# **DHDA Information Sheets** – MyMedicare Registration, Forecasting and Payments

# Contents

# How to register for MyMedicare on the Organisation Register - MYMEDINFO1

my medicare

# Checklist and steps to register for MyMedicare on the Organisation Register

## Before you get started, have the following information handy to save time

- [ ] Australian Business Number (ABN) of the Organisation.
- [ ] Details of an associate who is listed against the ABN on the Australian Business Register (ABR).
- [ ] Details of an authorised contact, including their individual Provider Digital Access (PRODA) Registration Authority (RA) number. This person doesn't need to be listed against the ABN, such as a practice manager. It can also be the same person as the associate.
- [ ] Provider location numbers of the General Practitioners (GP) that are providing services at your practice so you can link them to the organisation site.
- [ ] Details of your accreditation or relevant exemption as outlined on the Department of Health, Disability and Ageing website.

▶ If you've already set up your organisation sites (practices at which your organisation operates) for another program, such as the General Practice Training Payment (GPTP) program or Medicare Urgent Care Clinics, you don't need to complete steps 1, 2, 3 and 4 again. But you need to ensure you have added accreditation details and providers at step 4 before starting step 5.

## Steps to register

### 1. Set up your Organisation in PRODA

The person setting up the organisation in PRODA must have an individual PRODA account and be listed against the ABN on the ABR as an associate or authorised contact.

If you haven't already done it, setting up your practice as an organisation in PRODA is required for accessing the Organisation Register and MyMedicare program. This includes any Subsidiary Organisations.

**For information on how to do this, refer to the eLearning:**
How to register a new organisation or join an organisation in PRODA using ABR verification

### 2. Link your Organisation to Health Professional Online Services (HPOS)

Linking your organisation to HPOS with your ABN allows you to unlock the Organisation Register. This will give you the green Organisation Register tile on the HPOS home screen.

**Note:** Your subsidiary organisations in PRODA can't be linked with your ABN, you must first link your Parent Organisation in PRODA with your ABN to access and set up the Organisation Register. For more information about Subsidiary Organisations refer to step 6.

**For information on how to do this, refer to the eLearning:**
Linking an Organisation in PRODA to HPOS

# Checklist and steps to register for MyMedicare on the Organisation Register

## 3. Create an Organisation Record

Using the Organisation Register tile on the HPOS home screen, you can record details of your organisation in the Organisation Record.

**For information on how to do this, refer to the eLearning:**
Creating an Organisation Record

## 4. Create an Organisation Site Record

With your Organisation Record complete, you can create organisation sites (the practices at which your organisation operates).

To ensure your practice is set up to register patients in MyMedicare, please make sure that:

- The **Organisation Site Name** and **Physical Address** fields are up to date and recognisable to patients. Patients will see this information when registered or when they're using their myGov or Medicare Online Account to search for your practice to register.
- The Accreditation tab is complete and up to date with the practice accreditation or exemption details, as outlined on the Department of Health, Disability and Ageing website.
- The Providers tab has all GPs providing services at your practice added to your organisation site record. For GPs providing services at your practice, ensure their provider location number address is the same as the recorded address of your Organisation Site Record, to allow them to be linked.

**For information on how to do this, refer to the eLearning:**
Creating an Organisation Site Record

## 5. Add the MyMedicare Program

The MyMedicare program will become available in the Program Registration tab to add to your Organisation Site Record.

**For information on how to do this, refer to the eLearning:**
Creating an Organisation Site Record

## 6. Subsidiary Organisations (Optional)

Linking your subsidiary organisation is optional and provides restricted access for staff between multiple sites. You must first link the parent organisation in PRODA to HPOS using your ABN. Then create the Organisation Site Record to get the Organisation Site ID to proceed with linking a subsidiary organisation.

**For information on how to do this, refer to the eLearning:**
Linking a Subsidiary Organisation in PRODA to an Organisation Site Record

## 7. Start registering patients for MyMedicare

Once you have added MyMedicare Program in the Organisation Register, your practice will be able to start registering patients.

**For information on how to do this, refer to the eLearning:**
MyMedicare - Managing patient registrations

# MyMedicare MBS Item information - MYMEDINFO2

# Medicare Benefits Schedule (MBS) Item information

Longer MBS-funded Level C and D telephone calls are available for patients registered under MyMedicare with the billing practice, and triple bulk billing incentives for the longer MBS telehealth (Level C & D phone and E video) services for Medicare eligible patients.

| | |
|---|---|
| **Level C items** | |
| 91900 | Phone attendance by a General Practitioner lasting at least 20 minutes |
| 91903 | Phone attendance by a Medical Practitioner 25 - 45 minutes |
| 91906 | Phone attendance by a Medical Practitioner, in an eligible area, 25 - 45 minutes |
| **Level D items** | |
| 91910 | Phone attendance by a General Practitioner, lasting at least 40 minutes |
| 91913 | Phone attendance by a Medical Practitioner 45 - 60 minutes |
| 91916 | Phone attendance by a Medical Practitioner, in an eligible area, 45 - 60 minutes |
| **Triple bulk bill incentive items**<br>**Note: MM – Modified Monash locality classification** | |
| 75880 | Bulk bill incentive MM 1 |
| 75881 | Bulk bill incentive MM 2 |
| 75882 | Bulk bill incentive MM 3-4 |
| 75883 | Bulk bill incentive MM 5 |
| 75884 | Bulk bill incentive MM 6 |
| 75885 | Bulk bill incentive MM 7 |

## Frequently asked questions

**Who can access the new MBS Levels C and D telehealth services?**
- Patients registered with a practice who are participating in the MyMedicare program.
- The patient must be receiving the service through the practice where they are registered.

