

Medicover

Securing the future for you and your patients.

Covering the Medical Gap in private health care.

How to register and use Medicover.
Information for Doctors and Practice Staff.

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Welcome to Medcover

Medcover is a flexible arrangement which gives you, the doctor, the choice of eliminating entirely the need for your patients to pay out-of-pocket medical expenses for your in-hospital services.

You can choose on an episode by episode basis whether to accept Medcover as payment in full for your in-hospital services.

Medcover recognises the doctor-patient relationship always comes first and upholds your professional freedom to determine the most appropriate form of clinical treatment for patients in your care.

Medcover offers a schedule of benefits that covers all items listed in the Commonwealth Medicare Benefits Schedule (MBS), except for pathology services, relating to the provision of in-hospital medical services.

Medcover is one of our two initiatives to cover the medical gap for members. The other initiative is the Medical Purchaser Provider Agreements (MPPA) covering medical arrangements, and agreements with leading pathology and radiology providers.

The Medcover *Information and Registration Kit* is provided to all interested doctors and contains the following:

- *What you should know about Medcover* – an information brochure for doctors.
- *How to register and use Medcover* – an information brochure for doctors and practice staff.
- *Medcover Schedule of Benefits*.
- *Medcover Registration Forms*.

The many benefits of Medcover and why HCF has introduced it are contained in the *What you should know about Medcover* brochure.

This brochure, *How to register and use Medcover*, provides details on the registration and claiming process.

It is designed to provide you and your practice staff with all the information you need to use Medcover. We have also included details on how to complete the Medcover forms, and contact details if you need any assistance or further information.

The information contained in the *Information and Registration Kit* forms the terms and conditions for using Medcover.

When you submit a Medcover claim you:

- Indicate your acceptance of these terms and conditions in relation to that claim.
- Allow HCF to claim the Medicare rebate on behalf of your patient.
- Allow HCF to pay a benefit directly to you.

You must keep relevant claim documents for the minimum period as specified by Medicare Australia from time to time.

Medicover Benefits

What Medicover Benefits cover

The benefit we pay will be the amount you bill up to the amount set out in the Medicover Schedule of Benefits. These will be identified and defined by the Commonwealth MBS item numbers.

It covers the sum of:

- The 75% Medicare rebate from Medicare Australia. We accept assignment under Subsection 20A(2A) of the Health Insurance Act 1973;
- The 25% Medicare gap benefit from HCF; and
- The additional amount HCF will pay up to the amount charged where this is less than or equal to the amount published in the Medicover Schedule of Benefits.

The Medicover benefit is based on:

- The fees charged by doctors for a specific service; and
- Economic sustainability in terms of what members are prepared to pay as part of their total hospital insurance premium.

Where there is a change to a Commonwealth MBS item number, we will realign the Medicover Schedule of Benefits accordingly. We use the same method to determine the rate for multiple procedures and derived fees as applies to the Commonwealth MBS.

The Medicover Schedule of Benefits is available through the HCF Provider Portal which is a secure site where you can edit your postal address, download the Medicover Registration Form, Change of Bank Details Form and the updated

Medicover Schedule of Benefits. Providers can also print claims summaries and access news items.

The Medicover benefits will be reviewed annually and a revised schedule will be published every November.

To access the Provider Portal go to www.hcf.com.au, select Provider Portals and choose the 'Medical provider portal' option. If you haven't previously registered to access the portal you will need to select the 'apply for login' option and complete the information requested providing a valid email address. If you have successfully registered, an email will be sent to you to confirm your registration and your access details will be posted to you within 5-10 working days providing a User ID and Password.

How to register and claim through Medicare – a step by step guide

The following provides a guide to registering and claiming using Medicare. Full details for completing each step are shown on the following pages of this brochure.

Step 1 Registration

You can register as a Medicare Provider by completing the Registration Form contained in this kit. By first registering as a Medicare Provider we:

- Obtain your banking details and authorisation so that payment can be credited directly to your account by electronic funds transfer;
- Obtain the Provider Number you intend to use for Medicare; and
- Record your Provider details and whether or not you wish to be known to our members as a Participating Medicare Provider.

