					
1001	PERIODIC EXAM Periodic Oral Examination	푸				
022	INTRAORAL EXPSR Intraoral periapical or bitewing radiograph – per exposure	푸				
114	REM CALCULUS 1 Removal of calculus – first appointment	푸				
121	TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment	푸				
161	FISSURE SEALING Fissure and/or tooth surface sealing – per tooth	푸				
213	ACUTE PERIODONT Fissure and/or tooth surface sealing – per tooth	푸				
222	ROOT PLANING Root planing and subgingival curettage – per tooth	푸				
311	REM PERM TOOTH Removal of tooth or part(s) thereof	푸				



Step 9b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Go to Step 9 to select the newly created item.

Step 10

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter any of the following optional fields:

- Item override code **Note:** This code can be selected from a drop-down list. Tap to display a list of codes.
- Referral Issue Date **Note:** This cannot be a future date.
- Restrictive override code
- LSPN

Tap ADD TO CLAIM to add the item to the claim.



-	4 100	· • • • • • •
×	Item details	
1001	PERIODIC EXAM Periodic Oral Examination	
Date o 13 A	of service spr 2019, Thu	
Date o	of service must be within the last 24 mc	onths
(\$) (Cost	
*Requ	lired	
Item	i override code	-
Optio	nal	
Refer 13 A	ral issue date Apr 2019, Thu	
Option	nal - Cannot be a future date	
Rest	trictive override code	*
Optio	nal	
LSP	N	
Option	nal	
	ADD TO CLAIM	

The claim details will be displayed.

To add items to the claim before submitting it, tap **ADD ITEM** and go to Step 9.

To change the referring provider before submitting the claim, tap on the three dots : next to the referring provider's name and select another provider. Go to Step 8.

When you're ready to submit the claim, tap **SUBMIT CLAIM**.



\$ 💎 100% 🖸 12:30pm

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▲ * ▼ 100% 0 12:30pm Sending to Medicare

Step 12

A message will be displayed **Sending to Medicare**.

The Claim Summary screen displays details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT REBATE**.

Step 14

The **Rebate** screen will be displayed. Insert or swipe the claimant's debit card to accept the rebate.

Step 15

Ask the cardholder to select the account for the transaction type - **Savings** or **Cheque**.





Total **\$87.95**

Cancel

Ask the cardholder to enter their PIN and tap **ENTER** to proceed.



Step 17

The screen will display **Approved** if the rebate was successful.



Tap **Print** if you would like to print the merchant receipt. If no receipt is required, tap **NO THANKS**.



3.2 part paid claim – specialist, ancillary health care and dental

Part paid claims are used when a claimant has paid a partial contribution toward the full settlement of their account. Upon submission of the claim to Medicare, benefits are assessed as payable and a statement or cheque in the health professional's name will be sent by Medicare to the claimant's address. The cheque is sent by the claimant to the health professional with any outstanding balance.

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section



Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.





Step 2a

Enter a Medicare card number, then tap **NEXT**.

Step 3

Enter the **patient IRN** (the number to the left of the Patient's name on the Medicare card) and tap **NEXT**.

On the Select Medicare transaction screen, tap Part Paid.

Note: If a Medicare card is swiped from the HICAPS home screen, transaction types **Unpaid and Bulk Billed** will also be displayed.

Step 5

If the patient and claimant are the same person, tap **YES** and go to Step 6.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.



NO

YES

Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

Step 5b

Swipe the claimant card and go to Step 5c.

Note: To enter a claimant card number manually, tap **Enter manually**, enter the card number and tap **NEXT**.



Step 5c

Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.

Step 6

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap **Enter the provider manually** and go to Step 6a.

Step 6a

Enter the provider number and tap **NEXT**.







Step 6b

Tap Specialist | Allied Health | Dentist.



Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 7a.

Select **No** for payment to be made to the servicing provider and go to step 8.

Note: you must press **Yes** to send the payee provider number.

Step 7a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap **NEXT**.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.







If applicable, select a referring provider from the displayed list or use the search bar to search for a referring provider's name. Tap the referring provider to select them and go to Step 9.

If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 10.

To create a new referring provider, tap **CREATE MANUALLY** and go to Step 8a.

Note: You can also use the plus icon (+) to add a new referring provider, go to Step 8a.

Step 8a

Enter the referring provider name and number in the **Create referring provider** screen.

Tap **NEXT** to select the newly created referring provider.

Step 9

Enter the referral details. Select the referral date using the calendar icon (required).

Add the optional referral period and referral override codes by selecting items from the drop-down lists.

Tap **NEXT**.







Select a referral override code from the drop-down list. Tap **NEXT**.

Step 11

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 12.

To add a new item to the list, tap the plus icon (+) and go to Step 11a.



-						
÷	Select an item					
Q	Search for an item number or name	9				
Pinned items						
1001	PERIODIC EXAM Periodic Oral Examination	Ŧ				
121	TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment	Ŧ				
222	ROOT PLANING Root planing and subgingival curettage – per tooth	Ŧ				
All ite	ms					
1001	PERIODIC EXAM Periodic Oral Examination	푸				
022	INTRAORAL EXPSR Intraoral periapical or bitewing radiograph – per exposure	푸				
114	REM CALCULUS 1 Removal of calculus – first appointment	푸				
121	TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment	푸				
161	FISSURE SEALING Fissure and/or tooth surface sealing – per tooth	푸				
213	ACUTE PERIODONT Fissure and/or tooth surface sealing – per tooth	푸				
222	ROOT PLANING Root planing and subgingival curettage – per tooth	푸				
311	REM PERM TOOTH Removal of tooth or part(s) thereof	푸				

Step 11a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.





On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter the patient contribution.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
 Note: These codes can be selected from a drop-down list. Tap to display a list of codes.
- Referral issue date **Note:** This cannot be a future date.
- LSPN

Tap ADD TO CLAIM to add the item to the claim.

Step 13

Check the Claim details and tap SUBMIT CLAIM.

Note: To add more items, tap ADD ITEM.

Note: Check the provider's name and item number are correct.





A message will be displayed **Sending to Medicare**.

●▲ * ♥ 100% @ 12:30pm Sending to Medicare





Step 14

ACCEPT.

The **Claim Submitted** screen will display if the claim is successful.

The **Claim Summary** screen will display details of the claim.

You should present this screen to the customer and ask

them to confirm the details are correct before tapping



Note: Printing patient receipt will display and the receipt will print automatically.



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Step 16

Tap **YES** to print a provider's copy of the Medicare claim receipt for your records.

Tap **NO** if you don't want to print a receipt.

3.3 unpaid claim – specialist, ancillary health care and dental

The unpaid claim function is used when a claimant has not paid their account. Upon submission of the claim, Medicare benefits are assessed as payable and a statement or cheque in the health professional's name will be sent by Medicare to the claimant's address. The cheque is then sent by the claimant to the health professional with any outstanding balance.



Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.

Step 2

Swipe a Medicare and go to step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

Step 2a

Enter a Medicare card number, then tap **NEXT**.







Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4 On the Select Medicare transaction screen, tap Unpaid.

Step 5

If the patient and claimant are the same person, tap **YES** and go to Step 6.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.





Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

Step 5b

Swipe the claimant's card and go to Step 5c.

Note: To enter a claimant card number manually, tap **Enter manually**, enter the card number and tap **NEXT**.





Step 5c

Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.

Step 6

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap **Enter the provider manually** and go to Step 6a.

Step 6a

Enter the provider number and tap **NEXT**.







Step 6b

Tap Specialist | Allied Health | Dentist.



Unpaid claim Additional data? Is there additional claim data required? YES NO

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NEXT

Select **No** for payment to be made to the servicing provider and go to step 8.

