

Department of Health Western Australia DVA Supporting Guide V1.2



Table of Contents

About.....	3
Valid Health treatment cards for financial authorisation determination	6
Non-valid DVA cards for health treatment under Arrangement.....	6
Gold Card Holders	7
White Card Holders.....	8
DVA patient election form	9
Billing arrangements for selected services provided to DVA Entitled Persons .	9
Hospital transfer process for DVA Entitled Persons from public to private hospitals	11
Inter-hospital transport arrangements for DVA Entitled Persons.....	13
Road Ambulance - DVA eligible patients post 1 July 2017	15
Arrangements for the provision and charging of aids or equipment, home assessment and home modification for DVA Entitled Persons	18
Loan Equipment – Arrangements for the provision and charging for DVA Entitled Persons	24
Community Nursing Guide.....	26
Compliance.....	27
Evaluation	27
References.....	27
Definitions.....	28
Attachments	31
Attachment #1 WebPAS Election Form	31
Attachment #2 Commercial Flight Invoice	32
Attachment #3 Tax Invoice for selected services.....	34
DVA Contacts	36
Amendments	37

About

This document provides supporting information to assist Health Service Providers with operational procedures for the Hospital Services Arrangement (the Arrangement) between the WA Department of Health and the Department of Veterans' Affairs.

The Arrangement between the two parties ensures that Entitled Persons receive a range of admitted and non-admitted hospital services in WA Funded Hospitals. Hospital staff can access the relevant details of the Arrangement and this guide on the DoH website: www.health.wa.gov.au/dva_management/FAQ/index.cfm

The Arrangement is between Commonwealth of Australia as represented by the Department of Veterans' Affairs, the Repatriation Commission - a Commonwealth body corporate continued in existence under the *Veterans' Entitlements Act 1986* (VEA); and the Military Rehabilitation and Compensation Commission - a Commonwealth body corporate established by the *Military Rehabilitation Compensation Act 2004* (MRCA) (these bodies are described collectively as DVA) AND the CROWN IN RIGHT OF THE STATE OF WESTERN AUSTRALIA ('the State' or Western Australia) acting through the Department of Health.

The Arrangement is for treatment under Part V and s. 203 of the *Veterans' Entitlements Act 1986* or under s. 285 and s. 286 of the *Military Rehabilitation and Compensation Act 2004* or under s. 16 of the *Safety Rehabilitation and Compensation Act 1988* or under s. 7 of the *Australian participants in British Nuclear Tests (Treatment) Act 2006* for the period 1 July 2019 to 30 June 2023.

The roles and responsibilities of Western Australian Health under the Arrangement are to:

- a) work in partnership with DVA recognising both DVA's business needs and Western Australia's health service delivery and financing policies; ensure the provision of quality Treatment within the full range of Public
- b) hospital services on the IHPA General List that are available in Western Australia to Entitled Persons in accordance with the terms of the Arrangement;
- c) ensure that Entitled Persons are able to access the full range of Public Hospital Services on the IHPA General List that are available in Western Australia in accordance with the Principles in Part 3 of the Arrangement;
- d) report on performance measures and provide information on a regular basis, as set out in the Arrangement; and
- e) work with DVA to ensure efficient management arrangements are developed and maintained as outlined in Part 7 of the Arrangement.

This Arrangement does NOT cover dental treatment or Australia Defence Force patients.

Identification of DVA Entitled Persons

This section outlines the identification of the Department of Veterans' Affairs (DVA) Entitled Persons (EP) who access admitted and non-admitted services in publicly funded hospitals across Western Australia (WA).

Best endeavours by health service providers and the health manager should be engaged to ensure the State is able to claim the costs associated with DVA Entitled Persons from the DVA. Health service staff are asked to use best endeavours when identify Entitled Persons at point of service delivery.

Entitled Persons who choose to access WA publicly funded hospital services and be treated as Repatriation private patients under the Arrangement are entitled to a choice of:

1. a publicly funded hospital with a minimum of shared ward accommodation and
2. doctor provided the doctor has admitting rights for private patients at that hospital

This DVA Supporting guide will be read in conjunction with the Admission, Readmission, Discharge and Transfer Mandatory Policy for the WA Health System, other guidelines and policy documents including but not limited to the Health Department Policy website: doh-healthpoint.hdwa.health.wa.gov.au/DoH/policies/Pages/Policies.aspx.

Important - Repatriation Private Patient status is not equivalent to having private health insurance.

Entitled Persons may elect to be treated as public patients under the National Health Care Agreement; however, they will not be entitled to the choice of hospital or doctor.

The Arrangement requests the Department of Health (DoH) to provide the DVA with service utilisation details of Entitled Persons who are using admitted and/or non-admitted patient services.

Best endeavours will be used to ask all patients whether they have DVA treatment entitlements for the episode of care or attendance using the procedures in this section as described within this section.

Identification of Entitled Persons require the collection and electronic recording (in the relevant data collection systems) of three mandatory data items, on admission or in the case of non-admitted patients at attendance:

- Financial election - the value for EP should be "VET" within WebPAS, "DVA" or its equivalent in other processing systems
- DVA card or file number; and
- DVA card colour - **Gold or White**
- Card expiry date (some health provider financial systems request this field)

All admissions (booked or emergency) should be reviewed to confirm if the patient has a DVA treatment entitlement using the procedures outlined below. All admitted Entitled Persons should sign the DVA patient election form that is electronically generated via webPAS or other departmental capturing system.

Procedure to Establish DVA Treatment Entitlement

Best endeavours should be used to ask patients the following questions:

(a) Do you have a DVA entitlement treatment card?

If the response is "Yes", then proceed to question (b).

If the response is "No", proceed with the usual admission process using a non-DVA financial election.

(b) What colour is your treatment entitlement card?

If the response is "Gold" or "White" proceed to step (c). If the response is "Orange", "Blue" or "Green", then proceed with a **non-DVA financial election**.

(c) What is your DVA card or file number?

Record this number in the relevant data collection systems and proceed with the usual admission process. Gold and White cards are the only Health treatment cards under the Arrangement.

Note **Orange coloured card** is a pharmacy access card while **Blue or Green coloured cards** are concession based. These cards have no health treatment entitlements under the Arrangement for this recovery purpose.

The **DVA card or file number** to be recorded is listed after "**File No.**" as displayed on the person's card.

DVA are updating entitlement cards. Card colours remain the same however the newer cards allow for electronic chip technology, which will streamline entitlement determination where used or implemented. Examples of the old and new cards are presented below:

Valid Health treatment cards for financial authorisation determination

Gold card previous



Gold card new



White card previous



White card new



Note a Veteran may hold a “**Letter of Authorisation**” where a treatment has been approved **BEFORE** a DVA card is issued or for special purposes. Best endeavours will be used to capture the reference number and other information where applicable.

Non-valid DVA cards for health treatment under Arrangement

Orange Pharmacy card previous



Orange Pharmacy card new



DVA eligible person may carry other forms of “DVA” cards. These may include – **Orange Pharmacy Card, Blue Pension Concession Cards or Green Services Australia entitlement card.** These cards are NOT valid Health Treatment cards under this Arrangement.

