Australian Government
Department of Human Services

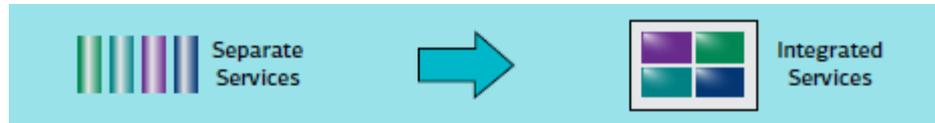# Medicare Digital Claiming…

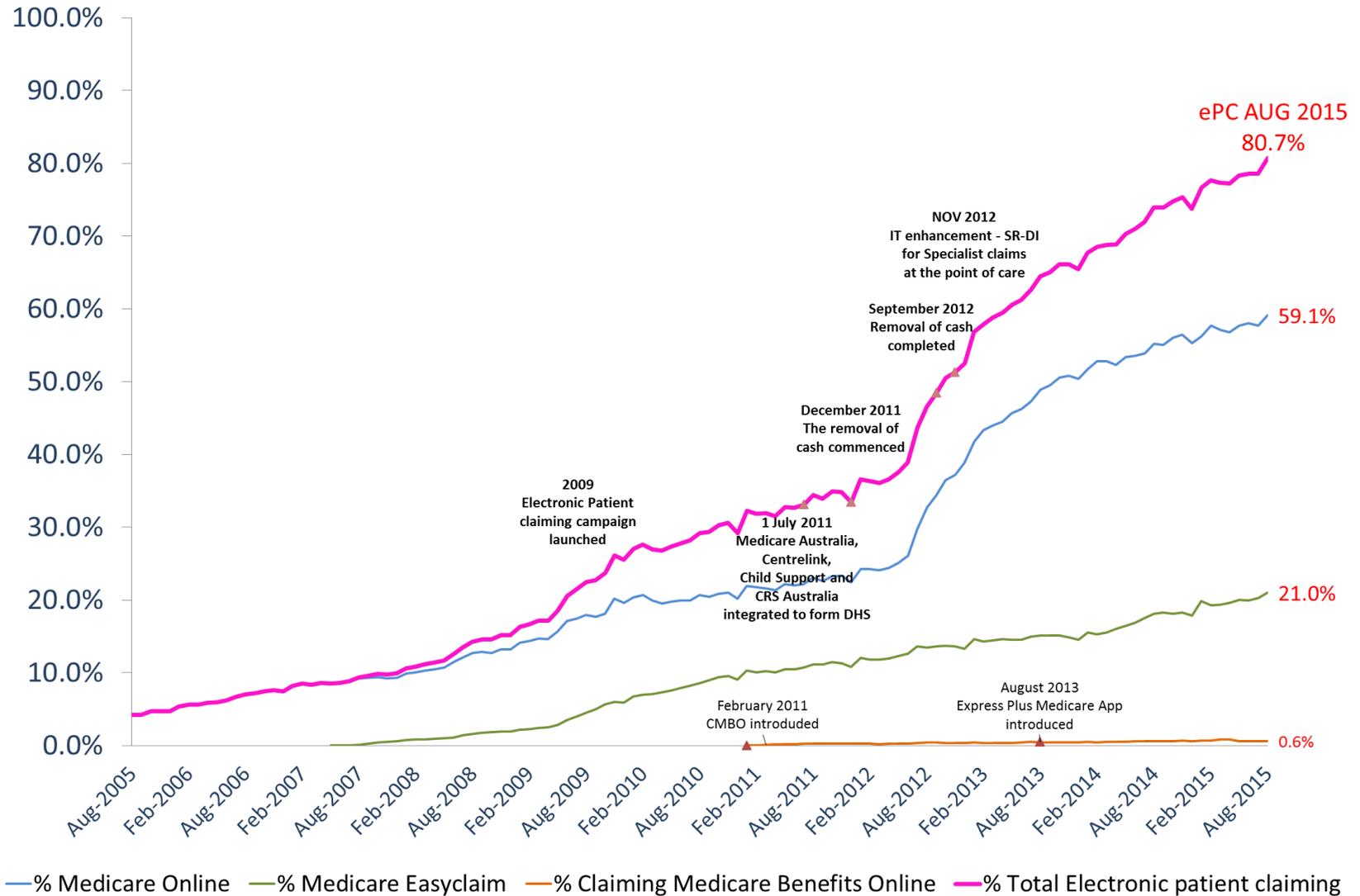# …the past, the present, and the future.

