



# PORTAL TRANSITION GUIDE

1 February 2019

## PORTAL TRANSITION GUIDE



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## WELCOME

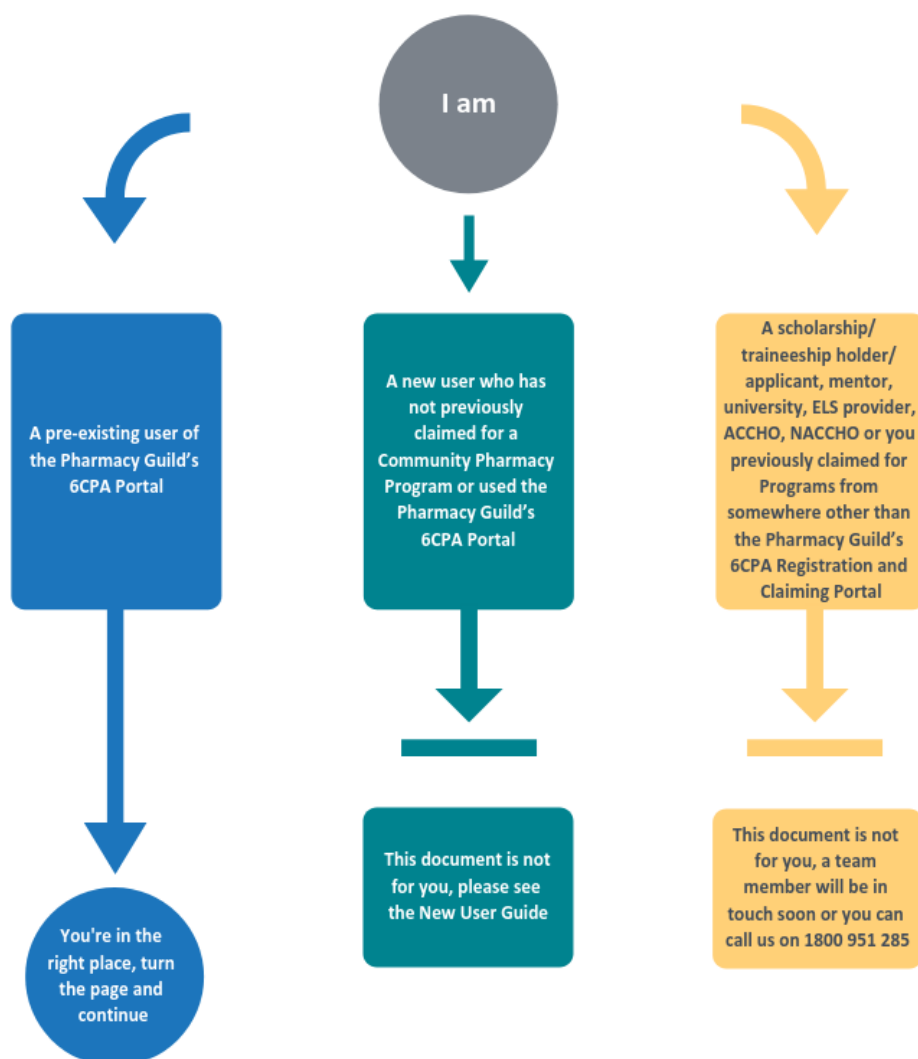
### 1

## Welcome

The Pharmacy Programs Administrator welcomes you to the new Registration and Claiming Portal. Our team is dedicated to ensuring that your experience when claiming and receiving payments for the services you deliver to the community, is as smooth as possible.

Initially, you may require support in navigating and using the new Portal. This Portal Transition Guide has been developed to support you through the transition process.

### Who is this Portal Transition Guide for?



## 2

## Portal Essentials

This section includes essential information to be aware of, set out under the following headings:

- Important Portal Information
- User Accounts.

