HICAPS
MEDICARE EASYCLAIM
User guide

medicare
easyclaim

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.

TABLE OF CONTENTS

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 **HICAPS Accounts Online**. 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 **www.hicaps.com.au/forms** 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 **www.hicaps.com.au/forms** *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.
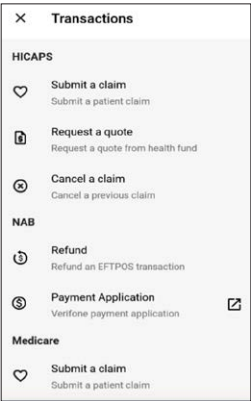
3. SPECIALIST, ANCILLARY HEALTH CARE AND DENTAL CLAIMS

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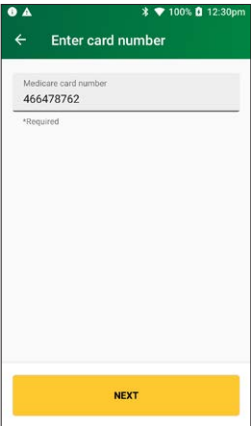
Step 2
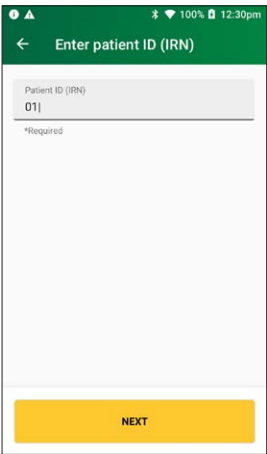Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

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.**

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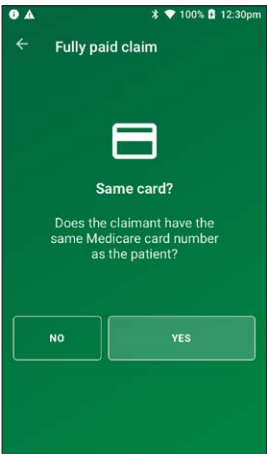
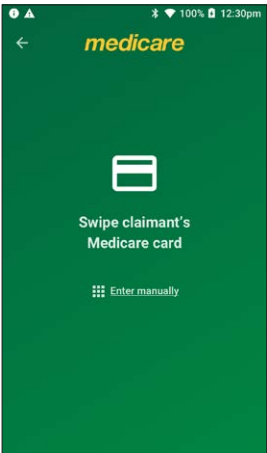**Note:** The patient and claimant cannot be the same if the patient is a minor.

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 **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.

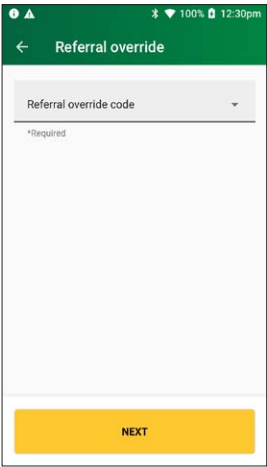To create a new referring provider, tap **CREATE MANUALLY** and go to Step 7b.

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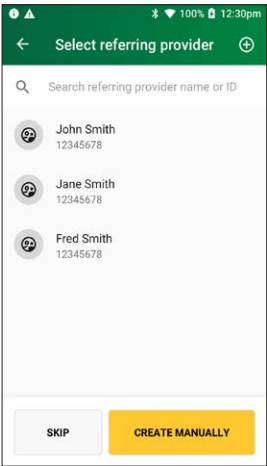
Step 7a

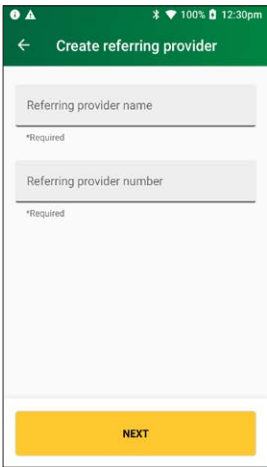Select a referral override code from the drop-down list. Tap **NEXT**. Go to Step 9.

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.

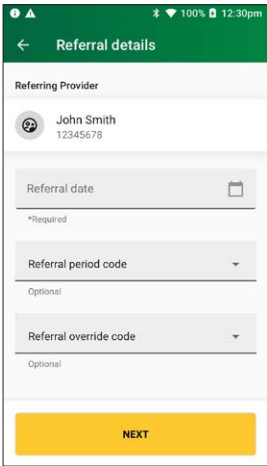Tap **NEXT** to select the newly created referring provider.

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.
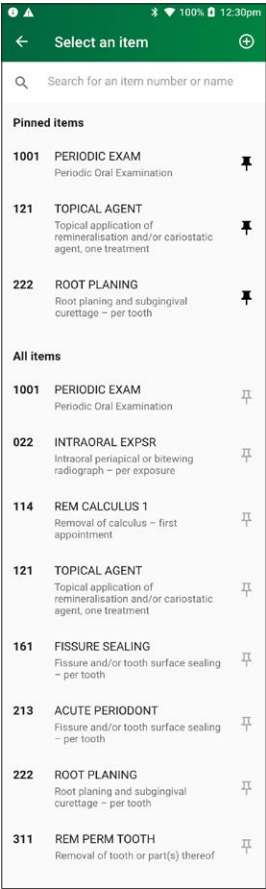
Tap **NEXT**.

Step 9

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**.

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.

Step 11

The claim details will be displayed.

To add items to the claim before submitting it, tap **ADD ITEM** and go to Step 9.
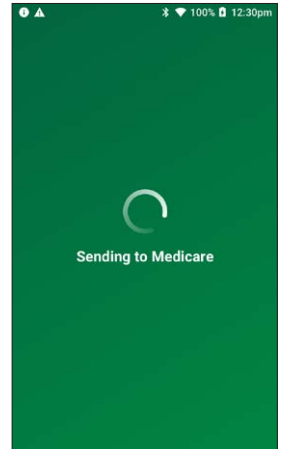
To change the referring provider before submitting the claim, tap on the three dots ⋮ next to the referring provider's name and select another provider. Go to Step 8.

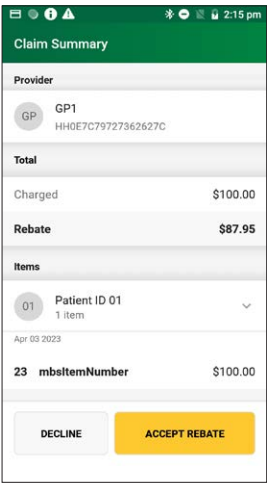When you're ready to submit the claim, tap **SUBMIT CLAIM**.

Step 12

A message will be displayed **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**.
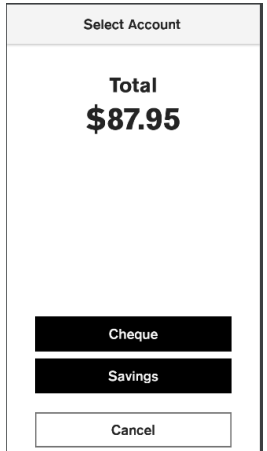
Step 14

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**.
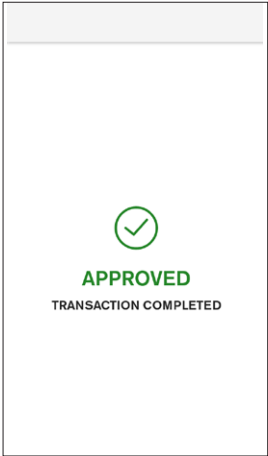
Step 16

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

Enter PIN		
Total $87.95		
1	2	3
4	5	6
7	8	9
C	0	
Cancel		Enter

Step 17

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

⊘

APPROVED

TRANSACTION COMPLETED

Step 18
Tap **Print** if you would like to print the merchant receipt.
If no receipt is required, tap **NO THANKS**.
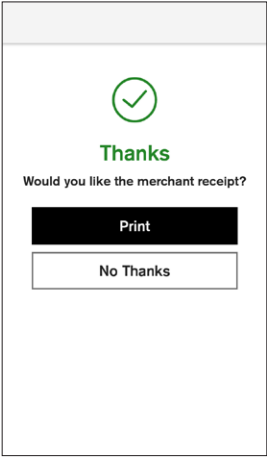
3.2 part paid claim – specialist, ancillary health care and dental

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
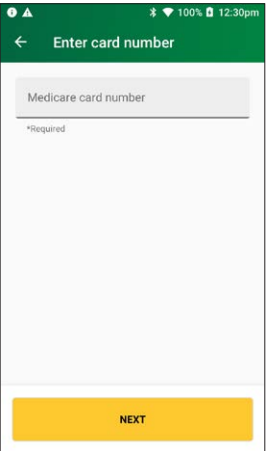
Step 2

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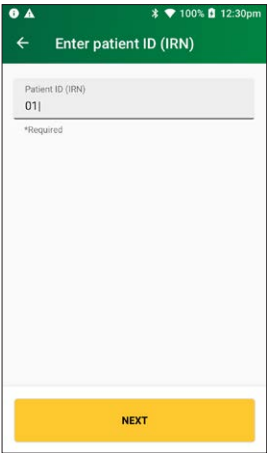

Step 2a

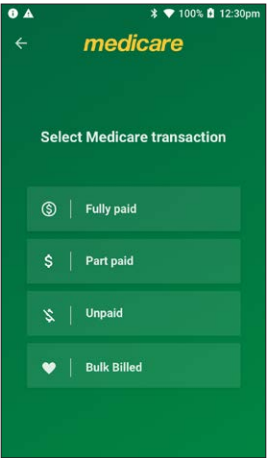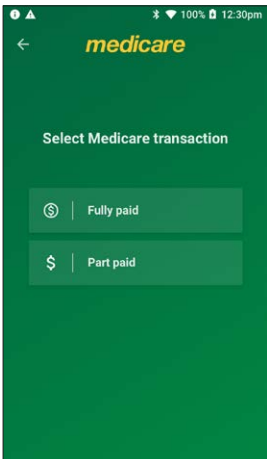Enter a Medicare card number, then tap **NEXT**.

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 **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.
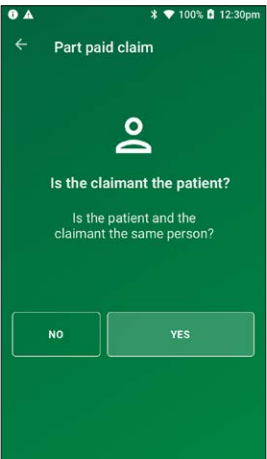
Step 5

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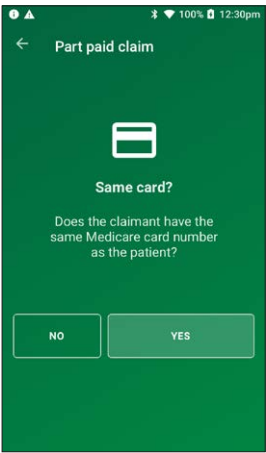
Otherwise, tap **NO** and go to Step 5a.

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

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**.
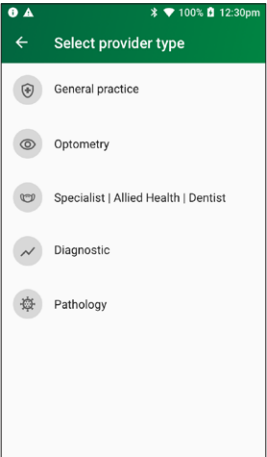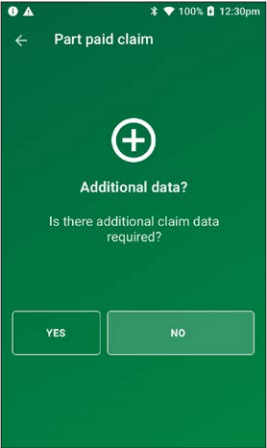
Step 6b
Tap **Specialist | Allied Health | Dentist**.

Step 7
If there is no additional claim data, tap **NO** and go to Step 8.

If there is additional claim data tap **YES** and go to Step 7a.

Step 7a
Enter the **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only 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.
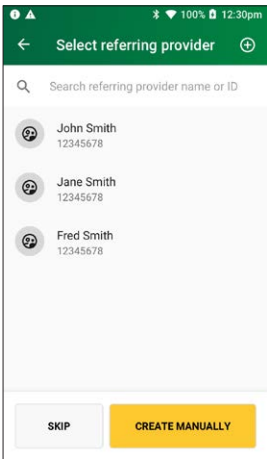
Step 8

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 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.

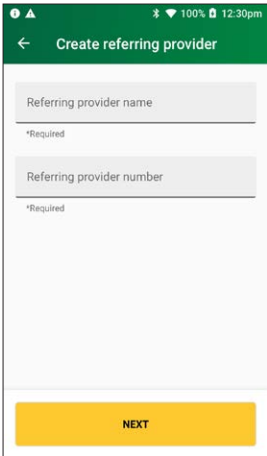To create a new referring provider, tap **CREATE MANUALLY** and go to Step 8a.

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.

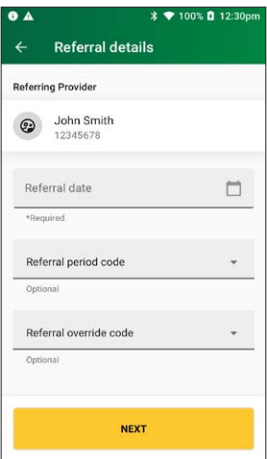Tap **NEXT** to select the newly created referring provider.

Step 9

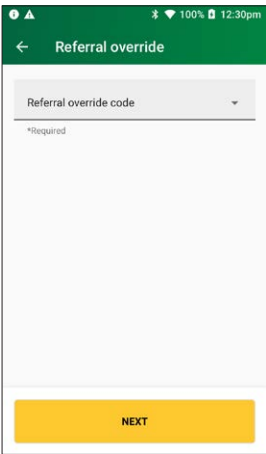Enter the referral details. Select the referral date using the calendar icon (required).

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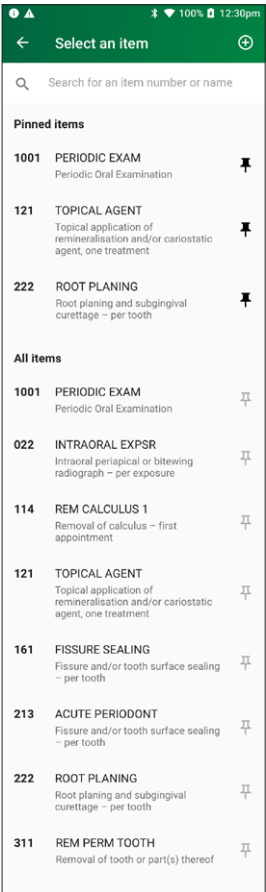
Tap **NEXT**.

Step 10

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.

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.

