SESLHD PROCEDURE COVER SHEET

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POSITION RESPONSIBLE FOR THE DOCUMENT	Manager, Patient Information Systems Health Information Unit
KEY TERMS	Doctor, Medical Officer, Medicare, Provider number, AMO, iPM, PAS, MED
SUMMARY	This document provides guidelines on the provision of site specific Medicare provider numbers by all medical practitioners prior to being added to Clinical Information Systems.

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Medical Practitioners – Medicare Provider Numbers (site-specific)

SESLHDPR/224

1. POLICY STATEMENT

All Admitting Medical Officers (Including AMO's, VMO's, Staff Specialist and Locums) are required to apply for a Medicare Provider Number for every location at which they are credentialed to work. The provider number must be provided to the relevant Clinical Services / Medical Administration and Information Systems Managers prior to the Clinician being added to any clinical information systems.

2. BACKGROUND

A **Medicare provider number** uniquely identifies the health professional and the location from which a service is rendered. You must apply for a provider number for each location required (Medicare Information Sheet). The Medicare provider number must enable Medicare Billing to be a condition (i.e. not a referral/diagnostics test ordering only) unless specific approval is obtained that this is not required.

SMO Services – Senior Medical Officer Services.

AMO – Admitting Medical Officer credentialed to work in one or more SESLHD hospitals and includes both VMOs Staff Specialists and Clinical Academics.

3. RESPONSIBILITIES

- Senior Medical Officer Services (SMO)
- Admitting Medical Officers and other Medical Practitioners (AMO)
- Director Clinical Services – Site / Sector (DCS)
- Patient Administration Systems (PAS) Coordinators
- Data / Systems Managers
- Human Resources

4. PROCEDURE

4.1 Permanent Appointments / Long-term temporary appointments

- An offer of permanent / long term temporary appointment is made by SESLHD SMO Services, which will include the standard package of all recruitment paperwork. This includes Offer of Appointment, Acceptance Advice form and the link to the Medicare application form for Medicare provider number/s.
- After applying to Medicare for a provider number, the AMO must complete and return the Medicare provider number Fax Sheet (Appendix 1) and copy of notification letter from Medicare, to the office of the Director of Clinical Service at the primary hospital site of the appointment as well as SMO Services.
- The Site / Sector Clinical Services Office (or Local Executive) must send the Notification of New AMO memo to the Site / Sector PAS Manager. This must include the following information:
  - AMO Family Name
  - AMO Given Names
  - Start Date

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- End date (if not a permanent employee)
- Speciality
- Subspecialty (if relevant)
- Privileges
- Registration Number (MED)
- Facilities with approved clinical privileges to work
- Provider numbers for all listed facilities
- Copy of the Medicare letter containing the valid provider number

- The PAS Manager must then organise the AMO to be added to iPM via the established change control processes.
- District PAS Team will send the notification email to the PAS Manager and other system / data managers advising of the assigned AMO code and relevant details including provider number for configuration in other information systems (e.g. eMR, PBRC, GE_RIS).

4.2 Temporary Appointments / Immediate Appointments where a Medicare provider number is not available

- If the start date for the AMO is less than 30 days from the offer, a provider number may not yet have been received from Medicare.
- In this instance, an external provider number may be used. For example, provider numbers from a different facility may be loaded into iPM as a temporary measure.
- The Notification memo from the DCS Office/Unit must be accompanied by the previous notification from Medicare containing the external provider number/s. The external location must be clearly specified for this provider number.
- The PAS manager will follow the same change control processes; however, will attach comments to the provider number indicating it is a temporary, external provider number.
- The updated, site specific provider number must be provided within 6 weeks. If it is not received, the steps outlines in 4.4 will be applied.

4.3 Short-term Temporary Appointments

- This includes temporary appointments less than two weeks.
- Patients admitted under these temporary appointments will be admitted in iPM, and tests will be ordered under the AMO the locum is relieving for

4.4 No site specific Medicare provider number provided

- AMO's will not be added to iPM or any other clinical information system (e.g. eMR) unless there is an internal or external provider number supplied with documented evidence from Medicare.
- Provider Numbers for new AMO's must be received within 6 weeks from the date of commencement.
- The PAS Manager will send a reminder to the DCS identifying all AMO's who have not provided their site specific provider number for the facility within 6 weeks.

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- If the valid site specific provider number has not been provided within 8 weeks from the date of commencement, the AMO will be removed from iPM. This will prevent patients from being admitted under the AMO's name.
- On receipt of the valid, site-specific provider number, the DCS must notify the Site / Sector PAS Manager who will then follow the established change control procedures to update the AMO details in iPM.

4.5 Medical Officers with no admitting rights

Medical Officers with no admitting rights still need to follow the procedures outlined above. General MO details and providers numbers are still required for outpatient clinics and associated billing and therefore require entry to the relevant information systems. These clinicians will be added with outpatients and referral rights only.

