

QUICK REFERENCE GUIDE AUTOMATED PAYMENTS: INSURANCE COMMISSION



The Insurance Commission of Western Australia, together with HICAPS, enables service providers to claim for pre-approved treatments provided to injured motorists and WA Government employees through existing HICAPS terminals.

- Insurance Commission has 24-hour payment terms for pre-approved treatments via HICAPS
- Supporting small businesses receive payment more quickly
- Same payment process used by private health insurers
- Pre-approved services support early payment for treatment



Insurance Commission
of Western Australia

Background

The Insurance Commission funds treatment for injured claimants, including motorists and Government employees. Health practitioners play a crucial role in helping claimants recover from injury. In 2021, the Insurance Commission paid for around 600,000 health services for 21,000 claimants at a cost of \$86 million.

The Insurance Commission introduced automated payments using HICAPS for pre-approved treatment services in August 2020 for general practitioners, physiotherapists, chiropractors, osteopaths and medical specialists.

Services provided by psychologists, occupational therapists and speech pathologists can now be paid using HICAPS in the same way.

Automated payments simplify invoice and payment processing, and result in the Insurance Commission making payment within 24 hours for pre-approved health treatment services, with banks transferring payment the next day.

Transactions can be made on the day of service or up to four days later.

The move to automated payments reflects a continued effort by the Insurance Commission to deliver efficient, effective and contemporary services to its claimants and service providers. The Insurance Commission is understood to be the first motor injury or workers' compensation insurer in Australia to pay for services via HICAPS.

How it works

For pre-approved services, simply key in the 19-digit Insurance Commission treatment number (equivalent to a patient's health fund card number), the provider number and the item cost* to receive real-time approval notification.

Insurance Commission pays within 24 hours, with cash transfer to provider made by bank the next day.

*Treatment costs will be paid at the applicable WorkCover WA or AMA rate.



Benefits for service providers

- Streamlined and simplified payment process;
- Greater payment certainty and improved cash flow management;
- Before providing treatment, service providers can use the HICAPS quote facility to check if a service is pre-approved; and
- Reduced administration – no paper invoices for pre-approved treatment.



HOW TO

Process a HICAPS transaction for Insurance Commission of Western Australia

1. Using the keypad on the terminal, enter the Claimant's 19 digit Insurance Commission treatment number into the HICAPS terminal
2. Use the arrows on the touch screen to select the **Provider** that you would like to claim with
3. Using the keypad, enter the 2-digit Patient-ID. Use 01 for all Insurance Commission claims
4. Using the keypad, enter the **item number** associated with the treatment supplied
5. Using the keypad, enter the **date** (DD/MM) in which the treatment supplied was performed
6. Using the keypad, enter the **item cost**
7. The terminal will display a Claim Summary of the item's entered
8. If the claim summary is correct, press the [send] button and the claim will be submitted to the Insurance Commission of Western Australia for assessment
9. The Approve screen will be displayed if the claim was successful.



FAQs

How do I reconcile Insurance Commission claims?

The Retrieval Reference Number (RRN) printed on the HICAPS receipt will appear on your remittance as the Invoice Number.

What if I have a question about pre-approved treatment or a treatment number?

Call the Insurance Commission's service provider help line on **1800 632 242**. You can also visit icwa.wa.gov.au to learn more about the Insurance Commission

Does the injured person need to sign the receipt?

Yes. The person receiving treatment must sign the receipt.

Do I need to keep the receipt of invoice lodgement?

Yes, for seven years.

Can you do different service-date transactions?

Yes, claims can be made on the day of service or up to four days later.

Can I check if a service is pre-approved by the Insurance Commission before treatment occurs?

Yes, use the quote facility on the HICAPS Terminal. (A step by step Guide on How to do a Quote Guide is available on HICAPS website – <https://www.hicaps.com.au/forms/hicaps-user-guide>)

Helpful hints

- **Patient ID** – Use '01' for all insurance Commission claims when processing transactions using HICAPS.
- **Item per Transaction** – You can only process one item per transaction
- **Item Numbers** – Refer to your HICAPS Quick Reference Guide for initial and standard consultation item numbers. To download a copy visit the support section <https://www.hicaps.com.au/forms/item-number-guides>
- **Insurance Commission claim** – Invoices can only be lodged through HICAPS terminals after the injured person has been provided with a 19 digit Commission treatment number for approved treatments.

For further information, please contact the Insurance Commission on 1800 632 242