

CLIENT BILLING POLICY

FPOL-001

Effective from 23 September 2024

1. PURPOSE AND SCOPE

This policy outlines the mixed billing approach that will be offered to Hedland Well Women's Centre clients presenting for fee for service appointments, consultations and /or procedures at Hedland Well Women's Centre (HWWC).

All HWWC clients will be informed that there will be out of pocket expenses which will vary dependant on service provision and applicable Medicare benefits prior to their appointment at the Centre.

A late cancellation/no attendance fee will also be charged where the service is subject to fee for service. This does not apply to any services offered for free via the Centre.

This policy applies to HWWC members, clients, staff including employees, board members, students, volunteers, and anyone who represents HWWC. This policy applies to all billable services only.

2. POLICY STATEMENT

All clients to be notified that there will be out-of-pocket expenses prior to a billable consultation and /or procedure at the HWWC.

3. KEY DEFINITIONS

General Consultation	A consultation with a doctor: meeting with them to discuss a particular problem and get their advice.
Procedure	A clinical procedure such as IUD insertion or removal, Implanon insertion or removal.

4. PROCEDURE

Hedland Well Women's Centre (HWWC) staff will manage all client billing discussions to ensure consistency of message and to avoid client confusion:

- All foreseeable prices and out of pocket fees will be disclosed to the HWWC client at the time of booking;
- Late fee and no attendance fee charges will be disclosed at time of booking;
- Additionally, clients will receive an email outlining when the late fee and no-show charges will apply;
- All fees to be paid in full at the time of appointment or at the time of booking;
- Any outstanding fees will be required to be settled prior to making any further bookings;
- The billing policy will be available on the HWWC website.

The billing procedures will be as follows.

4.1 GENERAL RATES

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- All non-Health Care Card holders and non-Medicare holders will be charged at general rates;
- Students 16 years and over will be charged at the general rates (with a Medicare rebate, where applicable).

4.2 BULK BILLED

Health care or concession card holders, or persons identified to be experiencing financial hardship will be bulk billed for GP Telehealth general consultations, separate to any procedures (see below). . Valid concession card holders will be bulk billed GP consultation fee with no gap fee to be paid following an attended appointment. No rebate, concession or bulk billing is available for the GP late cancellation/non-attendance fee.

Nurse procedures do not have associated Medicare rebates. Health card or concession card holders and those deemed to be experiencing financial hardship will be charged 50% of the nurse procedure full fee. Nurse procedures must be paid in full via eftpos or electronic transfer (no cash kept on premises) to HWWC at the time of appointment. No rebate, concession or bulk billing is available for the Nurse late cancellation/non-attendance fee.

Bulk billing, rebates, and concession rates do not apply to Women's Pelvic Physiotherapy services and must be paid in full at the time of booking. No rebate, concession or bulk billing is available for the Women's Pelvic Physiotherapy late cancellation/non-attendance fee.

4.3 BOOKING FEE/ LATE CANCELLATION FEE / NO ATTENDANCE FEE

If a client cancels their appointment late (less than 24 business hours prior to their appointment) a late fee will be charged or placed on their account of \$25 for the billable appointment. This also applies for not attending the appointment with no or less than 24 business hours' notice to the Centre.

All appointments are to be cancelled prior to 24 business hours of the appointment to avoid late cancellation fee.

If a client does not attend an appointment and does not provide 24 business hours' notice to cancel or change the appointment, the client will receive a no attendance fee on their account.

The fee will be charged automatically where the credit card details are held on file, retained where payment is made at time of booking or applied to a clients account which must be settled prior to any additional appointments being provided.

A full schedule of fees will be available on request.

5. INCORRECT BULK BILLING

Bulk billing is when Medicare is billed directly for a patient's medical or allied health service. In a bulk billing arrangement:

- Provider accepts the Medicare benefit as full payment for the service, and
- Patient assigns their right to a Medicare benefit to provider, so benefit can be paid

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to the GP.

Under the [Health Insurance Act 1973](#) the provider (the GP) is legally responsible for services billed to Medicare under their Medicare provider number or in their name.

The provider is responsible for incorrect claims regardless of who does the billing or receives the benefit and will be responsible for the repayment of the full amount of the incorrect Medicare benefit that was paid. In a situation such as ours where the provider does not keep the benefit then the service provider is responsible for the repayment.

6. PROCESS FOR INCORRECT BULK BILLING

Inform management of any incorrect bulk billing. Management to follow up with the service provider in relation to below steps.

Contact the [Medicare provider enquiries](#) to delete a claim you lodge on that day.

You can change an item number or other details on a processed claim that's under two years old. To do this you need to submit a manual request for adjustment (fax number below) and provide the following details on the provider letterhead. To be completed by provider directly.

- Provider's number and address of service;
- Details of patient incorrectly billed: name, Medicare number, DOB, date of service, item number lodged and amount;
- Signature of Provider;
- Fax to (02) 98953437.

Once this has been done the claim for the correct client can be forwarded to Medicare.

7. RESPONSIBILITIES

Management

- Ensure the policy is communicated to all staff and the process and cost are reviewed periodically;
- Ensure staff training is undertaken if required.

Centre Staff

- Manage all client billing;
- Ensure consistency in messaging to clients;
- Feedback to manager any concerns or complaints from clients.

8. AUTHORISATION

Certifies that the policy has been through all necessary procedures and is now in force.

- Full deliberation by the Board.

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9. RELATED DOCUMENTS

Correct Client Identification Policy
HWWC Clinic Operating Manual
GP Telehealth Schedule of Fees
Women's Pelvic Physiotherapy Schedule of Fees

10. REFERENCES

Australian Government, Health Insurance Act 1973