**Do I have to bulk bill the MyMedicare services?**
- No, you don't have to bulk bill the MyMedicare services.
- However, the triple bulk bill incentive item can only be claimed where a service is bulk billed for a Medicare eligible patient, registered for MyMedicare at the billing practice.
- Further information on Commonwealth concession cards is available at servicesaustralia.gov.au/concession-and-health-care-cards.

**If my practice is using its own Medicare billing software, how can I check if my patient is eligible for MyMedicare before lodging a claim?**
- You can access the Patient List to check if your patient is registered for MyMedicare.
- To access the Patient List from Health Professional Online Services (HPOS):
  - Select My Programs tile.
  - Select MyMedicare tile.
  - The Patient List will be displayed.
- You can also use the filters at the top the list to search for a patient, for example, by name or Medicare number/Department of Veterans' Affairs (DVA) file number.

**If I claimed the wrong incentive item when I could have claimed the new MyMedicare incentive, will the incentive we have claimed be paid or rejected?**
- There are no changes being made to the claiming and payment parameters of the existing bulk billing incentive items. Therefore, if the provider was to claim the lower paying item (e.g. item 10990/10991) and the conditions advised within the item description are met, the bulk bill incentive will be paid on the lower paying item.
- If the provider later identifies the new, higher paying, bulk billing incentive item (e.g. item 75880) should have been claimed, the provider can request an adjustment in accordance with current Medicare practice.

**If I claim 2 incentives (for example, a 10990 and a 75880) which one will be paid?**
- In this circumstance, if the items were submitted in the same claim, the higher paying bulk billing incentive item (e.g. 75880) will be paid, with the lower paying item (e.g. 10990) rejected.
- If the bulk bill incentive items aren't submitted in the same claim, the item submitted first will be paid. If this is the lower paying item (e.g. 10990), the provider may submit a request for adjustment in accordance with current Medicare practice.

**If I claim the service and forget to bill the incentive item, however, I am eligible for an incentive, is there a way I can claim the incentive by itself, or can this be done through the web services, or would it be a manual process?**
- Where a provider omitted to submit a bulk bill incentive item as part of their claim and later identifies they were eligible to claim the bulk billing incentive, it's possible for a provider to claim the bulk billing incentive item only.
- The claiming of the bulk bill incentive item only is treated in the same way as any other claim, i.e. it can be submitted either manually or through a digital claiming channel.

**Are the new bulk billing incentive items applicable to DVA clients?**
- The new bulk billing incentive items are claimable where a relevant clinical service has been provided to the eligible DVA client by a registered provider.

## Links

Department of Health, Disability and Ageing - Supporting Bulk Billing in General Practice
Department of Health, Disability and Ageing - Billing Scenarios
MBS Online

# HPOS messages for organisations registered with MyMedicare - MYMEDINFO3

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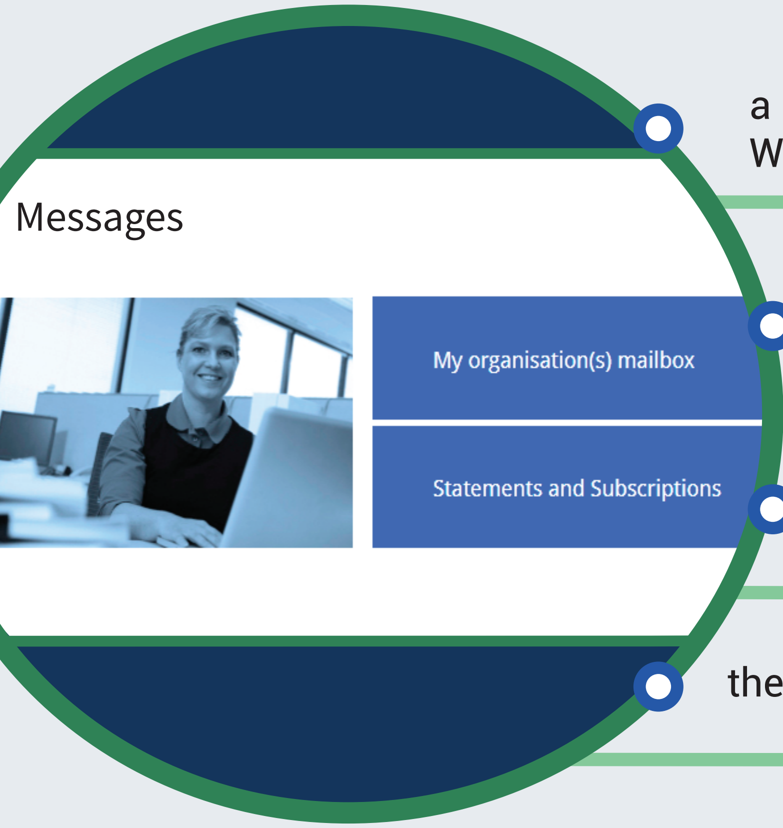
# Health Professional Online Services (HPOS) messages for organisations registered with MyMedicare

