

medicare



Substantiating that valid individual Allied Health services were provided (for allied health professionals)

Guideline for responding to a Department of Human Services (Human Services) request to substantiate a Medicare Benefits Schedule (MBS) service.

This guideline relates to MBS item numbers 10950 to 10970 rendered by Allied Health Professionals.

This Guideline is not exhaustive and an individual can respond to an audit using any document they believe substantiates the concern raised. However, Human Services may determine that further information is required and request additional documentation to substantiate the concern raised.

Documents that Allied Health Professionals can provide to substantiate that valid individual allied health services were provided under MBS items 10950-10970 include:

- A copy or excerpt of a
 referral form from a medical
 practitioner—that has been
 issued by the Department of
 Health and Ageing, or a referral
 form that contains all the
 components of the form issued
 by the Department. The form
 must include the patient details,
 the referring medical practitioner
 details and should be dated and
 signed by the medical practitioner.
- A copy or excerpt of a report written to the referring GP— written for the first and/or last service provided under the referral, and clearly showing the name of the patient, the name of the referring GP and the date of the report.

 An excerpt/s from the patient's clinical file—clearly showing the patient's name and the date of service.

Note: Schedule 2, Part 1 of the Health Insurance (Allied Health Services) Determination 2011, as reflected in MBS item descriptors and explanatory notes M3.1-3.5, outline all required components of MBS items 10950–10970.

You are not expected to produce clinical information relating to a patient unless those details are necessary to substantiate that the patient attended the service. Where clinical information is not necessary to substantiate this fact, that information should be censored in all documents provided.

If you are asked to produce documents containing clinical information, you can choose to only provide it to a medical practitioner employed by Human Services.

Notice to Produce Documents

- Under section 129AAD of the Health Insurance Act, Human Services can issue a formal notice for you to produce documents that substantiate your services under Medicare should there be a reasonable concern that a benefit has been paid that exceeds the amount that should have been paid.
- A notice to produce documents will only be issued if you do not voluntarily respond to a request by Human Services to provide substantiating documents for compliance audit purposes.
- A notice to produce documents can only be issued for services rendered on or after 9 April 2011.
- In addition, the legislation gives you the ability to request a review of decision for amounts recoverable as determined by a Department of Human Services' Medicare compliance audit.

For more information

humanservices.gov.au/healthprofessionals then For health professionals > Doing business with Medicare > Compliance > IMCA Initiative

Record keeping

- All practitioners who provide or initiate a service for which a Medicare benefit is payable should ensure they maintain adequate and contemporaneous records.
- Records should clearly identify the name of the patient; contain a separate entry for each attendance by the patient for a service; indicate the date on which the service was rendered or initiated; contain information adequate to explain the type of service rendered or initiated; and be sufficiently comprehensible that another practitioner, relying on the record, could effectively undertake the patient's ongoing care.
- The patient's clinical record must be contemporaneous. This means it must be completed at the time the service was rendered or initiated or as soon as practicable afterwards.
- Records produced to substantiate concerns raised by Human Services may be in paper or electronic form; however both forms must satisfy the requirements to be adequate and contemporaneous.
- Make sure you refer to any guidance provided by your relevant professional body in relation to records and record keeping.

For information on the provision of services by Allied Health Professionals in relation to Team Care Arrangements please refer to the Health Insurance (Allied Health Services) Determination 2011 found at comlaw.gov.au

For more information

humanservices.gov.au/healthprofessionals then For health professionals > Doing business with Medicare > Compliance