Fact Sheet

Department of Veterans’ Affairs

The Department of Veterans’ Affairs (DVA) provides a range of benefits and services to veterans and their dependants for injury, disease or death which is related to service with the Australian Defence Force. Eligibility for benefits depends on where and when a veteran served.

This includes:
- current serving members
- former serving members
- carers
- families

Treatment cards

Gold Card
A Gold Card entitles the holder to DVA funding for:
- all health care needs, for all health conditions, whether they are related to war service or not
- the card holder may be a veteran or the widow or dependant of a veteran
- only the person named on the card is covered.

Gold Card holders may also be eligible for the Coordinated Veterans’ Care (CVC) program. The CVC targets Gold Card holders who are more at risk of being admitted or readmitted to hospital.

White Card - for specific conditions only

The White Card is issued to:
- eligible veterans for the care and treatment of accepted injuries or conditions that are war caused or service related
- for the treatment of malignant cancer, pulmonary tuberculosis, posttraumatic stress disorder, anxiety and/or depression whether war caused or not
- ex-service personnel who are eligible for treatment under agreements between the Australian Government and New Zealand, Canada, South Africa and the United Kingdom for disabilities accepted as war-caused by their country of origin.

Orange Card - for pharmaceuticals only

An Orange Card is issued to Commonwealth and allied veterans and mariners who:
- have qualifying service from World War 1 or World War 2;
- are aged 70 or over; and
- have been resident in Australia for 10 years or more.

Treatment Authority letter

A Treatment Authority letter acts as ongoing approval from DVA for the client to access reasonable primary and allied health treatment as required (up to certain limits for some treatment types). The Treatment Authority states

the accepted condition/s that the client has.

All treatment outlined in the Treatment Authority letter is pre-approved.

Treatment Authority letters will be issued either at the point a needs assessment is undertaken, or when a client contacts DVA for medical approval.
Local Medical Officer Scheme

Medical practitioners, including general practitioners are referred to as Local Medical Officers (LMOs) in the DVA schedule. Medical practitioners wanting to participate in the LMO Scheme are required to meet the registration criteria as stipulated in item 5.2 of the Notes for Local Medical Officers. Medical practitioners who have been issued a new Medicare provider number and who meet the registration criteria for the LMO Scheme will be contacted by DVA and invited to participate in the Scheme.

Fee schedule for medical services

Like Medicare Australia, the DVA has a schedule of fees for services provided by LMOs to eligible DVA clients. LMOs are paid at 115 per cent of the listed Medicare Benefits Schedule (MBS) fee, plus:

Veterans’ Access Payment (VAP):
- paid at 100 per cent of the MBS
- claimed using the MBS bulk billing incentive item numbers (10990 or 10991)
- not payable to inpatients of a hospital or day surgery

Rural Enhancement Initiative (REI) loading:
- is an additional 10 per cent of the LMO fee
- is available to LMOs who provide services to veterans in rural public hospitals
- only applies to hospital items indicated in the LMO Fee Schedule

Payments for Department of Veterans’ Affairs services

DVA claims provided to an eligible card holder may be submitted for payment using Medicare Online Claiming software. Medicare Online enables practices to lodge Medicare claims via the internet. It can be used to process bulk bill and patient claims, as well as DVA and Australian Childhood Immunisation Register information. Payments to practitioners are usually made within two to three working days via electronic funds transfer.

Referring a Department of Veterans’ Affairs client

When referring a DVA client for allied health or specialist services, Form D904 for a DVA Request/Referral needs to be completed and submitted to DVA for approval. This form should be used by the referring provider to:

- request prior approval from DVA, where necessary, for treatment services and the supply of rehabilitation appliances
- refer directly to another provider where prior approval from DVA is not required
- request patient transport for travel to treatment services.


It is requested that where possible, referrals are provided to a medical specialist who accepts DVA fees and arrangements for treating veterans and has treating rights at DVA contract hospitals.
Local Medical Officer fee schedule – commonly used item numbers for Department of Veterans’ Affairs clients

<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
<th>DVA Fee (115%)</th>
<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>$16.95</td>
<td>$19.50</td>
<td>$10.85</td>
<td>N/A</td>
<td>$30.35</td>
</tr>
<tr>
<td>23</td>
<td>$37.05</td>
<td>$42.65</td>
<td>$10.85</td>
<td>N/A</td>
<td>$53.50</td>
</tr>
<tr>
<td>36</td>
<td>$71.70</td>
<td>$82.50</td>
<td>$10.85</td>
<td>N/A</td>
<td>$93.35</td>
</tr>
<tr>
<td>44</td>
<td>$105.55</td>
<td>$121.40</td>
<td>$10.85</td>
<td>N/A</td>
<td>$132.25</td>
</tr>
</tbody>
</table>

*Time based MBS items for professional attendance in consulting rooms.*

<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
<th>DVA Fee (115%)</th>
<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>$63.00</td>
<td>$72.45</td>
<td>$10.85</td>
<td>$7.24</td>
<td>$90.54</td>
</tr>
</tbody>
</table>

Level B consultation at a place other than consulting rooms or a residential aged care facility (e.g., hospital). Fee for item 23, plus $25.45 divided by the number of patients seen, up to a maximum of six patients. In this example, one patient only.