Some DVA persons may not possess a Medicare care card due to these DVA cards being issues before Medicare existed. The following DVA cards below act as a Medicare card.

Blue Concession card



Green Services Australia Healthcare card



Gold Card Holders

The Arrangement suggests best endeavours are engaged by hospital staff **to obtain DVA financial authorisation prior to treatment where possible** to ensure that the patient will be financially covered by DVA **under the following circumstances:**

- (a) Respite care
- (b) If the treatment required is a non-MBS item; treatments occasionally nominated in writing by DVA such as cosmetic surgery or in vitro fertilisation; or a non-listed prosthesis item.
- (c) If the veteran is being admitted to a
 - non-contracted private hospital or
 - non-contracted day procedure centre.

White Card Holders

To facilitate successful claims of DVA entitlements for White Card holders, hospital staff will use best endeavours to obtain financial authorisation from these patients, following the same processes as detailed for Gold Card holders above.

All other episodes of care/ occasions of service provided to DVA White Card Holders will be submitted by the DVA Management Unit, DoH, to the Commonwealth DVA for retrospective confirmation of treatment eligibility. Therefore, it is important that episodes of care provided for white card holders have a financial election of "VET" within WebPAS or "DVA" or other equivalent descriptions in other capturing systems as this information will be included during data submission(s) to the DVA.

How to obtain DVA financial authorisation

- a) Make sure you have the patient's name, DVA card colour and file number, and information about the treatment or procedure required.
- b) Ring the DVA Health Provider line for metro and nonmetro areas: **1800 550 457**.
- c) From the series of prompts, **select Option 3 "Prior approval, eligibility checks and provider registration"**.
- d) This will lead to three further options. **Select Option 1:** "Prior approvals, eligibility checks, and all general Medical & Allied Health queries". The information required by DVA will depend on the nature of the treatment or procedure.
- e) If approved, the DVA will provide confirmation accordingly.
- f) If approval is not granted the patient should be admitted under another financial election type and the usual admission process applies. I.e. an ineligible DVA person may then be assigned public or private funding classification.
- g) **Provider invoicing & billing enquiries** should be directed to Services Australia, DVA access on 1300 550 017

DVA patient election form

This section outlines the procedures for all Department of Veterans' Affairs (DVA) Entitled Persons to sign the DVA Patient Election Form on admission or during the course of their hospital stay.

The DVA Patient Election Form is a mandatory requirement for the DVA process and local hospital policy guidelines apply.

The DVA Patient Election Form provides the means of confirming the patient's identity, and DVA eligibility. It is also a record of consent for the release of relevant information by the Department of Health to the DVA to facilitate the effective management of the Arrangement, and the processing of payments for hospital services.

As part of the admission process, hospital staff verify where possible that the:

- DVA Patient Election Form is signed by all Entitled Persons who wish to be treated using their DVA entitlements. If the patient is unable to sign for clinical reasons, the next of kin or their authorised representative may sign the form; and
- signed form is filed in the patient's medical record for audit purposes.

All hospitals are advised to use the relevant forms such as Attachment #1, WebPAS Election Form, which is available in electronic versions in WebPAS (copy located towards end of this manual for reference) for patient admissions.

Billing arrangements for selected services provided to DVA Entitled Persons

This section outlines the billing arrangements between Western Australia (WA) and the Department of Veterans' Affairs (DVA) for pharmaceuticals, nursing home type patient (NHTP) contribution for ex-Prisoners of War (POW) and Victoria Cross (VC) recipients and post discharge services provided to Entitled Persons.

Pharmaceuticals

Entitled Persons will have the same access to pharmaceuticals as other admitted and non-admitted patients. Where an Entitled Person requires access to

- Highly Specialised Drugs (HSD);
- Pharmaceuticals under the Special Access Scheme (SAS); and/or
- Pharmaceuticals not included in the hospital drug formulary

Hospital staff should use best endeavours to first seek financial authorisation from the DVA by calling the Veterans' Affairs Pharmacy Advisory Centre (VAPAC) on 1800 552 580. If approval for supply of these pharmaceuticals is granted, DVA should be invoiced for the cost.

Under the Pharmaceutical Benefits Scheme Reform Program, participating hospitals may charge a patient co-payment for pharmaceuticals provided (to admitted patients) on discharge or as a non-admitted patient.

NHTP Contribution for ex-Prisoner Of War (POW) and Victorian Cross (VC) recipients

Entitled Persons who are admitted as, or reclassified to, NHTP would be charged a patient contribution in line with the provisions of the *Health Insurance Act 1973* and entitlement determination is not required by the DVA. If the patient is an ex-POW or a VC recipient, the DVA should be invoiced for the patient contribution.

The POW status is usually shown on the gold card. However, if there is some doubt contact DVA on 1800 550 457 to confirm the patient's status. NHTP contributions for **non ex-POWs** should be billed directly to the Entitled Person.

Post Discharge Services

Where an admitted Entitled Person requires post discharge care, hospitals are encouraged to refer them to DVA-contracted health service providers. A list of providers for the relevant area can be obtained by contacting DVA on 1800 550 457.

If the DVA advises that there are no DVA-contracted providers in the area, hospitals should seek approval by contacting 1800 550 457 to provide the service themselves or arrange for the service to be provided by their subcontractors. Upon approval, the hospital should arrange the required service and the DVA should be invoiced for the cost.

The DVA Discharge Planning Resource Kit, which provides more information about post discharge services for Entitled Persons, can be accessed via the DVA website: <https://www.dva.gov.au/providers/health-programs-and-services-our-clients/hospitals-and-day-procedure-centres/hospital>.

The DVA Discharge Planning Resource Guide can be found on DVA's website: https://www.dva.gov.au/sites/default/files/files/providers/hospitals/discharge_planning_resource_guide.pdf.

Entitled Persons may be eligible to access the Veterans' Home Care (VHC). More information about VHC is available by calling 1300 550 450 or the DVA website: <https://www.dva.gov.au/health-and-treatment/care-home-or-aged-care/community-nursing>

INVOICING AND PAYMENT PROCESS

All HSP's are to process their own invoices as per current practice where applicable.

Where subcontracted services are required the following should be used as a guide:

1. Hospitals should raise a tax invoice and complete the relevant attachment at the end of this guide or as per current billing practice where applicable. Where a hospital engages a subcontractor to provide the post discharge service, current practice continues where the subcontractor sends the invoice to the hospital and the hospital pays the subcontractor. The hospital, in turn, should invoice the DVA for the cost of the service, and DVA pays the hospital.
2. The DVA will make payments against the tax invoice directly to the HSP. See Attachment #2 Commercial Flight Invoice and Attachment #3 Tax Invoice for selected services- pharmaceuticals, ex-POW and VC recipients and post discharge services.

Hospital transfer process for DVA Entitled Persons from public to private hospitals

Under the terms of the Arrangement, Entitled Persons may be transferred from a public hospital to a private hospital under specific circumstances.