### Important Portal Information

- 1. Recommended web browser:** We recommend you use the Google Chrome or Mozilla Firefox browsers. Chrome and Firefox browsers are available free of charge from <https://www.google.com/chrome/> and <https://mozilla.org/en-US/firefox/new>
- 2. Payment will be made within 3 business days for most major Programs:** The Portal has been designed to facilitate prompt payment. For most major Programs, the new Portal will check and validate claims in real-time. This means these claims will be approved immediately, and payments made within 3 business days of submission. These fast-tracked payment arrangements will initially be in place for DAAs, MedsCheck and Diabetes MedsCheck, Staged Supply, HMRs and QUM.
- 3. Claiming may be different:** To achieve real-time validation and rapid payment timeframes it has not been possible to offer the option of submitting claims data via the upload of the spreadsheets previously used. For the short-term therefore, all HMR, MedsCheck and Staged Supply claims data must be entered directly into the new Portal.  
  
Over the next six months, we will be working with software vendors toward integration between software packages and the new Portal to enable more automated transfer of data for claiming purposes. We recognise that for many claimants this will result in an increase in data entry activities until this integration is in place. We are committed to working with software vendors to enable automatic transfer of data in as short a timeframe as possible.
- 4. Personal User accounts:** The new Portal has been developed to specifications from the Department of Health. An important aspect of these specifications is account security. Each individual User now requires their own account. The new approach provides pharmacy owners with more control over who can update important information and claim on their behalf. Information about how User accounts operate is on the next page.
- 5. Ongoing optimisation:** Our team is committed to continually refining and improving your claiming experience. We'll be drawing on feedback and input from pharmacies, pharmacists and other stakeholders to continuously improve and enhance Users' claiming experience. Information about updates and improvements will be communicated to you as they progress.
- 6. Support is available:** We have a large support team trained to provide assistance should you require it. Please do not hesitate to contact us by telephone (1800 951 285) between 9am and 8pm Australian Eastern Time or by email ([support@ppaonline.com.au](mailto:support@ppaonline.com.au)).

## PORTAL ESSENTIALS

### User Accounts

The new Portal has increased flexibility and security for pharmacy owners and other registrants claiming for Community Pharmacy Programs.

The Portal allows a Service Provider (e.g. community pharmacy) to have multiple people (Users) authorised to view the Service Provider's account and undertake other actions such as submitting claims.

Each individual User has their own login details and has defined actions they are authorised to perform. A User is either:

- The **Main Authorised Person (MAP) - Actions permitted:** Update contact and bank details, approve an Authorised Person, register for Programs, submit claims.  
or
- An **Authorised Person (AP) - Actions permitted:** Submit claims.

A Service Provider can have only one MAP but any number of APs.

Each AP is granted approval to view/use the Service Provider account by the MAP. Further information about how a MAP can approve a User as an AP for a particular Service Providers is provided in section 4 (What You Need to Do) of this document.

### A User can act for multiple Service Providers

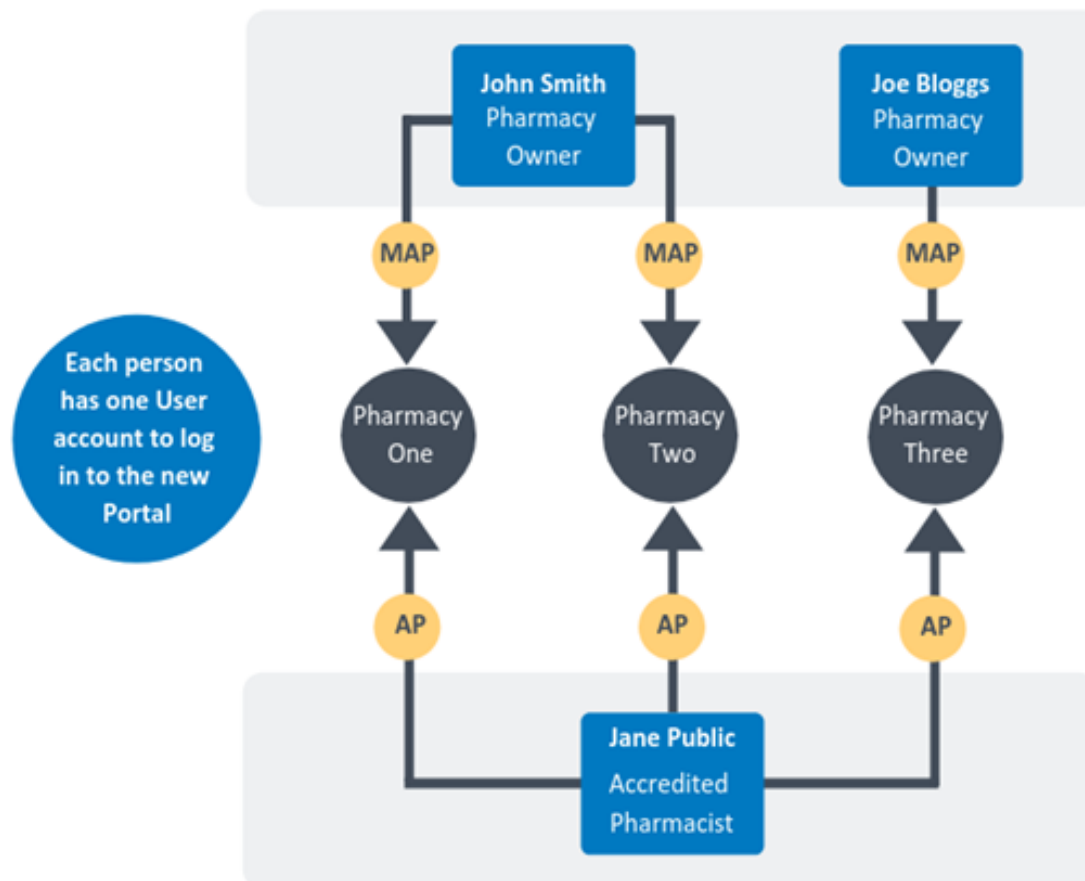
A User can be approved to act for multiple Service Providers. A User who acts for multiple Service Providers can have different roles (MAP or AP) for each Service Provider.

For example a User could be the MAP for one Service Provider, but be an AP for another Service Provider. This provides increased flexibility and security for pharmacy owners etc.

The following page provides an illustrative example.

## PORTAL ESSENTIALS

In this scenario we have two pharmacy owners (John Smith and Joe Bloggs). John owns two pharmacies, and Joe owns one pharmacy. John and Joe are both the MAP for their respective pharmacies. They can edit Service Provider details, register for programs, approve other Users as APs and make claims. Each owner can only see their pharmacies when they log into the Portal.



Jane Public, an Accredited Pharmacist, works at all three pharmacies. Both John and Joe have approved her to be an AP for their pharmacies, meaning Jane can claim on behalf of all three pharmacies.

When Jane logs into the Portal, she can select either Pharmacy to view their details. Importantly, confidential information is not visible on the home screen.

## TRANSITION OF EXISTING USERS TO THE NEW PORTAL

### 3

## Transition of Existing Users to the New Portal

The Pharmacy Guild provided data to the Pharmacy Programs Administrator from the 6CPA Registration and Claiming Portal. This data has been migrated into the new Portal, to minimise the need for Users to re-register or provide information previously provided to the Guild.

**Please note that the data provided was current as at November 2018 and does not therefore reflect updates, additions or changes made since then.**

### Data migration

The following summarises the information that has been migrated into the new Portal.

#### Service Providers

An account has been set up for each pre-existing Service Provider and populated with information including Service Provider type (Community Pharmacy, Business Entity or Sole Trader) address, contact details, Pharmacy Approval Number (where applicable) and ABN. Where data was available the Portal also records:

- The Programs for which the Service Provider is registered
- Approved QUM and RMMR Service Agreements with Aged Care Facilities.
- Patients registered for Health Outcomes Data collection (for DAAs, Staged Supply MedsCheck and Diabetes Medscheck). Note however that:
  - Only limited information is recorded for each registered patient
  - The 'Date Submitted' field will reflect the date the data was migrated rather than the date the patient was registered.

#### Users

A User account has been created for each Primary Contact recorded in the previous 6CPA Portal. Each Primary Contact has been designated as the MAP for the Service Provider they were associated with in the previous 6CPA Portal. Specifically:

- For the Primary Contact of a Community Pharmacy - a User account has been created in the new Portal and designated as the MAP for the community pharmacy(ies) for which they were the Primary Contact
- For the Primary Contact of a Business Entity - a User account has been created in the new Portal and designated as the MAP for the business for which they were the Primary Contact
- For Sole Traders - a User account has been created in the new Portal and designated as the MAP for the related Sole Trader Service Provider.