Step 2 Choosing to use Medicare

Once registered as a Medicare Provider, for each episode of care you have the choice of:

- Billing HCF for each patient up to the Medicare level of benefit; or
- Continuing to charge your patients as you have in the past.

Step 3 Claiming

If you choose to use Medicare you will need to confirm that your patient has hospital cover. Then after your patients' treatment you can lodge your Medicare claim by:

- Providing HCF with your practice invoice which should display the following:
 - The patients' name, address and date of birth;
 - Their Medicare number and Medicare patient ID;
 - Their HCF membership number and the HCF patient ID;
 - The name and provider number of the hospital where you performed the service;
 - All service details, for example the date of service, Commonwealth MBS item number etc;
 - The fees charged for each Commonwealth MBS item number;
 - Whether the claim could be covered by compensation.

Step 4 Processing and Payment of Claims

We claim the Medicare rebate, add the gap up to the amount charged where this is less than or equal to the amount published in the Medicare Schedule of Benefits and deposit this amount into your bank account.

We then send you a statement that lists the claims included in your payment and, if necessary, reasons for declined claims.

Your patient receives a statement from HCF showing what has been paid on their behalf for all services provided during their hospital stay.

How to register and claim through Medicare – in detail

Step 1 Registration

To register as a Medicare Provider simply complete the Registration Form (an example of which is shown on page 7) contained in the Information and Registration Kit and return it by fax to 1800 045 563, or by using the enclosed reply paid envelope to:

Reply Paid 5550
HCF Medicare Registration
GPO Box 4242
SYDNEY NSW 2001

We will confirm in writing your registration, Provider Number and bank account details. You will need to quote this Provider Number on all Medicare claims.

The Registration Form also invites you to indicate whether you want us to provide your details to our members, some of whom may request names of participating doctors. This is optional and has no bearing on your ability to participate in Medicare. You may withdraw your name from the Medicare provider list by giving reasonable notice in writing of your intention to do so.

HCF can withdraw your name from the Medicare provider list by giving you reasonable notice in writing of our intention to do so if:

- There is evidence that you haven't complied with the Medicare terms and conditions;
- You no longer carry professional indemnity insurance with a recognised indemnity provider in which case you must notify HCF;

- You are or become suspended or deregistered under the laws of the relevant State/Territory in which case you must notify HCF.

Registration is not a commitment to use Medicare

Step 2 Choosing to use Medicare

Once you have registered as a Medicare Provider, for each episode of care you have the choice of:

- Billing HCF for your insured hospital patient up to the Medicare level of benefit, and in so doing you choose to eliminate entirely the need for your patient to pay out-of-pocket expenses. The result: your patient does not have to worry about unexpected bills, and they can feel confident about the private health care system; or
- Continuing to charge your patient as you have in the past. In this case, your patient must pay any amount by which your fee exceeds the Commonwealth MBS fee.

You can use Medicare at any public or private hospital. You choose on a patient by patient basis whether or not to use Medicare.

Irrespective of whether or not you use Medicare, patients have the right to be fully informed about the cost of their treatment and consent to it.

Medicare enables you to tell your patient that they are fully covered for your service.

It's your choice – every time

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HCF Medcover

Provider Registration and Direct Credit Authority Form

I understand the Medcover Terms and Conditions of Use. Please register me as a Medcover Provider.

Your details. Please use capital letters

Title Given names

Surname

Address (Please complete your street number, name and suburb)

Postcode Phone Fax

Provider No./s (see note below)

Contact Person

Email

Speciality/specialities in which I practice are

Preferred Hospital/s for treatment

I request to be identified to members and referring doctors as a Medcover Provider

Yes No

I authorise payment of benefits to be credited to my account by electronic funds transfer

Yes No

I have included a copy of a bank deposit slip for verification of banking details

Yes No

Account details.

Financial Institution Name

Financial Institution Address

Account Name

BSB No.