The DVA contracts with Day Procedure Centres (DPCs), public hospitals and Tier 1 private hospitals for Entitled Persons.

The DVA defines **Tier 1** hospitals (including mental health facilities) and DPCs as facilities where admission of Entitled Persons does not require prior approval from DVA for transport. All WA public hospitals are Tier 1 facilities. In addition, DVA has contracts with a number of private hospitals. For further details, please click on the links below.

Tier 1 Private Hospitals

www.dva.gov.au/sites/default/files/files/providers/hospitals/private_hospitals_list.pdf

Mental Health Facilities

www.dva.gov.au/sites/default/files/files/providers/hospitals/privhospmh.docx

Day Procedure Centres

www.dva.gov.au/sites/default/files/files/providers/hospitals/dpcs.docx

Tier 2 hospitals are contracted private facilities where all Entitled Person admissions require prior financial authorisation from DVA. These facilities are used when treatment cannot be provided within a reasonable time in the Tier 1 facilities. Currently no private hospitals contracted under these arrangements.

All other private hospitals are categorised as “non-contracted private hospitals” or **Tier 3** private hospitals. Admission of Entitled Persons to Tier 3 facilities requires prior financial authorisation from DVA and would only be given if the treatment is not available or cannot be provided within a reasonable time in the Tier 1 facilities.

Transfer of Entitled Persons (from public to private facilities)

Under the terms of the Arrangement the transferring (public) hospital will use best endeavours for coordinating the transfer to ensure that a bed is available at the admitting (private) hospital.

The transferring hospital should inform the admitting hospital if the patient is a white card holder, or if the condition requires specific treatments such as cosmetic surgery or in vitro fertilisation. The admitting hospital should use best endeavours to obtain prior financial approval from DVA by contacting the Health Provider line on 1800 550 457. Failure to obtain approval can mean the admitting private hospital accepts full financial responsibility for the cost of the treatment.

All transfers to Tier 1 private facilities can be organised between the transferring and the admitting hospitals. Transfers for either clinical or social reasons (moving the Entitled Person closer to home and/or family support) are permissible, but all transfers must be clinically appropriate. The DVA relies on clinicians to act in the best clinical interests of Entitled Persons when considering a transfer.

If an Entitled Person attends an Emergency Department of a public hospital and expresses a preference for an admission to a Tier 1 private hospital at the time of admission, they may be transferred after being stabilised. If a suitable bed is not readily available, then a transfer may only be considered if it is clinically appropriate.

If a major clinical intervention has occurred, it may be more medically appropriate for the Entitled Person to remain in the admitting hospital.

Where inter-hospital transport is required, the arrangements detailed in section [“Inter-hospital transport arrangements”](#) for DVA entitled persons should be referred to.

Where an entitled person chooses or alters discharge to hospital outcomes, then the entitled person should be aware of and acknowledge the request by signing the notes attached to the Medical records.

Please see Inter-hospital transport arrangements for DVA Entitled Persons for details regarding transports and Road Ambulance in the [following section below](#).

Inter-hospital transport arrangements for DVA Entitled Persons

The Arrangement covers inter-hospital transport across WA for treatment purposes relating to the Entitled Person's episode of care.

Inter-hospital transport refers to transfers of admitted and emergency patients between hospitals using road ambulance, Royal Flying Doctors Service (RFDS), Emergency Rescue Helicopter Service (ERHS), commercial flights, taxi in the metropolitan area, and taxi or other forms of patient transport in regional/remote areas. It also includes emergency transfer from nursing posts¹ to a WA Funded Hospital.

Eligible DVA patients are entitled to all modes of inter-hospital transport that are available to all other patients. The inter-hospital transport arrangements covered here do not include transport costs of next of kin travelling with the patient.

Some transfers will require hospitals to notify the DVA Transport Unit on 1800 550 455 to arrange the transport. This guideline is detailed under section (d) below.

Inter-hospital transport includes transfers of admitted and emergency patients from a:

- WA Public Hospital to another WA Public Hospital
- WA Public hospital to a Tier 1 DVA-contracted private facility
- WA Public Hospital to a Tier 3 non-contracted private hospital where DVA has approved the transfer
- WA Public Hospital to the airport where the patient is to be transported by air to another WA Public Hospital
- Airport to a WA Public Hospital
- Nursing post to a WA Public Hospital
- WA Public Hospital to a Transition Care facility; and
- Transition Care facility to a WA Public Hospital (and return) for medical appointments &/or treatment relating to the patient's episode of care. Circular [OD 0290/10](#) or as amended from time to time, provides more information about the Transition Care Program found on Healthpoint: <https://doh-healthpoint.hdwa.health.wa.gov.au/directory/System%20Policy%20and%20Planning/Subacute%20Community%20and%20Aged%20Care/Documents/WA%20TCP%20Operational%20Guidelines%20Dec%202016.pdf>

To meet the requirements for DVA funding under the Arrangement, hospital staff should use best endeavours to:

¹ Includes nursing posts that are contracted by the Department of Health to supply the required services, i.e. Silver Chain Nursing Association.

a) Identify DVA treatment entitlements

All DVA patients should be asked whether they are treatment entitled according to the guidelines in “Identification of DVA Entitled Persons”.

Where entitlement could not be established before arranging the transport due to the patient’s clinical condition, hospitals should verify the veteran’s entitlements within five (5) working days and advise accordingly the:

- Ambulance provider if the patient was transported by road ambulance; or
- DVA if the patient was transported by commercial flight.
- DVA if the patient was transported by RFDS.

b) Determine the appropriate mode of transport based on the patient’s clinical condition.

c) Obtain financial approval from DVA where required.

Call 1800 550 455 prior to booking the transport from a WA Public Hospital to a contracted or non-contracted private facility.

d) Notify the DVA Transport Unit by calling 1800 550 455 for:

- Taxi within the metropolitan area.
- Appointments unrelated to the current episode of care.
- Commercial flight bookings.

Non-metropolitan areas

Taxi may be used in some regional areas. Best endeavours will be undertaken to seek authorisation from the DVA before transport. Some remote regions may have other methods of transport. DVA should be contacted in these cases for review – call the DVA on 1800 550 455.

Failure to check treatment entitlements and/or notify the DVA where required, could result in hospitals retrospectively paying for the cost of inter-hospital transport for Entitled Persons.

e) Booking of required transport

Road ambulance

DVA has some direct billing arrangement with St John Ambulance Australia (SJAA) and Advanced Medical Support (AMS) for the provision of emergency and non-urgent inter-hospital transport for all Entitled Persons in WA.

St John Ambulance is DVA's preferred provider and should be contacted in the first instance. Advanced Medical Support should only be used if SJAA is unavailable for the job or do not provide coverage in the region.

Hospitals should provide the name and DVA file number of the Entitled Person to book an ambulance and follow the table shown below for financial responsibility.

Road Ambulance - DVA eligible patients post 1 July 2017

Admitted patients - sending health service providers are responsible for fees for services when admitted treatment-entitled DVA patients require non-urgent road ambulance inter-hospital transport.