5. DOCUMENTATION

- Letter of Offer
- Letter of Acceptance
- Application for an Initial Medicare Provider number or a medical practitioner form
- Application for an Additional location Medicare Provider number for a medical practitioner form
- Memo - notification of newly appointed AMO
- Professional carer change control request
- Medicare notification of allocation of Provider Number and approved conditions

6. AUDIT

Monthly - PAS Managers to generate iPM Professional Carers configuration report (RSE_APPCONFIG01a) to identify AMO's without valid, site-specific Medicare provider numbers.

7. REFERENCES

Medicare Information Sheet
SMO Service Online System

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8. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
November 2009	0	Donna Martin, CHN Clinical Information Services Manager and Helen Puris, SHN PAS Manager. Approved by Dr Tony Sara, SESIAHS Director Clinical Informatics and Donna Martin, CHN Clinical Information Services Manager. Procedure endorsed by the Area Executive Team Strategy Committee on 28 September 2009
May 2010	Draft	Donna Martin, CHN Clinical Information Services Manager in conjunction with Dr Tony Sara, SESIAHS Director Clinical Informatics, SMO Services, SESIAHS PAS / UI User Group, SESIAHS HIM Committee
August 2012	1	Donna Martin, SGSHHS Manager, Clinical Information and Administrative Services in conjunction with Dr Tony Sara, SES/ISLHD Director Clinical Informatics, SMO Services, SES/ISLHD PAS / UI User Group, Senior Health Information Managers – IS/SESLHD
December 2015	2	Document revised by Clinical Information Managers and PAS team. Minor change to Audit control criteria. Content of document endorsed by Executive Sponsor.
May 2018	3	Change of executive sponsor
July 2018	3	Updates endorsed by Executive Sponsor

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Appendix 1 – Medicare provider number fax sheet

Medicare Provider Numbers Fax Sheet

Medicare Australia requires that you apply direct to their organisation for a provider number for **each location at which you will work** (please see attached information sheet provided with your letter of offer of appointment). Once you have received your number/s from Medicare please complete the following & FAX to the appropriate Director of Clinical Services nominated on the fax cover sheet below:

KEEP THIS FORM UNTIL YOU KNOW YOUR NEW PROVIDER NUMBER/S

Then complete and fax this form, including a copy of the Medicare Information sheet containing your assigned provider number/s to the relevant hospital fax number below and to SMO Services on 4223 8358

TO:	**Director of Clinical Services**		
DATE:			
SUBJECT:	**Notification of Medicare Provider Numbers to SESLHD**		
No. PAGES:	(including this page)		
Tick the primary hospital site where you will be working, then fax to the number indicated below:			
☐ Prince of Wales **Fax: 9382 2055**	☐ Sydney Children's **Fax: 9382 1777**	☐ Calvary Hospital **Fax: 9587 1421**	☐ Oral Health **Fax: 4223 8358**
☐ Royal Hospital for Women **Fax: 9382 6511**	☐ Sydney/Sydney Eye **Fax: 9382 7545**	☐ War Memorial Hospital **Fax: 9369 0366**	☐ Mental Health **Fax: 4223 8358**
☐ Sutherland Hospital Fax: **9540 7197**	☐ St George Hospital **Fax: 9113 3960**	☐ SEALS **Fax: 4223 8358**	

Declaration:

I declare I am aware Medicare Australia requires that registered medical practitioners claiming Medicare benefits, including Staff Specialists (SMPs) having benefits claimed on their behalf, are required to have site specific Provider Numbers for every geographical location of their practice. As well, the electronic clinical information systems maintained by the Health Service require that valid provider numbers are held in those systems. The site specific provider numbers are used for both ordering of tests for admitted and outpatients and for the transmission of results**. It is accordingly not possible for me to order tests, or to have tests ordered by others for inpatients, or to admit patients under my name, without correct provider numbers for each site at which I have been credentialed to practice on behalf of the Health Service**.

Doctors Signature: …… **Date:** ……

Doctor's Name …… **Specialty** ……

Doctors Rights of Private Practice Level (for SMP's only) ……

Doctor's EMAIL: …… **Commencement Date** …./……/……

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Please find details of my provider number/s below:

Hospital	Provider No.	Dept No (SMP's only)	Clinic Contact Person (SMP's only)	Clinic Contact Phone No (SMP's only)

Note: Must include a copy of the letter from Medicare detailing the Medicare provider numbers that have been assigned.

Note: Medicare provider numbers (for staff specialists) also enable sub-ledger processes to be setup prior to my commencement to ensure billing is processed in a timely manner.

DCS - Please forward the Details of Provider Numbers to your Network PAS Coordinator

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