**HPOS**
Use the Health Professional Online Services (HPOS) to do business online.
Go to service | Link identifiers

Your practice will receive messages in your HPOS '**My organisation(s) mailbox**' on the status of practice and patient initiated registrations.

## You will receive messages for the following reasons if:




- a Complete Registration is Created, Withdrawn or Deleted
- a Pending Registration is Created, Deleted, Cancelled, Expired, Declined, Accepted or Due to Expire
- a Preferred General Practitioner (GP) is Amended
- the Withdrawn Date is Amended or Removed.

## For more information refer to:

- HPOSM06 - Using HPOS messages eLearning
  hpe.servicesaustralia.gov.au/modules/hpos/hposm06/

# Eligibility forecasts and assessments for MyMedicare Incentives - Organisation Sites - MYMEDINFO5

# Eligibility forecasts and assessments for Organisation Sites MyMedicare Incentives

You can forecast your payment eligibility in Health Professional Online Services (HPOS) to track whether your Organisation Site and Providers have met the Incentive requirements for the current assessment period for each patient. You can also view previous forecasts and eligibility assessments that were used to calculate previous Incentive payments.

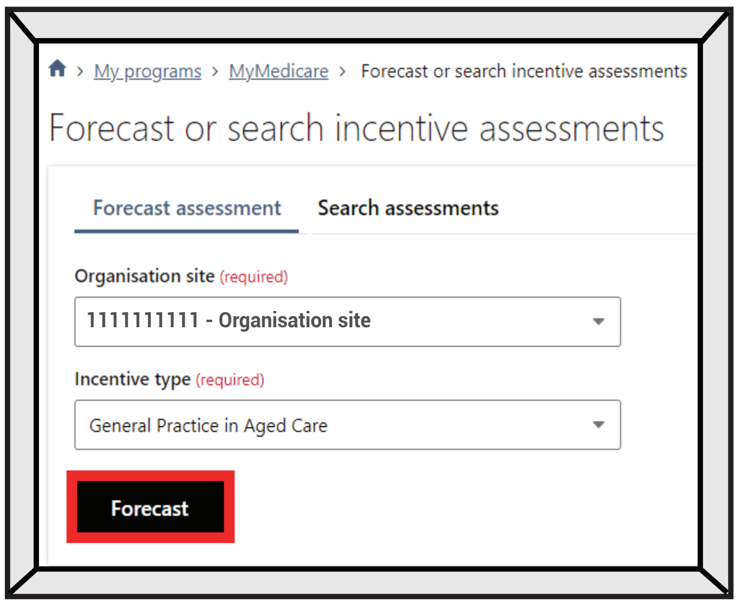
## Forecast and Search for Eligibility Assessments

1. Login to your **individual Provider Digital Access (PRODA)** account.
2. Under **My linked services**, select **Go to service** on the HPOS tile.
3. Select the **Organisation site** you are acting on behalf of, then select **Continue**.
4. The HPOS home page will display with your name and the Organisation site you selected in the top-right corner of the screen.
5. Select the **My programs** tile.
6. Select the **MyMedicare** tile.
7. Select the **View Payment Eligibility** tile.

## Forecast payment eligibility

The **Forecast assessment** tab is selected by default. To forecast the Organisation Site's eligibility for the current Incentive quarter:

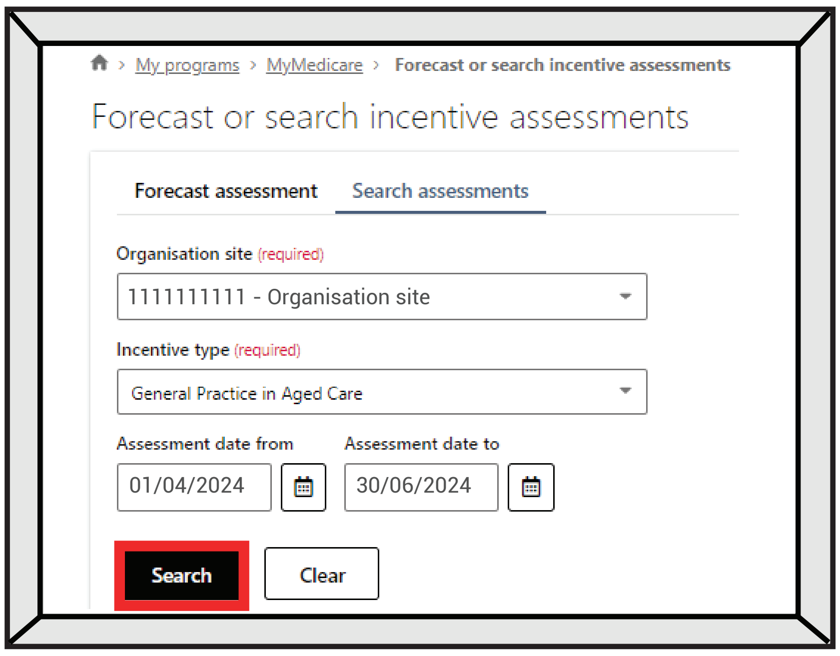
1. If required, select the **Forecast assessment** tab.
2. From the **Organisation site** drop-down list, select the **Organisation site** you are acting on behalf of.
3. Select the **Incentive** from the **Incentive type** drop-down list.
4. Select the **Forecast** button, the previous forecast will display on the screen.
5. To run a new forecast, select **Request new forecast**.
6. A pop-up box will display. Select **Yes** to continue.
7. A new information message will display at the top of the screen advising that a new forecast is in progress.
8. Once the new forecast is complete, you can view it by going to the **Search assessments** tab.




