

Medicare ineligible women – billing option for postnatal care after discharge

Medicare ineligible women and women from countries with **no entitlement to reciprocal rights**, who birth within the public hospital and are registered as ‘**visitor status**’ (with or without private insurance) may be offered postnatal care after discharge (Extended Postnatal Care (EPC) or Care Link Nursing Services) where they agree to pay Southern Health for the service.^{1,2,3}

Women who have a **visa class (bridging Visa E) or asylum seekers** and women with Medicare are **not to be billed**.^{1,2,3}



Important considerations

Medicare ineligible women should be identified at the initial booking visit and provided with the ‘*Over seas visitors - maternity care*’ information sheet.

During discharge planning non-Medicare women should be advised that reimbursement of charges from their health insurance provider will depend on the type of cover they have as many private insurers do **not** cover domiciliary care (EPC). It is the responsibility of the overseas visitor to ensure adequate insurance cover for health services.

Overseas visitors who are covered by OSHC World Care Assist will have their EPC or Care Link Nursing Services account submitted directly by the hospital Finance Department for payment to Southern Health. All other Medicare ineligible postnatal women will receive an account which they will be responsible for submitting to their own health insurance provider for payment.

Who

Midwives and ward clerks.

Nurses and clerks Monash Newborn / Special Care Nursery.

Cashiers and Accounts Receivable staff.

Expected outcomes

Appropriate treatment options and billing procedures are implemented in accordance with current legislative and humanitarian directives.^{1, 2,3}

All postnatal women discharged from public maternity services are offered options to ensure appropriate postnatal care after discharge.^{4,7}

Medicare ineligible women will be given consistent and accurate information regarding the public hospital account that they will receive if electing either, a home visit (EPC midwife or Care Link Nursing Services) or a hospital postnatal outpatient visit.³

Where a woman or her family decline postnatal care after discharge and the midwife, nurse or doctor believes this poses a significant risk to safety, the concerns should be escalated to the Director of Nursing (DoN) Women’s and Children’s Program or Program Medical Director.

Why

Southern Health is unable to provide free medical care to people who do not have Medicare status unless that treatment is determined as **critically urgent** by the Chief Medical Officer (or equivalent) or in his/her absence the Program Medical ¹ or Nurse Director.

Health services are only funded to provide public domiciliary care based upon the number of public birth episode separations in the previous calendar year.³ Health Care agreements do not exclude public health services from charging private maternity patients for domiciliary services where they are required.³

Post discharge options

1. Where all recommended tests have been undertaken and there are no care concerns, the woman may safely consider the Maternal and Child Health Nurse (MCHN) referral and General Practitioner (GP) referral as adequate follow up.^{4,7}
2. Where ongoing assessments /tests are required (i.e. newborn screening tests or jaundice assessment) or there are other care concerns, non Medicare women may choose either an **EPC visit at home** or to return to the **ward for an EPC visit**. Refer process below.
3. Where a baby requires ongoing specialised nursing/medical care after discharge a **Care Link Nursing Services** visit may be offered. (Refer criteria Appendix 1). Refer process below.

Interpreter support

In hospital

Interpreters should be used at any critical points of care, where the woman is unable to communicate effectively in English and is required to make a decision or provide consent, be given life changing information or be assessed so as to enable her to take care of her own health and that of her baby. Refer to specific guidelines.^{6, 7, 8}

Post discharge

Where a woman requires interpreter assistance on EPC or Care Link Nursing Services the Telephone Interpreter Services (TIS) should be utilised unless otherwise indicated.^{6,7}

Generating a 'Charge Advice Slip' for either EPC or PAC

Step 1.

Medicare ineligible postnatal women electing a post discharge visit should be provided with a *Charge Advice Slip* for each visit (refer site specific and service specific attachments).

Step 2

The midwife /nurse /or clerk from the discharging ward/nursery providing the woman with a *Charge Advice Slip/s* should sign as witness in the 'Auth Signature' Section.

Step 3

Once completed and signed by the woman the *Charge Advice Slip* should be **photocopied**:

- **One copy is given to the woman.** If the woman is discharged while the hospital cashiers is open (weekdays in office hours) she should be advised to go to the cashier and pay for the service in advance.
- **One copy is mailed to the Finance Department** of the relevant site (Dandenong Hospital, MMC Clayton Campus or Casey Hospital). The Finance Department will then have a record to check if payment has been made (via cashier) and if payment has not been made, raise an invoice and follow up payment/s.

Care Link Nursing Services

Care Link Nursing Services consists of Neonatal Hospital in the Home (HITH) and Post Acute Care (PAC). To request either service a Care Link Nursing Services referral should be completed and faxed internally to Fax: **46065**.

Neonatal HITH

- No separate billing is required as this service will be billed by the Finance Department as component of the hospital stay.