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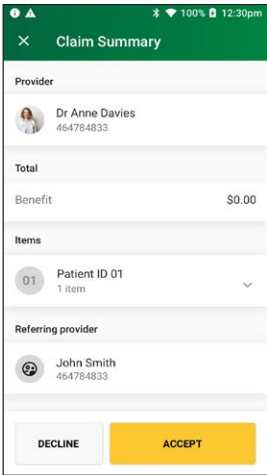
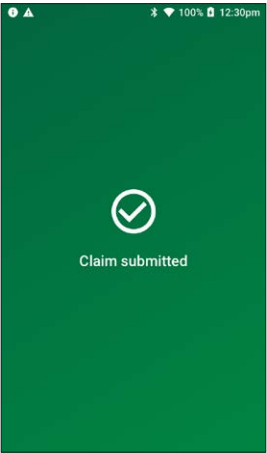A message will be displayed **Sending to Medicare**.

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**.

Step 15
The **Claim Submitted** screen will display if the claim is successful.

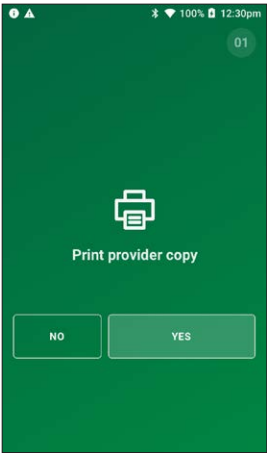**Note: Printing patient receipt** will display and the receipt will print automatically.

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.

Step 1

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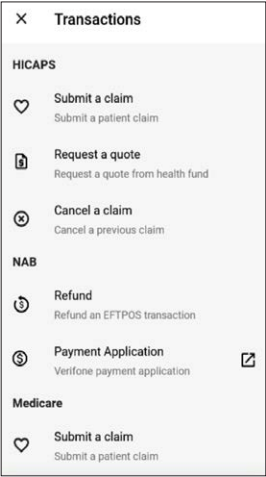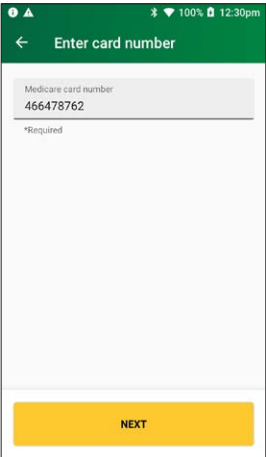

Step 2

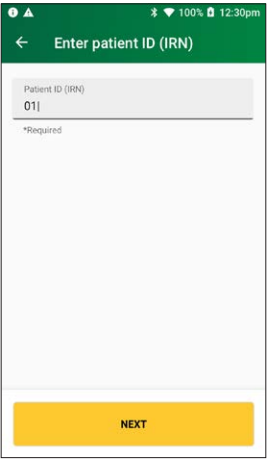Swipe a Medicare and go to step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

Step 2a

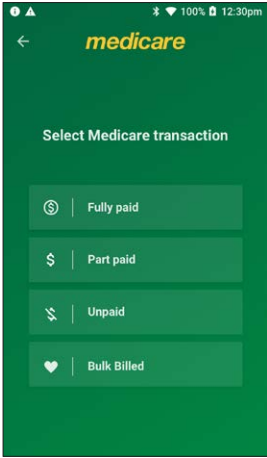Enter a Medicare card number, then tap **NEXT**.

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 **Select Medicare transaction** screen, tap **Unpaid**.

Step 5

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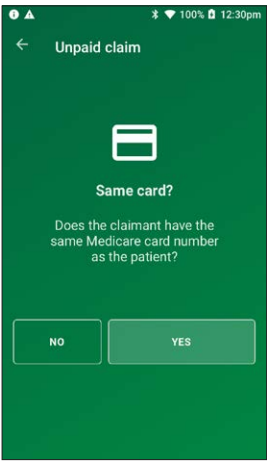
Otherwise, tap **NO** and go to Step 5a.

Note: The patient and claimant cannot be the same if the patient is a minor.
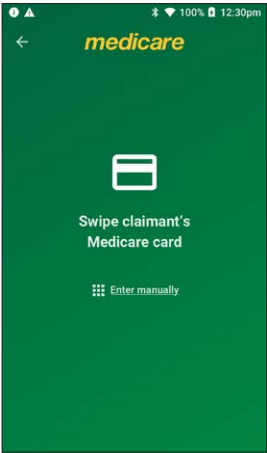
Step 5a

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.
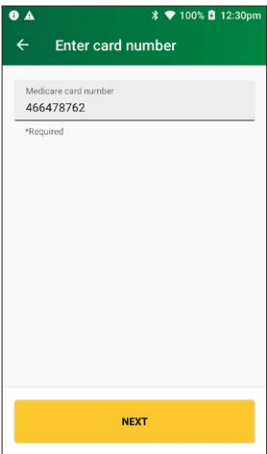
Step 5b

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**.
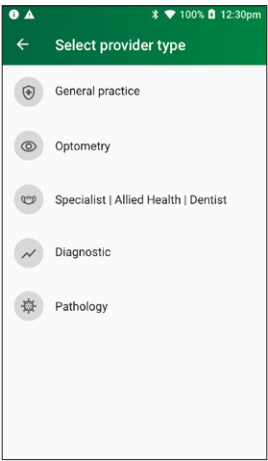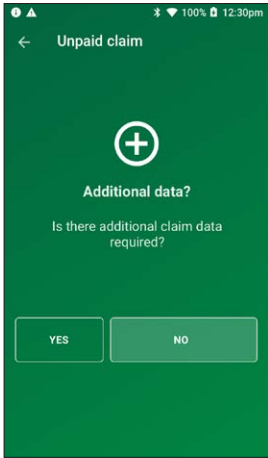
Step 6b
Tap **Specialist | Allied Health | Dentist**.

Step 7
If there is no additional claim data, tap **NO** and go to Step 8.
For additional claim data tap **YES** and go to Step 7a.

Step 7a
Enter **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only 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.
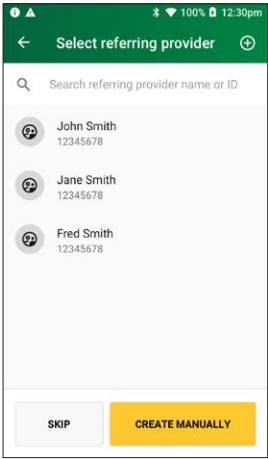
Step 8

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

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

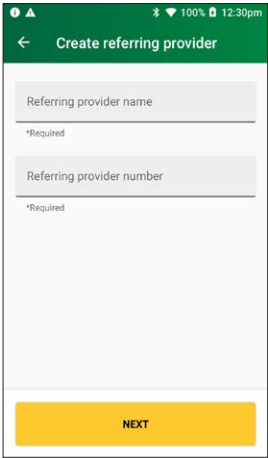To create a new referring provider, tap **CREATE MANUALLY** and go to Step 7a.

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

Step 8a

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

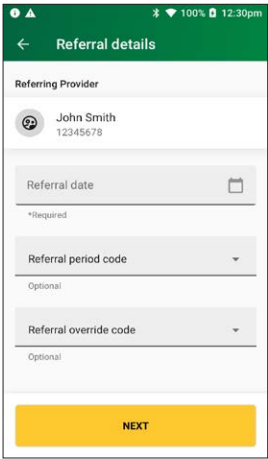Tap **NEXT** to select the newly created referring provider.

Step 9

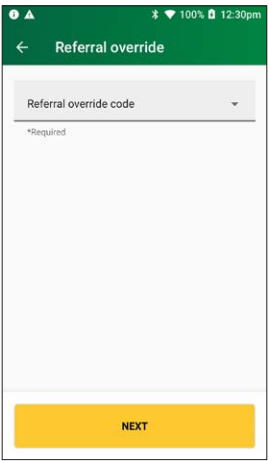Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.
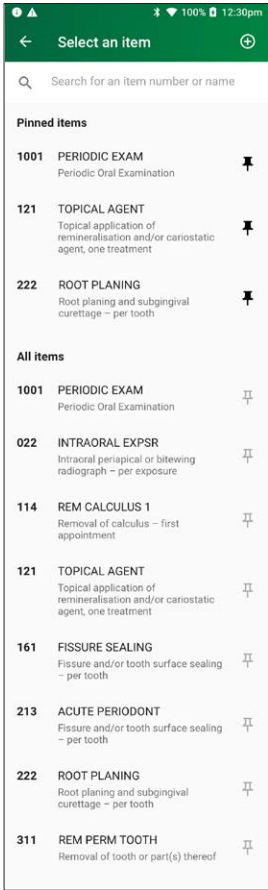
Tap **NEXT**. Go to Step 10.

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

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.

Step 11

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

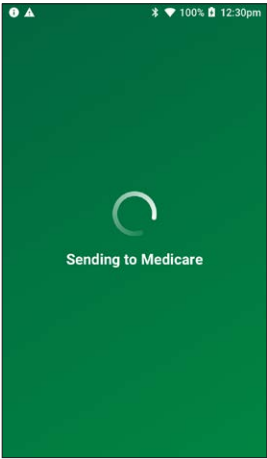Tap **ADD TO CLAIM** to add the item to the claim.

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.
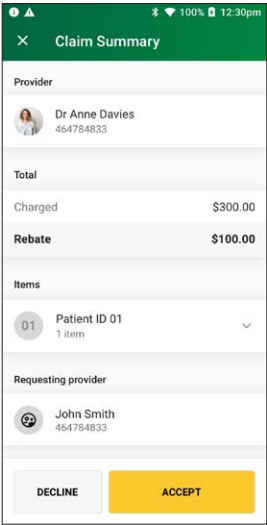
Step 13

A message will be displayed on the screen **Sending to Medicare**.
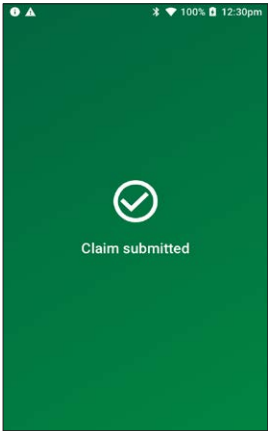
Step 14

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.

Step 15

The **Claim submitted** screen will be displayed if the claim was successful.
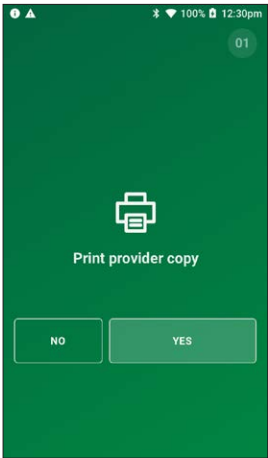
Step 16

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

Step 17

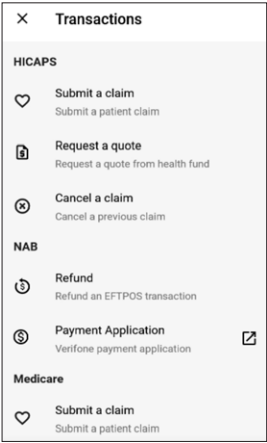Tap **YES** to print a provider's copy of the Medicare claim receipt for your records.

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

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**.

Step 3
Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.
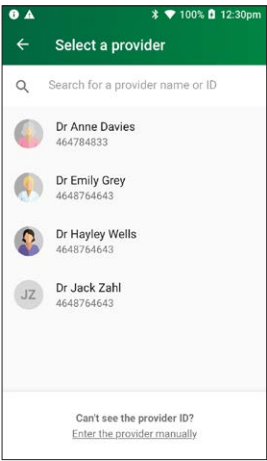
Step 4
On the Medicare transaction screen, tap **Bulk Billed**.
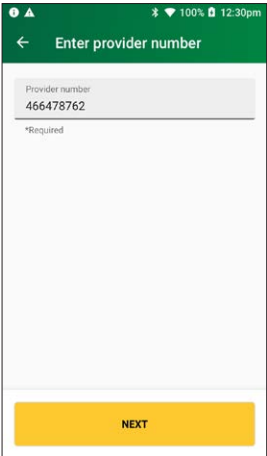
Step 5

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.
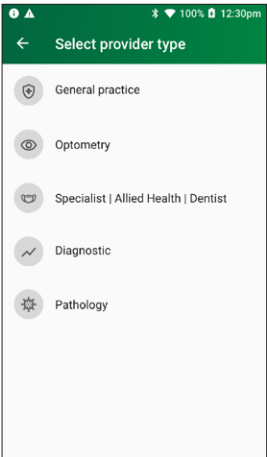
Step 5a

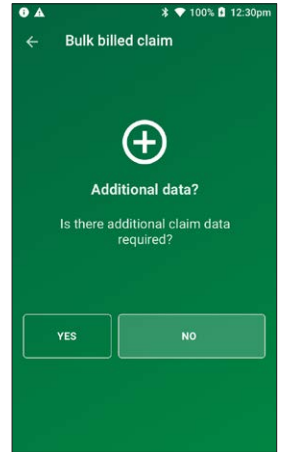Enter the provider number and tap **NEXT**.

Step 5b

Tap **Specialist | Allied Health | Dentist**.

Step 6

If there is no additional claim data, tap **NO** and go to Step 7.

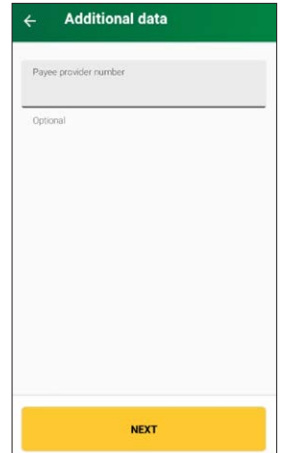If there is additional claim data tap **YES** and go to Step 6a.

Step 6a

Enter the **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only required if the payee provider is not the servicing provider. Tap **NEXT**.
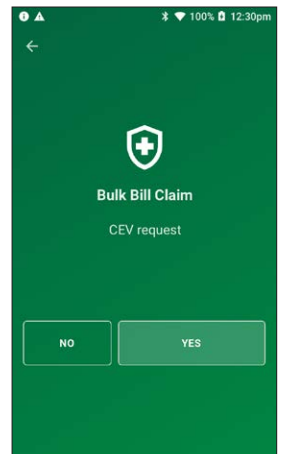
Note: Tap **NEXT** without entering a payee provider number to bypass this step. The field will be populated with the payee if they are attached to the selected provider.

Step 7

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

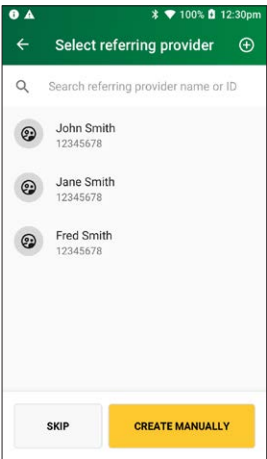To continue without checking concession status, tap **NO**.

Step 8

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.

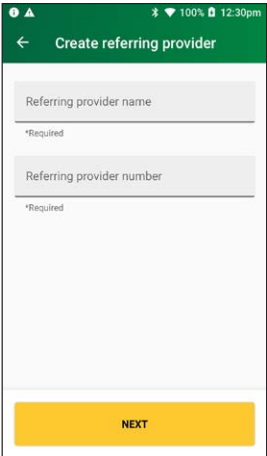If there is no referring provider displayed (or no referring provider required), tap **SKIP** and go to Step 10.