Step 7

Note: you must press **Yes** to send the payee provider number.

the servicing provider and go to Step 7a.

Select **Yes** for payment to be made to someone other than

Step 7a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap **NEXT**.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.

If applicable, select a referring provider from the displayed list or use the search bar to search for a referring provider's name.

If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 9.

To create a new referring provider, tap **CREATE MANUALLY** and go to Step 7a.

Note: You can also use the plus icon (+) to add a new referring provider, go to Step 7a.



I 12:30pm Create referring provider Referring provider name *Required *Required *Required



Step 8a

Enter the referring provider name and number in the **Create** referring provider screen.

Tap **NEXT** to select the newly created referring provider.

Step 9

Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

Tap NEXT. Go to Step 10.

Select a referral override code from the drop-down list. Tap **NEXT**.

♦ ★ ★ ● 100% ₫ 12:30pm ← Referral override Referral override code *Required



Step 10

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 11.

To add a new item to the list, tap the plus icon (+) and go to Step 10a.

Step 10a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

Step 10b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Go to Step 10 to select the newly created item.




On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
 Note: These codes can be selected from a drop-down list. Tap to display a list of codes.
- Referral issue date **Note:** This cannot be a future date.
- LSPN

Tap ADD TO CLAIM to add the item to the claim.

Step 12

Note: To change the referring provider, tap on the three dots next to the referring provider's name and select another provider.

To add items to the claim tap ADD ITEM.

When you're ready to submit the claim, tap **SUBMIT CLAIM**. Go to Step 13.





A message will be displayed on the screen **Sending to Medicare**.



Step 14

The **Claim Summary** screen displays details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT**.

Go to Step 15 for payment.



The **Claim submitted** screen will be displayed if the claim was successful.

Step 16

The **printing patient receipt** screen will be displayed and the receipt will print automatically.

Step 17

Tap **YES** to print a provider's copy of the Medicare claim receipt for your records.

Tap **NO** if you don't want to print a receipt.



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Claim submitted

3.4 bulk billed claim – specialist, ancillary health care and dental

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.



Step 2

Swipe a Medicare card and go to step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.



Step 2a

Enter a Medicare card number, then tap **NEXT**.

▲ ★ ● 100% @ 12:30pm ← Enter card number <u>466478762</u> •Required





Step 3

On the Medicare transaction screen, tap **Bulk Billed**.

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.



Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 6.

Note: If the provider is not on the terminal, tap the link to **Enter the provider manually** and go to Step 5a.

▲ * ● 100% & 12:30pm ← Select a provider name or ID Q Search for a provider name or ID Q Dr Anne Davies 464784833 Q Dr Emily Grey 4648764643 Q Dr Hayley Wells 4648764643 Q Dr Jack Zahl 4648764643

C Enter provider number 466478762 *Registed NEXT

\$ 💎 100% 🖬 12:30pm

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Step 5a

Enter the provider number and tap **NEXT**.

Step 5b

Tap Specialist | Allied Health | Dentist.

Step 6a

Tap NEXT

servicing provider.

Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 6a.

Select **No** for payment to be made to the servicing provider and go to step 7.

Note: you must press **Yes** to send the payee provider number.

Please verify or enter the Payee provider number (the

Note: This is required if the payee provider is not the

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.

practitioner who is to be paid for the service).





Step 7

To check for concession status, tap **YES**.

To continue without checking concession status, tap NO.



Select a referring provider from the displayed list or use the search bar to search for a referring provider's name. Tap the referring provider and go to Step 9.

If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 10.

To create a new referring provider, tap **CREATE MANUALLY** and go to Step 8a.



▲ * ♥ 101 € 12:30pm Create referring provider Referring provider name *Required Referring provider number *Required NEXT



Step 8a

Enter the referring provider name and number in the **Create referring provider** screen.

Tap **NEXT** to select the newly created referring provider.

Step 9

Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

Tap NEXT. Go to Step 11.

Select a referral override code from the drop-down list. Tap **NEXT**.

▲ * ▼ 100% © 12:30pm ← Referral override Referral override code • *Required • •Required NEXT

6 A \$ 💎 100% 🖬 12:30pm \oplus Medicare items All providers Q Search for an item number or name 777 PERIODIC EXAM : Periodic Oral Examination 022 INTRAORAL EXPSR : Intraoral periapical or bitewing radiograph – per exposure 114 REM CALCULUS 1 Removal of calculus - first ÷ appointment 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment 161 FISSURE SEALING Fissure and/or tooth surface sealing - per tooth 213 ACUTE PERIODONT Fissure and/or tooth surface sealing – per tooth 222 ROOT PLANING Root planing and subgingival curettage 311 REM PERM TOOTH TOOTH TY ÷ Removal of tooth or part(s) thereof 411 PULP CAPPING : Direct pulp capping ADD ITEM

Step 11

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 13.

To add a new item to the list, tap the plus icon (+) and go to Step 11a.

Step 11a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap All Providers, then tap **ASSIGN**.





Step 11c

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item.

Tap ADD ITEM.

* 💎 100% 🖬 12:30pi . Medicare items 4 \oplus All providers Q Search for an item number or name PERIODIC EXAM 777 ÷ Periodic Oral Examination 022 INTRAORAL EXPSR : Intraoral periapical or bitewing radiograph – per exposure 114 REM CALCULUS 1 : Removal of calculus - first appointment 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment 161 FISSURE SEALING Fissure and/or tooth surface sealing – per tooth 213 ACUTE PERIODONT Fissure and/or tooth surface sealing -222 ROOT PLANING Root planing and subgingival curettage 311 REM PERM TOOTH TOOTH TY : Removal of tooth or part(s) thereof 411 PULP CAPPING ÷ Direct pulp capping ADD ITEM

Step 12

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter any of the following optional fields:

- Item override code
- Restrictive override code **Note:** These codes can be selected from a drop-down list. Tap to display a list of codes.
- LSPN

Tap ADD TO CLAIM to add the item to the claim.



Check the Claim details and tap SUBMIT CLAIM.

Note: Check the provider's name and item number are correct.

Note: To change the referring provider, tap on the three dots next to the referring provider's name and select another provider.

When you're ready to submit the claim, tap **SUBMIT CLAIM**.

Step 14

A message will be displayed on the screen **Sending to Medicare**.

The **Claim Summary** screen will display details of the claim. The claim summary will display slightly differently depending on the CEV status.

Go to Step 14a for claims where CEV has not been requested.

Go to Step 14b for claims where CEV was requested and accepted.

Go to Step 14c for claims with no concession entitlement.





Step 14a

Tap **ACCEPT** to accept the claim and display the declaration. Go to Step 15.



Claim summary Provider Dr Anne Davies 464784833 Total Benefit \$0.00 8 No Concession entitlement verified Items Patient ID 01 01 1 item Requesting provider John Smith 464784833 ACCEPT DECLINE

•

* 💎 100% 🗈 12:30pm

Step 14b

Tap **ACCEPT** to accept the claim and display the declaration. Go to Step 15.

Step 14c

Tap **ACCEPT** to accept the claim and display the declaration. Go to Step 15.





Step 15

The declaration screen will be displayed.

You should present this screen to the patient and ask them to accept or decline the declaration.

Tap **AGREE** and print a bulk billed patient receipt.

You should present this screen to the patient and ask them to confirm the details are correct before tapping **YES** to assign the benefit amount to the provider. A bulk billed patient receipt part 2 will print.

● ▲ * ▼ 100% © 12:30pm medicare Assign benefit to the provider? I assign my right to benefits to the practioner who rendered the services \$38.20 - BENEFIT AMOUNT NO YES



Step 17

To print a provider copy of the receipt, tap **OK**.