## Search for eligibility assessments

To view a previous eligibility forecast, or to view an eligibility assessment used to calculate a previous Incentive payment:

1. Select the **Search assessments** tab.
2. From the **Organisation site** drop-down list, select the **Organisation site** you are acting on behalf of.
3. Select the **Incentive** from the **Incentive type** drop-down list.
4. Enter the required **date range** or leave this blank to see all eligibility assessments.
5. Select the **Search** button.
6. Select **View assessment** on the relevant search result line to display the assessment data.




**Note:** A forecast can only be requested **once per day** per Organisation site and must be run separately for each site.

An eligibility forecast is a **point-in-time assessment** based on available data at the time and is **subject to change** based on updated data. A forecast is not a confirmation of actual payment amounts.

Depending on the number of patients, generating the forecast may take up to one hour. Once completed, the new forecast, along with any existing ones, will be available via **Search assessments.**

For more guidance on accessing and interpreting your MyMedicare Incentive information, refer to the MyMedicare - General Practice in Aged Care Incentive - Requirements and Eligibility Forecasts eLearning.

# Eligibility forecasts and assessments for MyMedicare Incentives – Providers - MYMEDINFO8

# Finding my Organisation Site Record and it's ID number*

**The Organisation Site ID is an identifier in the Organisation Register used for programs such as:**

- General Practice Training Payments (GPTP)
- Medicare Urgent Care Clinics (Medicare UCC)
- Assisted Reproductive Technology (ART)
- MyMedicare.


- **Log in to Provider Digital Access (PRODA) and select 'Go to service' on the Health Professional Online Services (HPOS) tile .**
- **From HPOS Organisation screen select the Organisation you are acting on behalf of.**


- **Then select the Organisation Register tile from the HPOS home page.**
- **The Organisation Record displays. Select the Associated Sites tab. The associated sites page displays the current Organisation Sites.**

- **Search the list for the organisation you wish to view. The ID number will be the Organisation Site Record ID.**

*In the HPOS Provider Number application process, the Organisation Site ID is only mandatory for General Practitioners applying for a provider number for an Australian Government funded Medicare Urgent Care Clinic.

**All other providers can continue the process without entering an Organisation Site ID .**

# View payments for MyMedicare Incentives - Organisation Site - MYMEDINFO10

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# View payments as an Organisation site MyMedicare Incentives