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.

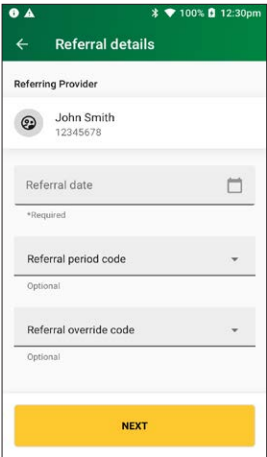Tap **NEXT** to select the newly created referring provider.

Step 9

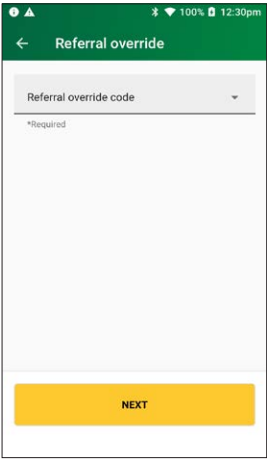Enter the referral details. Select the **referral date** using the calendar icon (required).

Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.
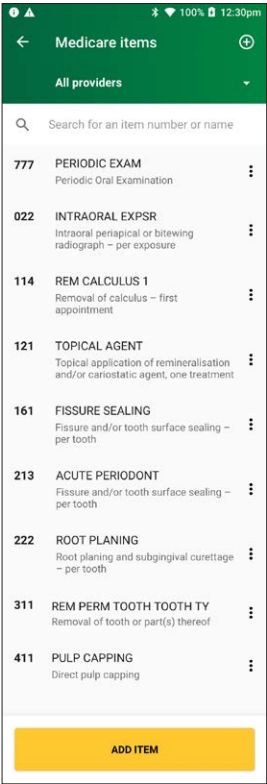
Tap **NEXT**. Go to Step 11.

Step 10

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 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**.

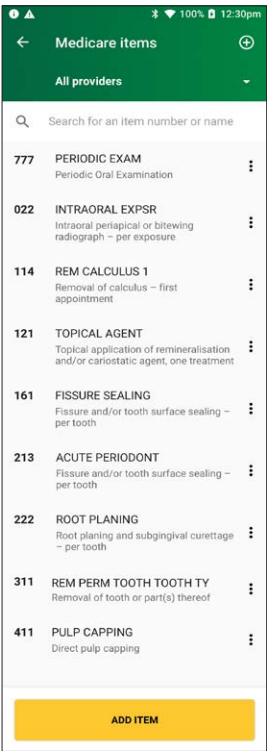**Note:** To assign an item to all providers on the terminal, tap All Providers, then tap **ASSIGN**.

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**.

Step 12

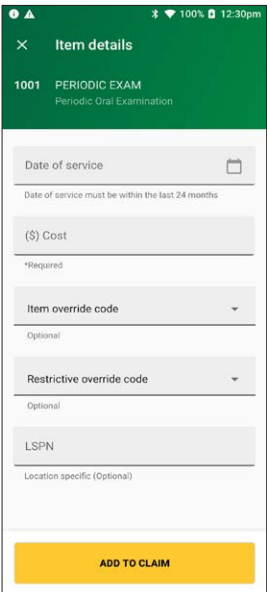On the **item details** screen select the date of service using the calendar icon.

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

Enter the item cost.

Enter 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.

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

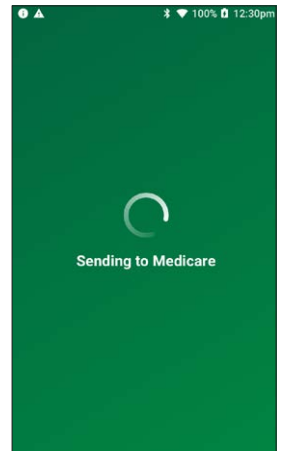When you're ready to submit the claim, tap **SUBMIT CLAIM**.

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.

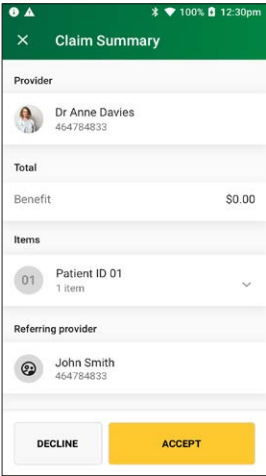Go to Step 14a for claims where CEV has not been requested.

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

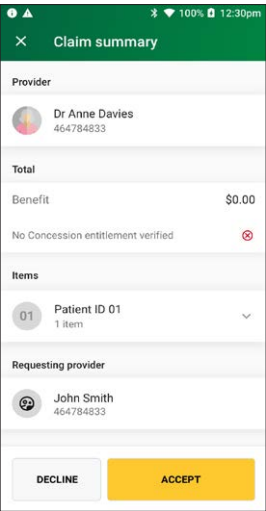Go to Step 14c for claims with no concession entitlement.

Step 14a
Tap **ACCEPT** to accept the claim and display the declaration.
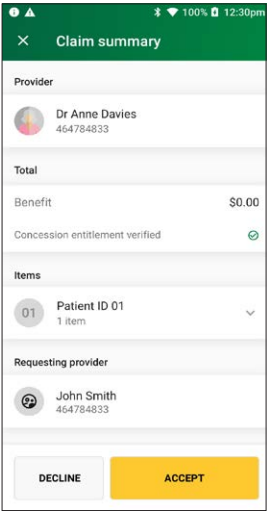Go to Step 15.

Step 14b
Tap **ACCEPT** to accept the claim and display the declaration.
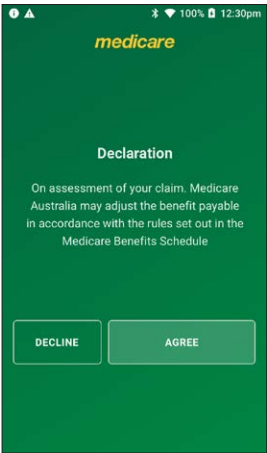Go to Step 15.

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.

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.
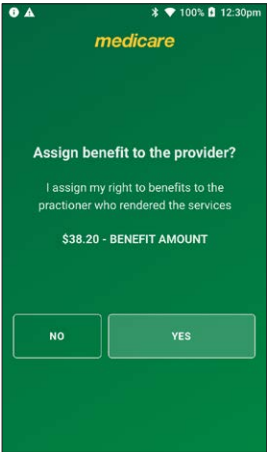
Step 17

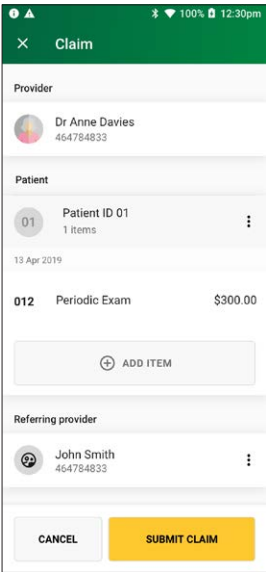To print a provider copy of the receipt, tap **OK**.

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.

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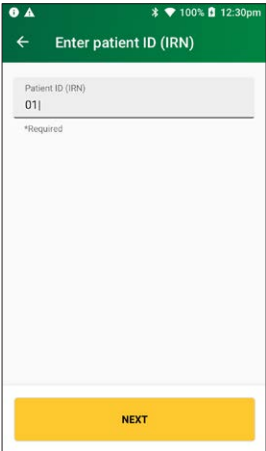
Step 2a
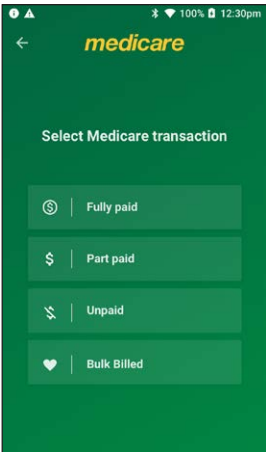Enter a Medicare card number, then tap **NEXT**.

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**.

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.
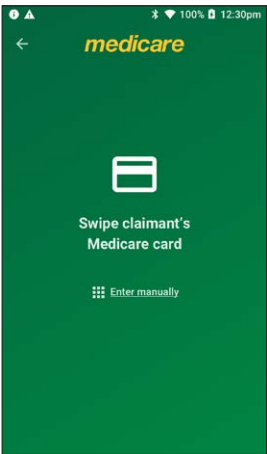

Step 5a

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.
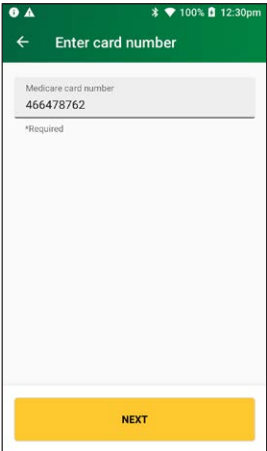
Step 5b

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**.
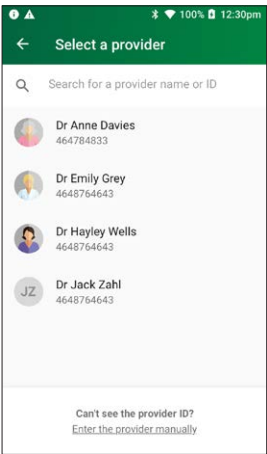
Step 5c

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

Step 6

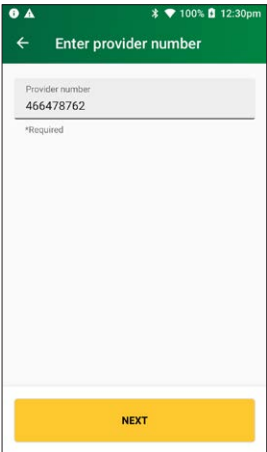Select a provider from the displayed list or use the search bar to search for a provider's name. Tap the provider you want to claim with, then tap **NEXT**. Go to Step 7.

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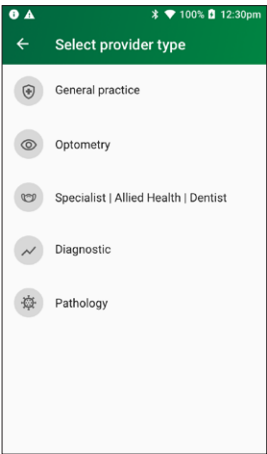
Step 6a

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

Step 6b

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

Step 7

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**.

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**.

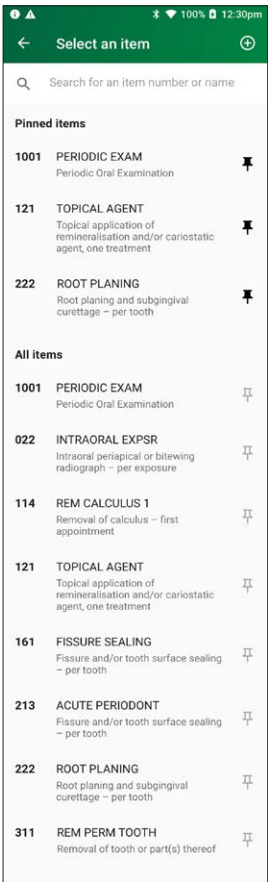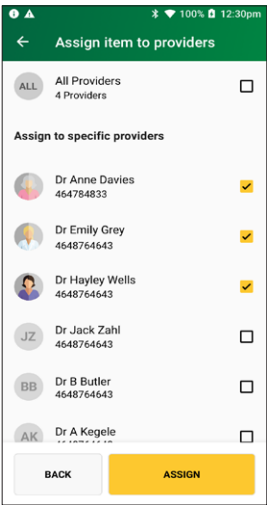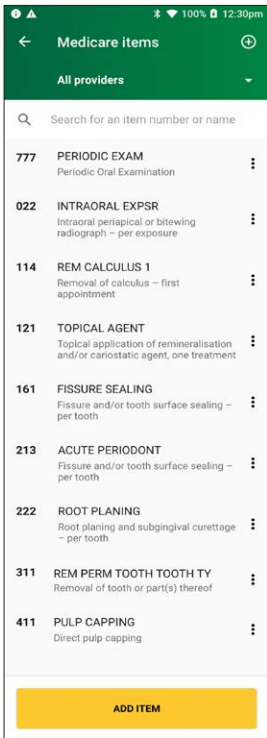**Note:** To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

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**.

Step 8

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

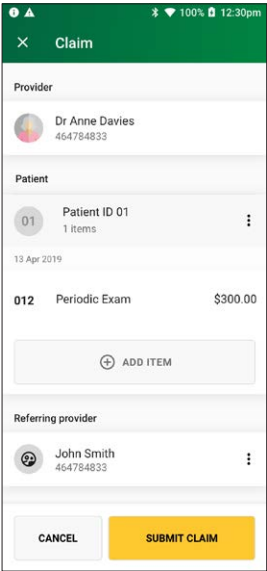To add items to the claim before submitting it, tap **ADD ITEM**.
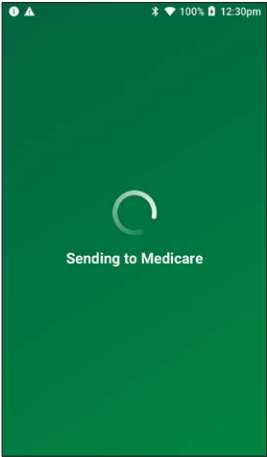
Enter item details and tap **NEXT** to proceed.

Step 10
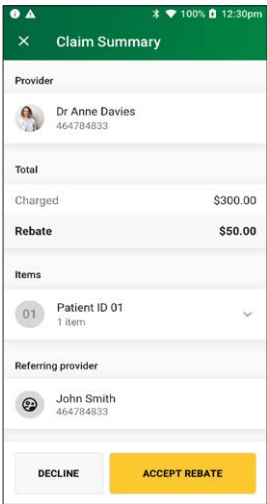When you're ready to submit the claim, tap **SUBMIT CLAIM**.

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

Step 11

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**.
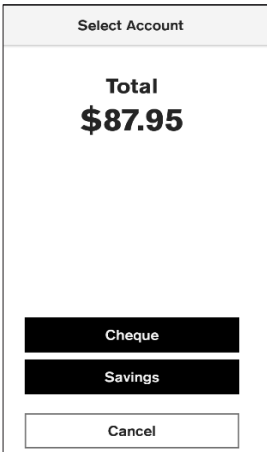

Step 12

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.

Step 14

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

Enter PIN		
Total $87.95		
1	2	3
4	5	6
7	8	9
C	0	
Cancel		Enter

Step 15

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

APPROVED
TRANSACTION COMPLETED

Step 16

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

Thanks
Would you like the merchant receipt?