These associated fees for service need to comply with WA Health Department's providers of road based inter hospital transport services, Transport Policy – Hospital Patient and Voluntary Transport Services ([OD 0614/15](#)).

“Effectively, all DVA admitted patients are to be treated in the same manner as publicly admitted patients requiring inter-hospital transfers via road ambulance”.

Non-Admitted patients- DVA remains responsible for eligible treatment-entitled DVA patients via contractual arrangements between the DVA and service providers such as SJAA.

The following table summarises the **Financial Responsibility** for road Ambulance inter-hospital transport for entitled DVA patients -

Table - Financial Responsibility for road Ambulance inter-hospital transport for entitled DVA patients

Transport From	Transport To	Responsible For Payment
Public Health Facilities-admitted patients	Public Hospital or public mental health facility	Sending Hospital
	Diagnostic or public day procedure service	Sending Hospital
	Private Health Facilities	Sending Hospital
	Community	DVA
Public Health Facilities-non admitted patients	Public Hospital or public mental health facility	DVA
	Private Health Facilities	DVA
	Community	DVA
Community	Public Healthcare facilities	DVA
	Private Healthcare facilities	DVA
	Receive treatment at a medical facility, to receive diagnostic services, to attend appointments at non-admitted patient clinics or to return the patient to their point of origin following such transport and to be transported from one aged care residence to another providing the receiving aged care residence will provide a higher level of care	DVA
Private Health care facilities	Public Hospital or public mental health facility	DVA
	Diagnostic or public day procedure service	Sending Hospital
	Private Health facilities	DVA
	Community	DVA

Further DVA details regarding Hospital Patient and Voluntary Transport Services can be found on Healthpoint- <https://doh-healthpoint.hdwa.health.wa.gov.au/directory/System%20Policy%20and%20Planning/Subacute%20Community%20and%20Aged%20Care/Pages/St-John-Ambulance.aspx> and <https://healthpoint.hdwa.health.wa.gov.au/policies/Policies/EMHS/RPH/Transport%20-%20Hospital%20and%20Voluntary%20Policy.pdf>

Royal Flying Doctor Service (RFDS) where clinically required

This Arrangement covers RFDS transfers from remote and rural areas to the nearest hospital in the rural or metropolitan area, using the hospital booking process.

Best endeavours to be used in contacting the DVA on 1800 550 455 and asking for Transport authorisation or emailing DVA Transport via HSC.TRANSPORT.POLICY@dva.gov.au seeking approval for RFDS transports. The DVA should be informed of RFDS flights for their Entitled Persons.

Emergency Rescue Helicopter (where clinically required)

The arrangement described in [WA Health Patient Transport Strategy 2015-2018](#) (DoH website: www.healthywa.wa.gov.au/~media/Files/Corporate/Reports_and_publications/Patient_transport/Patient-Transport-Strategy-2015-2018.pdf) or as amended from time to time is applicable. Hospitals should use best endeavours and advise Department of Fire and Emergency Services WA (DFES) that the patient is DVA-entitled to ensure that bills are sent to the DVA and not to the hospital. Payment for this service will be administered between the DVA, DFES and St John Ambulance Australia WA where applicable.

Commercial flight (where medically certified)

Notify the DVA Transport Unit on 1800 550 455 of the need to use a commercial flight. The DVA will be responsible for booking the flight, not the hospital. However, if the transport is required after hours including weekends and public holidays, hospitals should arrange the flight using the hospital booking process and advise the DVA Transport Unit of the transaction on the next business day.

Hospitals should forward the tax invoice for the cost of the flight directly to the DVA Transport Unit. The tax invoice must be accompanied by the required information detailed in the attachment to this circular. The DVA will make payments directly to the hospital against the tax invoice.

Taxi services (where clinically appropriate)

- Taxi service for **metropolitan areas** is covered if the doctor determines that it is clinically appropriate. Hospitals should notify the DVA Transport Unit on 1800 550 455 of the need to use a taxi and DVA will book the transport and pay for the cost.
- For **regional areas**, DVA should be contacted on 1800 550 455 and advice will be given on the best mode of transport.

Appointments unrelated to the current episode of care

- Inter-hospital transport to and from appointments unrelated to the current episode of care (e.g. eye or dental) is not usually covered under this arrangement. Therefore, unless there is a medical need or other compelling reason, the patient is expected to reschedule any appointments booked prior to admission. Where it is necessary for appointments to be kept or in cases of long stay patients where appointments may need to be made during the course of the admission, the patient should:
 - Obtain a doctor's clearance to leave the hospital to attend an appointment; and
 - Arrange for their own transport or hospital staff should notify the DVA Transport Unit on 1800 550 455 of the appointment. If agreed, DVA will arrange and pay for the transport.

Reporting Requirements

All hospitals are encouraged to use best endeavours and record all inter-hospital transfers in the Entitled Person's record in the relevant feeder system under "Source of Referral-Transport" using the current values in the Hospital Morbidity Data System (HMDS) Manual. The Department of Health is using this information as part of its reporting requirement to the DVA under the terms of the Arrangement.

The HMDS values are as follows:

- 1 = Private/public transport
- 2 = Hospital transport
- 3 = Ambulance – emergency
- 4 = Royal Flying Doctor Service (RFDS)
- 5 = Helicopter (evacuation)
- 6 = Other (includes commercial flight)

Important note, where a patient is transported by air and then taken to a hospital by road ambulance, the **air transfer should be recorded as it takes priority** over other modes of transport.

Best endeavours should be undertaken so that Royal Flying Doctors mode of transport is recorded and not ambulance where a patient is identified as RFDS.

Arrangements for the provision and charging of aids or equipment, home assessment and home modification for DVA Entitled Persons

This section outlines the arrangement for the provision of aids or equipment, home assessment and home modification for DVA Entitled Persons. This covers admitted patients on discharge and non-admitted patients and

requirements for aids or equipment on discharge for these patients, including any required home assessment and home modification.

If an Entitled Person requires aids or equipment **during their hospital stay**, the items are part of the inpatient service and DVA should NOT be invoiced for the costs.

Where an Entitled Person is already in receipt of aids or equipment from the DVA prior to admission, the DVA will continue to provide the items upon discharge. Aids or equipment may be loaned to an Entitled Person on either a short-term or long-term arrangement.

Items issued under RAP are generally designed specifically for people with an illness or disability.

What is the Rehabilitation Appliances Program (RAP)?

RAP is an Australian Government Program administered by the Department of Veterans' Affairs (DVA). It provides aids and appliances to eligible veterans in their homes to enable them to maintain their functional independence.

Products and services are supplied under six categories:

- Contenance
- Mobility and Functional Support
- Home Medical Oxygen
- Diabetes
- Personal Response Systems
- Continuous Positive Airway Pressure.

Further detailed DVA Rehabilitation Appliance Program information can be found on the DVA website - [Rehabilitation Appliances Program \(RAP\) :](https://www.dva.gov.au/providers/rehabilitation-appliances-program-rap)
<https://www.dva.gov.au/providers/rehabilitation-appliances-program-rap>

Is my patient eligible?