<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
<th>DVA Fee (115%)</th>
<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>$83.75</td>
<td>96.31</td>
<td>10.85</td>
<td>N/A</td>
<td>$107.16</td>
</tr>
</tbody>
</table>

Level B professional attendance on one or more patients at a residential aged care facility on one occasion. The fee for item 23, plus $45.80 divided by the number of patients seen, up to a maximum of six patients. In this example, one patient only.

<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
<th>DVA Fee (115%)</th>
<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>5020</td>
<td>$49.00</td>
<td>$56.35</td>
<td>$10.85</td>
<td>N/A</td>
<td>$67.20</td>
</tr>
</tbody>
</table>

Level B after hours professional attendance at consulting rooms, initiated on a public holiday, on a Sunday, before 8am or after 1pm on a Saturday, or before 8am or after 8pm on any other day.

<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
<th>DVA Fee (115%)</th>
<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>5023</td>
<td>$74.95</td>
<td>$86.19</td>
<td>$10.85</td>
<td>N/A</td>
<td>$97.04</td>
</tr>
</tbody>
</table>

Level B after hours professional on one or more patients on one occasion at a place other than consulting rooms, hospital, residential aged care facility. Initiated on a public holiday, on a Sunday, before 8am or after 1pm on a Saturday, or before 8am or after 8pm on any other day. The fee for item 5020, plus $25.45 divided by the number of patients seen, up to a maximum of six patients. In this example, one patient only.

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<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
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<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>900</td>
<td>$154.80</td>
<td>$178.02</td>
<td>$10.85</td>
<td>N/A</td>
<td>$188.87</td>
</tr>
</tbody>
</table>

*Domiciliary Medication Management Review for patients living in the community setting*

<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
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<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>701</td>
<td>$59.35</td>
<td>$68.30</td>
<td>$10.85</td>
<td>N/A</td>
<td>$79.15</td>
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<tr>
<td>703</td>
<td>$137.90</td>
<td>$158.60</td>
<td>$10.85</td>
<td>N/A</td>
<td>$169.45</td>
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<tr>
<td>705</td>
<td>$190.30</td>
<td>$218.85</td>
<td>$10.85</td>
<td>N/A</td>
<td>$229.70</td>
</tr>
<tr>
<td>707</td>
<td>$268.80</td>
<td>$309.15</td>
<td>$10.85</td>
<td>N/A</td>
<td>$320.00</td>
</tr>
</tbody>
</table>

*Time based MBS items for health assessment of a person fitting the target groups.*
<table>
<thead>
<tr>
<th>MBS Item</th>
<th>MBS Fee (100%)</th>
<th>DVA Fee (115%)</th>
<th>VAP 10991</th>
<th>REI (plus 10%)</th>
<th>DVA Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>715</td>
<td>$212.25</td>
<td>$244.10</td>
<td>$10.85</td>
<td>N/A</td>
<td>$254.95</td>
</tr>
<tr>
<td>721</td>
<td>$144.25</td>
<td>$165.90</td>
<td>$10.85</td>
<td>N/A</td>
<td>$176.75</td>
</tr>
</tbody>
</table>

Aboriginal and Torres Strait Island peoples health assessment.

Preparation of a general practice management plan for a person with a chronic disease.

Full fee schedule

Available online at: [http://www.dva.gov.au/service_providers/Fee_schedules/Pages/index.aspx](http://www.dva.gov.au/service_providers/Fee_schedules/Pages/index.aspx)

Forms

Download forms from:
Website: [http://www.dva.gov.au/service_providers/Pages/Forms.aspx](http://www.dva.gov.au/service_providers/Pages/Forms.aspx)

Fact Sheets

Website: [http://www.dva.gov.au/service_providers/Pages/factsheets.aspx](http://www.dva.gov.au/service_providers/Pages/factsheets.aspx)

Contact

Providers can check a veteran’s eligibility for health services by phoning DVA:
Telephone: 1800 555 254 (regional callers)
Email: GeneralEnquiries@dva.gov.au

Related DVA Services

Hearing Services
Telephone: 1800 637 816

HomeFront
Telephone: 1800 801 945

Veterans’ Home Care
Telephone: 1300 550 450

Veterans’ & Veterans’ Families Counselling Service (VVCS)
Telephone: 1800 011 046

Repatriation Transport Scheme
Telephone: 1800 555 254 (regional callers)

For more information on how Rural Health West can support your practice please contact
Telephone: 08 6389 4500
Email: workforcesupport@ruralhealthwest.com.au

Department of Veterans’ Affairs. Version 2. Current as at September 2014
The information provided in this fact sheet has been taken from the Department of Veterans’ Affairs and Medicare Australia websites. Whilst all care has been taken in preparing this document, queries should be placed directly with the DVA or Medicare as this information is subject to change without notice.