Print

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.
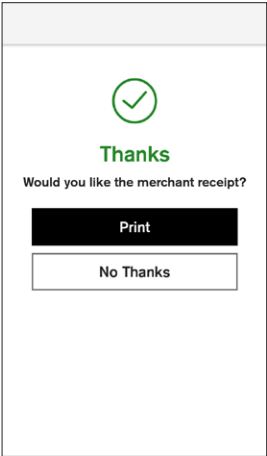
Step 1
Tap **Transactions** from the home screen and select **Submit a claim** from the Medicare section.
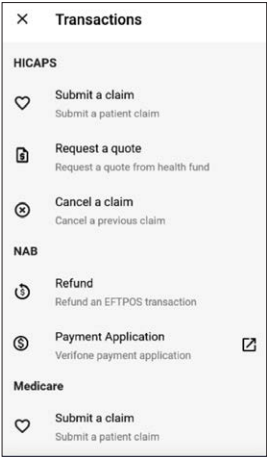
Step 2
To print a provider copy of the receipt, press **OK**.

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**.
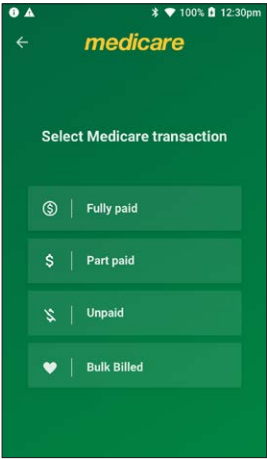
Step 4

On the Medicare transaction 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.
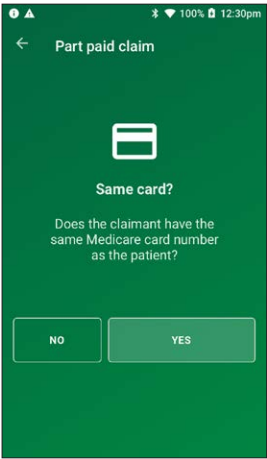
Otherwise, tap **NO** and go to Step 5a.

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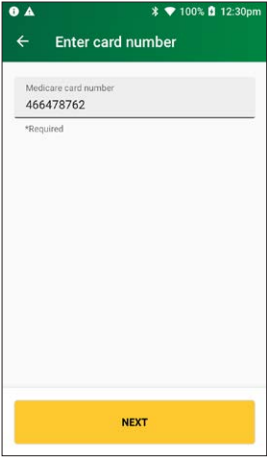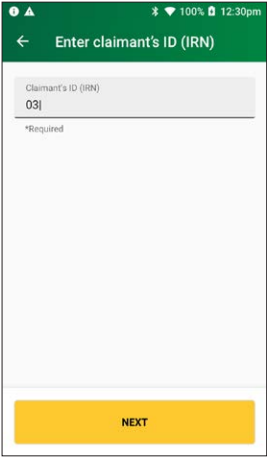
Step 5b
Swipe the claimant card and go to Step 5c.

Note: To enter a claimant card number manually, tap **Enter manually**, enter the card number and tap **NEXT**.
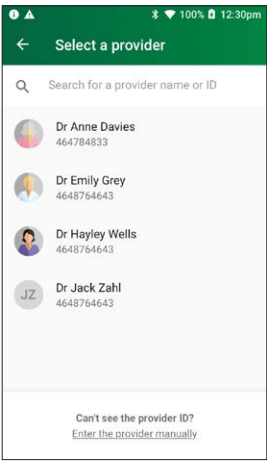
Step 5c
Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.
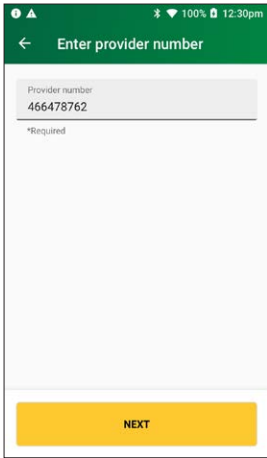
Step 6

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.
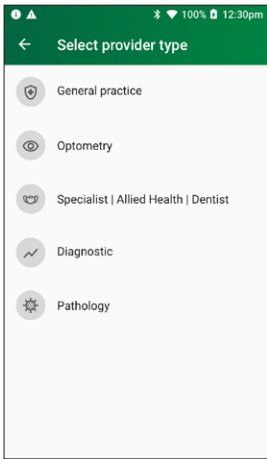
Step 6a

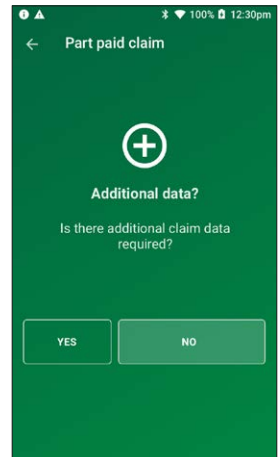Enter the provider number and tap **NEXT**

Step 6b

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

Step 7

If there is no additional claim data, tap **NO** and go to Step 8.

If there is additional claim data tap **YES** and go to Step 7a.

Step 7a

Enter the **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only 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.
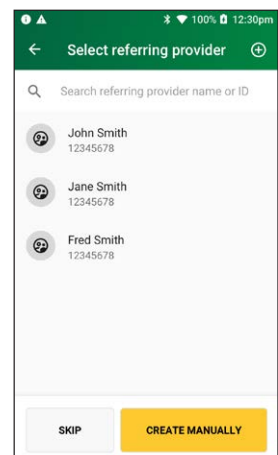
Step 8

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.

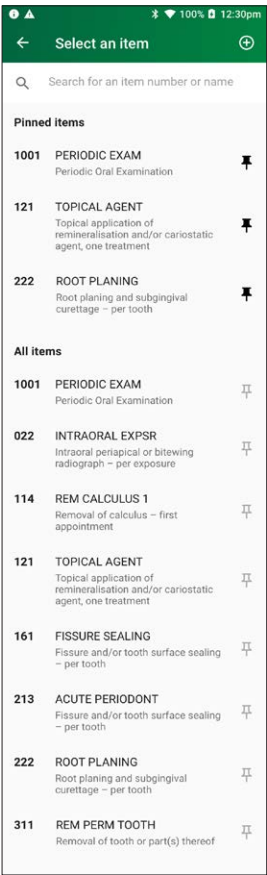Tap **NEXT**.

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.

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.
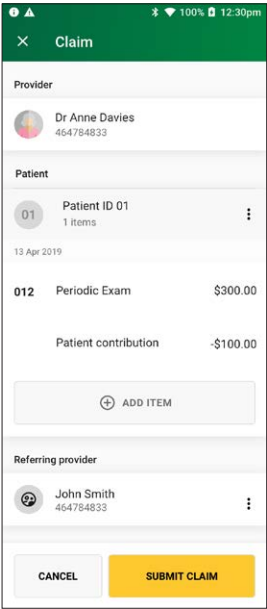- LSPN

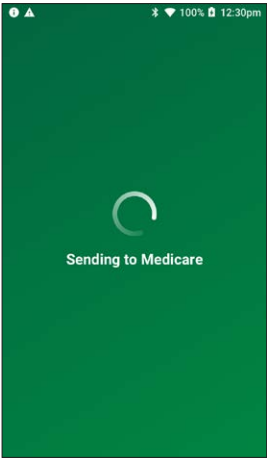Tap **ADD TO CLAIM** to add the item to the claim.

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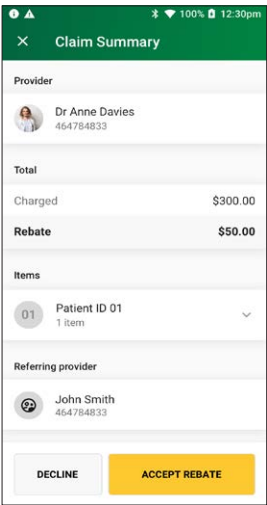
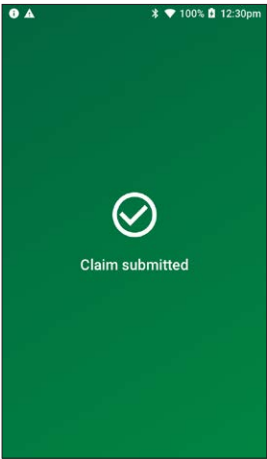A message will be displayed on the screen **Sending to Medicare**.

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**.

Step 15

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

Step 14

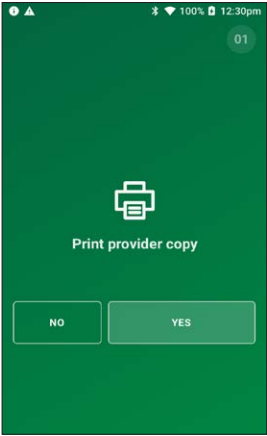The **printing patient receipt** screen will be displayed and the receipt will print automatically.

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.

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**.

Step 4

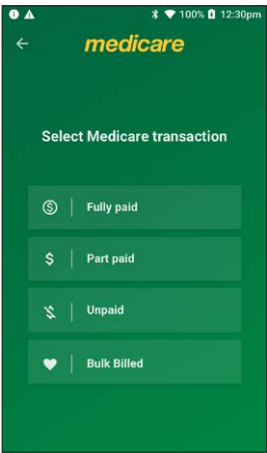Tap **Unpaid** on the Medicare transaction screen.

Step 5

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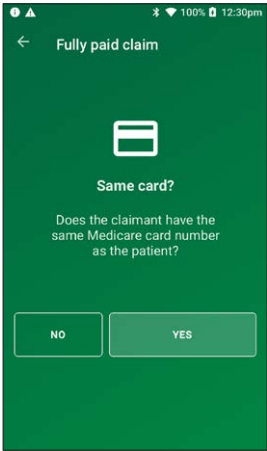
If the patient and claimant Medicare cards are the same, tap **YES** and go to Step 5c.

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

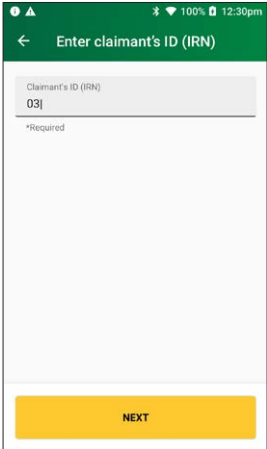### Step 5b
Swipe the claimant's card and go to Step 5c.

Step 5c
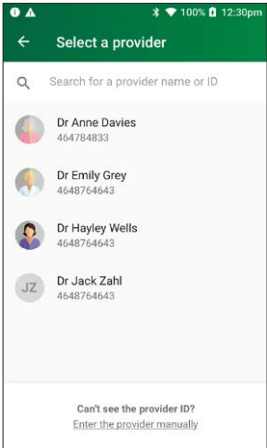Enter the **claimant's IRN** (the number to the left of the claimant's name on the Medicare card) and tap **NEXT**.

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.
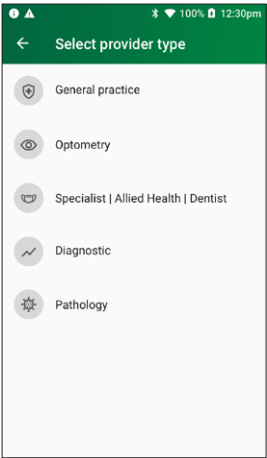
Step 6a
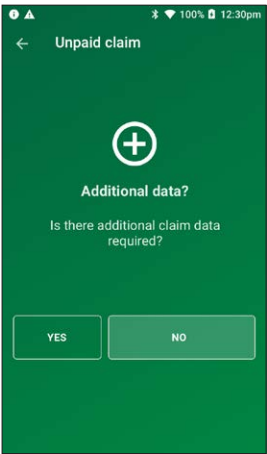Enter the servicing provider number in the search bar and tap **NEXT**.

Step 6b
Tap the **provider type** that matches the servicing provider number entered in Step 7a.

Step 7
If there is no additional claim data, tap **NO** and go to Step 8. For additional claim data tap **YES** and go to Step 7a.

Step 7a

Enter the **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only 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.

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

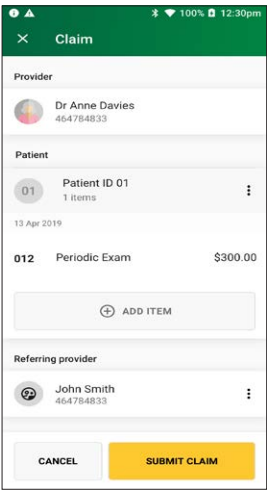Tap **ADD TO CLAIM** to add the item to the claim.

Step 10

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

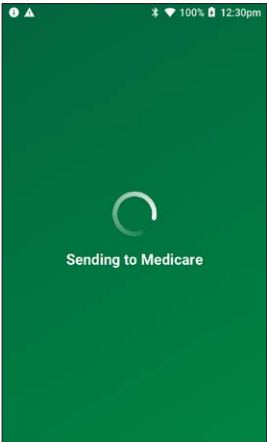To cancel the claim, tap **CANCEL**.

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

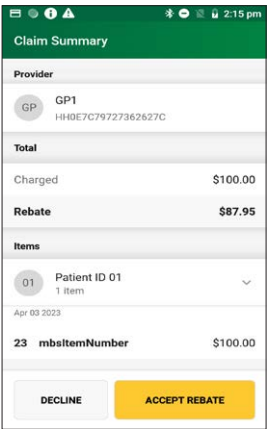**Note:** Check the provider's name and item number are correct.

Step 11

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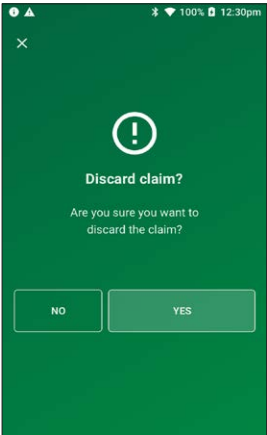

Step 12

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**.
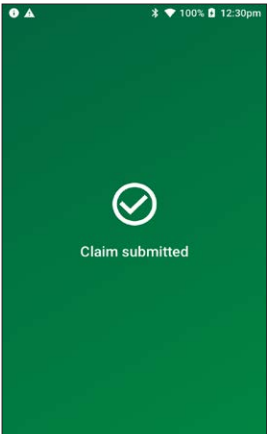
Step 12a

Step 13

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

Step 14

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

Step 15

To print a provider copy of the receipt, press **OK**.
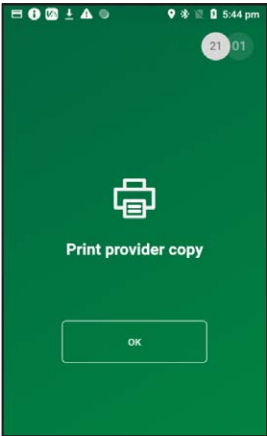
4.4 bulk billed claim – optometric/general practitioner

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**.