4. OPTOMETRIC CLAIMS/GENERAL PRACTITIONER CLAIMS

4.1 fully paid claim – optometric/general practitioner

Fully Paid claims are performed when a patient or claimant has paid their health professional account in full.

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.



● ▲ * ● 100% @ 12:30pm ← medicare Swipe Medicare card III Entermanually

Step 2

Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

Step 2a

Enter a Medicare card number, then tap **NEXT**.

Step 3

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4

On the Medicare transaction screen, tap Fully Paid.







If the patient and claimant are the same person, tap **YES** and go to Step 6.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.



\$ 💎 100% 🖬 12:30pm

Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

Step 5b

Swipe the claimant card and go to Step 5c.

Note: To enter a claimant card number manually, tap **Enter manually**, enter the card number and tap **NEXT**.

Step 5c

Enter the **claimant's IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.







Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap Enter the provider manually and go to Step 6a.

Step 6a

Enter the servicing provider number in the search bar and tap **NEXT**.

Step 6b

Tap Optometry or General Practice.







Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to step 8.

If the item number is not displayed, tap the plus icon (+) to add an item manually and go to Step 7a.

Step 7a

Enter the **item number**, **item title**, **item description** for the new item and tap **NEXT**.

• * 💎 100% 🖬 12:30pm Select an item \oplus Q Search for an item number or name Pinned items 1001 PERIODIC EXAM Ŧ Periodic Oral Examination 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment Ŧ 222 ROOT PLANING Ŧ Root planing and subgingival curettage – per tooth All items 1001 PERIODIC EXAM 푸 Periodic Oral Examination 022 INTRAORAL EXPSR 푸 Intraoral periapical or bitewing radiograph - per exposure 114 REM CALCULUS 1 Removal of calculus - first appointment 꾸 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment 푸 161 FISSURE SEALING 푸 Fissure and/or tooth surface sealing - per tooth 213 ACUTE PERIODONT 푸 Fissure and/or tooth surface sealing - per tooth 222 ROOT PLANING Root planing and subgingival curettage – per tooth 푸 311 REM PERM TOOTH 꾸 Removal of tooth or part(s) thereof



Step 7b

If there is more than one provider listed, tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Step 7c

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item.

Tap ADD ITEM.



÷	Medicare items	
	All providers	
Q	Search for an item number or name	
777	PERIODIC EXAM Periodic Oral Examination	:
022	INTRAORAL EXPSR Intraoral periapical or bitewing radiograph – per exposure	:
114	REM CALCULUS 1 Removal of calculus – first appointment	;
121	TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment	:
161	FISSURE SEALING Fissure and/or tooth surface sealing – per tooth	:
213	ACUTE PERIODONT Fissure and/or tooth surface sealing – per tooth	:
222	ROOT PLANING Root planing and subgingival curettage – per tooth	:
311	REM PERM TOOTH TOOTH TY Removal of tooth or part(s) thereof	:
411	PULP CAPPING Direct pulp capping	:
	ADD ITEM	

On the **Item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter any of the following optional fields:

- Item override code
- Restrictive override code **Note:** These codes can be selected from a drop-down list. Tap to display a list of codes.
- LSPN

Tap **ADD TO CLAIM** to add the item to the claim.

Go to Step 9 to add more items to the claim or go to Step 10 to submit a claim.

Step 9

To add items to the claim before submitting it, tap **ADD ITEM**.

Enter item details and tap **NEXT** to proceed.





When you're ready to submit the claim, tap **SUBMIT CLAIM**.



C Sending to Medicare

A message will be displayed **Sending to Medicare**.

The Claim Summary screen displays details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT REBATE**.



Insert - Swipe - Tap

Step 12

The **Rebate** screen will be displayed. Insert or swipe the claimant's debit card to accept the rebate.

Step 13

Ask the cardholder to select the account for the transaction type - Savings or Cheque.



Ask the cardholder to enter their PIN and tap **ENTER** to proceed.



Step 15

The screen will display **Approved** if the rebate was successful.



Step 16

Tap **Print** if you would like a copy of the merchant receipt. If no receipt is required, tap **No Thanks**.



4.2 part paid claim – optometric/general practitioner

Part paid claims are used when a claimant has paid a partial contribution toward the full settlement of their account. Upon submission of the claim to Medicare, benefits are assessed as payable and a statement or cheque in the health professional's name will be sent by Medicare to the claimant's address. The cheque is sent by the claimant to the health professional with any outstanding balance.

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.



Step 2

To print a provider copy of the receipt, press **OK**.



Step 2a

Enter a Medicare card number, then tap **NEXT**.

Step 3

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4 On the Medicare transaction scre

On the Medicare transaction screen, tap Part Paid.







Note: If a Medicare card is swiped from the HICAPS home screen, transaction types **Unpaid and Bulk Billed** will also be displayed.

Step 5

If the patient and claimant are the same person, tap **YES** and go to Step 6.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.

Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.



Step 5b

Swipe the claimant card and go to Step 5c.



Step 5c

Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.





NEXT

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap Enter the provider manually and go to Step 6a.

Step 6a

Enter the provider number and tap **NEXT**

Step 6b

Tap **Optometry** or **General Practice**.







Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 7a.

Select **No** for payment to be made to the servicing provider and go to step 8.

Note: you must press **Yes** to send the payee provider number.



← Additional data

Step 7a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap NEXT.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.



Step 8

If applicable, select a referring provider from the displayed list or use the search bar to search for a referring provider's name. Tap the referring provider and go to Step 9.

If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 10.

To create a new referring provider, tap **CREATE MANUALLY** and go to Step 8a.

Note: You can also use the plus icon (+) to add a new referring provider, go to step 8a.



Step 8a

Enter the referring provider name and number in the **Create referring provider** screen.

Tap **NEXT** to select the newly created referring provider.

Step 9

Enter the referral details. Select the referral date using the calendar icon (required).

Add the optional referral period and referral override codes by selecting items from the drop-down lists.

Tap **NEXT**.

Step 10

Select a referral override code from the drop-down list.

Tap NEXT.







Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 12.

To add a new item to the list, tap the plus icon (+) and go to Step 11a.

Step 11a

Enter the item number and item name (required) and an item description (optional) and tap **NEXT**.





Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Step 12

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter the patient contribution.

Enter any of the following optional fields:

- Item override code
- Restrictive override code **Note:** These codes can be selected from a drop-down list. Tap to display a list of codes.
- Referral issue date
 Note: This cannot be a future date.
- LSPN

Tap ADD TO CLAIM to add the item to the claim.



* 🕈 100% 🖬 1		% D 12:30pi
×	Item details	
1001	PERIODIC EXAM Periodic Oral Examination	
Date 13 A	of service Apr 2019, Thu	
Date	of service must be within the last 24 mo	onths
(\$) (Cost	
*Requ	ilred	
Item	override code	*
Optic	nal	
Refer	ral issue date opr 2019, Thu	
Optic	nal - Cannot be a future date	
Rest	trictive override code	*
Optic	nal	
LSP	N	
Optio	nal	
	ADD TO CLAIM	

Check the **Claim** details and tap **SUBMIT CLAIM**.

Note: To add more items, tap ADD ITEM.

Note: Check the provider's name and item number are correct.

A message will be displayed on the screen **Sending to Medicare**.




The **Claim Summary** screen will display details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT**.



Step 15 The **Claim submitted** screen will be displayed if the claim was successful.



The **printing patient receipt** screen will be displayed and the receipt will print automatically.



Step 15

Tap **YES** to print a provider's copy of the Medicare claim receipt for your records.

Tap **NO** if you don't want to print a receipt.