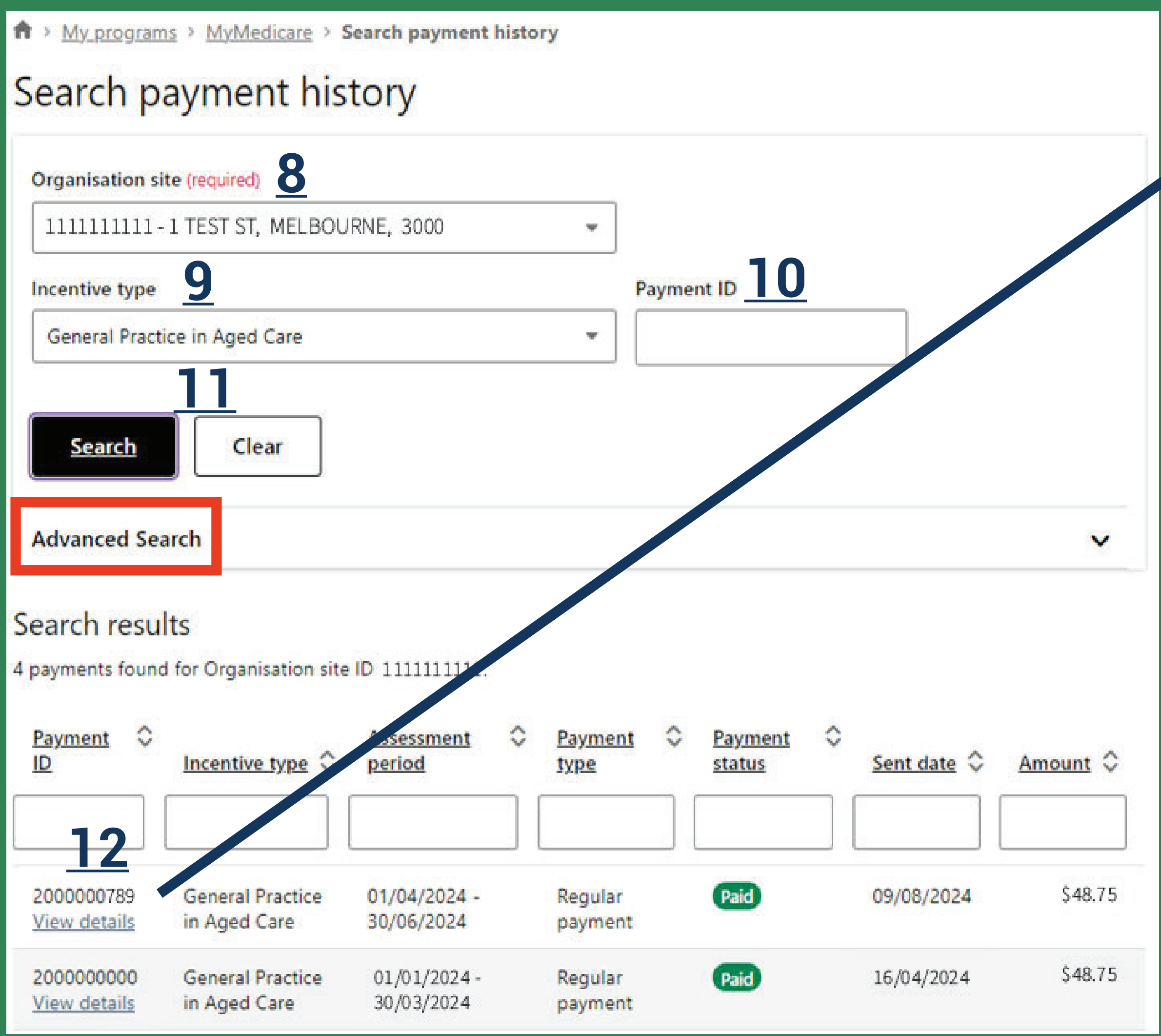
You can review the details of a previous Incentive payment in Health Professional Online Services (HPOS), and the associated eligibility assessment that was used to calculate it.

You don't need to call Medicare to access this information - you can access it in HPOS when it suits you.