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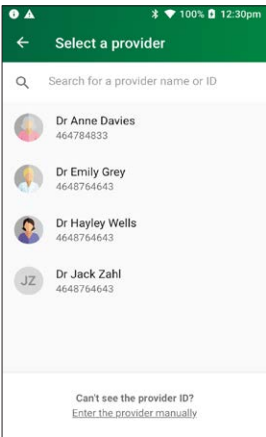
Note: If the provider is not on the terminal, tap **Enter the provider manually** and go to Step 5a.
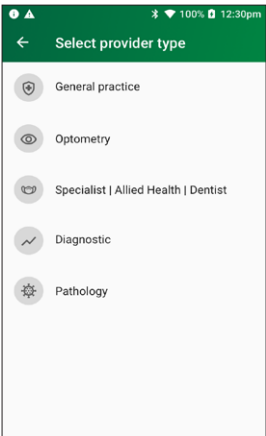
Step 5a

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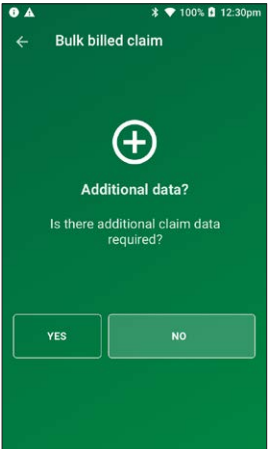
Step 5b

Tap **Optometry | General Practice**.

Step 6

If there is no additional claim data, tap **NO** and go to Step 7.

If there is additional claim data tap **YES** and go to Step 6a.

Step 6a

Enter the **Payee provider number** [optional]
(the practitioner who is to be paid for the service).

Note: This is only required if the payee provider is not the servicing provider.
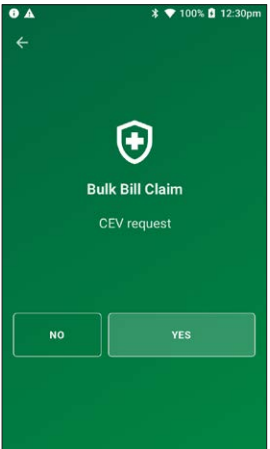
Tap **NEXT**.

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**.

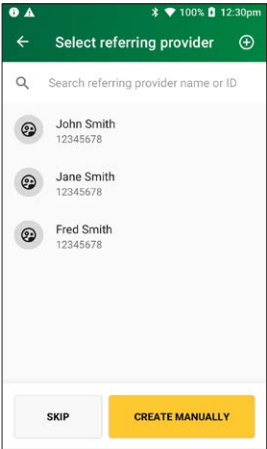To continue without checking concession status, tap **NO**.

Step 8

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 10

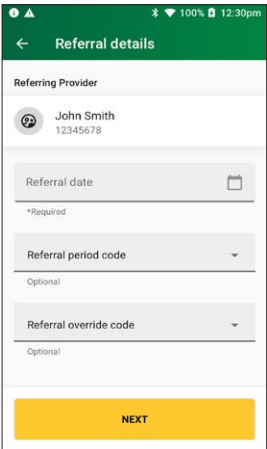Select a **referral override code** from the drop-down list. Tap **NEXT**.

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 13.

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

Step 11a

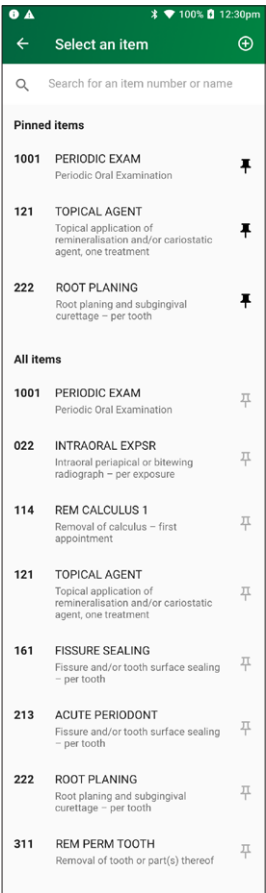Enter the **item number** and **item name** (required) and an **item description** (optional) and tap **NEXT**.

Step 11b

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

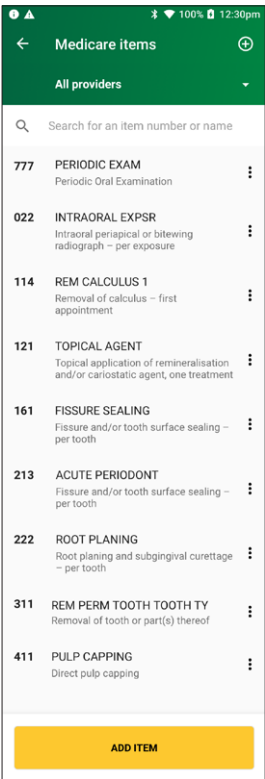**Note:** To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

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**.

Step 12

On the **item details** screen select the date of service using the calendar icon.
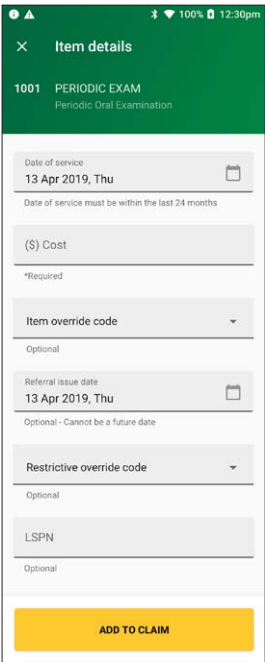
Note: The date of service must be within the previous 24 months.

Enter the item cost.

Enter 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

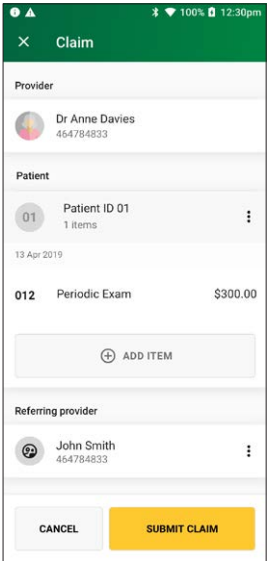Tap **ADD TO CLAIM** to add the item to the claim.

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

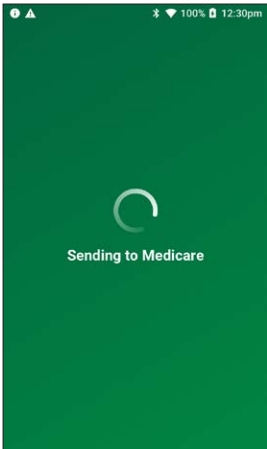When you're ready to submit the claim, tap **SUBMIT CLAIM**.

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.

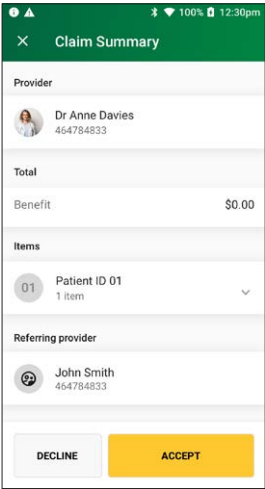Go to step 14a for claims where CEV has not been requested.

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

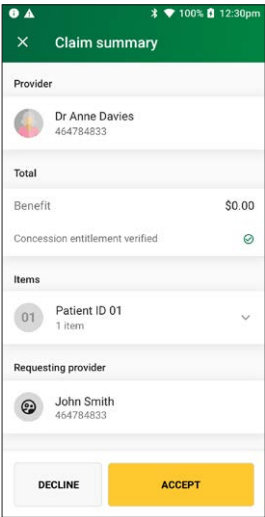Go to step 14c for claims with no concession entitlement.

Step 14a

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

Step 14b

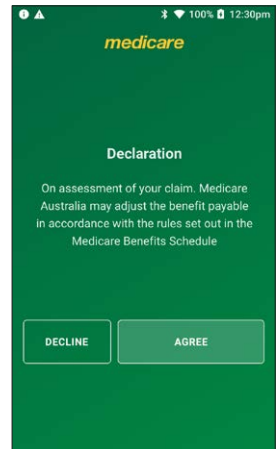To print a provider copy of the receipt, press **OK**.

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.

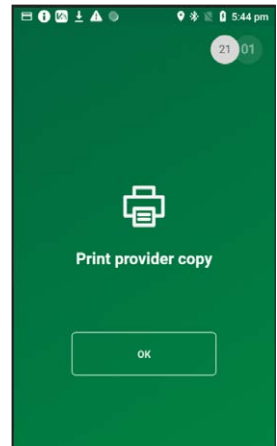Tap **AGREE** to print a bulk billed patient receipt.

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.
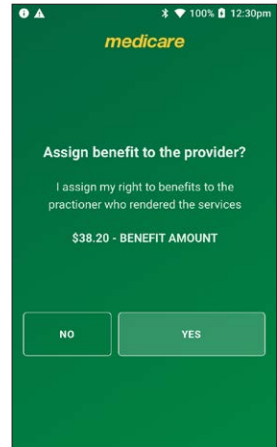
Step 17

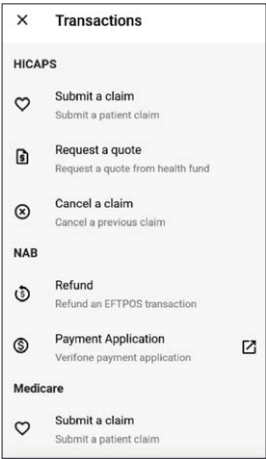To print a provider copy of the receipt, press **OK**.

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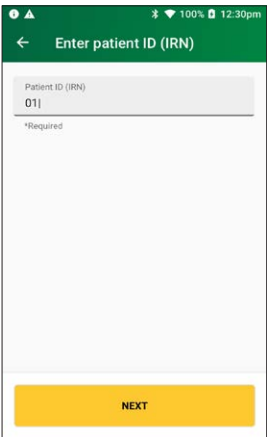Swipe a Medicare card and go to Step 3 or tap **Enter manually** to enter a Medicare card number, go to Step 2a.

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

Step 3

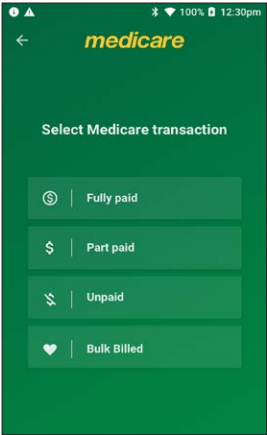Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 4

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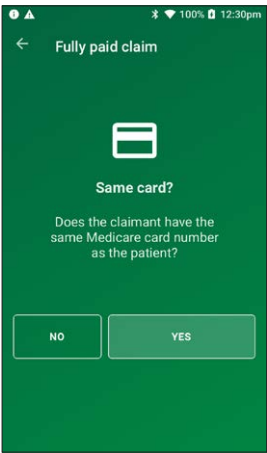
Note: The patient and claimant cannot be the same if the patient is a minor.

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**.
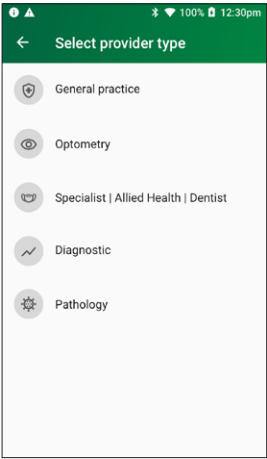
Step 6b
Tap **Diagnostic**.

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.
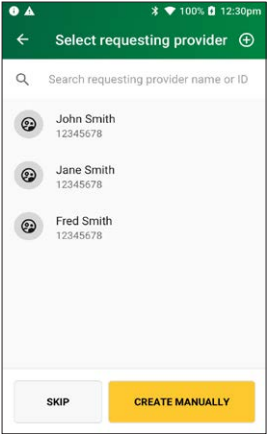
Step 7a
Select a requesting override code from the drop-down list. Tap **NEXT**. Go to Step 9.

Step 7b

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

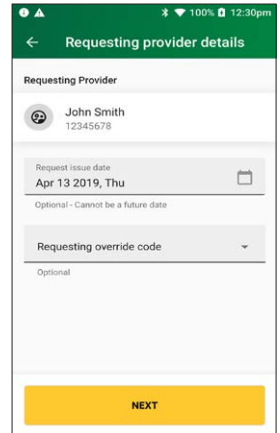Tap **NEXT** to select the newly created requesting provider.

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.

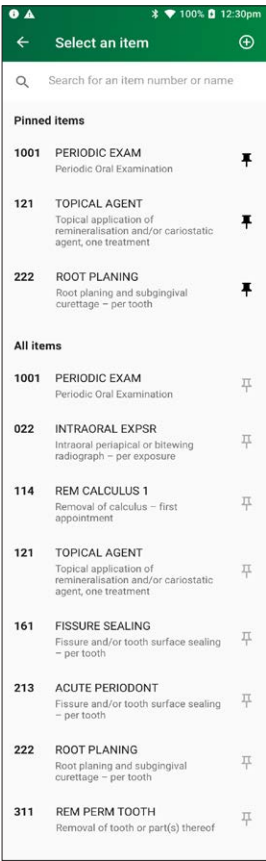Select a requesting override code by selecting an item from
the drop-down list.

Tap **NEXT**.

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.

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**.

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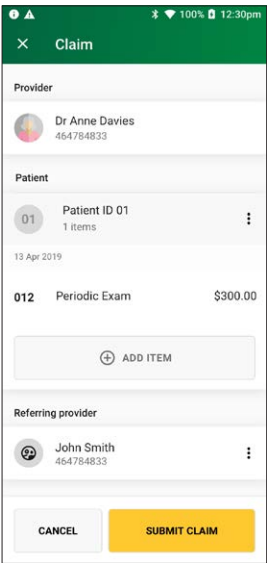
Tap **ADD TO CLAIM** to add the item to the claim.

Step 10

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.

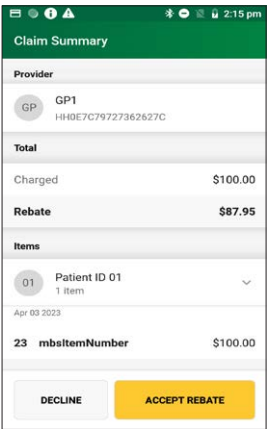When you're ready to submit the claim, tap **SUBMIT CLAIM**.

Step 11

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

Step 12

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**.
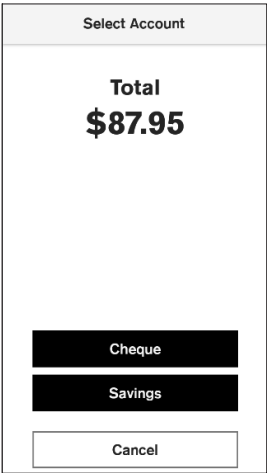
Step 13

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**.

Step 15

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

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

Enter PIN
Total $87.95

1	2	3
4	5	6
7	8	9
C	0	

Cancel	Enter

Step 16

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

✓

APPROVED

TRANSACTION COMPLETED

Step 17

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

✓

Thanks

Would you like the merchant receipt?