CONTENTS

- Transforming our services
- 2005 – 2015 timeline
- Increasing digital patient claiming
- Working with our Business Development Officers
- Health Professional Online Services (HPOS)
- Myths
- Questions

Transforming our services

A decade of progress towards digital patient claiming

The shift from manual to digital patient claiming

The number of digital patient claimed services made at medical practices has steadily increased with almost 81% claimed digitally in August 2015, compared to 74% in August 2014.

GP patient claimed digital services increased from 90% to 94% while specialist patient claimed digital services increased from 68% to 77% over the same period, an increase of 11 percentage points.

Patient Claiming by lodgement type - Electronic v Manual
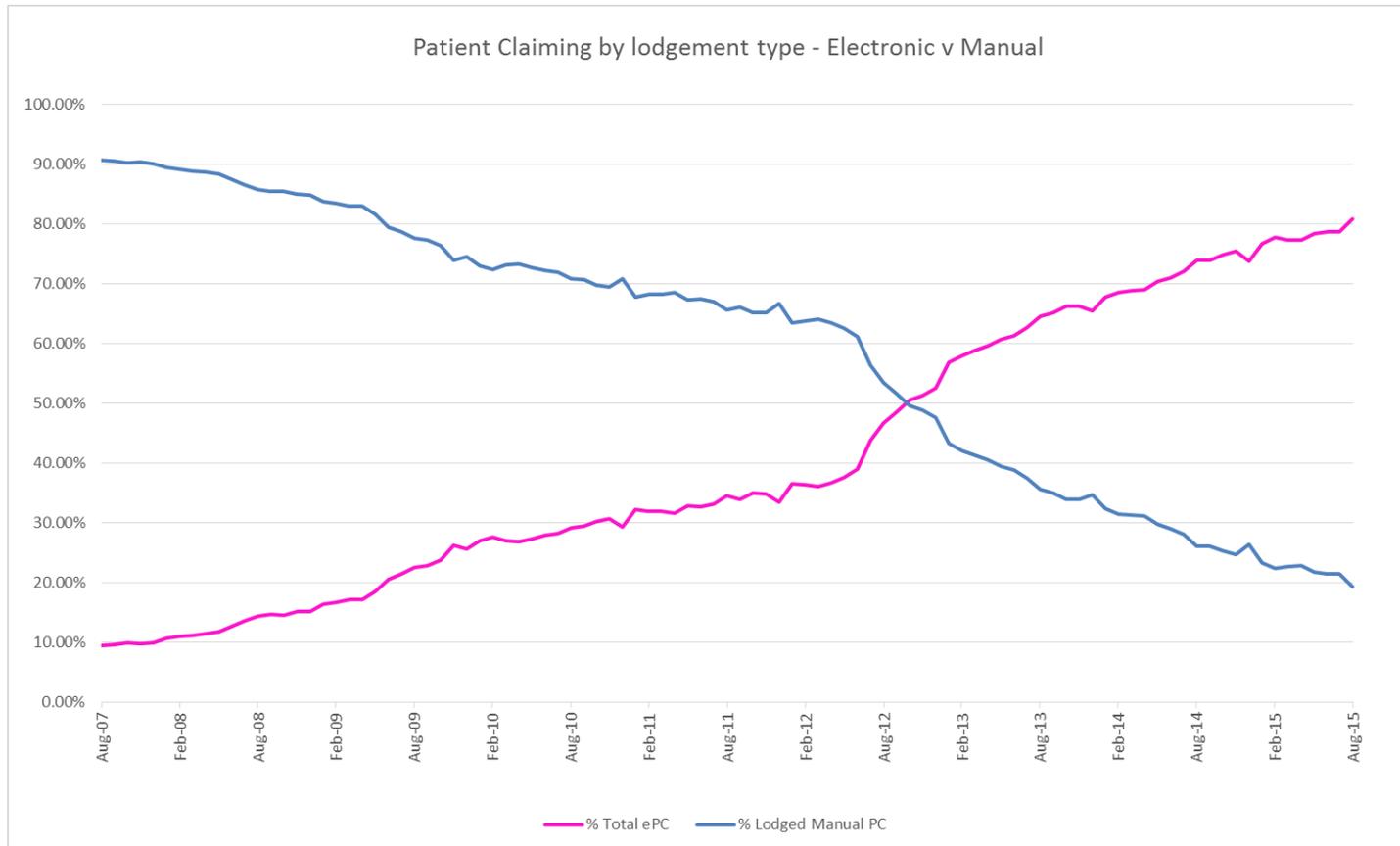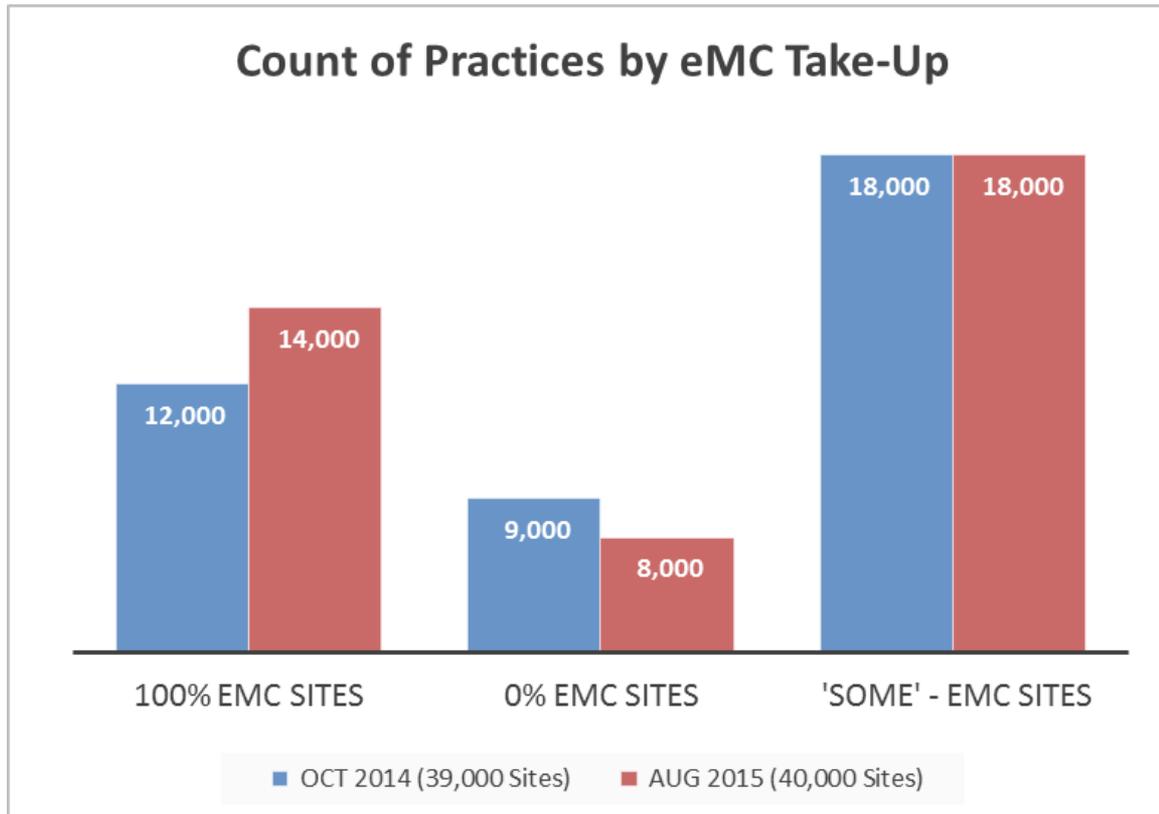
Working with our Business Development Officers

In 2015, the department's Business Development Officers (BDOs) began targeting practices that do *some* digital claiming at the point of service to try to get these practices to 100% digital claiming. A range of barriers have been identified and addressed with the targeted practices, with good results.

