

COMMUNITY NURSING NEWSLETTER No. 41



The *Community Nursing Newsletter* is issued to provide updates to Department of Veterans' Affairs (DVA) Community Nursing providers.

Update regarding June 2023 claim periods impacted by Aged Care Sector Wage Increase

Community Nursing (CN) Newsletter 40 advised that DVA is implementing an updated Schedule of Fees on 1 July 2023, based on the Fair Work Commission's decision on the Aged Care Work Value case.

As CN services are delivered under 28 day claim cycles, claim cycles for many clients will commence in June 2023 and extend past 1 July 2023. To ensure that CN providers are paid the increased fees for all services delivered in July 2023, DVA will provide a one-off adjustment payment to cover the increase for impacted service delivery in July.

Why has a separate process for adjustments been developed?

This adjustment payment is not able to be processed through existing claiming arrangements with Services Australia. For impacted 28 day claim periods commencing between 4 June 2023 and 30 June 2023, Services Australia can only process payments that reflect the fee amounts in the Schedule of Fees effective to 30 June 2023. To ensure CN providers receive the increase for impacted claim periods, they can submit an invoice for a one-off adjustment payment to DVA for processing and payment.

Is there any change to the claiming process?

The one-off adjustment payment process does not impact your organisation's regular claiming process. Claiming should continue as per normal arrangements, including for the impacted claim periods. The adjustment payment processed by invoice will only cover the additional amount associated with direct care service delivery in July for impacted claim periods.

What are the options for the adjustment payment?

Providers will be able to choose one of two options for the calculation of the adjustment payment, and submit ONE invoice covering all clients with claim periods commencing between 4 June 2023 and 30 June 2023. The invoice will reflect the total adjustment amount for all impacted claim periods.

Providers will also need to complete a Vendor Masterfile Request Form and submit this to DVA to be set up in DVA's invoice processing system. A copy of this form is attached.

Option 1

DVA will calculate the adjustment amount providers can claim. This will be calculated based on services claimed through existing claiming arrangements with Services Australia. A pro-rata amount will be calculated for the number of days falling in July for each date of service. 9% of

the value pro-rata amount will be calculated as the adjustment amount payable to providers, and providers will be advised of the amount they are able to claim.

Option 2

Alternatively, providers will be able to calculate their adjustment amount for services delivered in July where the date of service (claim period start date) is between 4 June 2023 and 30 June 2023.

- 1. Providers will need to calculate 9% of the expenditure amount for all services delivered in July 2023 with a date of service in June 2023, for all impacted client claim periods.
- 2. GST will need to be added to the amount equalling 9% of expenditure for services delivered in July.
- 3. A single invoice all impacted claim periods will be submitted to DVA with the adjustment amount calculated by the provider, with supporting evidence of the calculation.

When will payments be processed?

To facilitate the processing of invoices, the following timeframes have been identified.

For providers electing to use **Option 1**:

- Providers to submit claims for payment for all impacted claim periods through usual claiming processes:
 - o Manual claims to be submitted no later than Friday 15 September 2023.
 - o Electronic claims to be submitted no later than Friday 29 September 2023.
- DVA will calculate additional payment amounts based on claims processed through Services Australia in mid-October, and advise providers of their adjustment amount by Friday 27 October 2023.
- Providers should then submit completed Vendor Masterfile Request Forms and invoices reflecting the adjustment amount, no later than Friday 10 November 2023, via email to Community.Nursing.Contracts@dva.gov.au.

Providers electing to use **Option 2** will be able to submit a Vendor Masterfile Request Form and a single invoice at any point following the completion of claiming through usual processes for all impacted claim periods, and no later than Friday 10 November 2023.

• Providers should submit completed Vendor Masterfile Request Forms and invoices reflecting the adjustment amount they have calculated, no later than Friday 10 November 2023, via email to Community. Nursing. Contracts@dva.gov.au.

Leave Liabilities

Additional funding will also be made available to CN and VHC providers for historical leave liabilities as a result of the Fair Work Commission's decision. DVA is working closely with the Department of Health and Aged Care, as the lead agency on this matter, and further information about this will be made available as soon as possible.



Notes for Community Nursing Providers

The Notes for Community Nursing providers have been updated to reflect changes to pandemic period measures that were due to expire on 30 June 2023. The following changes have been made:

- Ability to hire nurses with a minimum of one year supervised postregistration practice has been made permanent
- Ability to employ second and third year nursing students as personal care workers has been made permanent
- COVID-19 infection control training has been made a permanent part of personnel training requirements
- Ability to conduct clinical wellbeing checks, where clinically appropriate, extended by a further two years, to 30 June 2025.
- Ability to conduct 28 day reviews remotely, where clinically appropriate, has been extended by a further two years, to 30 June 2025.



DVA will continue to monitor uptake of the two measures extended for a further two years to help inform the future decision on these measures.

In addition to the above changes, the timeframe in which clients are required to obtain a GP referral following hospital discharge has been changed from seven days to six weeks, unless an earlier GP visit is clinically indicated.

Reminder regarding referrals

With the change to the timeframe for referrals following hospital discharge, DVA would also like to take the opportunity to remind CN providers of the requirements in relation to all referrals.

Referrals are required at the following times:

- For each new episode of care
- Updated referrals are required from the client's GP every 12 months
- When individual clients transfer to a new CN provider
- From the client's GP within six weeks of discharge from hospital
- At any time when significant changes to a client's care needs are identified.

Changes to Contact Details

If you have any changes to contact or other organisational details please notify DVA via email at:

Community.Nursing.Contracts@dva.gov.au