Gold Card holders are eligible to receive aids and appliances subject to assessed clinical need.

White Card holders are eligible to receive aids and appliances subject to assessed clinical need in relation either to a disability accepted by DVA as service-related, and/or cancer, tuberculosis, anxiety, depression and post-traumatic stress disorder, whether or not these conditions are accepted by DVA as service-related". Further DVA information can be found on the DVA website concerning white cards – Veteran White Card: <https://www.dva.gov.au/health-and-treatment/veteran-healthcare-cards/veteran-white-card>

How do I arrange an assessment for RAP aids or appliances?

The RAP Schedule contains details on the most appropriate allied health professional to assess/prescribe specific items or services. However, in cases where an allied health professional is not available, a GP is able to assess the veteran.

Home Assessment

Where a home assessment is required prior to undertaking the home modification, hospitals should use best endeavours to record the service as a community service in CHIS, webPAS, and the Allied Health System or other health system if in use.

The DVA Management Unit, Department of Health will manage the cost recovery on behalf of all WA Funded Hospitals for this item. This **excludes** assessments undertaken by the Aged Care Assessment Team.

What aids/equipment are available for my patient?

The RAP National Schedule found on the DVA website:

www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-schedule lists items available through RAP and schedule equipment is available also on the DVA website:

https://www.dva.gov.au/sites/default/files/2021-06/rap-schedule-june-2021_2.pdf

The RAP Schedule is arranged by aid/appliance type (beds, wheelchairs etc) and provides detailed information on eligibility, clinical assessment, functional criteria, contraindications, and Residential Aged Care Facility (RACF) and Community Aged Care Package (CACP) recipients. The entitled person's responsibilities with regard to safe usage, care, maintenance and transport (if applicable) are also detailed.

Is prior approval from DVA required?

There are items on the RAP Schedule that require prior approval by DVA. The RAP Schedule lists these items and any criteria that might need to be met in order for the item to be provided.

Is there a choice of provider?

DVA has implemented national supply models for products in the Continence, Mobility and Functional Support, Home Medical Oxygen Therapy, and Personal Response System categories. This ensures that prices, service provision and reporting arrangements are consistent from State to State.

Several different suppliers are available within each group/class of equipment. For example, within the Mobility and Functional Support (MFS) category the suppliers contracted to provide products and services are Aidacare, Allianz Global Assistance, Country Care Group, and ParaQuad.

Diabetes products are listed in the RAP Schedule.

Further information is available under the "[Schedule and Guidelines](http://www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-schedule)" on DVA's RAP website: www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-schedule.

How do I order products?

The “[Provider Factsheets and Forms](#)” on the DVA RAP website: www.dva.gov.au/providers/rehabilitation-appliances-program-rap contains order forms as well as contact details for contracted suppliers.

You may need to complete an assessment / application form in addition to an order form- Please call DVA on 1800 550 457 for direction.

Mobility and Functional Support (MFS) products

D0992 - Mobility and Functional Support (MFS) Direct Order Form:
<https://www.dva.gov.au/about-us/dva-forms/mobility-functional-support-mfs-products-order-form>

Home Medical Oxygen Therapy (HMOT)

D9140 – Positive Airways Pressure (PAP) Equipment
<http://www.dva.gov.au/about-us/dva-forms/application-positive-airways-pressure-pap-equipment>

Continence

D0988 – Continence Direct Order Form:
<https://www.dva.gov.au/about-us/dva-forms/continence-direct-order-form>

Personal Response System (PRS)

D9199 - Personal Response System (PRS) Assessment Form:
<https://www.dva.gov.au/about-us/dva-forms/assessment-form-supply-personal-response-system>

Are there any guidelines for prescribing health providers?

DVA’s Guidelines are located on the DVA website: www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-national-guidelines for specific categories, if available, can be accessed by clicking on the category name on the left-hand menu of the RAP websites.

What is the expected timeline for delivery of products/services?

CPAP/Bi-Level Therapy

24 hours	For urgent orders
48 hours	For metropolitan, regional and rural areas
72 hours	For remote areas

Home Medical Oxygen Therapy

4 hours	for 'emergency' orders
24 hours	for metropolitan, regional and rural areas
48 hours	for remote areas

Continence

2 working days	Metropolitan areas
3-5 working days	Regional to remote areas

Veterans should be advised to order new supplies two weeks before their existing supplies run out to avoid having to place an urgent order.

What if my patient needs home modifications?

Major Home Modifications

DVA's [Major Home Modifications](http://www.dva.gov.au/about-us/dva-forms/home/access-modifications-assessment-form-all-major-modifications) found on the DVA website: www.dva.gov.au/about-us/dva-forms/home/access-modifications-assessment-form-all-major-modifications contains an OT Assessment form, Information for Prescribers and veterans on major modifications, a direct order form, and an Authority to Install form.

Minor Home Modifications

Minor Home Modifications can be provided by all MFS suppliers.

Please also refer to the DVA website: www.dva.gov.au/health-and-treatment/care-home-or-aged-care/equipment-and-modifications-you-and-your-home for "Information for Providers about Home Modifications and Household Adaptive Appliances".

Timeline for provision of minor home modifications

1 - 2 days	For urgent or emergency orders
5 days	for metropolitan areas (off the shelf)
7 days	For regional, rural and remote areas (off the shelf)
12 days	Custom built

RAP and Residential Aged Care

Entitled Persons receiving high level care in an Australian Government funded residential aged care facility (RACF) are not generally provided with RAP aids and appliances. DVA does, however, routinely provide a range of items to entitled persons in low-level care. These may include custom made wheelchairs, continence products, low vision aids, compression stockings and medical grade footwear.

When an Entitled Person moves from low-level care to high-level care, RAP items previously issued may be taken with them subject to the approval of the RACF. DVA will maintain responsibility for the repair, maintenance and replacement of such items. Entitled Persons receiving Extended Aged Care at Home (EACH) services or Community Aged Care Packages (CACP) are able to access RAP items where the service provider is not legally required to supply them.

Further information is available by calling My Aged Care on 1800 500 853.

What if my hospital/health service does not have a RAP contract in place?

If your hospital does not have a contract with a RAP provider, please follow these steps.

The list of available items and equipment is derived from Schedule 3 of the *GST Act 1999*.

To access the Schedule, please visit the DVA website:

<https://www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-schedule>

Schedule of Aids and Equipment

If the item's cost is \$500 or less, the hospital should supply the item and then invoice DVA. If the item's cost is greater than \$500 the hospital should then contact DVA for prior approval (contact details below). DVA will then advise whether they approve or arrange alternative provision of the item directly through their suppliers.

The list is not exhaustive therefore, if the patient requires an item that is not in the list, hospitals should provide the item and the approval process applies if the cost is more than \$500.

The Rehabilitation Appliances Program (RAP) can be found on the DVA website:

www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-overview

Schedule of Aids and Equipment is also found on the DVA website:

<https://www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-schedule>

Who can I contact for further information?