The digital patient claiming percentage for the 7,780 practices that were visited by BDOs from January to August 2015, increased from 70.9% to 78.4% as at 31 August 2015 - an increase of 8 percentage points, compared to the non-targeted practices which increased by 4 percentage points.

Digital Claiming Practices

As at August 2015, of the 40,000 health practices across Australia, approximately:

- 14,000 (35%) submit **all** claims digitally from the point of service

- 18,000 (45%) submit **some** claims digitally from the point of service. Our aim is to get these sites to as close to 100% as possible.

- 8,000 (20%) submit **no** claims digitally from the point of service. Our aim is to get these sites to commence digital claiming.

Count of Practices by eMC Take-Up

	100% EMC SITES	0% EMC SITES	'SOME' - EMC SITES
OCT 2014 (39,000 Sites)	12,000	9,000	18,000
AUG 2015 (40,000 Sites)	14,000	8,000	18,000

■ OCT 2014 (39,000 Sites)   ■ AUG 2015 (40,000 Sites)

Health Professional Online Services (HPOS)

HPOS has been modernised and additional functionality will be available soon, including:

- A Provider Digital Access (**PRODA**) account, which is designed for health professionals and administrators to securely access HPOS. This solution is an alternative to our Public Key Infrastructure (PKI) individual certificates which are currently used to logon to HPOS.

- A new digital claiming channel called **Webclaim** was implemented for:
  - DVA Allied Health claiming in September 2014
  - Medicare Bulk Bill and DVA Medical claiming in June 2015
  - and is currently in development for Medicare Patient Claiming (scheduled for implementation around mid-2016).

- Webclaim is a free online claiming channel available through HPOS, that is designed primarily for health professionals who currently do not use integrated software products to submit their claims electronically.

- Providers can now register bank account details in HPOS for all registered locations, for their Medicare and DVA payments.

Myths about digital claiming

Myth:

- Medicare Online claiming is too time consuming

Reality:

- Medicare Online cuts paperwork and speeds up payment times. Payments for bulk billed services are deposited directly into the provider's nominated bank account, usually the next business day.

- Medicare Online Patient Claiming makes it easier for patients by claiming their Medicare benefit at the point of service. If the patient has their bank details registered with Medicare, they receive their Medicare benefit electronically, usually the next working day.

- If your practice already has Practice Management Software, it's easy to 'switch on' Medicare Online claiming by contacting your software vendor.

- Practices can find out more about doing business online here:

- http://www.humanservices.gov.au/health-professionals/subjects/doing-business-online-for-health-professionals

Myths about digital claiming

Myth:

- That there are too many rejections when submitting claims electronically

Reality:

- There is a range of patient verification and eligibility checks available to assist practices with correctly submitting claims and reducing the amount of unnecessary rejections.
- These include; Online Patient Verification (OPV) Concessional Entitlement Verification (CEV), Online Eligibility Check (OEC), the MBS Items Online Checker and Child Dental Benefits Schedule Checker in HPOS, and online educational products.

- The Department has also recently released an education guide to assist practices to successfully submit claims online *(link available in the last AAPM newsletter)*.
- The guide lists the common 3 digit Medicare reason codes found in processing reports and Medicare Benefit Statements, as well as the actions that can be taken to reduce the rejected claims.
- The education guide on reducing claim rejections can be found here:
- http://www.humanservices.gov.au/health-professionals/services/education/education-guide-medicare-reason-codes-and-reducing-claim-rejections

Myths about digital claiming

Myth:

- If a patient hasn't registered their bank details with Medicare or they are unsure if they have, a claim cannot be transmitted using Medicare Online

Reality:

- If a patient has not registered their bank details with Medicare, a claim can still be transmitted using Medicare Online.

- If the patient knows their bank details they can be sent to Medicare by the practice within the claim.

- Patients can view, create, update or remove banking details using their Medicare Online Account in myGov.

- More information about how patients can do this can be found here:

- http://www.humanservices.gov.au/customer/services/medicare/medicare-online-accounts

Questions ?