Account No.

HCF will not accept any liability if banking details provided by you are incorrect or are subsequently changed without 14 days notice to us using this form. Payment in accordance with these banking details provided by you will constitute discharge of the debt.

I certify that the above details are correct.

Provider signature

Date

Note: If you use more than one Provider Number with this bank account, please list all your relevant Provider Numbers.

If your Provider Numbers utilise different bank accounts, please complete a separate registration for each bank account.

Office Use Only

Date of Registration

Entered by (User ID)

Date Confirmation Letter issued

Reference No. used

HEAD OFFICE: 403 George Street, Sydney NSW 2000

Postal address: GPO Box 4242, Sydney NSW 2001

Telephone: 1800 670 302 Facsimile: 1800 045 563 E-mail: medicoverenquiry@hcf.com.au

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Bank/State/Branch code for the branch at which your account is held.

Step 3 Claiming

Before you make a claim

You will need to confirm that your patient is a member of HCF and that he/she has hospital cover and obtain their Medicare and membership numbers. This information is vital in identifying the patient to enable HCF and Medicare Australia to process your claim. Medcover is applicable to all HCF hospital products. Normal membership conditions and waiting periods apply.

Medcover is also available for all eligible patients transferring from other funds.

To confirm patient eligibility, we suggest the hospital may be able to advise you. Alternatively, you can phone HCF on 1800 670 302.

Please inform your patient that under the Medcover arrangement you are able to claim directly from HCF, i.e.:

- They will not receive accounts for in-patient services covered by these arrangements;
- We will claim the Medicare rebate on their behalf; and
- We will pay you direct.

Only services you render to your patient during a period of hospitalisation are eligible for a Medcover benefit. You must bill your patient separately for any consultations or treatments before or after hospitalisation and you'll need to inform your patient that they can only claim these items through Medicare.

Making a Claim

You can submit a claim by providing HCF with your own accounts. Please ensure your accounts display:

- The patient's name, address and date of birth;
- Their Medicare number and Medicare patient ID;
- Their HCF membership number and the HCF patient ID;
- The name and provider number of the hospital where you performed the service;
- All service details, for example the date of service, Commonwealth MBS item number etc;
- The fees charged for each Commonwealth MBS item number;
- Whether the claim could be covered by compensation.

Please send your completed claim to:

HCF - Medcover Claims
GPO Box 4242
SYDNEY NSW 2001

Step 4 Processing and Payment of Claims

Processing of Claims

We will forward your account to Medicare Australia for processing. Medicare Australia will process the claim and pay 75% of the Commonwealth MBS fee to HCF. We will then process the gap up to the amount charged where this is less than or equal to the amount published in the Medcover Schedule of Benefits.

Payment of claims

You will receive payment via electronic funds transfer (EFT) directly into your nominated bank account, generally within 30 days from the date we receive your claim.

At the time of payment we will mail you a fully detailed Medical Claims Payment Summary Report for your records. You will find an example of the Medical Claims Payment Summary Report shown on page 10. Each report lists all claims your payment covers, including reason codes for any claims only partially paid, or that Medicare Australia or HCF declines. Depending upon the reason code, you must rectify, or re-submit declined claims, or send them to your patient for payment.

Your patient will also receive a statement from HCF detailing the services performed and advising that the claim was paid under the No Gap arrangement and that a benefit payment has been made direct to you on their behalf.

Circumstances when Medcover benefits may not be payable

We will not pay a Medcover benefit if:

- You didn't perform the service while the member was an in-patient of a public or private hospital;
- The patient's membership was not current at the time of treatment or service;
- The member was not contributing to a HCF hospital product;
- The claim was covered, or may be covered, by Worker's Compensation, Third Party or other compensation;
- Waiting periods had not been served at the time of the procedure, including those required for pre-existing ailments;
- The patient's product excludes benefits for the specific treatments and procedures you claimed;
- Medicare excludes benefits for the specific treatments and procedures you claimed, or Medicare declines the claim;
- You lodge the claim after two years from the date of service;
- Hospital benefits are not payable;
- You have billed the member direct and the member has collected their Medicare entitlement;
- The patient does not comply with the definition of 'patient' in Section 3(1) of the Health Insurance Act 1973.