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4.3 unpaid claim – optometric/general practitioner

The unpaid claim function is used when a claimant has not paid their account. Upon submission of the claim, Medicare benefits are assessed as payable and a statement or cheque in the health professional's name will be sent by Medicare to the claimant's address. The cheque is then sent by the claimant to the health professional with any outstanding balance.

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section



Step 2

Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

Step 2a

Enter a Medicare card number, then tap **NEXT**.



Step 3

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.



Tap **Unpaid** on the Medicare transaction screen.

Step 5

If the patient and claimant are the same person, tap $\ensuremath{\text{YES}}$ and go to Step 7.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.

Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

Note: You can manually enter a different claimant card number. Tap **Enter manually** and enter the card number and tap **NEXT**.





Step 5b

Swipe the claimant's card and go to Step 5c.







Step 5c

Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.

Step 6

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap Enter the provider manually and go to Step 6a.

Step 6a

Step 6b

number entered in Step 7a.

Enter the servicing provider number in the search bar and tap **NEXT**.

Tap the **provider type** that matches the servicing provider

● ▲ * ▼10% © 12:30pm ← Enter provider number Provider number 466478762 *Bequired



Step 7

Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 7a.

Select **No** for payment to be made to the servicing provider and go to step 8.

Note: you must press **Yes** to send the payee provider number.



Step 7a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap **NEXT**.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.

Step 8

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 11.

To add a new item to the list, tap the plus icon (+) and go to Step 8a.



₿ ▲	¥ 💎 100% 🚺 12:30pm		
÷	Select an item		
Q	Search for an item number or nam	e	
Pinne	d items		
1001	PERIODIC EXAM	Ŧ	
	Periodic Oral Examination		
121	TOPICAL AGENT		
	Topical application of remineralisation and/or carlostatic agent, one treatment	Ŧ	
222	ROOT PLANING		
	Root planing and subgingival curettage - per tooth	Ŧ	
All ite	ms		
1001	PERIODIC EXAM		
	Periodic Oral Examination	4	
022	INTRAORAL EXPSR		
	Intraoral periapical or bitewing radiograph – per exposure	푸	
114	REM CALCULUS 1		
	Removal of calculus - first appointment	푸	
121	TOPICAL AGENT		
	Topical application of remineralisation and/or cariostatic agent, one treatment	푸	
161	FISSURE SEALING		
	Fissure and/or tooth surface sealing - per tooth	푸	
213	ACUTE PERIODONT		
	Fissure and/or tooth surface sealing - per tooth	4	
222	ROOT PLANING		
	Root planing and subgingival curettage – per tooth	푸	
311	REM PERM TOOTH	п	
	Removal of tooth or part(s) thereof	7	

Step 8a

Enter the **item number** and **item name** (required) and an item description (optional) and tap **NEXT**.

Step 8b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Go to Step 8 to select the newly created item.

Step 9

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
 Note: These codes can be selected from a drop-down list. Tap to display a list of codes
- LSPN

Tap ADD TO CLAIM to add the item to the claim.







Check the Claim details and tap SUBMIT CLAIM.

To cancel the claim, tap CANCEL.

Note: To add more items, tap ADD ITEM. (Go to Step 8)

Note: Check the provider's name and item number are correct.

Step 11 A message will be displayed on the screen Sending to Medicare.

Step 12

The Claim Summary screen will display details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT REBATE**.







▲ * ▼ 100% 0 12:30pm × Discard claim? Are you sure you want to discard the claim? NO YES



\$ 💎 100% 🖸 12:30pm

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Step 14

Step 13

was successful.

The **printing patient receipt** screen will be displayed and the receipt will print automatically.

The **Claim submitted** screen will be displayed if the claim





To print a provider copy of the receipt, press **OK**.



4.4 bulk billed claim – optometric/general practitioner

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.

Step 2

Swipe a Medicare card and go to step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.





Step 2a

Enter a Medicare card number, then tap **NEXT**.

Step 3

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4

On the Medicare transaction screen, tap **Bulk Billed**.







Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 6.

Note: If the provider is not on the terminal, tap **Enter the** provider manually and go to Step 5a.







Step 5a Enter the provider number and tap **NEXT**.

Step 5b Tap **Optometry | General Practice**.

Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 6a.

Select **No** for payment to be made to the servicing provider and go to step 7.

Note: you must press **Yes** to send the payee provider number.





Step 6a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap **NEXT**.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.

Step 7

To check for concession status, tap **YES**.

To continue without checking concession status, tap NO.



Select a referring provider from the displayed list or use the search bar to search for a referring provider's name. Tap the referring provider and go to Step 9.

If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 10.

To create a new referring provider, tap **CREATE MANUALLY** and go to Step 8a.







Step 8a

Enter the referring provider name and number in the **Create referring provider** screen.

Tap **NEXT** to select the newly created referring provider.

Step 9

Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

Tap **NEXT**. Go to Step 11.

Step 11

to Step 11a.

Select a **referral override code** from the drop-down list. Tap **NEXT**.

Use the search bar to find the item name or item number

or scroll the displayed list to find the **item number**. Tap to

To add a new item to the list, tap the plus icon (+) and go

select the required item. Go to step 13.

• 🗱 💎 100% 🖬 12:30pm Select an item Q Search for an item number or name Pinned items 1001 PERIODIC EXAM Ŧ Periodic Oral Examination 121 TOPICAL AGENT Topical application of Ŧ ineralisation and/or cariostatic agent, one treatment 222 ROOT PLANING Ŧ Root planing and subgingival curettage - per tooth All items 1001 PERIODIC EXAM 푸 Periodic Oral Examination 022 INTRAORAL EXPSR 푸 Intraoral periapical or bitewing radiograph – per exposure 114 REM CALCULUS 1 Removal of calculus - first appointment 꾸 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic 푸 agent, one treatment 161 FISSURE SEALING 푸 Fissure and/or tooth surface sealing - per tooth 213 ACUTE PERIODONT 푸 Fissure and/or tooth surface sealing - per tooth 222 ROOT PLANING 푸 Root planing and subgingival curettage – per tooth 311 REM PERM TOOTH 푸 Removal of tooth or part(s) thereof

Step 11a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.





Step 11c

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item.

Tap ADD ITEM.

Step 12

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
 Note: These codes can be selected from a drop-down list. Tap to display a list of codes.
- LSPN

Tap ADD TO CLAIM to add the item to the claim.



0 = 1	• 🔁 🕰	• * • •	' 🖄 🔒 3:36 pm
×	Item details		
1001	PERIODIC EXA	м	
Date	of service	_	
29/	29/02/2024		
Date last 2	of service must be wi 4 months	thin the	
Item	override code		•
Option	nal		
Rest	rictive override o	ode	*
Option	nal		
	ADD T	D CLAIM	

Check the Claim details and tap SUBMIT CLAIM.

Note: Check the provider's name and item number are correct.

Note: To change the referring provider, tap on the three dots next to the referring providers name and select another provider.

When you're ready to submit the claim, tap **SUBMIT CLAIM**.

Step 14

A message will be displayed **Sending to Medicare**.

The **Claim Summary** screen will display details of the claim. The claim summary will display slightly differently depending on the CEV status.

Go to step 14a for claims where CEV has not been requested.

Go to step 14b for claims where CEV was requested and accepted.

Go to step 14c for claims with no concession entitlement.



Step 14a

Tap **ACCEPT** to accept the claim and display the declaration. Go to step 15.



. * 💎 100% 🖬 12:30pm Claim summary Provider Dr Anne Davies 464784833 Total Benefit \$0.00 Concession entitlement verified 0 Items Patient ID 01 01 V 1 item Requesting provider **30hn Smith** 464784833 DECLINE ACCEPT

Step 14b

To print a provider copy of the receipt, press **OK**.

The declaration screen will be displayed.

You should present this screen to the patient and ask them to accept or decline the declaration.