Should you have any additional queries or would like more information, please contact the **DVA Provider Hotline**:

1800 550 457 and select **Option 1** for RAP.

Veterans may contact general enquiries on **133 254**.

Loan Equipment – Arrangements for the provision and charging for DVA Entitled Persons

This section outlines the arrangement for the provision of loan equipment for DVA Entitled Persons. This arrangement covers admitted patients on discharge and non-admitted patients.

If an Entitled Person requires aids or equipment during their hospital stay, the items are part of the inpatient service and DVA should NOT be invoiced for the costs.

Where an Entitled Person is already in receipt of aids or equipment from the DVA prior to admission, the DVA will continue to provide the items upon discharge. Aids or equipment may be loaned to an Entitled Person on either a short-term or long-term arrangement.

Where an Entitled Person is NOT in receipt of aids or equipment from the DVA prior to admission, the hospital will contact the DVA Health Provider line: 1800 550 457 **pre-discharge** and seek approval to arrange appropriate equipment as per the patient's clinical need.

If the loan equipment is approved by the DVA, no further action will be required by the hospital staff. The DVA will arrange for delivery and address any costs relating to this equipment.

Should the loan equipment request be rejected by the DVA, the hospital staff will follow normal hospital policy and procedures for issuing loan equipment to patients.

PROCESS

Has the patient financially elected to be treated as a DVA Patient?

YES: Determine whether the patient's condition is an accepted condition under their level of DVA entitlement.

NO: Provide equipment as per Hospitals Standard Procedures

Please see "Financial Authorisation- Gold and White Card Holders" section

Is the condition accepted?

YES: Please refer to section: "Arrangements for the Provision and Charging of Aids or Equipment, Home Assessment and Home Modification for the Department of veterans' Affairs (DVA) Entitled Persons"

NO: Provide equipment as per hospital's standard procedures. Please refer to section "Provision of Aids, Equipment and Home Modifications"

To determine whether the patient's condition is approved, please follow the steps below

Financial Authorisation – Gold and White Card Holders

Best endeavours should be used to obtain DVA financial authorisation by

- (a) Make sure you have the patient's name, DVA card colour and file number, and information about the treatment or procedure required.
- (b) Ring the DVA Health Provider line: 1800 550 457.
- (c) From the series of prompts, select Option 3 "Prior approval, eligibility checks and provider registration".
- (d) This will lead to three further options. Select Option 1: "Prior approvals, eligibility checks, and all general Medical & Allied Health queries". The information required by DVA will depend on the nature of the condition(s) for which the patient requires the loan equipment.
- (e) If approved, the DVA will provide confirmation accordingly.
- (f) If approval is not granted the loan equipment should be provided to the patient as per public patient procedures

Loan Equipment and Residential Aged Care

Entitled persons receiving high level care in an Australian Government funded residential aged care facility (RACF) are not generally provided with loan equipment. DVA does, however, routinely provide a range of items to entitled persons in low-level care. These may include custom made wheelchairs, continence products, low vision aids, compression stockings and medical grade footwear.

When an entitled person moves from low-level care to high-level care, Rehabilitation Appliances Program (RAP) items previously issued may be taken with them subject to the approval of the RACF. DVA will maintain responsibility for the repair, maintenance and replacement of such items. Entitled persons receiving Extended Aged Care at Home (EACH) services or Community Aged Care Packages (CACP) are able to access loan equipment where the service provider is not legally required to supply them.

Further information is available by calling **My Aged Care on 1800 200 422**.

Should you have any additional queries or would like more information, please contact the **DVA Provider Hotline on 1800 550 457** and select Option 1 for RAP.

Veterans may contact general enquiries on 133 254.

Community Nursing Guide

Community Nursing guide for veterans, family members and carers

The Department of Veterans' Affairs (DVA) has recently produced a booklet "Community Nursing guide for veterans, family members and carers". The booklet, which was developed following clients' responses to a Community Nursing Client Feedback Survey conducted in 2019, aims to improve overall engagement with and awareness of the program. It provides information about services, eligibility, providers, nursing care plans, aged care assessments, rights and responsibilities, elder abuse, getting help from an advocate, and more.

The booklet can be accessed on the DVA website, [Department of Veterans' Affairs Community Nursing services. A guide for veterans, family members and carers | Department of Veterans' Affairs \(dva.gov.au\)](#), or you can request print copies from DVA by phoning 1800 550 457 or emailing us at nursing@dva.gov.au.

Copies of the booklet can be ordered to be provided to clients who may be eligible to receive DVA funded Community Nursing services.

END OF SUPPORT GUIDE SECTION

Compliance

All Health Service Providers will follow local hospital policy. Hospitals are asked to use this DVA supportive guide document in conjunction with their local operational procedures and policies.

Evaluation

Individual health services are responsible for ensuring compliance their own policy guidelines and local policy framework.

This manual will be reviewed every five years.

References

DVA Management Unit website :

http://www.health.wa.gov.au/dva_management/home/

The Department of Veterans' Affairs website: <https://www.dva.gov.au/>

DVA forms for support and services: <https://www.dva.gov.au/about-us/forms>

AIHW Profile of Australian Veterans: <https://www.aihw.gov.au/getmedia/1b8bd886-7b49-4b9b-9163-152021a014df/aihw-phe-235.pdf.aspx?inline=t>

Department of Health rescinded Operational Directives:

This manual is based on the rescinded DoH DVA Operational Directives:

- OD0494/14 - Arrangements for the Provision and Charging of Aids and Equipment, Home Assessment and Home Modification for the Department of Veterans' Affairs (DVA) Entitled Persons
- OD0495/14 - Billing Arrangements for Selected Services Provided to DVA Entitled Persons
- OD0496/14 - DVA Patient Election Form
- OD 0497/14 - Hospital Transfer Policy For DVA Entitled Persons From Public To Private Hospitals
- OD0498/14 - Identification of DVA Entitled Persons
- OD0499/14 - Inter-Hospital Transport Arrangements for DVA Entitled Persons
- OD 0525/14 - Arrangements for the Provision and Charging for the Department of Veterans' Affairs (DVA) Entitled Persons

WebPAS Self Service:

<https://wahealthdept.sharepoint.com/sites/hss-customer-ict-hosp-admin/SitePages/webpas.aspx>

HMDS Data Collections - Morbidity:

<http://morb.hdwa.health.wa.gov.au/Default.cgi?ID=Downloads.htm>

Emergency Data Collections - EDDC:

<https://ww2.health.wa.gov.au/About-us/Policy-frameworks/Information-Management/Mandatory-requirements/Collection/Emergency-Department-Data-Collection-and-Reporting-Policy>

Non Admitted Data Collections - NAPAAWL:

https://ww2.health.wa.gov.au/Articles/N_R/Non-admitted-data-collections

Definitions

‘Entitled person’ means a person who has elected to be treated under DVA arrangements and:

a) has been issued with:

- a **Gold Card**, or
- a **White Card**, or
- an **Orange Card** (pharmaceuticals only), or
- a written authorisation on behalf of the Repatriation Commission, or

b) is a Vietnam Veteran or his/her dependant who is not otherwise eligible for treatment and who is certified by a medical practitioner as requiring urgent hospital treatment for an injury or disease.