In the event that you have entered into a separate arrangement with a hospital for the payment of medical services, then those services will be ineligible for benefits under Medcover.

HCF

HCF

THE HOSPITALS CONTRIBUTION FUND OF AUSTRALIA LIMITED
 ABN 68 000 026 746
 HCF House, 403 George Street, Sydney 2000. Correspondence: GPO Box 4242, Sydney NSW 2001
 Telephone: Business (02) 9290 0444. Information: 13 13 34. Facsimile: (02) 9262 3118.

XYZ Medical Practice
 P.O. Box Xxx
 SYDNEY NSW 2001

MEDICAL CLAIMS PAYMENT SUMMARY
 PERIOD ENDING 8 AUGUST 1999

Provider Reference Number	Patient Name	Member Number	Date of Service	Provider Number	Item No	Invoice Amount	Medicare Rebate	HCF Rebate (25%)	HCF Rebate (>25%)	Total Rebate	Reason Code
	A B Smith	0123456	01-03-99	0123456	00104	74.60	49.35	16.45	8.80	74.60	
	C D Smith	7890123	01-06-99	0123456	32090	296.00	192.90	64.25	37.30	294.45	9997
	E F Smith	4567890	20-06-99	0123456	38500	2235.00	1269.35	423.10	541.60	2234.05	9997
	G H Smith	1234567	12-04-99	0123456	49318	1368.85	760.50	253.45	354.90	1368.85	
	I J Smith	8901234	15-04-99	0123456	00104	74.60	49.35	16.45	8.80	74.60	
	A B Jones	5678901	20-04-99	0123456	32090	296.00	192.90	64.25	37.30	294.45	9997
	C D Jones	2345678	21-04-99	0123456	38500	2234.05	1269.35	423.10	541.60	2234.05	
	E F Jones	4567890	20-06-99	0123456	49318	1368.85	760.50	0.00	0.00	760.50	0098
	G H Jones	1234567	12-04-99	0123456	00104	74.60	49.35	16.45	8.80	74.60	
	I J Jones	8901234	15-04-99	0123456	32090	296.00	192.90	64.25	37.30	294.45	9997
	A B Green	5678901	20-04-1999	0123456	38500	2234.05	1269.35	423.10	541.60	2234.05	
	C D Green	2345678	21-04-1999	0123456	49318	1368.85	760.50	253.45	354.90	1368.85	
	E F Green	4567890	20-06-1999	0123456	38500	2234.05	0.00	0.00	0.00	0.00	320
	G H Green	1234567	12-04-1999	0123456	49318	1368.85	760.50	253.45	354.90	1368.85	
	I J Green	8901234	15-04-1999	0123456	00104	74.60	49.35	16.45	8.80	74.60	
				TOTALS		15598.95	7626.15	2288.20	2836.60	12750.95	

REASON CODES
 9997 Charged Amount Adjusted to Reflect Agreed Rate
 0098 Service Not Covered Under Patient's Hospital Cover
 320 Quoted Medicare card number is incorrect

The surname and initials of the patient.

The date the service was provided to the patient.

Your Provider Number, as the doctor providing the services.

The Commonwealth MBS code of the item of service.

The invoice amount quoted by you on the Medicovert Account Form or supporting accounts

This is 75% of the Commonwealth MBS fee as rebated by Medicare.

The reference number supplied by you on your account.

Descriptions are included for Reason Codes used.

The 25% Medical gap benefit paid by HCF.

The additional amount HCF will pay in excess of the Commonwealth MBS fee, up to the Medicovert benefit level.

The total of the previous three columns.

The Reason Code relating to any partial payment or decline of claim. Note that where your invoice amount has been adjusted to the correct Medicovert benefit, a Reason Code is also included. Totals are included for each of the rebate columns. The total of the 'Total Rebate' column is the amount transferred to your nominated bank account.