Tap **AGREE** to print a bulk billed patient receipt.

Step 16

You should present this screen to the patient and ask them to confirm the details are correct before tapping **YES** to assign the benefit amount to the provider. A bulk billed patient receipt part 2 will print.

Step 17 To print a provider copy of the receipt, press **OK**.



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5. DIAGNOSTIC CLAIMS

5.1 fully paid claim – diagnostic

Fully Paid claims are performed when a patient or claimant has paid their health professional account in full.

Step 1

Tap **Transactions** from the home screen and select **Submit** a claim from the Medicare section.

Step 2

Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

Step 2a Enter a Medicare card number, then tap **NEXT**.





NEXT

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4

On the Select Medicare transaction screen, tap Fully Paid.

Step 5

If the patient and claimant are the same person, tap **YES** and go to Step 6. Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.





Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

Step 5b Swipe the claimant card and go to Step 5c.

Note: To enter a claimant card number manually, tap **Enter manually**, enter the card number and tap **NEXT**.



Step 5c

Enter the **claimant's IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 6

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap **Enter the provider manually** and go to Step 6a.





Step 6a

Enter the provider number in the search bar and tap **NEXT**.



Step 6b Tap **Diagnostic**.



Step 7

If applicable, select a requesting provider from the displayed list or use the search bar to search for a requesting provider's name. Go to Step 8.

If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 7a.

To create a new requesting provider, tap **CREATE MANUALLY** and go to Step 7b.

Note: You can also use the plus icon (+) to add a new requesting provider, go to Step 7b.

* * 100% © 12:30pm Select requesting provider ① Q Search requesting provider name or ID John Smith 12:345678 Jane Smith 12:345678 Fred Smith 12:345678 SkiP CREATE MANUALLY

Step 7a

Select a requesting override code from the drop-down list. Tap **NEXT**. Go to Step 9.



Step 7b

Enter the requesting provider name and number in the **Create requesting provider** screen.

Tap **NEXT** to select the newly created requesting provider.

Step 7c

Enter the optional requesting provider details. Select the request issue date using the calendar icon.

Note: The request issue date cannot be a future date.

Select a requesting override code by selecting an item from the drop-down list.

Tap **NEXT**.





Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item.

To add a new item to the list, tap the plus icon (+) and go to Step 8a.

Step 8a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

•	¥ ▼ 100% 🖬 12:30pm					
÷	Select an item	Ð				
Q	Search for an item number or name	2				
Pinned items						
1001	PERIODIC EXAM	-				
	Periodic Oral Examination	Ŧ				
121	TOPICAL AGENT					
	Topical application of remineralisation and/or cariostatic agent, one treatment	Ŧ				
222	ROOT PLANING					
	Root planing and subgingival curettage - per tooth	Ŧ				
All items						
1001	PERIODIC EXAM	π				
	Periodic Oral Examination	Ť				
022	INTRAORAL EXPSR	π				
	Intraoral periapical or bitewing radiograph – per exposure	4				
114	REM CALCULUS 1	π				
	Removal of calculus – first appointment	т				
121	TOPICAL AGENT					
	Topical application of remineralisation and/or cariostatic agent, one treatment	푸				
161	FISSURE SEALING	1000				
	Fissure and/or tooth surface sealing - per tooth	꾸				
213	ACUTE PERIODONT					
	Fissure and/or tooth surface sealing - per tooth	Ψ				
222	ROOT PLANING	-				
	Root planing and subgingival curettage – per tooth	4				
311	REM PERM TOOTH	п				
	Removal of tooth or part(s) thereof	T.				



Step 8b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Go to Step 9 to select the newly created item.

Step 9

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
- Equipment number
- LSPN is a required field

Note: This is required if the equipment number is set.

Tap **ADD TO CLAIM** to add the item to the claim.



-			op
	Item details		
1001	PERIODIC EXAM Periodic Oral Examination		
Date o	of service .pr 2019, Thu		
Date o last 2-	of service must be within the 4 months		
(\$) (Cost		
*Requ	ired		
Item	override code	Ŧ	
Optio	nal		
Refer 13 A	ral issue date .pr 2019, Thu		
Option	nal - Cannot be a future date		
Rest	rictive override code	Ŧ	
Optio	nal		
LSP	N		
*Requ	ired		
	ADD TO CLAIM		

To add items to the claim before submitting it, tap **ADD ITEM**. Go to Step 8a.

Note: To change the requesting provider, tap on the three dots next to the requesting provider's name and select another provider.

When you're ready to submit the claim, tap **SUBMIT CLAIM**.



Sending to Medicare

Step 11

A message will be displayed **Sending to Medicare**.

The **Claim Summar**y screen displays details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT REBATE**.

Step 13

The **Rebate** screen will be displayed. Insert or swipe the claimant's debit card to accept the rebate.





Step 14

Ask the cardholder to select the account for the transaction type – **Savings** or **Cheque**.



Ask the cardholder to enter their PIN and tap **ENTER** to proceed.

To cancel the transaction, tap **CANCEL**.



Step 16

The screen will display **Approved** if the rebate was successful.



Step 17

Tap **Print** if you would like a copy of the merchant receipt. If no receipt is required, tap **No Thanks**.



5.2 part paid claim – diagnostic

Part paid claims are used when a claimant has paid a partial contribution toward the full settlement of their account. Upon submission of the claim to Medicare, benefits are assessed as payable and a statement or cheque in the health professional's name will be sent by Medicare to the claimant's address. The cheque is sent by the claimant to the health professional with any outstanding balance.

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.

× Transactions HICAPS Submit a claim 0 Submit a patient claim Request a quote 6 Request a quote from health fund Cancel a claim 8 Cancel a previous claim NAB Refund 3 Refund an EFTPOS transaction Payment Application (\$) Ø Verifone payment application Medicare Submit a claim 0 Submit a patient claim

Step 2

Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.



Step 2a

Enter a Medicare card number, then tap **NEXT**.

Step 3

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4 On the Medicare transaction screen, tap **Part Paid**.







Note: If a Medicare card is swiped from the HICAPS home screen, transaction types **Unpaid** and **Bulk Billed** will also be displayed.

Step 5

If the patient and claimant are the same person, tap **YES** and go to Step 6.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.

Step 5a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 5b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.


Step 5b

Swipe the claimant card and go to Step 5c.

Note: To enter a claimant card number manually, tap Enter manually, enter the card number and tap **NEXT**.

Step 5c

Enter the **claimant's IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 6

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

Note: If the provider is not on the terminal, tap Enter the provider manually and go to Step 6a.







Step 6a

Enter the provider number and tap **NEXT**.

Step 6b Tap **Diagnostic**.

Step 7

Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 7a.

Select **No** for payment to be made to the servicing provider and go to step 8.

Note: you must press **Yes** to send the payee provider number.

Provider number	
466478762	
*Required	





Step 7a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap **NEXT**.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.







Step 8

If applicable, select a requesting provider from the displayed list or use the search bar to search for a requesting provider's name. Tap the requesting provider and go to Step 9.

If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 8b.

To create a new requesting provider, tap **CREATE MANUALLY** and go to Step 8a.

Note: You can also use the plus icon (+) to add a new requesting provider, go to Step 8a.

Step 8a

Enter the requesting provider name and number in the **Create requesting provider** screen.

Tap **NEXT** to select the newly created requesting provider.

Enter the referral details. Select the referral date using the calendar icon (required).

Add the optional referral period and referral override codes by selecting items from the drop-down lists.

Tap **NEXT**.

Step 10

Select a referral override code from the drop-down list.

Tap **NEXT**.





Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to Step 12.

To add a new item to the list, tap the plus icon (+) and go to Step 11a.

Tap ADD ITEM.