‘HSA’ means The WA DoH Hospitals Services Arrangement between Commonwealth and the State for Veteran Health Care and Cost Recovery.

‘Gold Card’ means a DVA Health Card provided to an Entitled Person by DVA which identifies the Entitled Person as being entitled under the VEA, the MRCA, the Treatment Principles and the Private Patient Principles to Treatment for all injuries and diseases and RPBS pharmaceutical items.

‘White Card’ means a Repatriation Health Card provided by DVA to an Entitled Person or a Commonwealth or Other Allied Veteran, for Treatment of specific conditions. A White Card identifies the Entitled Person as being entitled under the VEA, the MRCA, the SRCA, the

‘Orange Card’ means a Repatriation Pharmaceutical Benefits card provided to a person by DVA which gives that person access to the extended range of prescription medicines and ancillary items available under the Repatriation Pharmaceutical Benefits Scheme. The Orange Card does not entitle the person to admission to hospital or a Day Procedure Centre (Day Hospital Facility) under DVA contractual arrangements and does not provide any medical or allied health Treatment entitlements.

Treatment Principles and the Private Patient Principles to Treatment for specific war-caused injuries or diseases and accepted (whether war-caused or not) malignant neoplasia, pulmonary tuberculosis, Posttraumatic Stress Disorder, anxiety and/or depression or substance and/or alcohol use disorder and for RPBS pharmaceuticals in respect of those disabilities.

In the case of a Commonwealth or Other Allied Veteran, a White Card identifies the person as being eligible to receive Treatment for specific war-caused injuries or

diseases as accepted by their country of origin. Commonwealth or Other Allied Veteran White Card holders are only entitled to Treatment for malignant neoplasia, pulmonary tuberculosis, Posttraumatic Stress Disorder, anxiety and/or depression or substance and/or alcohol use disorder where the condition has been accepted as war-caused.

'A Veteran' is a person (or deceased person) who has:

- rendered eligible war service, or
- is a member of the defence forces who on or after 31 July 1962 was outside Australia, but not on operational service, who was killed or injured by the action of hostile forces.

Extended definition for service pension purposes

For the purposes of service pension eligibility, the term Veteran also means a person who is:

- a commonwealth veteran; or
- an allied veteran or
- an allied mariner.

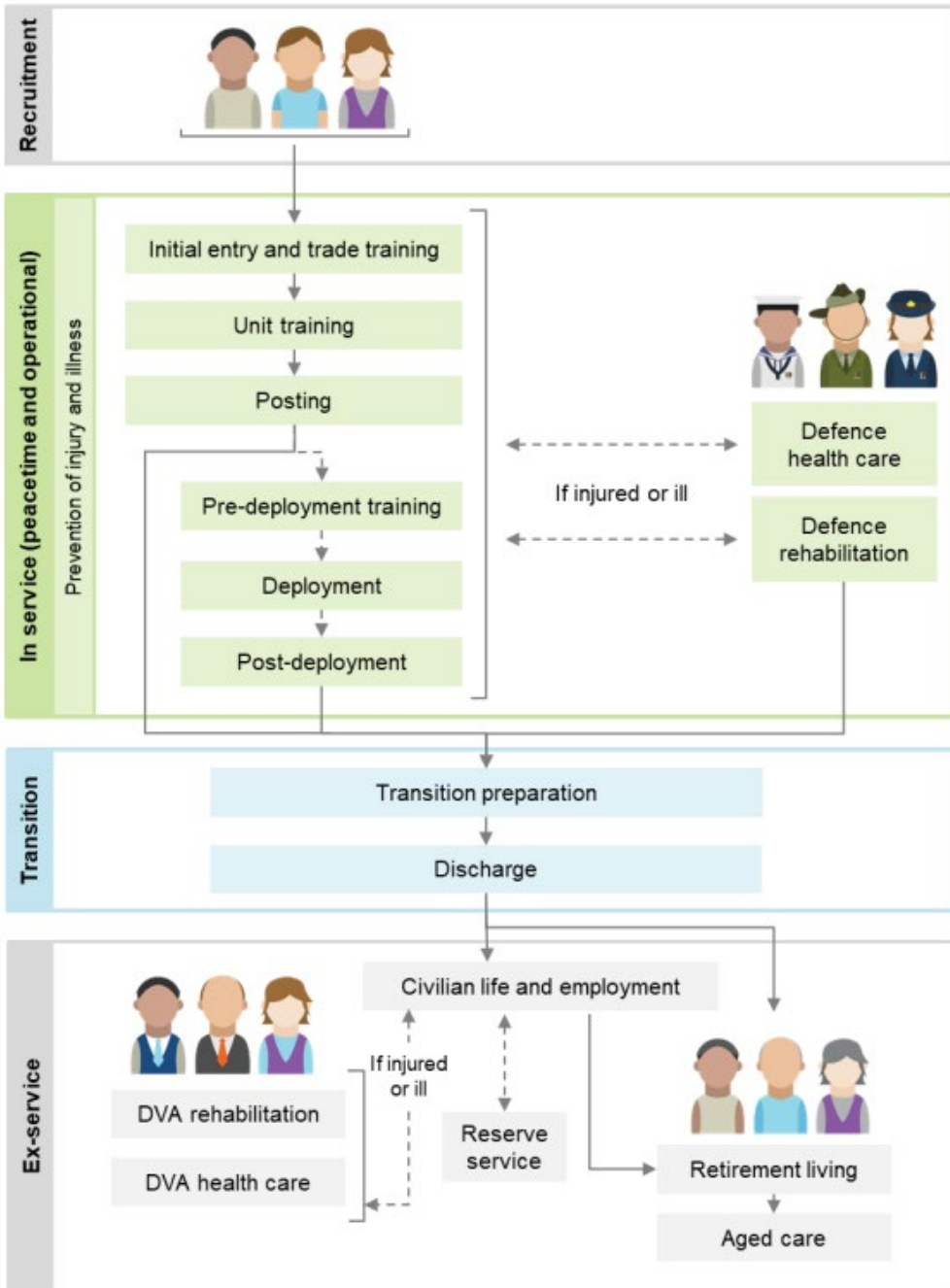
Who is a veteran?

Traditionally, the term 'veteran' has been used to describe former ADF members who were deployed to serve in war or a war-like conflict environment. Definitions have also been informed by the legislation that enables former personnel to receive entitlements and support from DVA following their service: *The Veterans' Entitlements Act 1986*; the *Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988*; and the *Military Rehabilitation and Compensation Act 2004*. Each piece of legislation details specific eligibility criteria for accessing treatment, but also covers other groups, such as cadets and Australian Federal Police members, who have not served in the ADF.