Post Acute Care (PAC)

- Billing is required irrespective of insurance status. Generate **two** (minimum number of visits) specific 'Care Link Charge Advice Slips' and follow steps 2 and 3 above.
- A copy of the 'Care Link Charge Advice Slips' should also be faxed with the completed referral to Fax: **46065**.



If further visits are required

The visiting midwife / nurse should advise the woman of the clinical need and provide a further 'Charge Advice slip' for completion. On return to the hospital the single copy should be photocopied (step 3 above). The woman's copy would be given to her at the subsequent visit.

Key contacts

Finance Department Casey Hospital: telephone extension 81588.

Finance Department Dandenong: telephone extension 48556.

Finance Department MMC Clayton: telephone extension 42510.

Midwifery Unit Manager Casey Maternity: telephone extension 81759.

Midwifery Unit Manager Dandenong Maternity: telephone extension 48392.

Midwifery Unit Manager Clayton Maternity: telephone extension 45262.

Nurse Unit Manager Care Link Nursing Services: telephone extension 44154



If an adverse event (actual or 'near miss') is associated with this guideline document details in the health record and complete an incident report.



1. Southern Health 2008. *Medicare Ineligible Patient Protocol* (CorP-FPA01) Corporate Protocols, Patient Administration.
2. Dowd N. Metropolitan Health & Aged Care Services. Hospital Circular 27/2005 issued 28 December 2005. Revised Arrangements for Public Hospital Services to Asylum Seekers
3. Victorian Department of Human Services, 2008-2009 *Information Regarding Funding and Health Services Responsibilities under the Variable Maternity Services Grant* (VMSG) Maternity Care in Victoria Maternity Services Funding
4. Southern Health, 2009, *Midwife Assessment Clinic (MAC) guideline* (CP-MA46)
5. Victorian Department of Human Services, 2004, *Maternity And Maternal Child Health Services Communication Matrix*, Melbourne
6. Victorian Department of Human Services, 2005, *Language Services Policy*. Melbourne.
7. Southern Health, 2009, *Interpreting Services Guidelines*
8. Southern Health (2009) *Postnatal Care in the First Week Guideline* (CP-MA.) Clinical Protocols and Guidelines, Maternity (*in draft*).

SH Policy	Patient Care	ACHS	Clinical
Reviewer	Extended Postnatal Care Resource Group Finance Department Southern Health Interpreter Services Southern Health Maternity Guideline Development Group Care Link Nursing Services	Last review date	March 2010
Authoriser	Maternity Executive Committee	Next review date	June 2012

This hard copy might not be the latest version of this document. Please see the Southern Health Policy and Protocol Intranet site for current policies, protocols and guidelines.

Disclaimer

These clinical practice guidelines and protocols have been developed having regard to general circumstances. It is the responsibility of every clinician to take account of both the particular circumstances of each case and the application of these guidelines. In particular, clinical management must always be responsive to the needs of the individual woman and particular circumstances of each pregnancy.

These guidelines have been developed in light of information available to the authors at the time of preparation. It is the responsibility of each clinician to have regard to relevant information, research or material which may have been published or become available subsequently. Please check this site regularly for the most current version.

Appendix 1

Southern Health Care Link Nursing Services criteria

Care Link comprises a team of experienced neonatal (infant) and paediatric nurses from Monash Medical Centre, Clayton. Maternity services should contact the Care Link Nursing Services and discuss potential referrals as early as possible. A Care Link Nursing Services referral form must be completed with all referrals.

Who is eligible?

Any patient aged 0-18 years whose home care will involve at least one of the following:

- premature infants born at less than 35 weeks gestation
- low birth weight infants less than 2500g on discharge
[Infants between 1950g- 2250g qualify for HITH]
- feeding difficulties/poor weight gain
- special parent education or support
- nasogastric /gastrostomy tube feeding
- surgical interventions/dressings
- oxygen therapy
- tracheostomy /airway management
- intravenous antibiotics/subcutaneous medications
- seizure management requiring interventions
- home monitoring (any type)
- bladder catheterisation
- bowel interventions or Ostomy care
- diabetes education and support
- babies/children with special medical needs.

Services offered

- Parental education and support during home nursing visits - post hospitalization.
- Discharge planning advice and coordination.
- Provision of home care medical supplies/equipment.
- General advice re community care issues.
- Liaison with relevant community nursing/medical support service providers.
- Overnight oximetry.
- Carer education and ongoing assessment and monitoring of in-home/school carers for infants/children with complex medical care needs.

Appendix 2

Southern Health

ABN 82 142 080 338

David Street
Dandenong 3175
Victoria
Australia

Postal address:
PO Box 478
Dandenong 3175
Australia

tel (03) 9554 8556
fax (03) 9554 1128

Charge Advice Slip _ EPC
MMC Clayton

Business Unit: Southern Health Maternity Services

Patient Details:

Name

Address

Patient's UR

Description of Charges

Extended Post Natal Care \$100.00 Fee

Provider Number: 030970K

Expected Date of Service:

This is not a Tax Invoice. Receipt will be issued.