Step 11a

Enter the **item number** and **item name** (required) and an item description (optional) and tap **NEXT**.

•	¥ ▼ 100% 🖬 12:30pm	
÷	Select an item	Ð
Q	Search for an item number or name	3
Pinne	d items	
1001	PERIODIC EXAM	-
	Periodic Oral Examination	Ŧ
121	TOPICAL AGENT	
	Topical application of remineralisation and/or cariostatic agent, one treatment	Ŧ
222	ROOT PLANING	
	Root planing and subgingival curettage – per tooth	Ŧ
All ite	ms	
1001	PERIODIC EXAM	TT
	Periodic Oral Examination	Ť
022	INTRAORAL EXPSR	
	Intraoral periapical or bitewing radiograph – per exposure	4
114	REM CALCULUS 1	
	Removal of calculus - first appointment	푸
121	TOPICAL AGENT	
	Topical application of remineralisation and/or cariostatic agent, one treatment	푸
161	FISSURE SEALING	
	Fissure and/or tooth surface sealing - per tooth	Ψ
213	ACUTE PERIODONT	
	Fissure and/or tooth surface sealing – per tooth	Ψ
222	ROOT PLANING	π
	Root planing and subgingival curettage – per tooth	4
311	REM PERM TOOTH	п
	Removal of tooth or part(s) thereof	1



Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Step 12

On the **item details** screen, select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter the patient contribution.

Enter any of the following optional fields:

- Item override code
- Restrictive override code **Note:** These codes can be selected from the drop-down lists. Tap to display a list of codes.
- Equipment number
- LSPN is a required field

Note: This is required if the equipment number is set.

Tap **ADD TO CLAIM** to add the item to the claim.



•	* 🗸	100% 🖸 12:30pm
	Item details	
1001	PERIODIC EXAM Periodic Oral Examination	
Date of 13 A Date of last 2	of service Apr 2019, Thu of service must be within the 4 months	
(\$) (Cost	
Item	override code	Ŧ
Optio	nal	
Refer 13 A	ral issue date Apr 2019, Thu	
Option	nal - Cannot be a future date	
Rest	trictive override code	-
Optio	nal	
LSP	N	
*Requ	uired	
	ADD TO CLAIM	

Check the **Claim** details and tap **SUBMIT CLAIM**.

Note: To add more items, tap ADD ITEM. Go to Step 13.

Note: Check the provider's name and item number are correct.

A message will be displayed **Sending to Medicare**.

Step 14

The **Claim Summary** screen will display details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT**.







The **Claim Submitted** screen will display if the claim is successful.



will display and the receipt will print automatically.



•

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Claim submitted

Step 16

Tap **YES** to print a provider's copy of the Medicare claim receipt for your records.

Tap **NO** if you don't want to print a receipt.



Printing patient receipt

5.3 unpaid claim – diagnostic

The unpaid claim function is used when a claimant has not paid their account. Upon submission of the claim, Medicare benefits are assessed as payable and a statement or cheque in the health professional's name will be sent by Medicare to the claimant's address. The cheque is then sent by the claimant to the health professional with any outstanding balance.

Step 1

From the HICAPS home screen, swipe a Medicare card. Go to Step 3.

To enter a card number manually, tap **Enter health card** and go to Step 1a.

Note: the Medicare loading screen will be displayed if a Medicare card is swiped from the HICAPS home screen, or when a Medicare card is entered manually.



Step 1a

Enter the Medicare card number and tap **NEXT**.





Step 2

Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.



Tap **Unpaid** on the Medicare transaction screen.



Step 4

If the patient and claimant are the same person, tap $\ensuremath{\textbf{YES}}$ and go to Step 6.

Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.



Step 4a

If the patient and claimant Medicare cards are different, tap **NO** and go to Step 4b.

If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 4c.

Same card? Does the claimant have the same Medicare card number as the patient? NO VES

4

Unpaid claim

\$ 💎 100% 🖬 12:30pr





Step 4b

Swipe the claimant's card and go to Step 4c.

Note: You can manually enter a different claimant card number. Tap **Enter manually** and enter the card number and tap **NEXT**.

Step 4c

Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 6.

Note: If the provider is not on the terminal, tap **Enter the** provider manually and go to Step 5a.

Step 5a

Enter the servicing provider number in the search bar and tap **NEXT**.

Step 5b

Tap the **provider type** that matches the servicing provider number entered in Step 6a.







Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 6a.

Select **No** for payment to be made to the servicing provider and go to step 7.

Note: you must press **Yes** to send the payee provider number.



- Additional data

Step 6a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Tap NEXT.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.

Step 7

If applicable, select a requesting provider from the displayed list or use the search bar to search for a requesting provider's name. Go to Step 7c.

To create a new requesting provider, tap **CREATE MANUALLY** and go to Step 7a.

Note: You can also use the plus icon (+) to add a new requesting provider, go to Step 7a.

If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 7b.





Step 7a

Enter the requesting provider name and number in the **Create requesting provider** screen.

Tap **NEXT** to select the newly created requesting provider.

Step 7b

Select a requesting override code from the drop-down list. Tap **NEXT**. Go to Step 9.

Step 7c

Enter the optional requesting provider details. Select the request issue date using the calendar icon.

Note: The request issue date cannot be a future date.

Select a requesting override code by selecting an item from the drop-down list.

Tap NEXT.







Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the item number. Tap to select the required item. Go to Step 10.

To add a new item to the list, tap the plus icon (+) and go to Step 8a.

Tap ADD ITEM.

Step 8a

Enter the item number and item name (required) and an item description (optional) and tap **NEXT**.





Step 8b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Go to Step 9 to select the newly created item.

Step 8c

Then tap the provider to **Add item**. Go to Step 11 after adding the new item.



÷	Medicare items	
	All providers	
Q	Search for an item number or name	
777	PERIODIC EXAM Periodic Oral Examination	:
022	INTRAORAL EXPSR Intraoral periapical or bitewing radiograph – per exposure	:
114	REM CALCULUS 1 Removal of calculus – first appointment	:
121	TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment	:
161	FISSURE SEALING Fissure and/or tooth surface sealing – per tooth	:
213	ACUTE PERIODONT Fissure and/or tooth surface sealing – per tooth	:
222	ROOT PLANING Root planing and subgingival curettage – per tooth	:
311	REM PERM TOOTH TOOTH TY Removal of tooth or part(s) thereof	:
411	PULP CAPPING Direct pulp capping	:
	ADD ITEM	1

On the **item details** screen, select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter the patient contribution.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
- Self deemed code
 Note: These codes can be selected from the drop-down lists. Tap to display a list of codes.
- Equipment number
- LSPN is a required field

Note: This is required if the equipment number is set.

Tap **ADD TO CLAIM** to add the item to the claim.

Step 10

Check the **Claim** details and tap **SUBMIT CLAIM**.

To cancel the claim, tap CANCEL.

Note: To add more items, tap ADD ITEM. Go to Step 13.

Important: Check the provider's name and item number are correct.

•	* 🕈	100% 🖸 12	:30pm
×	Item details		
1001	PERIODIC EXAM Periodic Oral Examination		
Date 13 A	of service Apr 2019, Thu	Ċ	1
last 2 (\$) (4 months Cost		
*Requ	uired		
Iten	n override code		*
Optic	onal		
Refer	ral issue date Apr 2019, Thu	Ċ	
Optio	nal - Cannot be a future date		
Res	trictive override code		v
Optic	onal		
LSP	N		
*Requ	uired		
	ADD TO CLAIM		
• • ×	* ♥ Claim Summary	100% 🖬 12	:30pm



A message will be displayed **Sending to Medicare**.