However, as the environment around the ADF changes, so, too, does the composition of veterans. While the size of the ADF has remained similar in recent decades, an increase in the tempo of military operations, and changes to the nature of warfare and deployments (both peacetime and active conflict), have resulted in a new cohort of contemporary veterans (DVA 2013). Compared with their predecessors, this cohort share some aspects of the military experience but also have different needs for their physical, mental and social health (DVA 2015). The sex profile of the ADF is also changing, with an increasing number of women joining the ADF in recent years (Department of Defence 2017b).


In light of these changes, the definition of a veteran has evolved to take a broader view. In 2017, a Roundtable of Australian Veterans' Ministers agreed that a veteran would be defined as 'a person who is serving or has served in the ADF and should not be restricted by the definitions outlined in legislation (Tehan 2017).

Life stages of full-time military personnel



Attachments

Attachment #1 WebPAS Election Form

Hospital Name		 UMRN	
Veteran Affairs Claim Type Form		Patient Name	
Admission			
Date:	Visit No:	DVA Card No:	
Time:	Ward:	DVA Card Colour:	
Clinician:			
DECLARATION:			
<p>I authorise the State of Western Australia ("the State") to disclose and release to the Commonwealth of Australia, the Repatriation Commission, the Military Rehabilitation and Compensation Commission, and the DVA ("the Commonwealth") relevant information from my clinical records as an authorised Commonwealth patient for the:</p> <p>(a) <u>general</u> purpose of facilitating the effective operation of the Hospital Services Arrangement between the State and the Commonwealth; and</p> <p>(b) <u>specific</u> purpose of confirming my DVA treatment eligibility and the State obtaining payment from the Commonwealth for my hospital treatment and services.</p>			
Patient/Guardian Signature _____		Date _____	
Print Name and Relationship _____			
Signature of Admitting Officer/Witness _____			Date _____
Print Name: _____			

Attachment #2 Commercial Flight Invoice

TAX INVOICE ATTACHMENT

All WA Funded Hospitals that utilise commercial flights for inter-hospital transport of DVA Entitled Persons are required to invoice the DVA directly for the cost of the flight. This attachment should accompany the tax invoice.

INTER-HOSPITAL TRANSPORT USING COMMERCIAL FLIGHTS

HOSPITAL DETAILS

ABN:

Hospital Name:

Hospital Address:

PATIENT DETAILS

Surname:

First Name:

Date of Birth:

Residential Address:

Suburb:

Post Code:

DVA Card Colour:

Gold or White

DVA File Number:

Date of Admission:

Date of Separation:

FLIGHT DETAILS

Name of Commercial Airline:

Flight Date:

Flight Origin:

Flight Destination:

AUTHORISATION

DVA Authorisation No.:

DVA Authorisation Date:

Invoice Total including GST:

Attachment #3 Tax Invoice for selected services

Billing arrangements for selected services provided to DVA Entitled Persons

The DVA will make payments against the tax invoice directly to HSP's.

Pharmaceuticals tax invoice example:

PHARMACEUTICALS This attachment should be completed and should accompany all tax invoices for pharmaceuticals provided to DVA Entitled Persons. This includes pharmaceuticals not included in the hospital drug formulary, Highly Specialised Drugs or Special Access Scheme pharmaceuticals. Send the tax invoice and this attachment to: Reply Paid No. 9998 VAPAC (Veterans' Affairs Pharmaceutical Approvals Centre) GPO Box 9998 BRISBANE QLD 4001	
HOSPITAL DETAILS	
ABN:	
Hospital Name:	
Hospital Address:	
PATIENT DETAILS	
Surname:	
First Name:	
Date of Birth:	
Residential Address:	
Suburb:	
Post Code:	
DVA Card Colour:	Gold or White
DVA File Number:	
INPATIENTS (Hospital Stay)	
Date of Admission:	
Date of Separation:	
NON-ADMITTED PATIENTS (Appointment Details)	
Date of Attendance:	
PHARMACEUTICAL DETAILS	
Description of Pharmaceutical:	
Cost of Item:	
Date of supply:	

Nursing Home Type Patient (NHTP) for ex-POW's or VC Recipients tax invoice example:

(FOR ex-POWs OR VC RECIPIENTS ONLY) This attachment should be completed and should accompany all tax invoices for NHTP contribution for a DVA Entitled Person who is an ex-Prisoner of War or Victoria Cross recipient. Send the tax invoice and this attachment to: Contract Manager Public Hospital Contracts Department of Veterans' Affairs GPO Box 9998 Hobart TAS 7001	
HOSPITAL DETAILS	
ABN:	
Hospital Name:	
Hospital Address:	
PATIENT DETAILS	
Surname:	
First Name:	
Date of Birth:	
Residential Address:	
Suburb:	
Post code:	
DVA Card Colour:	Card only
DVA File Number:	
EPISODE DETAILS	
Date of Admission:	
Date of Separation:	
Cost of Patient Contribution:	

Post Discharge Services tax invoice example:

POST DISCHARGE SERVICES This attachment should be completed and should accompany all tax invoices for any post discharge services provided by hospitals to DVA Entitled Persons. Send the tax invoice and this attachment to: The Manager Public Hospital Contracts Department of Veterans' Affairs GPO Box 9998 Hobart TAS 7001	
HOSPITAL DETAILS	
ABN:	
Hospital Address:	
PATIENT DETAILS	
Surname:	
First Name:	
Date of Birth:	
Residential Address:	
Suburb:	
Post Code:	
DVA Card Colour:	
DVA File Number:	
INPATIENTS (Hospital Stay)	
Date of Admission:	
Date of Separation:	
Description of the Service:	
NON-ADMITTED PATIENTS (Appointment Details)	
Date of Attendance:	
Description of the Service:	

DVA Contacts

You can call DVA between 8am and 5pm, Monday to Friday.

Telephone: 1800 VETERAN (1800 838 372)

International callers: +61 2 6289 1133

Interpreter service

If you need an interpreter, the Telephone Interpreter Service (TIS) can help you call us.

You can call TIS on 131 450 or visit the TIS website.

Hearing or speech impairment assistance

If you are deaf, or have a hearing impairment or speech impairment, contact us through the National Relay Service (NRS):

Talk To You (TTY) users phone 1800 555 677 then ask for 1800 838 372

Speak and Listen users' phone 1800 555 727 then ask for 1800 838 372

Internet relay users connect to the NRS then ask for 1800 838 372

Provider invoicing and billing enquiries

Provider enquiry numbers

Provider invoicing & billing enquiries: 1300 550 017

Provider enquiries: 1800 550 457

Transport bookings: 1800 550 455

Veterans' Affairs Pharmaceutical Advisory Centre (VAPAC): 1800 552 580

My Age Care: 1800 200 422

Amendments

15/07/2021

- Updated invoicing details for HSP's. From 1 March 2019, HSS transferred Accounts Receivable functions to clinical sites across both metropolitan and regional Western Australia. HSP's are responsible for managing invoice processes as per local policy guidelines.
- HCARE reference removed
- TOPAS funding classification type removed - VA

Document provided by:

*Revenue Strategy and Support, System Finance
Level 1, A Block, 189 Royal Street, East Perth WA 6004
April 2023*