Total \$100.00

Auth Signature: _____ Ext:

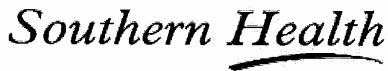
Patient Signature: _____ Date Of Payment:

Cashiers Use Only :

Cost Centre: A1303

Account Code: 50601

Receipt Number:



ABN 82 142 080 338

David Street
Dandenong 3175
Victoria
Australia

Postal address:
PO Box 478
Dandenong 3175
Australia

tel (03) 9554 8556
fax (03) 9554 1128

Charge Advice Slip – EPC
Dandenong

Business Unit: Southern Health Maternity Services

Patient Details:

Name

Address

Patient's UR

Description of Charges

Extended Post Natal Care \$100.00 Fee

Provider Number: 030310B Dandenong Hospital

Expected Date of Service:

This is not a Tax Invoice. Receipt will be issued.

Total \$100.00

Auth Signature: _____ Ext:

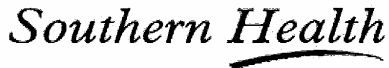
Patient Signature: _____ Date Of Payment:

Cashiers Use Only :

Cost Centre: A1310

Account Code: 50601

Receipt Number:



ABN 82 142 080 338

David Street
Dandenong 3175
Victoria
Australia

Postal address:
PO Box 478
Dandenong 3175
Australia

tel (03) 9554 8556
fax (03) 9554 1128

Charge Advice Slip _ EPC
Casey Hospital

Business Unit: Southern Health Maternity Services

Patient Details:

Name

Address

Patient's UR

Description of Charges

Extended Post Natal Care \$100.00 Fee

Provider Number: Provider Number:0031960F

Expected Date of Service:

This is not a Tax Invoice. Receipt will be issued.

Total \$100.00

Auth Signature: _____ Ext:

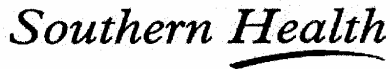
Patient Signature: _____ Date Of Payment:

Cashiers Use Only :

Cost Centre: A1313

Account Code: 50601

Receipt Number:



ABN 82 142 080 338

Monash Medical Centre
246 Clayton Road
Clayton 3168
Victoria
Australia

Postal address:
Locked Bag 29
Clayton South 3169
Australia

tel (03) 9594 6666
fax (03) 95946111

Charge Advice Slip
Care Link Nursing Services
MMC Clayton

Business Unit: Southern Health Maternity Services

Patient Details:

Name

Address

Patient's UR

Description of Charges

Care Link Nursing Services \$100.00 Fee

Provider Number: 030970K Monash Medical Centre – Clayton

Expected Date of Service:

This is not a Tax Invoice. Receipt will be issued.

Total \$100.00

Auth Signature: _____ Ext:

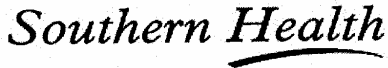
Patient Signature: _____ Date Of Payment:

Cashiers Use Only :

Cost Centre: L0103

Account Code: 57804

Receipt Number:



ABN 82 142 080 338

David Street
Dandenong 3175
Victoria
Australia

Postal address:
PO Box 478
Dandenong 3175
Australia

tel (03) 9554 8556
fax (03) 9554 1128

Charge Advice Slip
Care Link Nursing Services
Dandenong

Business Unit: Southern Health Maternity Services

Patient Details:

Name

Address

Patient's UR

Description of Charges

Care Link Nursing Services \$100.00 Fee

Provider Number: 030310B Dandenong Hospital

Expected Date of Service:

This is not a Tax Invoice. Receipt will be issued.

Total \$100.00

Auth Signature: _____ Ext:

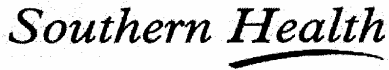
Patient Signature: _____ Date Of Payment:

Cashiers Use Only :

Cost Centre: L0103

Account Code: 57804

Receipt Number:



ABN 82 142 080 338

52 Kangan Drive
Berwick
Victoria
Australia

Postal address:
Locked Bag 3000, Hallam Vic
3806, Australia

tel (03) 9554 8556
fax (03) 9554 1128

Charge Advice Slip
Care Link Nursing Services
Casey Hospital

Business Unit: Southern Health Maternity Services

Patient Details:

Name

Address

Patient's UR

Description of Charges

Care Link Nursing Services \$100.00 Fee

Provider Number: 0031960F Casey Hospital

Expected Date of Service:

This is not a Tax Invoice. Receipt will be issued.

Total \$100.00

Auth Signature: _____ Ext:

Patient Signature: _____ Date Of Payment:

Cashiers Use Only :

Cost Centre: L0103

Account Code: 57804

Receipt Number: