



Telehealth

Guidance for nib Extras providers during COVID-19

This document describes expectations for the provision of telehealth services to nib members under their extras/ancillary cover during COVID-19 and should be understood in conjunction with the nib Recognised Provider Terms and Conditions and any other Agreement in place with nib. Similarly, this guidance document does not replace conditions that must be observed as part of legislative, regulatory, or professional obligations.

Why is nib funding telehealth in response to COVID-19?

We believe it's important our members prioritise their health needs, even in the toughest of times, to help maintain their health and wellbeing. Telehealth allows our members to access services to support their health while staying at home in line with the social distancing and self-isolation measures introduced by the Australian Government.

What is a Telehealth consultation?

Telehealth is a virtual health service consultation that is delivered securely via phone or video conferencing as an alternative to traditional face-to-face consultations. When providing telehealth consultation for an nib member Providers must ensure:

- The service must be a one to one consultation delivered in real-time.
- Providers must adhere to the standards/code of conduct of their professional and regulatory bodies including any telehealth guidance and training to ensure that each telehealth service delivered for nib members is safe and effective by undertaking a comprehensive assessment to determine that it is:
 - Appropriate for the individual patient/member irrespective of whether they are currently accessing face-to-face treatment or presenting for a new episode of care.
 - Appropriate for the presenting condition and any subsequent management plan agreed, and services provided, for the patient/member.
 - Delivered via a platform that is accessible to the patient/member and meets the needs of the patient/member.
- Providers must have the competency and experience to deliver safe and effective telehealth consultations in line with any industry guidelines applicable to their modality including but not limited to AHPRA, and professional association guidelines.
- Providers will engage in a collaborative manner with nib members to ensure they are best equipped to optimise the efficacy of the telehealth service.
- Informed consent must be obtained and recorded by the provider in the clinical notes prior to the commencement of the telehealth consultation.
- Providers will remain up to date with best practice in the delivery of telehealth services.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.

What services are eligible for telehealth benefits?

Extras Providers

As a temporary measure to help our members continue to keep on top of their health and wellbeing, nib has paid benefits towards the following telehealth consultations from the Effective Date in the table listed below to 30 June 2020; these services were then extended to 30 September 2020.

In order to best support our members' access to these services nib will continue to fund these services until **31 March 2021**. Normal exclusions apply including, but not limited to, services that receive a rebate from Medicare.

Please note that we're continually monitoring the evolving pandemic situation and will review these services to ensure they meet the needs of nib members and, if required, extend and/or amend the dates available.

Services	Effective Date		Item codes	
			nib	HICAPS*
Psychology	30 March 2020	Individual Initial/Referred Assessment by teleconsultation	8701	701
		Individual Subsequent Treatment by teleconsultation	8801	801
Physiotherapy	6 April 2020	Individual Initial/Referred Assessment by teleconsultation	8811	811
		Individual Subsequent Treatment by teleconsultation	8812	812
Dietetics	6 April 2020	Individual Initial/Referred Assessment by teleconsultation	8301	301
		Individual Subsequent Treatment by teleconsultation	8302	302
Occupational Therapy	6 April 2020	Individual Initial/Referred Assessment by teleconsultation	8601	601
		Individual Subsequent Treatment by teleconsultation	8602	602
Speech Pathology	6 April 2020	Individual Initial/Referred Assessment by teleconsultation	8501	501
		Individual Subsequent Treatment by teleconsultation	8502	502
Exercise Physiology	14 April 2020	Individual Initial/Referred Assessment by teleconsultation	8710	710
		Individual Subsequent Treatment by teleconsultation	8712	712
Podiatry	14 April 2020	Individual Initial/Referred Assessment by teleconsultation	8901	901
		Individual Subsequent Treatment by teleconsultation	8902	902

*Providers are advised to check [HICAPS information on Telehealth](#) to confirm the Telehealth services they provide are available for claims submission using HICAPS.

Which nib members are eligible?

To claim benefits for telehealth services nib members must have:

- Cover for the service on their existing policy
- Served relevant waiting periods
- Remaining limits for the service
- Undergone a service provided by a recognised nib Provider that was located in Australia at the time of consultation
- Been located in Australia themselves at the time of the consultation.
- nib Fund Rules and policy inclusions and exclusions applicable to the member's cover apply.

What delivery platform should be used?

The provider must ensure that the chosen platform for the delivery of telehealth consultations:

- Is a secure method in the transmission of personal and private information and maintains patient confidentiality in line with applicable laws for security and privacy.
- Is technically reliable with adequate upload and download speeds.
- Is of high sound and video quality.
- Aligns with the recommendations of their professional and regulatory bodies including any specific telehealth guidance and training.

Providers should consider foreseeable limitations when using technology and have procedures in place for detecting, diagnosing and fixing equipment problems to ensure optimal patient/member access at agreed appointment times.

What patient setting must be applied?

Prior to the commencement of the consultation, the provider must ensure that the patient:

- Is undertaking the consultation in a private and secure location.
- Is in a location free of obstruction, ensuring all risks and hazards have been removed.
- Is in a location appropriate for the delivery of the consultation as recommended by association guidelines and industry standards.

How do members claim for telehealth?

Currently electronic claiming is limited to only those telehealth services available through HICAPS and for claims for other eligible telehealth services will require manual claims submission by the nib member. Providers can assist nib members to submit a manual claim by observing the following requirements:

- Providers issue nib members with an account/receipt ideally by email. nib members can use the account/receipt to submit a claim using nib online services or the nib App. Accounts/receipts

must be on the provider's business letterhead or include the provider's official stamp, and should include:

- The full name, Medicare provider number or Association membership details of the treating provider.
 - The telehealth item code and a clear description of the service provided.
 - The date of service and date the invoice was issued, treatment recipient's full name, charge for each service provided, payments made and any outstanding balance.
- For services that have HICAPS codes Providers can submit a claim by manually entering the nib members card number into the HICAPS terminal. Please refer to the [HICAPS website](#) for information on how to process telehealth claims.
 - When submitting a claim via HICAPS terminal for nib members please note that you need to enter:
 - The nib fund prefix of 903600020
 - Then the nib member's card number shown on the front of the card
 - Then the issue number for the specific patient as shown on the back of the card
 - For an nib member is: 903600020<policy number><issue_no> (19 digits),

How will these telehealth claims be monitored and reviewed?

nib will monitor the use of these telehealth items as part of our commitment to pay benefits for services in accordance with our aim to provide members with access to high quality, affordable health care. Where claims for these items do not appear to be in accordance with the relevant guidelines and legislation they will be actioned appropriately.

Have questions?

We are here to help. Should you have any questions please do not hesitate to contact us by calling the team on 1300 853 530 or by emailing providers@nib.com.au

Information as at 1 October 2020. nib reserves the right to amend this document with any notification of amendments will be provided to relevant associations and updated on our website.