

Community Nursing BULLETIN No. 28

March 2021

FOR DISTRIBUTION TO ALL DVA COMMUNITY NURSING STAFF

This bulletin is being issued to provide an update to Department of Veterans' Affairs (DVA) Community Nursing (CN) providers about the CN Schedule of Fees and the extension to COVID-19 Pandemic Provisions.

Simplification of the CN Schedule of Fees

Further to the information provided in Bulletin 27 in January 2021 about the additional, one-off increase to the Schedule of Fees and work underway to simplify the Schedule, changes are being made to simplify the Schedule of Fees, with effect for claim periods commencing on or after 1 May 2021.

Background

The Government committed through the 2020-21 Budget measure to simplifying the CN Schedule of Fees to help make claiming easier for providers, reduce red tape, and make the claiming process more efficient and easier to navigate.

Consultation

In November 2020, DVA emailed all CN providers to seek their views on the design of incremental changes to the Schedule of Fees in the short term, and potential options for more substantial change in the longer term.

DVA received submissions from 13 CN providers in response to the consultation process. Many providers suggested that there was an opportunity to change the basis for fees to a simpler timebased/classification structure. Several providers also commented on the additional claiming burden of having a separate three-times-a-day (TDS) schedule that used a different approach to the existing banded fee item ranges for clinical and personal care visits. Several other changes were also proposed.

Analysis of options

Restructuring the CN program's Schedule of Fees to a time-based/classification structure is a substantial change that is outside the scope of the current review process, and not something that can be implemented in the short term. However, DVA will consider opportunities in the future for more transformative reform.

The most feasible option to simplify the Schedule of Fees in the short term is to integrate the TDS range into the clinical and personal care core ranges, and expand the add-on and second worker item ranges, to enable providers to claim up to three visits a day over the 28 day claim period through these ranges. The new fee items have been adjusted for indexation to 2021, including the 11 percent increase from 1 February 2021.

What is changing in the Schedule of Fees

The updated Schedule of Fees will take effect for claim periods commencing on or after 1 May 2021. The TDS, Clinical and Personal Core, Clinical and Personal Add-on, and Clinical and Personal Second Worker Item Ranges will be impacted by the change.

The Notes for Community Nursing Providers will be updated to reflect the removal of the TDS item range.

Items that will be removed

The TDS item range is being removed. It will still be available for claim periods commencing up to and including 30 April 2021.

To accommodate the new fee items being added to the other impacted item ranges, the current upper visit banding item numbers will be removed from these ranges. The items that are being removed will remain active for claim periods commencing up to and including 30 April 2021.

Items that will be added

The following items will be expanded from the existing upper limit to have upper visit banding for up to 84 visits per claim period:

- Clinical Care core
- Personal Care core
- Clinical Care add-on
- Personal Care add-on
- Clinical Care second worker
- Personal Care second worker

The new items in each range will be for bandings of ten visits. While bandings of five visits were considered, this would add significantly to the length of the Schedule of Fees and detract from the effort to simplify the Schedule.

Item ranges that won't change

There will be **no change** to the Other Items, Clinical Overnight Care, Personal Overnight Care, or Nursing Consumables item ranges.

Items with no	Clinical care core schedule – NL01 to NL09, NL18
change	Clinical care add-ons – NS01 to NS07, NS10 to NS14
	Clinical care second worker – NS16 to NS22, NS25 to NS29
	Personal care core schedule – NP01 to NP07
	Personal care add-ons – NT01 to NT07
	Personal care second worker – NT17 to NT23, NT27 to NT33,
	NT37 to NT43
Items that will	Clinical core items – NL10, NL11, NL17
no longer be	Clinical care add-ons – NS08, NS09, NS15
active for care	Clinical care second worker - NS23, NS24, NS30
provided from	Personal care core items – NP08, NP11, NP14, NP09, NP12,
1 May 2021	NP15, NP10, NP13, NP16
	Personal care add-ons - NT08, NT11, NT14, NT09, NT12, NT15,
	NT10, NT13, NT16
	Personal care second worker - NT24, NT25, NT26, NT34, NT35,
	NT36, NT44, NT45, NT46
	Three time a day (TDS) items - ND01 to ND14
Items added	Clinical care core schedule – NL19 to NL29
for care	Clinical care add-ons – NS45 to NS55
provided from	Clinical care second worker – NS56 to NS66
1 May 2021	Personal care core schedule – NP17 to NP31
	Personal care add-ons – NT61 to NT75
	Personal care second worker – NT76 to NT90

Claiming for services delivered in claim periods commencing prior to 1 May 2021

As specified in the Notes for Community Nursing Providers, all claims for payment must be submitted to Medicare Australia for payment within six months of the first day of a claim period. Consistent with this requirement, providers have until 31 October 2021 to submit claims for services provided during claim periods commencing up to and including 30 April 2021.

Questions

If you have any questions about these arrangements please contact us at: nursing@dva.gov.au

Extension of COVID-19 Pandemic Provisions

Temporary arrangements to assist with the delivery of CN services during the COVID-19 pandemic were due to cease on 31 March 2021.

On 14 March 2021 the Prime Minister, the Hon Scott Morrison MP, announced the Government will extend the temporary telehealth arrangements to 30 June 2021 to continue to provide support during the pandemic. In line with this decision, DVA has also extended its CN arrangements to 30 June 2021.

The Notes for Community Nursing Providers (the Notes) have been updated accordingly to reflect this extension and will be made available on the DVA website at: <u>https://www.dva.gov.au/providers/health-programs-and-services-our-clients/community-nursing-services-and-providers-0</u> Updates to DVA's COVID-19 arrangements for providers will continue to be communicated in CN Bulletins and will be available on the DVA website at: <u>https://www.dva.gov.au/providers/health-programs-and-services-our-clients/community-nursing-services-and-providers-3</u>

Attachments

Included with this bulletin is an updated Schedule of Fees, Frequently Asked Questions (FAQs) about the changes, and Notes for Community Nursing Providers effective 1 April 2021.

Updates to Contact Details

If you have any changes to contact or other provider details, please contact the Community Nursing Contracts team via email at: <u>Community.Nursing.Contracts@dva.gov.au</u>