Print

No Thanks

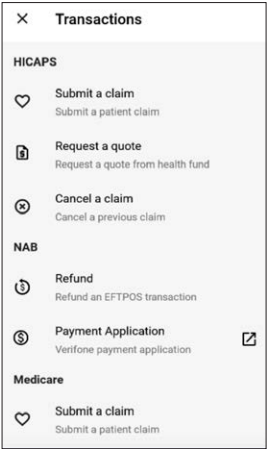## 5.2 part paid claim – diagnostic

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.

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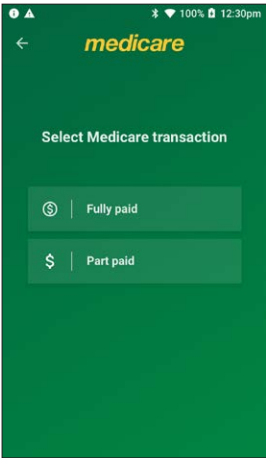Enter a Medicare card number, then tap **NEXT**.

Step 3
Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.
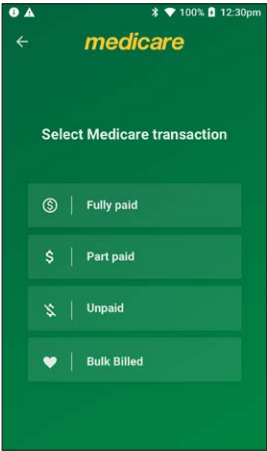
Step 4
On the Medicare transaction screen, tap **Part Paid**.

Note: If a Medicare card is swiped from the HICAPS home screen, transaction types **Unpaid** and **Bulk Billed** will also be displayed.
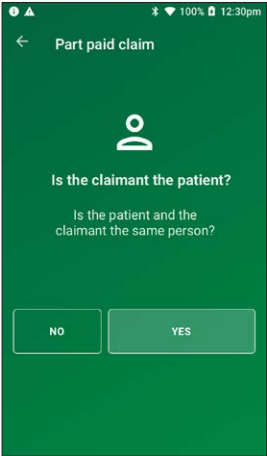
Step 5

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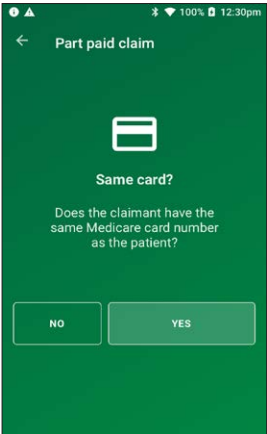
Otherwise, tap **NO** and go to Step 5a.

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.

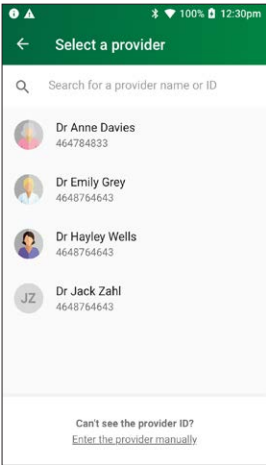**Note:** To enter a claimant card number manually, tap Enter manually, enter the card number and tap **NEXT**.

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.
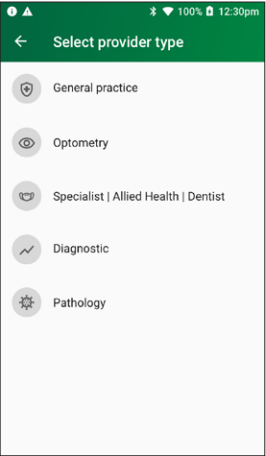
Step 6a
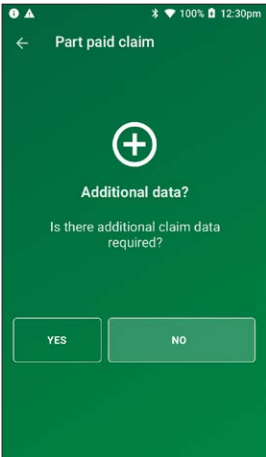Enter the provider number and tap **NEXT**.

Step 6b
Tap **Diagnostic**.

Step 7
If there is no additional claim data, tap **NO** and go to Step 8.

If there is additional claim data tap **YES** and go to Step 7a.

Step 7a

Enter the **Payee provider number** [optional]
(the practitioner who is to be paid for the service).

Note: This is only 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.
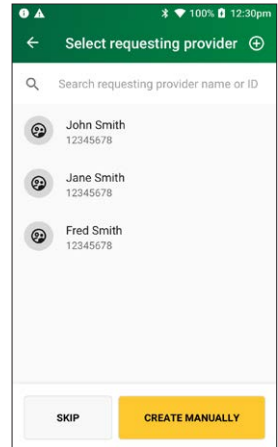
Step 8

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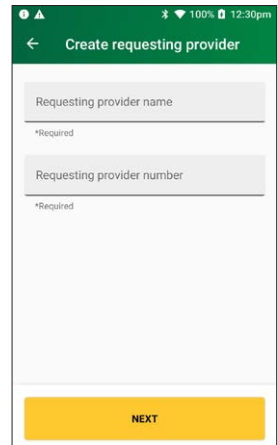
Note: You can also use the plus icon (+) to add a new requesting provider, go to Step 8a.

Step 8a

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

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

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

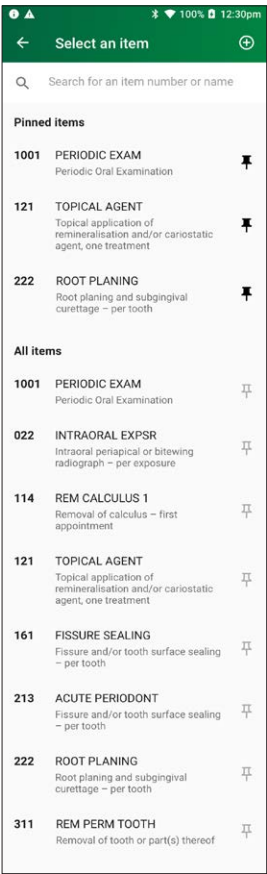Select a referral override code from the drop-down list.

Tap **NEXT**.

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.
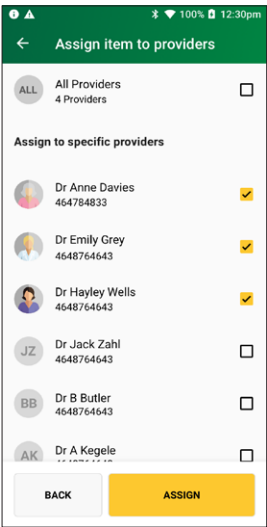
Tap **ADD ITEM**.

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.
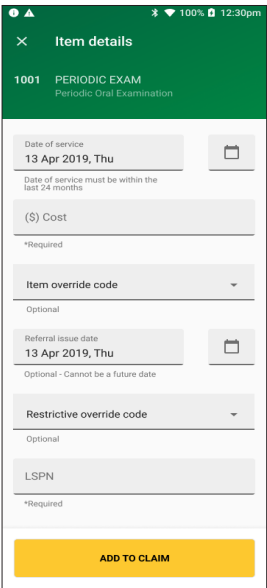
Enter the item cost.

Enter the patient contribution.

Enter any of the following optional fields:

- Item override code
- Restrictive override code
  Note: These codes can be selected from 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 13

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

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

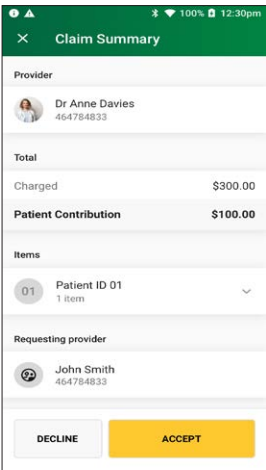**Note:** Check the provider's name and item number are correct.
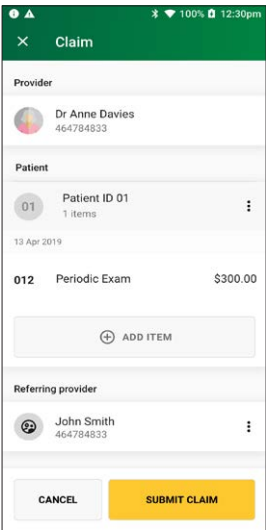
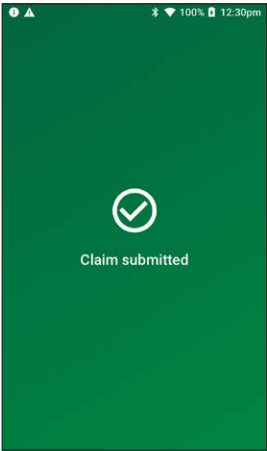A message will be displayed **Sending to Medicare**.

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**.

Step 15

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

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

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.
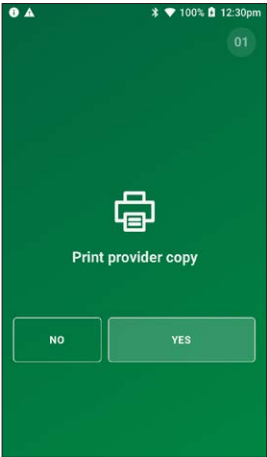
5.3 unpaid claim – diagnostic

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.
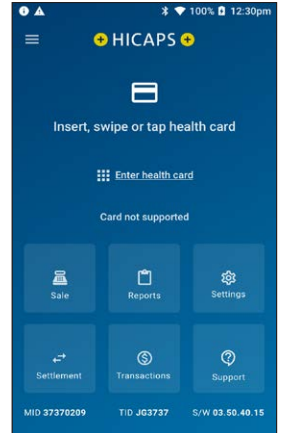
Note: the Medicare loading screen will be displayed if a Medicare card is swiped from the HICAPS home screen, or when a Medicare card is entered manually.
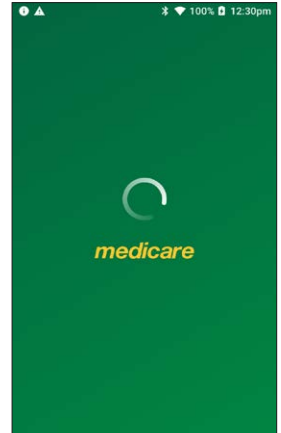
Step 1a
Enter the Medicare card number and tap **NEXT**.
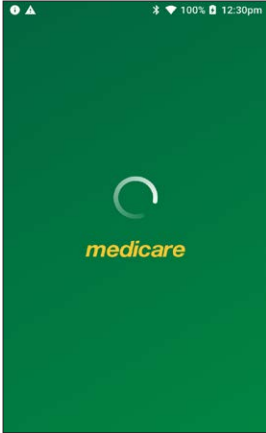
Step 2
Enter the **patient IRN** (the number to the left of the patient's name on the Medicare card) and tap **NEXT**.

Step 3

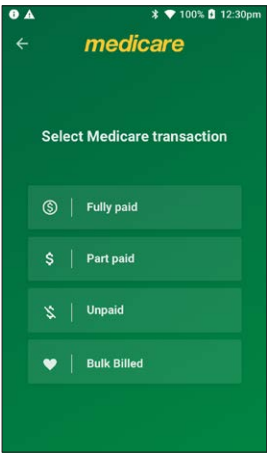Tap **Unpaid** on the Medicare transaction screen.

Step 4

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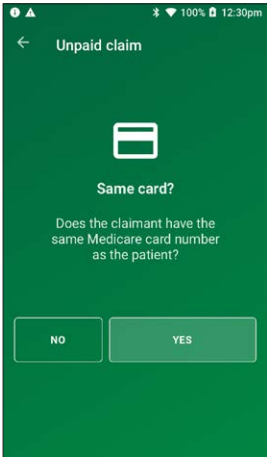
Otherwise, tap **NO** and go to Step 5a.

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

Step 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.

Step 4b

Swipe the claimant's card and go to Step 4c.
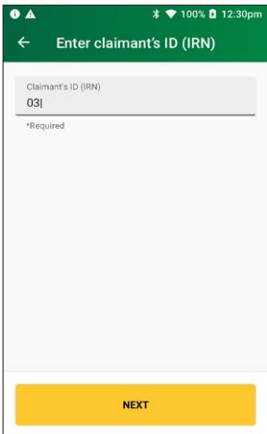
Note: You can manually enter a different claimant card number. Tap **Enter manually** and enter the card number and tap **NEXT**.

Step 4c

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

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.

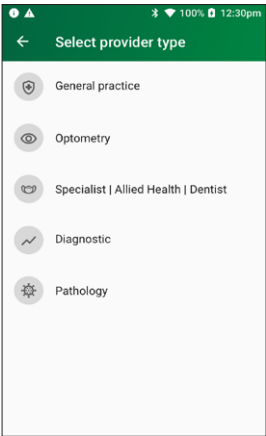**Note:** If the provider is not on the terminal, tap **Enter the provider manually** and go to Step 5a.

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.

Step 6

If there is no additional claim data, tap **NO** and go to Step 7. For additional claim data tap **YES** and go to Step 6a.

Step 6a

Enter the **Account reference number** [optional] and the **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only 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

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.

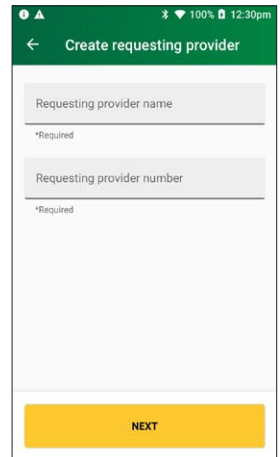**Note:** You can also use the plus icon (+) to add a new requesting provider, go to Step 7a.

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

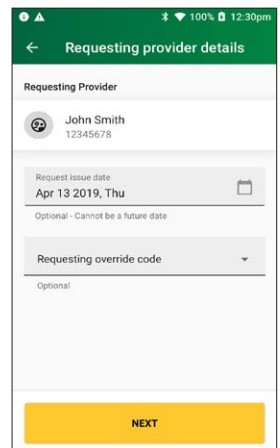Select a requesting override code from the drop-down list. Tap **NEXT**. Go to Step 9.

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.
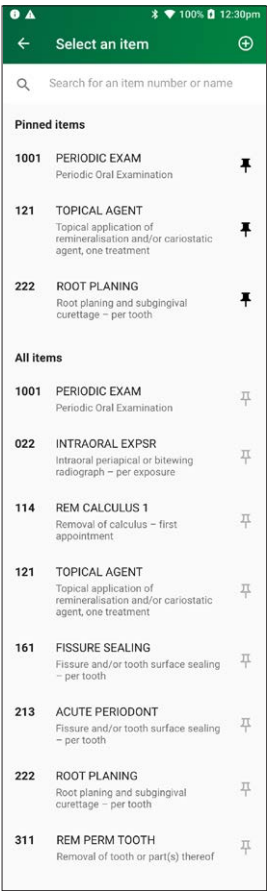
Tap **NEXT**.

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 10.

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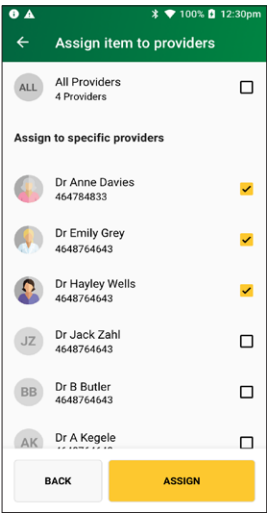
Tap **ADD ITEM**.