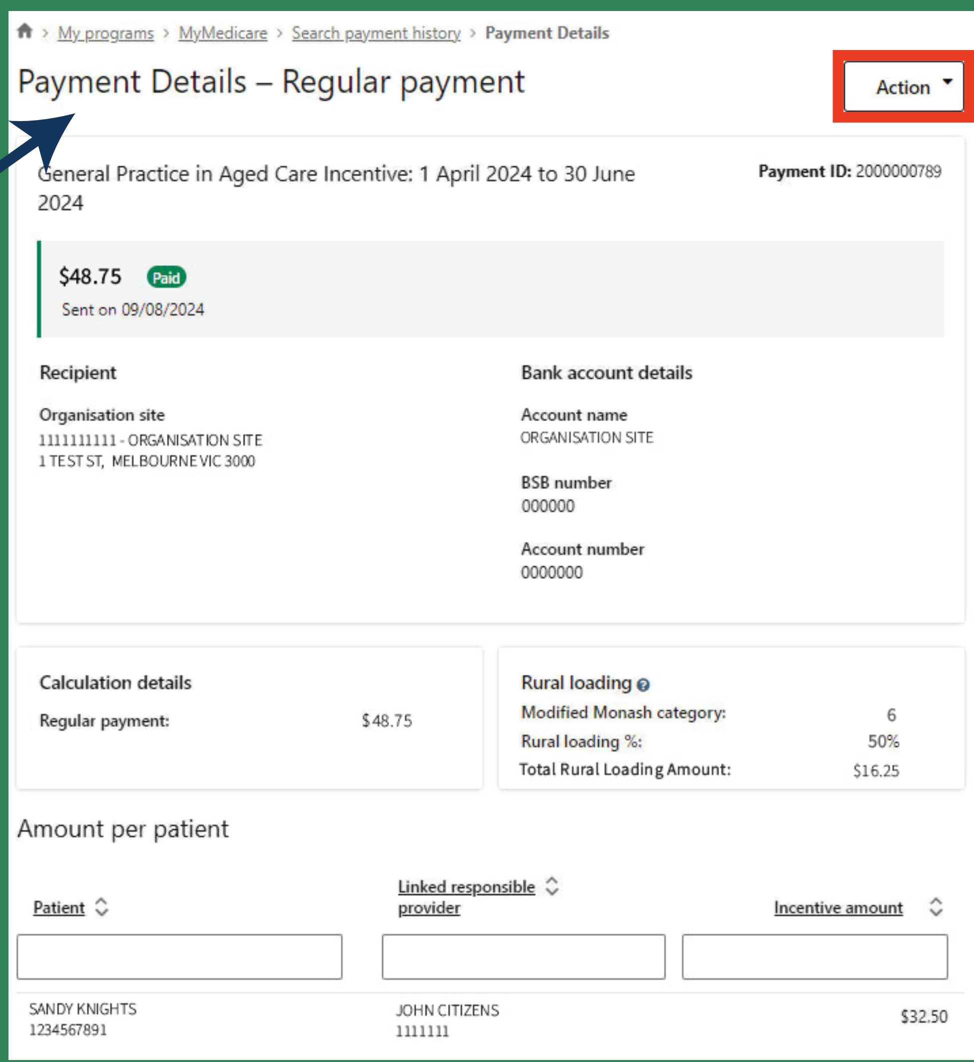
## Search for Incentive payment details

1. Login to your **individual Provider Digital Access (PRODA)** account.
2. Under **My linked services**, select **Go to service** on the HPOS tile.
3. Select the **Organisation site** you are acting on behalf of, select **Continue**.
4. The HPOS home page will display with your name and the Organisation site you selected in the top-right corner of the screen.
5. Select the **My programs** tile.
6. Select the **MyMedicare** tile.
7. Select the **Search Payment History** tile.
8. From the **Organisation site** drop-down list, select the **Organisation site** you are acting on behalf of.
9. Select the **Incentive** from the **Incentive type** drop-down list.
10. Enter the **Payment ID** or leave this blank to see all payments. **Note:** Additional search fields are available via the **Advanced Search** drop-down.
11. Select the **Search** button. High level information about payments will display in the **Search results**.
12. Select **View details** on the relevant row in the **Search results** to display the payment details.

## Search payment history




## View Payment Details




## View the assessment details used to calculate your Incentive payment

On the **Payment Details** screen using the **Action** drop-down list in the top-right corner of the screen, you can select **View assessment details** to access details of the eligibility assessment used to calculate the amount paid, based on the number of eligible patients for that assessment period.

- The **Organisation site incentive assessment** screen will display.
- From the **Organisation site requirements** tab and the **Responsible providers** tab you can see if the practice and providers met their eligibility requirements during the assessment period related to the payment.
- After selecting **View patients,** you can access information about the patients, and individual service items delivered, and which were eligible or not.

# View payments for MyMedicare Incentives – Provider - MYMEDINFO11

# View payments as a Provider MyMedicare Incentives

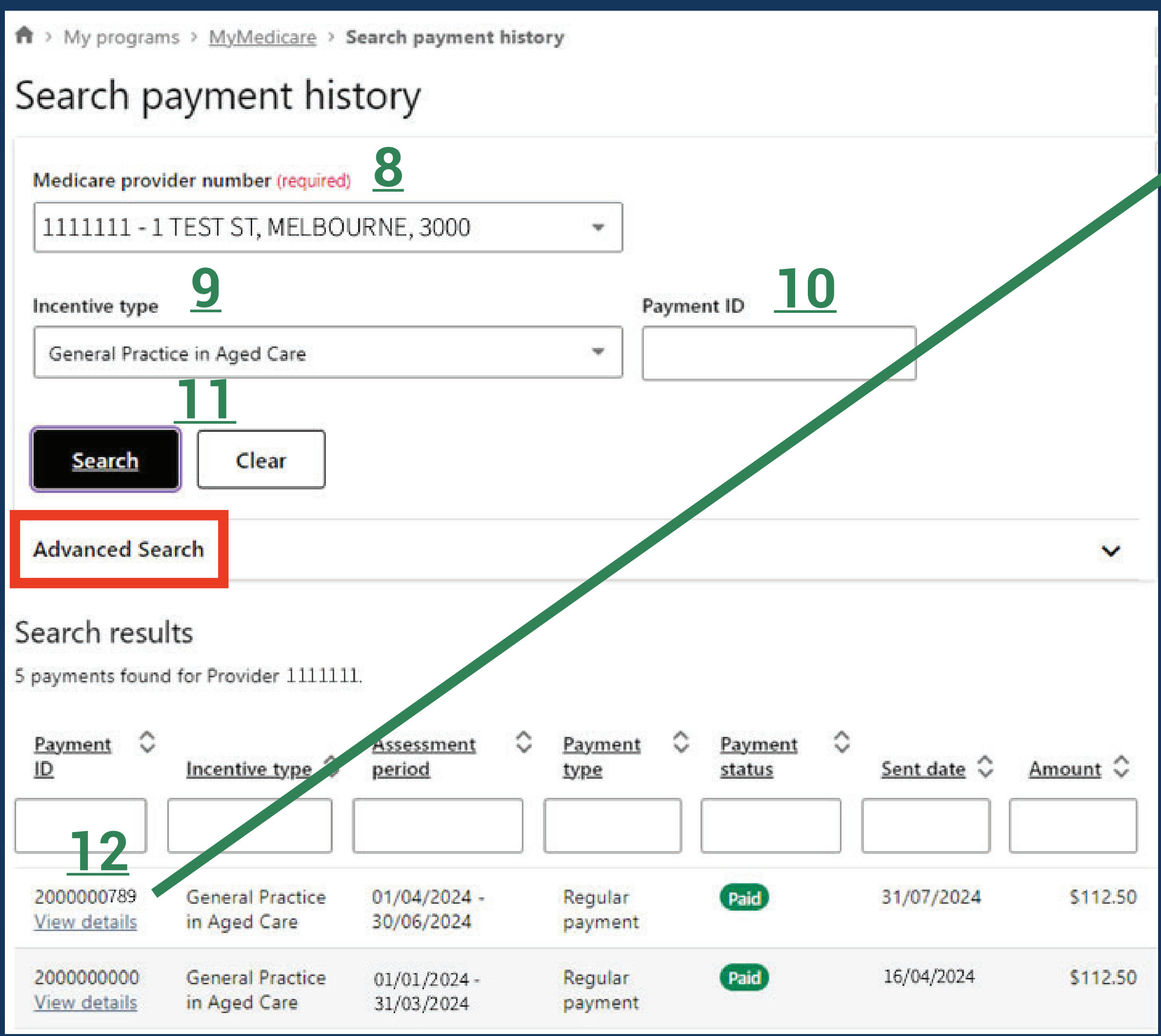
You can review the details of a previous Incentive payment in Health Professional Online Services (HPOS), and the associated eligibility assessment that was used to calculate it.