Claim Summary Provider 0 Dr Anne Davies Total Charged \$300.00 Patient Contribution \$100.00 Items Patient ID 01 01 1 item Requesting provider John Smith 464784833 DECLINE ACCEPT



Step 11

The **Claim Summary** screen will display details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT**. Go to Step 12.

If the details are incorrect on the **Claim Summary** screen, tap **DECLINE**.

Go to Step 11a.

Step 11a

To discard the claim and print a declined receipt, tap **YES**. The terminal will return to the HICAPS home screen.

To return to the claim summary, tap NO.

A message will be displayed on the screen **Sending to Medicare**.

Step 13

The **Claim Summary** screen displays details of the claim.

You should present this screen to the customer and ask them to confirm the details are correct before tapping **ACCEPT REBATE**.

Go to Step 14 for payment.

If the details are incorrect on the **Claim Summary** screen, tap **DECLINE**.

Go to Step 13a.

Step 13a

To discard the claim and print a declined receipt, tap **YES**. The terminal will return to the HICAPS home screen.

To return to the claim summary, tap **NO**.



🛊 💎 100% 🖬 12:30pi

* 🗢 🖹 🖬 2:15 pm

\$100.00

\$87.95

\$100.00

Sending to Medicare

.

8 0 **()** A

Provider

Total

Charged

Rebate

Items

Apr 03 2023 23 mbsitemNumber

01 Patient ID 01

GP GP1

HH0E7C79727362627C

Claim Summary

The **Claim submitted** screen will be displayed if the claim was successful.

Step 15

The **printing patient receipt** screen will be displayed and the receipt will print automatically.





5.4 bulk billed claim

Step 1

Tap **Transactions** from the home screen and select **Submit** a **claim** from the Medicare section.



NEXT

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5

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HICAPS

Transactions

Submit a claim

Submit a patient claim

Cancel a previous claim

Request a quote from health fund Cancel a claim

Step 2

Swipe a Medicare card and go to step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

Step 2a

Enter a Medicare card number, then tap **NEXT**.

Enter the **patient IRN** (the number to the left of the Patient's name on the Medicare card) and tap **NEXT**.

Step 4

On the Medicare transaction screen, tap **Bulk Billed**.

Step 5

Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 6.

Note: If the provider is not on the terminal, tap the link to **Enter the provider manually** and go to Step 5a.





Step 5a

Enter the provider number and tap **NEXT**.

Step 5b Tap **Diagnostic**.

Step 6

Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 6a.

Select **No** for payment to be made to the servicing provider and go to step 7.

Note: you must press **Yes** to send the payee provider number.







Step 6a

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the servicing provider.

Tap **NEXT**.

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.



To check for concession status, tap YES.

To continue without checking concession status, tap NO.

Step 8

Select a requesting provider from the displayed list or use the search bar to search for a requesting provider's name. Tap the requesting provider and go to Step 9.

If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 10.

To create a new requesting provider, tap **CREATE MANUALLY** and go to Step 8a.





SKIP

CREATE MANUALLY

Step 8a

Enter the requesting provider name and number in the **Create requesting provider** screen.

Tap **NEXT** to select the newly created requesting provider.

Step 9

Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

Tap **NEXT**. Go to Step 11.

Step 10 Select a **referral override code** from the drop-down list. Tap **NEXT**.







Use the search bar to find the **item name** or item number or scroll the displayed list to find the **item number**. Tap to select the required item. Go to step 13.

To add a new item to the list, tap the plus icon (+) and go to Step 11a.

Step 11a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.





Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

Step 11c

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item.

Tap ADD ITEM.



•	* 💎 100% 🚺 12	2:30pm		
÷	Select an item			
Q	Search for an item number or name	е		
Pinne	d items			
1001	PERIODIC EXAM	I		
	Periodic Oral Examination	т		
121	TOPICAL AGENT			
	Topical application of remineralisation and/or cariostatic agent, one treatment	Ŧ		
222	ROOT PLANING	22.9		
	Root planing and subgingival curettage – per tooth	Ŧ		
All items				
1001	PERIODIC EXAM	π		
	Periodic Oral Examination	T		
022	INTRAORAL EXPSR			
	Intraoral periapical or bitewing radiograph – per exposure	4		
114	REM CALCULUS 1			
	Removal of calculus – first appointment	꾸		
121	TOPICAL AGENT			
	Topical application of remineralisation and/or cariostatic agent, one treatment	푸		
161	FISSURE SEALING			
	Fissure and/or tooth surface sealing - per tooth	꾸		
213	ACUTE PERIODONT			
	Fissure and/or tooth surface sealing - per tooth	꾸		
222	ROOT PLANING			
	Root planing and subgingival curettage – per tooth	꾸		
311	REM PERM TOOTH	п		
	Removal of tooth or part(s) thereof	T		

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
 Note: These codes can be selected from a drop-down list. Tap to display a list of codes.
- LSPN is a required field

Tap **ADD TO CLAIM** to add the item to the claim.

Step 13

Check the Claim details and tap SUBMIT CLAIM.

Note: Check the provider's name and item number are correct.

Note: To change the requesting provider, tap on the three dots next to the requesting providers name and select another provider.

When you're ready to submit the claim, tap **SUBMIT CLAIM**.





A message will be displayed **Sending to Medicare**.

The **Claim Summary** screen will display details of the claim. The claim summary will display slightly differently depending on the CEV status.

Go to step 14a for claims where CEV has not been requested.

Go to step 14b for claims where CEV was requested and accepted.

Go to step 14c for claims with no concession entitlement.

Step 14a

Tap **ACCEPT** to accept the claim and display the declaration. Go to step 15.





Step 14b

Tap **ACCEPT** to accept the claim and display the declaration. Go to step 15.



* 💎 100% 🖬 12:30pm . Claim summary Provider Dr Anne Davies 6 464784833 Total Benefit \$0.00 \otimes No Concession entitlement verified Items Patient ID 01 01 1 item Requesting provider John Smith 464784833 DECLINE ACCEPT

Step 14c

Tap **ACCEPT** to accept the claim and display the declaration. Go to step 15.

The declaration screen will be displayed.

You should present this screen to the patient and ask them to accept or decline the declaration.

Tap **AGREE** to print a bulk billed patient receipt.

Step 16

You should present this screen to the patient and ask them to confirm the details are correct before tapping **YES** to assign the benefit amount to the provider. A bulk billed patient receipt part 2 will print.

Step 17 To print a provider copy of the receipt, press **OK**.



6. PATHOLOGY CLAIMS

6.1 bulk billed claim – pathology

Step 1

Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.

Step 2

Swipe a Medicare card and go to step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.





Step 2a

Enter a Medicare card number, then tap **NEXT**.

Step 3

Enter the **patient IRN** (the number to the left of the Patient's name on the Medicare card) and tap **NEXT**.

Step 4

On the Medicare transaction screen, tap **Bulk Billed**.







Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 6.

Note: If the provider is not on the terminal, tap the link to **Enter the provider manually** and go to Step 5a.



Enter the provider number and tap **NEXT**.

Step 5b Tap Diagnostic.







Step 6a

Tap NEXT.

servicing provider.

Select **Yes** for payment to be made to someone other than the servicing provider and go to Step 6a.

Select **No** for payment to be made to the servicing provider and go to step 7.

Note: you must press **Yes** to send the payee provider number.

Please verify or enter the Payee provider number (the practitioner who is to be paid for the service).

Note: This is required if the payee provider is not the

Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.



● ▲ * ▼ 100% © 12:30pm ← Additional data Perce provider number 46647876 Optional NEXT



To check for concession status, tap **YES**.

To continue without checking concession status, tap NO.


Select a requesting provider from the displayed list or use the search bar to search for a requesting provider's name. Tap the requesting provider and go to Step 9.

If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 10.

To create a new requesting provider, tap **CREATE MANUALLY** and go to Step 8a.



Step 8a

Enter the requesting provider name and number in the **Create requesting provider** screen.

Tap **NEXT** to select the newly created requesting provider.

Step 9

Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

Tap **NEXT**. Go to Step 11.





Select a referral override code from the drop-down list. Tap **NEXT**.

● ▲ * ● 100% @ 12:30pm ← Referral override Referral override code ← *Required

• 🕈 💎 100% 🖪 12:30pm Select an item Q Search for an item number or name Pinned items 1001 PERIODIC EXAM Ŧ Periodic Oral Examination 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment Ŧ 222 ROOT PLANING Ŧ Root planing and subgingival curettage – per tooth All items 1001 PERIODIC EXAM 푸 Periodic Oral Examination 022 INTRAORAL EXPSR 꾸 Intraoral periapical or bitewing radiograph – per exposure 114 REM CALCULUS 1 д Removal of calculus - first appointment 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment 푸 161 FISSURE SEALING Fissure and/or tooth surface sealing - per tooth 푸 213 ACUTE PERIODONT 푸 Fissure and/or tooth surface sealing – per tooth 222 ROOT PLANING 푸 Root planing and subgingival curettage – per tooth 311 REM PERM TOOTH 푸 Removal of tooth or part(s) thereof

Step 11

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item. Go to step 13.

To add a new item to the list, tap the plus icon (+) and go to Step 11a.

Step 11a

Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

Step 11b

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.





Step 11c

Use the search bar to find the **item name** or **item number** or scroll the displayed list to find the **item number**. Tap to select the required item.

Tap ADD ITEM.

🗴 💎 100% 🖪 12:30pn • ← Medicare items Ð All providers Q Search for an item number or name PERIODIC EXAM 777 : Periodic Oral Examination 022 INTRAORAL EXPSR : Intraoral periapical or bitewing radiograph – per exposure 114 REM CALCULUS 1 Removal of calculus – first appointment : 121 TOPICAL AGENT Topical application of remineralisation and/or cariostatic agent, one treatment : 161 FISSURE SEALING Fissure and/or tooth surface sealing – Per tooth 213 ACUTE PERIODONT Fissure and/or tooth surface sealing per tooth 222 ROOT PLANING Root planing and subgingival curettage 311 REM PERM TOOTH TOOTH TY : Removal of tooth or part(s) there 411 PULP CAPPING ÷ Direct pulp capping ADD ITEM



Step 12

On the **item details** screen select the date of service using the calendar icon.

Note: The date of service must be within the previous 24 months.

Enter any of the following optional fields

- Item override code
- Restrictive override code
 Note: These codes can be selected from a drop-down list. Tap to display a list of codes.
- LSPN

Tap ADD TO CLAIM to add the item to the claim.

Check the Claim details and tap SUBMIT CLAIM.

Note: Check the provider's name and item number are correct.

Note: To change the requesting provider, tap on the three dots next to the requesting providers name and select another provider.

When you're ready to submit the claim, tap **SUBMIT CLAIM**.

Step 14

A message will be displayed **Sending to Medicare**.

The **Claim Summary** screen will display details of the claim. The claim summary will display slightly differently depending on the CEV status.

Go to step 14a for claims where CEV has not been requested.

Go to step 14b for claims where CEV was requested and accepted.

Go to step 14c for claims with no concession entitlement.



Step 14a

Tap **ACCEPT** to accept the claim and display the declaration. Go to step 15.



. * 💎 100% 🖪 12:30pm Claim summary Provider Dr Anne Davies 464784833 Total Benefit \$0.00 Concession entitlement verified 0 Items Patient ID 01 01 V 1 item Requesting provider John Smith 464784833 DECLINE ACCEPT

Step 14b

Tap $\ensuremath{\textbf{ACCEPT}}$ to accept the claim and display the declaration. Go to step 15

Step 14c

Tap **ACCEPT** to accept the claim and display the declaration. Go to step 15.





Step 15

The declaration screen will be displayed.

You should present this screen to the patient and ask them to accept or decline the declaration.

Tap **AGREE** to print a bulk billed patient receipt.

You should present this screen to the patient and ask them to confirm the details are correct before tapping **YES** to assign the benefit amount to the provider. A bulk billed patient receipt part 2 will print.

* ▼ 100% 0 12:30pm *medicare* Assign benefit to the provider? I assign my right to benefits to the practioner who rendered the services \$38.20 - BENEFIT AMOUNT NO YES



Step 17

To print a provider copy of the receipt, press **OK**.

7. ADDING NEW ITEMS

7.1 adding new items

Step 1

From the **Select an item** screen, tap the plus icon + on the top right of the screen to add an item manually.



Enter the **item number** and **item title** (required) and the **item description** (optional) and tap **NEXT**.

Note: The Item number description can be a maximum of 50 characters including spaces.

Step 3

Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.





The new item will be displayed in the list of items for the selected provider.

Adding a new item is now complete.

	■ A ¥ 100% ■ 12:30pm		
÷	Select an item	Ð	
Q	Search for an item number or nam	e	
Pinne	d items		
1001	PERIODIC EXAM	-	
	Periodic Oral Examination	+	
121	TOPICAL AGENT		
	Topical application of remineralisation and/or cariostatic agent, one treatment	Ŧ	
222	ROOT PLANING		
	Root planing and subgingival curettage – per tooth	Ŧ	
All ite	ms		
1001	PERIODIC EXAM	π	
	Periodic Oral Examination	4	
022	INTRAORAL EXPSR		
	Intraoral periapical or bitewing radiograph – per exposure	4	
114	REM CALCULUS 1	11	
	Removal of calculus – first appointment	4	
121	TOPICAL AGENT		
	Topical application of remineralisation and/or carlostatic agent, one treatment	꾸	
161	FISSURE SEALING	_	
	Fissure and/or tooth surface sealing - per tooth	4	
213	ACUTE PERIODONT		
	Fissure and/or tooth surface sealing - per tooth	4	
222	ROOT PLANING		
	Root planing and subgingival curettage – per tooth	4	
311	REM PERM TOOTH	п	
	Removal of tooth or part(s) thereof	T	

8. REPORTS AND SETTLEMENT

Reports and Settlement functions for Medicare Easyclaim transactions can be selected by tapping the Reports icon or the Settlement icon on the HICAPS home screen.

Insert, swipe or tap health card
 if Enter healt



Tap on Medicare reports to display or print the Medicare transaction list or to reprint Medicare receipts.

9. ERROR SCREENS AND CONDITIONS

9.1 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.

Tap **RETRY** 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.

Tap **CANCEL** to cancel the transaction.



9.2 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 digital claiming return codes**.

9.3 bulk billed claims cancelled by the practice or patient

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



9.4 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.

10. HELPDESK TELEPHONE NUMBERS

For EFTPOS related issues and questions please contact the HICAPS Help Desk on **1300 650 852**

For practitioner enquiries regarding claim assessment or other enquiries relating to Medicare systems please call the Medicare Australia Provider Line 24 hours, 7 days **132 150**.

Further information is available at **www.medicareaustralia.gov.au**.

Alternatively refer to MEDICARE E Business Service Centre on 1800 700 199.

For the convenience of your patients, for patient or claimant enquiries regarding claim assessment or other general Medicare enquiries, patients can call the Medicare Australia Consumer Line 24 hours, 7 days **132 011**

11. ACCESS SUPPORT GUIDES

For the most up to date version of this Medicare Easyclaim user guide, the Trinity Terminal user guide or Quick reference guide please scan the QR code below.

To access the QR Code from the Trinity Terminal

- 1. Select support
- 2. Terminal Guides
- 3. Then scan the QR Code





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