Covering your patients' pathology and radiology expenses

HCF has entered into 'no gap' arrangements with leading pathology and radiology providers to provide 100% gap cover for all eligible members of HCF for in-patient services when provided by the following participating providers listed by state as follows:

NEW SOUTH WALES

Pathology Services

AustPath Laboratory	Medlab Australia
Border Pathology	National Pathology Laboratories
Barratt & Smith Pathology	Laboratories
CP Douglas P/L (Histopath)	Nextpath
Davies, Campbell, De Lambert	PaLMS (Pacific Lab. Medicine Service)
Douglass Hanly Moir Pathology	Southern Pathology South Eastern Area
Hampsons Sugerman Pathology	Laboratory Service SydPath
Macquarie Pathology Service	

Radiology Services

Healthcare Imaging Services Pty Ltd	St George Public Hospital - Nuclear Medicine Department
North Shore Radiology	St Vincent's Imaging
PRP Diagnostic Imaging	St Vincent's Medical Imaging (Sydney)
Regional Imaging	X-Ray@TheGardens
South East Radiology	Vascular One Ultrasound
South East Sydney Local Health District	VESEBE P/L Wales CT

AUSTRALIAN CAPITAL TERRITORY

Pathology Services

ACT Pathology
Capital Pathology

Radiology Services

Canberra Imaging Group

VICTORIA

Pathology Services

Anatpath	Gippsland Pathology Service
Austin Health Pathology	Jolimont Laboratories
Bespoke Pathology Pty Ltd	Melbourne Pathology
T/A TissuPath	Northern Pathology
Division of Laboratory Services, Royal Children's Hospital	Omnipath
Dorevitch Pathology	Peter MacCallum Cancer Centre
Eastern Health Pathology	St Vincent's Pathology
Gribbles Pathology P/L	The Alfred Health
	St John of God Pathology

Radiology Services

Austin Health Radiology	Medical Imaging Department,
Ballarat Radiology	Royal Children's Hospital
Barwon Health	Peter MacCallum Cancer Centre
Healthcare Imaging Services Pty Ltd	Regional Imaging
Lake Imaging	The Alfred Health

QUEENSLAND

Pathology Services

Coastal Pathology	Queensland Medical Laboratory
Envoi Laboratory/Clouston Pathology	Sullivan Nicholaides Pathology
Mater Laboratory Services	
Nexus Pathology	
Northside Pathology	
Queensland Health Pathology Services	

Radiology Services

Healthcare Imaging Services Pty Ltd
Gold Coast Health Serv Dist Private Practice
Mackay Health Service District
Mater Health Service Radiology - Brisbane
PAH Private Practice Radiology

SOUTH AUSTRALIA

Pathology Services

Adelaide Pathology Partners
Clinpath Pathology
Gramp Skin Pathology
SA Pathology

Radiology Services

Benson Radiology SA
I-Med SA/NT
Perrett Medical Imaging
Radiology SA
Regional Imaging
Riverland Medical Imaging
Southern Imaging

WESTERN AUSTRALIA

Pathology Services

Western Diagnostic

TASMANIA

Pathology Services

Diagnostic Services P/L

Radiology Services

Regional Imaging

NORTHERN TERRITORY

Radiology Services

I-Med SA/NT
Perrett Medical Imaging

For your enquiries and further information

Please contact HCF on 1800 670 302 if you need:

- Assistance or have any questions about Medcover;
- Further supplies of Registration Forms;
- To change your bank details;
- To check a patient's eligibility; or
- More information about Medcover.

The Hospitals Contribution Fund of Australia Limited. ABN 68 000 026 746
HEAD OFFICE: 403 George Street, Sydney NSW 2000
Postal Address: GPO Box 4242, Sydney NSW 2001 Telephone: 1800 670 302
Enquiries via email: medicoverenquiry@hcf.com.au
To access HCF's Provider Portal: Go to www.hcf.com.au
select Provider portals and choose Medical provider portal