You don't need to call Medicare to access this information - you can access it in HPOS when it suits you.

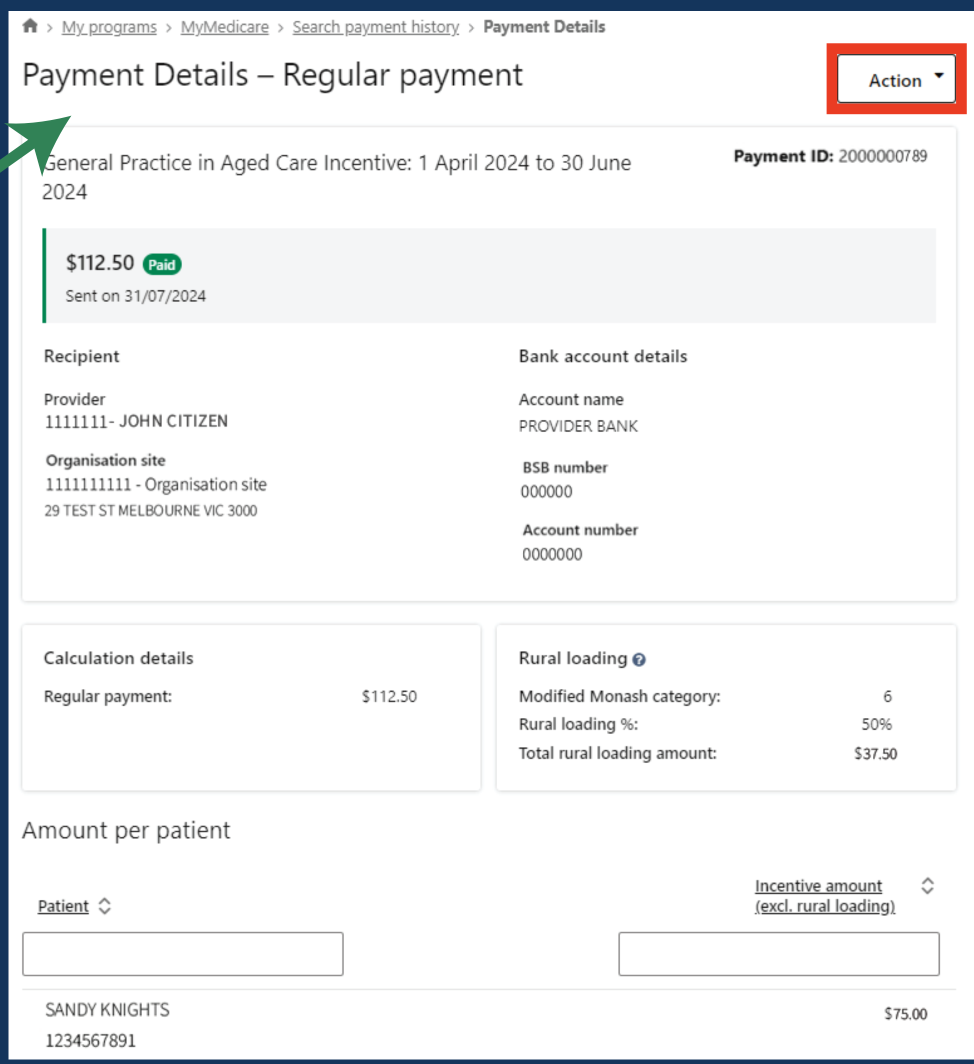
## Search for Incentive payment details

1. Login to your **individual Provider Digital Access (PRODA)** account.
2. Under **My linked services**, select **Go to service** on the HPOS tile.
3. **Select No Organisation - Proceed as an individual only,** select **Continue.**
4. The HPOS home page will display with your name displayed in the top-right corner of the screen.
5. Select the **My programs** tile.
6. Select the **MyMedicare** tile.
7. Select the **Search Payment History** tile.
8. From the **Medicare provider number (MPN)** drop-down list, select the **MPN** for the relevant location.
9. Select the **Incentive** from the **Incentive type** drop-down list.
10. Enter the **Payment ID** or leave this blank to see all payments. **Note:** Additional search fields are available via the **Advanced Search** drop-down.
11. Select the **Search** button. High level information about payments will display.
12. Select **View details** on the relevant row in the search results to display the payment details.

