

Frequently Asked Questions

Exercise Physiology

dva.gov.au/providers



Australian Government
Department of Veterans' Affairs

QUESTION	ANSWER
How long is a standard exercise physiology DVA consultation?	Standard consultations have an expected duration of at least 20 min.
Twenty minutes is not long enough to provide clinically necessary treatment to my client, can I bill DVA my hourly rate?	No. While the minimum expected duration of a standard consultation is 20 min, this is not a cap on the duration of a consultation. DVA will only fund services listed on the DVA exercise physiology schedule of fees. If a client presents with a clinically exceptional circumstance, DVA may consider applications for prior financial authorisation for a higher fee. To apply for consideration, providers should complete form D1328 and email this to Health.Approval@dva.gov.au.
Can I charge a gap fee for my clients?	No co-payment (gap fee) can be charged to DVA clients.
Can I charge for writing a care plan and end of cycle report?	Writing care plans is not a billable item as this is expected to be performed as part of an initial consultation. Item number EP90 can be claimed for an end of cycle report.
Can I claim an EP90 end of cycle report code for TPI clients?	No. TPI clients are exempt from treatment cycle arrangements for physiotherapy and exercise physiology services and do not need an end of cycle report.
Can I bill DVA for gym or pool entry fees?	No. The cost of gymnasium or pool admission for the entitled person is included in the fee paid by DVA for a consultation.
My client is a white card holder with knee OA, can I also treat them for their back pain caused by an altered gait pattern?	No. Veteran white card holders are only eligible for clinically necessary treatment for their accepted service-related injuries or conditions. Treatment cannot be conducted for sequelae of the accepted conditions.
Can veterans see a Physio and an AEP on the same day?	Physiotherapy treatment and other musculoskeletal services (chiropractic, osteopathy and physiotherapy) cannot be claimed on the same day as an exercise physiology service to treat the same condition. When a session is booked with a DVA client, providers must check to ensure another DVA funded musculoskeletal service is not being provided on the same day to treat the same condition.
Can a veteran see multiple exercise physiologists at the same practice?	An entitled person must not receive treatment from more than one provider of the same provider type, for the same condition at the same time. An entitled person would ideally see the same provider for all services for consistency. However, if one provider is unavailable/on leave the provider may transfer the entitled person to another health care provider within their specialty. Should an entitled person require treatment from more than one provider of the same provider type at any point in time for different conditions, both providers will require separate referrals.
Physical activity guidelines for Australian adults (18-64 yrs.) recommend a minimum of 150 min of moderate intensity exercise per week. Will DVA fund 3x60mins group exercise classes to meet this requirement?	No. Treatment of a DVA client must be clinically necessary and individualised. You cannot use group treatment items to supervise ongoing exercise regimes or provide general gym programs. This includes group exercise classes for health and wellbeing (e.g. improve fitness, decrease the risk of falls, and lose weight).

QUESTION**ANSWER**

Will DVA fund an exercise bike for a client?

Exercise bikes are not intended for general fitness. Exercise bikes will only be funded for clients:

- To increase cardiovascular fitness prior to surgery
- To reduce weight prior to surgery
- As a rehabilitation aid following surgery e.g., post knee surgery
- As prescribed management for medical conditions such as arthritis, respiratory and neurological conditions, cancer

What funding is available for exercise physiology consultations under non-liability health care (mental health) arrangements?

Under non-liability health care (mental health) arrangements, the veteran's usual GP can refer them for exercise physiology services as an adjunct to mental health treatment. These additional supports are fully funded, and will generally provide short-term assistance to help the veteran develop a self-directed exercise plan.

The treatment provided must be direct treatment of a specific mental health disorder and be clinically necessary to treat that condition. Treatment under non-liability health care (mental health) cannot be used to fund health services for general wellbeing purposes, such as delivering a general exercise program, or where the veteran does not have a diagnosable mental health disorder.

How do I claim for services under non-liability health care (mental health)?

If your patient is eligible for treatment under non-liability health care (mental health) treatment, you can claim for payment using DVA item numbers. When making a claim, you must state the specific mental health condition that is being treated. This has always been a requirement and it is not a new rule, however, there have been some recent improvements in confirming requirements are met before a payment is made. The specific mental health condition being treated will be listed on the referral from the veteran's GP.

Does DVA pay for pool or gym entry, general exercise programs, fitness centre or gym membership?

No. Under DVA arrangements only treatments that are deemed clinically necessary can be claimed. If the DVA client wishes to join a gym or pool program or undertake a supervised general exercise program (including generalised pool exercise program), this needs to be a private arrangement between the DVA client, the fitness centre/gym and the exercise physiologist.

All consultation fees include any fees that might be payable to access a facility, such as payment for the DVA client's entry cost into the gym or pool. The cost of pool or gymnasium admission must never be charge to the entitled person.

What services can be provided via telehealth?

Telehealth services must only be provided if the full service can be delivered safely. Initial consultations and group services cannot be delivered by telehealth.

If a client is performing an individualised program in a group exercise session, can I charge an individual consultation code?

No. EP30 group consultations must be utilised for two or more participants. This is the same regardless the entitled persons are completing the same program or individual programs.

If an entitled person is not safe to complete their exercises without supervision or they are non-compliant with a home exercise program, how do I provide this to clients within DVA guidelines?

DVA will pay for clients to see an EP for clinically necessary treatment only. It is expected that treatment will be evidence and outcome-based, reasonable in time, and focus on exercise literacy to promote improved condition management and recovery, independent of the need for regular or ongoing treatment. EP treatment of chronic conditions must focus on promoting independence and facilitate the DVA client's transition to self-management of their condition.

For more information on DVA arrangements for Exercise Physiologists visit

dva.gov.au/providers/allied-health-provider-information/dva-arrangements-exercise-physiologists

This information is current at March 2023