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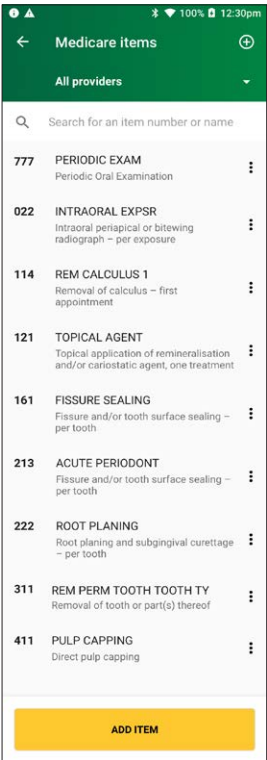
Note: To assign an item to all providers on the terminal, tap **All Providers**, then tap **ASSIGN**.

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.

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 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.

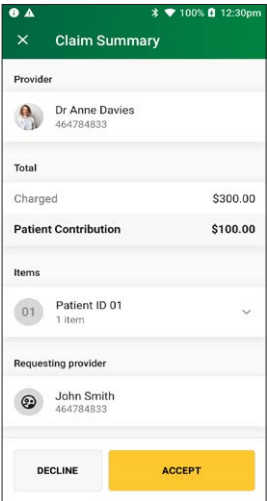A message will be displayed **Sending to Medicare**.
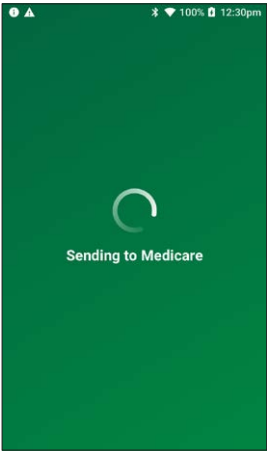
Step 11
The **Claim Summary** screen will display details of the claim.

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

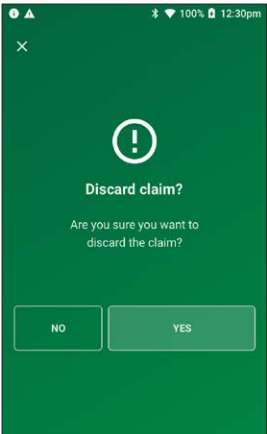If the details are incorrect on the **Claim Summary** screen, tap **DECLINE**.

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**.

Step 12

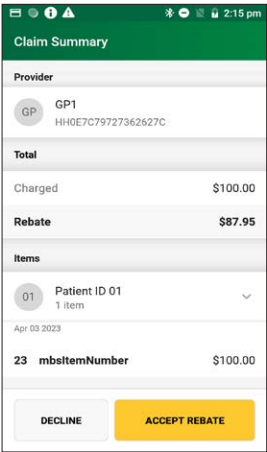A message will be displayed on the screen **Sending to Medicare**.

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.

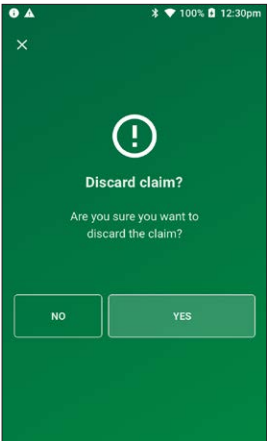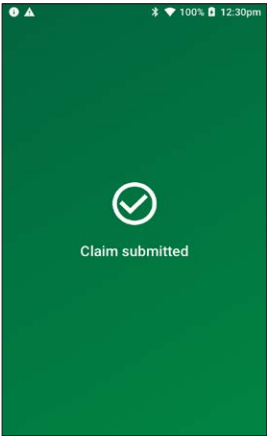If the details are incorrect on the **Claim Summary** screen, tap **DECLINE**.

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**.

Step 14

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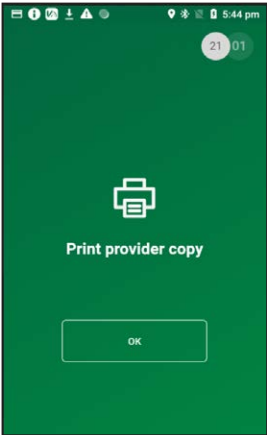
Step 15

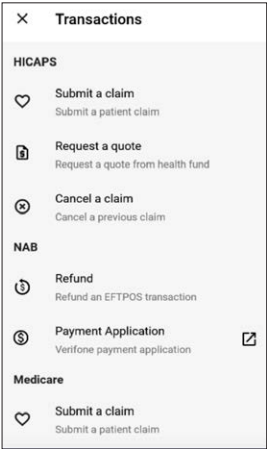The **printing patient receipt** screen will be displayed and the receipt will print automatically.

Step 16

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

5.4 bulk billed claim

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.
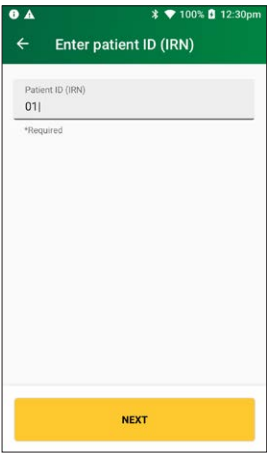

Step 2a
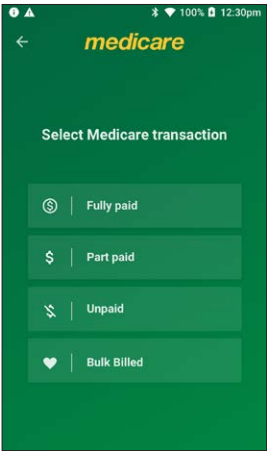Enter a Medicare card number, then tap **NEXT**.

Step 3

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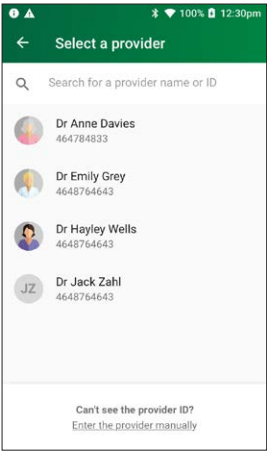Patient's name on the Medicare card) and tap **NEXT**.

Step 4

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

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
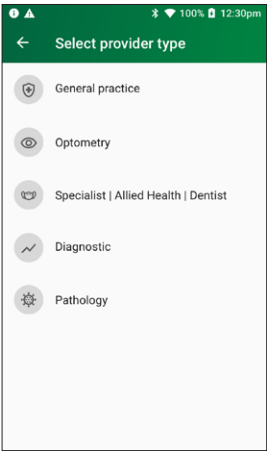**Enter the provider manually** and go to Step 5a.

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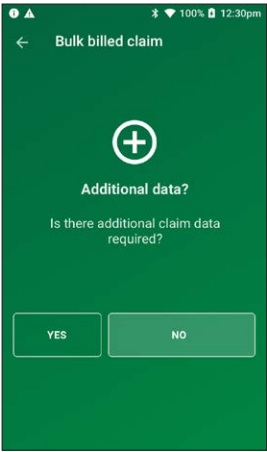
Step 5b
Tap **Diagnostic**.

Step 6
If there is no additional claim data, tap **NO** and go to Step 7.

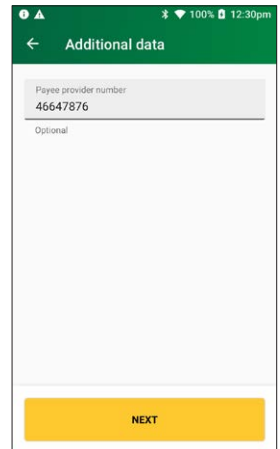If there is additional claim data tap **YES** and go to Step 6a.

Step 6a

Enter the **Payee provider number** [optional]
(the practitioner who is to be paid for the service).

Note: This is only required if the payee provider is not the servicing provider.
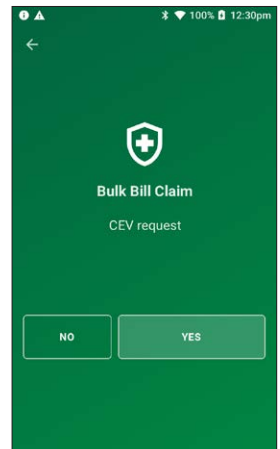
Tap **NEXT**.

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**.

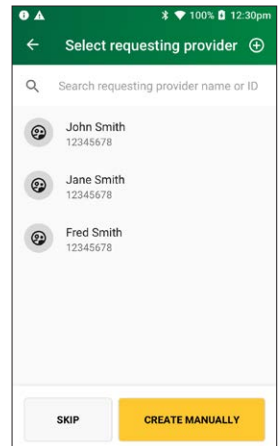To continue without checking concession status, tap **NO**.

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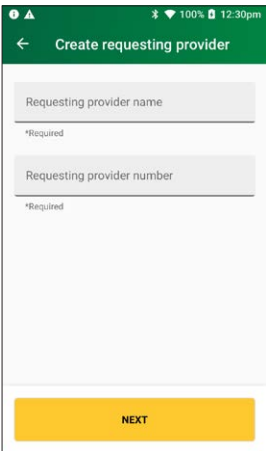
If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 10.

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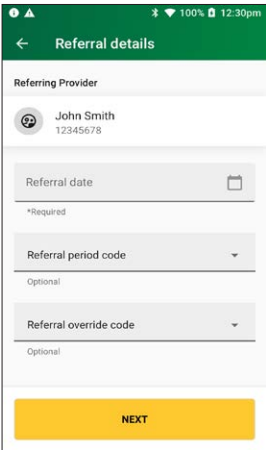
Step 8a

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.

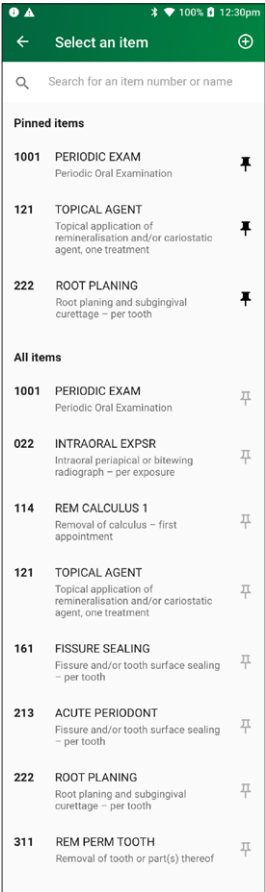### Step 10

Select a **referral override code** from the drop-down list. Tap **NEXT**.
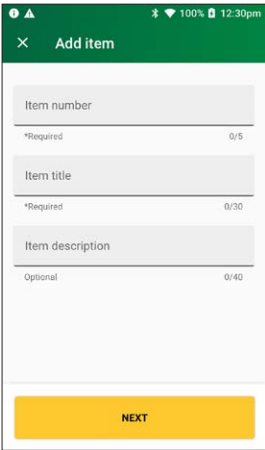
Step 11

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.
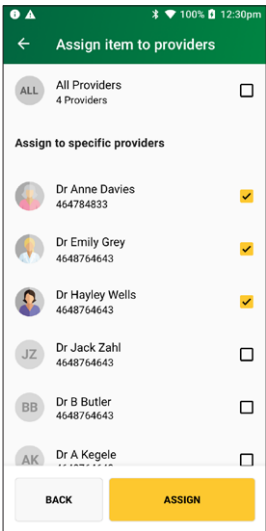
Step 11a

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

Step 11b

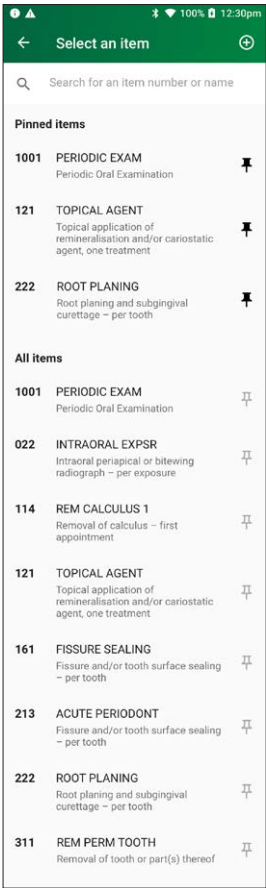Tap a provider name to tick the box and assign the item to a specific provider, then tap **ASSIGN**.

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**.

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 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**.
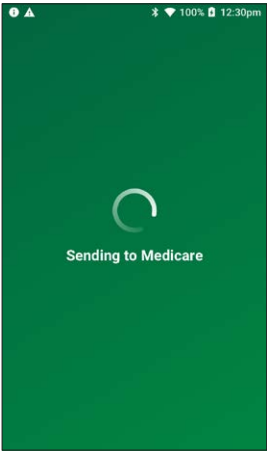
Step 14

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.

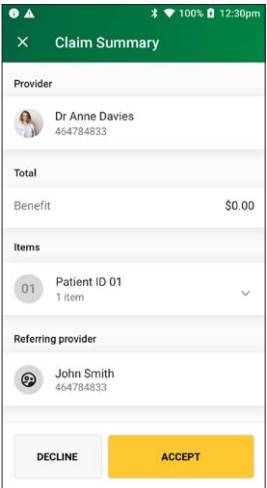Go to step 14b for claims where CEV was requested and accepted.

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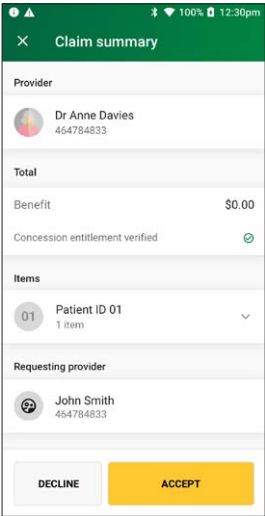
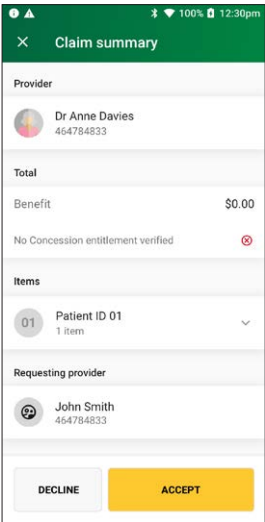### Step 14a

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

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.
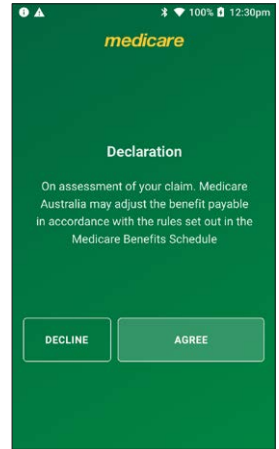Go to step 15.
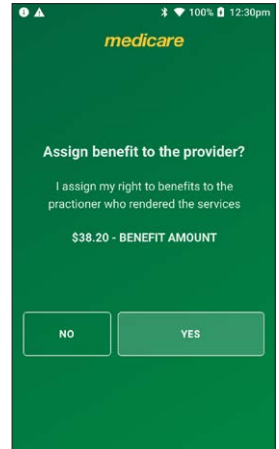
Step 15

The declaration screen will be displayed.