## Search payment history




## View Payment Details




## View assessment details used to calculate your Incentive payment

On the **Payment Details** screen using the **Action** drop-down list in the top-right corner of the screen, you can select **View assessment details** to access the eligibility assessment used to calculate the amount paid for each patient.

- The **Provider incentive assessment** screen will display.
- From the **Provider requirements** tab you can see if the provider met their eligibility requirements during the assessment period related to the payment.
- From the **Eligible patients** and **Not Eligible patients** tabs you can select on individual patients to see the individual service items delivered, and which were eligible or not.

# Payment Failed and Cancelled notifications - MYMEDINFO12

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# Payment Failed and Cancelled notifications MyMedicare Incentives

After the end of each quarter, Services Australia will assess and make payments to eligible practices and providers. It is important to make sure you keep your banking details up to date to receive payment promptly.

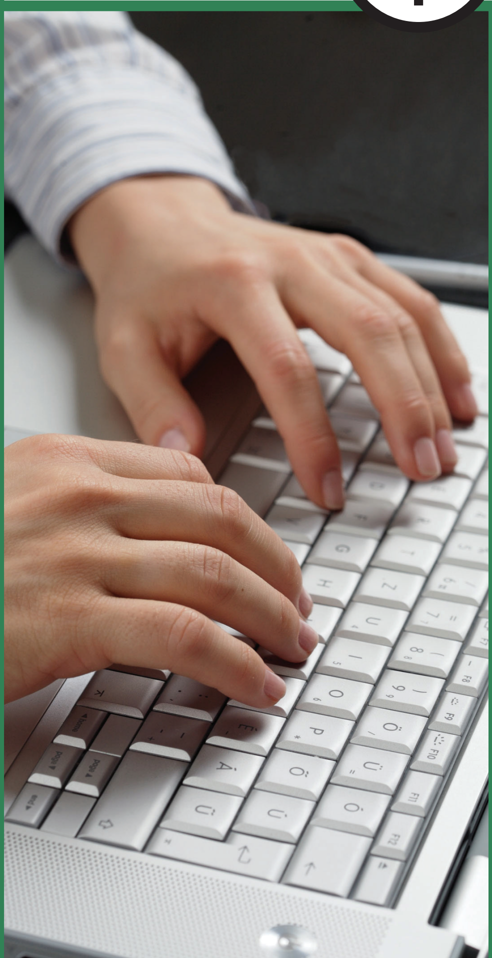
If we are unable to make payments due to missing or incorrect banking details, you will receive a notification via your Health Professional Online Services (HPOS) mailbox.

For more information on using your HPOS mailbox, refer to this eLearning:
**Using HPOS Messages**.

If you receive a notification, please review the table below to determine what actions are required for the payment to be processed.

| Notification title | What you need to do |
|---|---|
| **Update your MyMedicare banking details - Payment failed for the period** | You received this notification because your banking details for the MyMedicare program are incorrect.<br><br>Once you update the banking details, the system will register the update and deliver payment. There is no need to contact us. |
| **Update your MyMedicare banking details and contact us - Payment cancelled for the period** | You received this notification because:<br>• we have tried unsuccessfully to make a MyMedicare Incentive payment for 12 months<br>• we sent notifications each period, requesting you to update your MyMedicare banking details<br>• you have **not** updated your banking details for the MyMedicare program<br>• your payments have been cancelled for the relevant period.<br><br>You will need to contact us once you update your banking details, using one of the following methods, so we can make the payment:<br>• Use the **Reply** option at the top of this HPOS notification.<br>• Call us on **13 21 50** and select **option 2** (call charges may apply). |

## How to update your MyMedicare program banking details



| | |
|---|---|
| **Providers** | Providers need to update their MyMedicare Incentive program banking details in HPOS under My personal details.<br><br>You need to add banking details for the MyMedicare Incentive program for each Medicare provider number (MPN) location. You can only nominate one bank account for all MyMedicare Incentives at each MPN location.<br><br>For information on how to do this, refer to this eLearning:<br>**How to manage your details in HPOS**. |
| **Practices** | Practices need to update their MyMedicare program banking details in the Organisation Register under Program Registration.<br><br>You can only nominate one bank account for the MyMedicare program and its associated MyMedicare Incentives.<br><br>For information on how to do this, refer to this eLearning:<br>**Creating an Organisation Site Record**. |