You should present this screen to the patient and ask them to accept or decline the declaration.
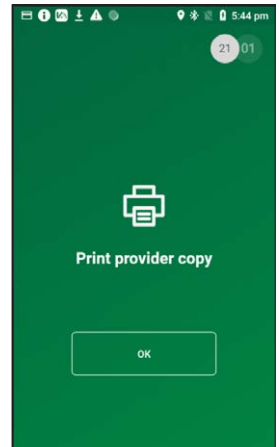
Tap **AGREE** to print a bulk billed patient receipt.

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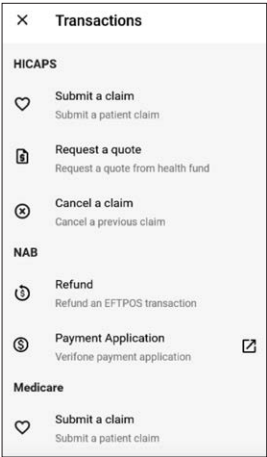
To print a provider copy of the receipt, press **OK**.

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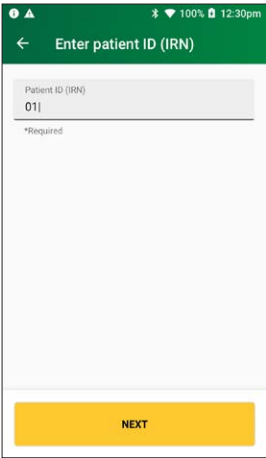
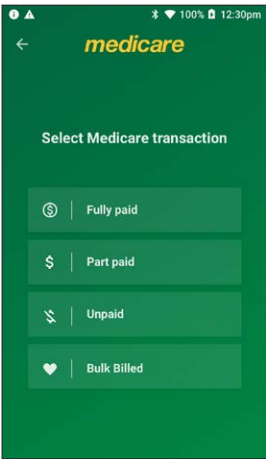### Step 2a
Enter a Medicare card number, then tap **NEXT**.

Step 3
Enter the **patient IRN** (the number to the left of the Patient's name on the Medicare card) and tap **NEXT**.
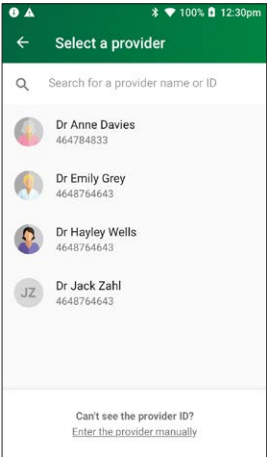
Step 4
On the Medicare transaction screen, tap **Bulk Billed**.
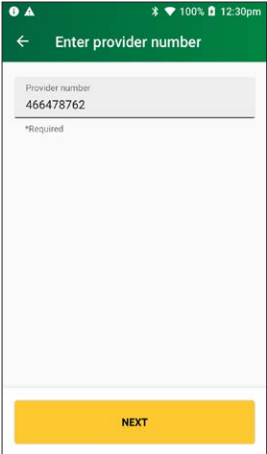
Step 5

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.
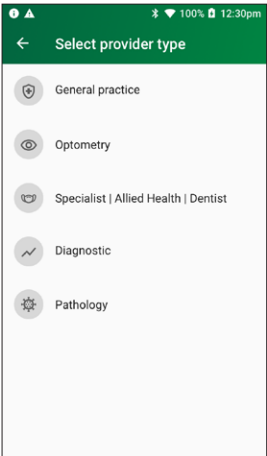
Step 5a

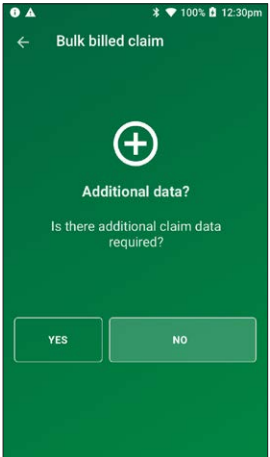Enter the provider number and tap **NEXT**.

Step 5b

Tap **Diagnostic**.

Step 6

If there is no additional claim data, tap **NO** and go to Step 7.

If there is additional claim data tap **YES** and go to Step 6a.

Step 6a

Enter the **Payee provider number** [optional] (the practitioner who is to be paid for the service).

Note: This is only required if the payee provider is not the servicing provider.
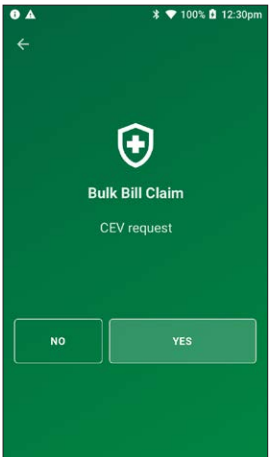
Tap **NEXT**.

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**.

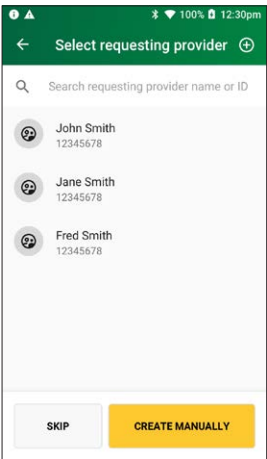To continue without checking concession status, tap **NO**.

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.

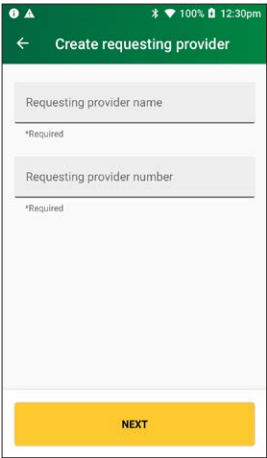If there is no requesting provider displayed (or no requesting provider required), tap **SKIP** and go to Step 10.

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

Step 8a

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

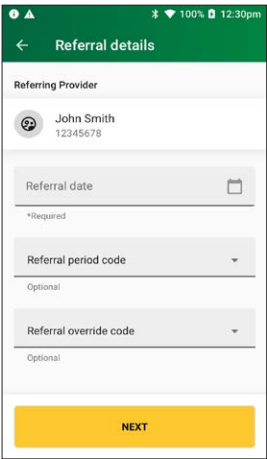Tap **NEXT** to select the newly created requesting provider.

Step 9

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

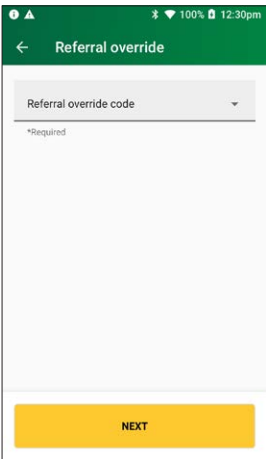Add the optional **referral period** and **referral override** codes by selecting items from the drop-down lists.

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

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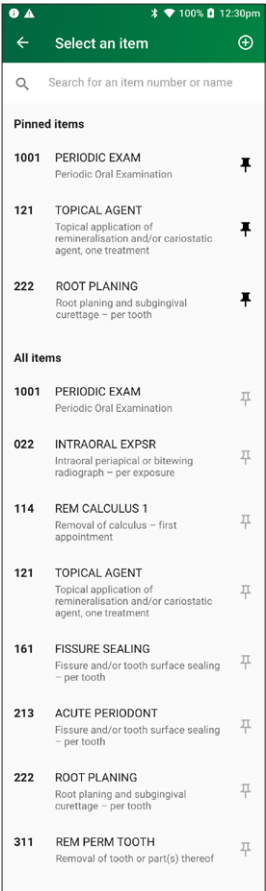
Select a referral override code from the drop-down list.
Tap **NEXT**.

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**.

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 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.

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.

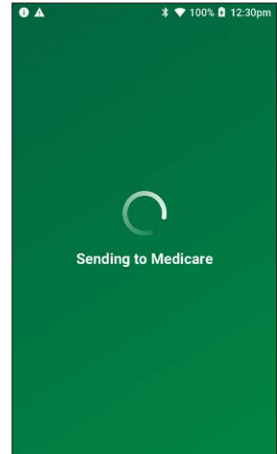When you're ready to submit the claim, tap **SUBMIT CLAIM**.

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.

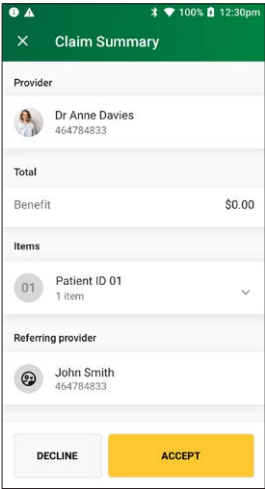Go to step 14a for claims where CEV has not been requested.

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

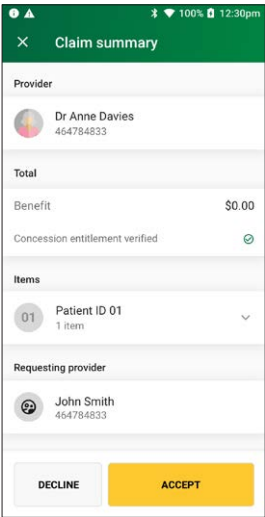Go to step 14c for claims with no concession entitlement.

Step 14a
Tap **ACCEPT** to accept the claim and display the declaration.
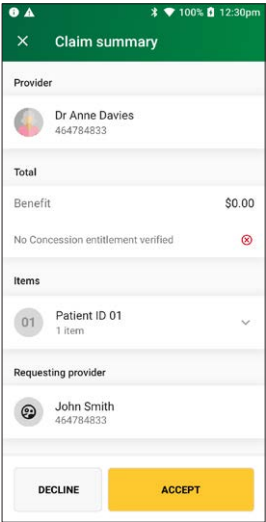Go to step 15.

Step 14b
Tap **ACCEPT** to accept the claim and display the declaration.
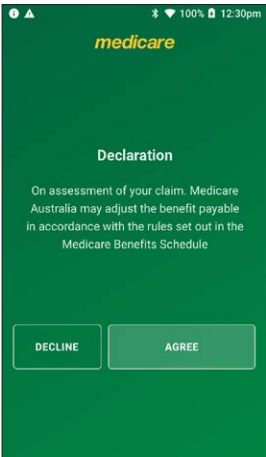Go to step 15

Step 14c

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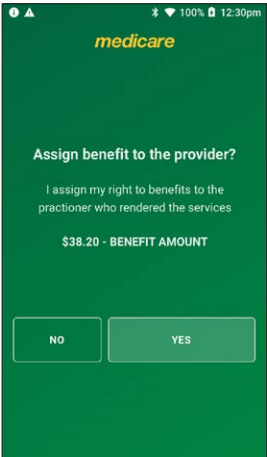
Step 15

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** 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

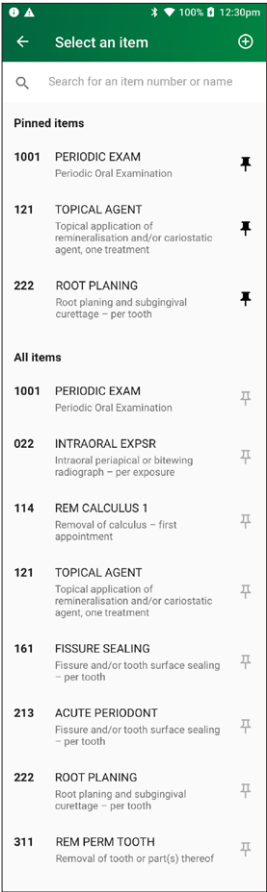To print a provider copy of the receipt, press **OK**.

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.

Step 2

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**.

Step 4

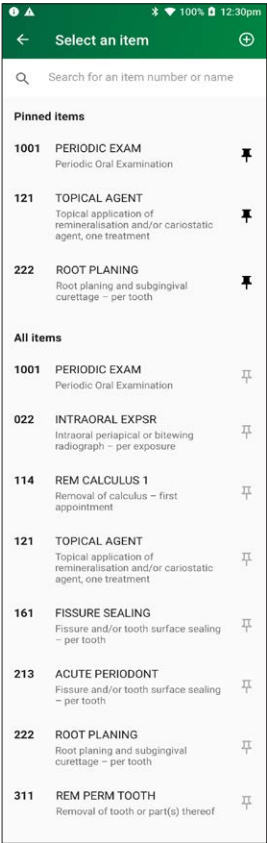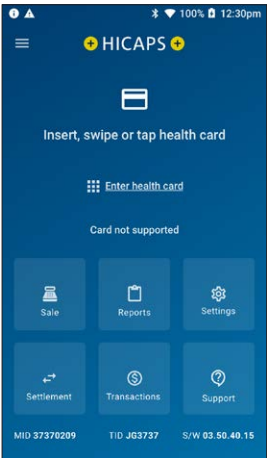The new item will be displayed in the list of items for the selected provider.
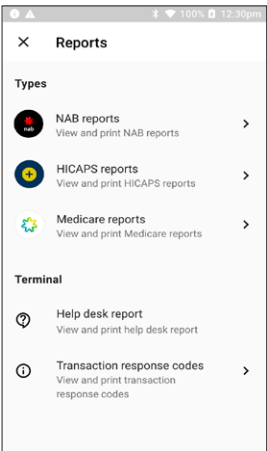
Adding a new item is now complete.

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.

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.
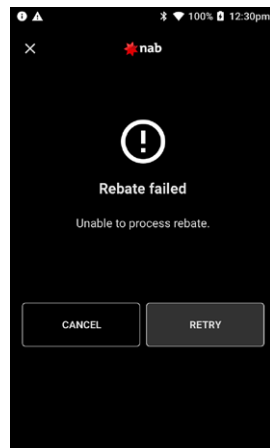
9.2 decline Medicare Easyclaim transaction

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.
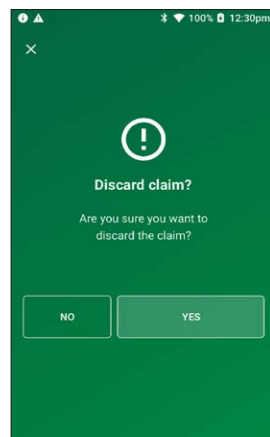
9.4 general

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**
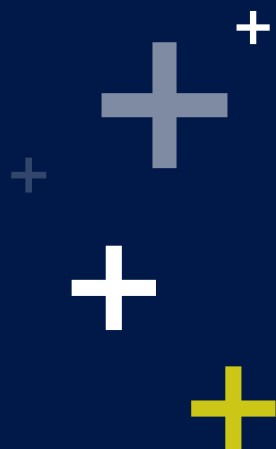
11. ACCESS SUPPORT GUIDES

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