## TRANSITION OF EXISTING USERS TO THE NEW PORTAL



If you have previously submitted claims on behalf of a Service Provider (e.g. Community Pharmacy, Business Entity or Sole Trader) and you were not the Primary Contact in the Pharmacy Guild's 6CPA Portal, you have not had a User account set up for you.

In the above circumstance, you should register as a new User for the Portal. During the registration process you can select to be registered in the role of 'Service Provider Contact' and search for/select the relevant Service Provider, to request to be designated as an AP. Once the MAP has approved your request to act as an AP, you will be able to view the Service Provider's account and submit claims on their behalf.

### Please note

Prior to launch of the new Portal on 1 February 2019, we contacted a number of pre-existing Users of the Guild's 6CPA Portal to check the accuracy of the information to be migrated.

If you were contacted, we will have confirmed and/or updated details in the new Portal on your behalf. A different approach to setting up User accounts (to that described on the previous page) may have been discussed and agreed with you. If for example, the Primary Contact for the 6CPA Portal was not the pharmacy owner, we may have taken the pharmacy owner's details to set them up as the MAP and set up the existing Primary Contact as an AP.

### Not Migrated

Information that has not been migrated from the 6CPA Portal includes:

- Service Provider's bank details – these need to be entered into the new Portal by the MAP, **payments cannot be made until this occurs**
- Login and password details – the new Portal login is the e-mail address we have recorded for you and to which your welcome email was sent. You will need to set a password before you can login (instructions provided in section 4)
- Claims history and details of previous claims – it is suggested that Users record any information they require for record keeping or taxation purposes before the Guild's 6CPA Portal is deactivated.
- Detailed information about patients registered for Health Outcomes Data collection
- Information that was entered/changed in the 6CPA Portal between November 2018 and 31 January 2019.



## WHAT YOU NEED TO DO

### 4

### What You Need to Do

We have e-mailed all people for whom a User account has been created in the new Portal (as per the migration process described on the previous page).

If you received this 'welcome' e-mail, please take the following steps to complete the set-up of your account:

- Set a password for your User account
- Update the Service Provider's bank details, so we can make payments (if you are the Main Authorised Person).

You may also wish to ask other people to register for a User account in the Portal, so they can be approved as an Authorised Person (for one or more Service Providers). This will enable them to submit claims for the Service Provider.

Instructions and guidance to complete these tasks are provided on the following pages.

**We recommend that Users establish access to the Portal and claim as soon as possible in February, to ensure that unanticipated issues don't cause any claiming deadlines to be missed.**

#### Please note

The Main Authorised Person (MAP) of a Service Provider is responsible for ensuring that the Service Provider is eligible for all programs for which they are registered and that claims are submitted in accordance with the Program Rules.

The MAP should advise the Pharmacy Programs Administrator if they identify any issues, or do not meet the eligibility requirements for one or more programs for which they are registered. The Service Provider's eligibility may be reviewed in future and repayment required where appropriate.




**CONTACT THE SUPPORT CENTRE:** 1800 951 285 | [support@ppaonline.com.au](mailto:support@ppaonline.com.au)

## WHAT YOU NEED TO DO

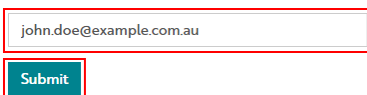
### Set a password for your User account

- 1) The e-mail you received from the Pharmacy Programs Administrator invites you to click on a link to set your password. When you select '[click here](#)' in the e-mail you'll be taken to a webpage to begin the process.
- 2) Enter your e-mail address into the box as shown below and click 'Submit'. Note that the e-mail address must be the same address as the one where the e-mail from the Pharmacy Programs Administrator was sent.




The screenshot shows the top of a web portal. It has a dark grey header with the Pharmacy Programs Administrator logo on the left. Below the header is a blue banner with the text "Pharmacy Programs Administrator Registration and Claiming Portal".

### Set your password



The screenshot shows a form with a text input field containing "john.doe@example.com.au" and a "Submit" button below it.

- 3) A confirmation message will appear, as below



This is a duplicate of the screenshot above, showing the top of the web portal with the Pharmacy Programs Administrator logo and the blue banner.

### Set password confirmation

Please check your email to reset your password. [Please click here to return home.](#)

- 4) A follow-up email will be sent to your verified email address to set your new password. Click the set a new password link in this second email



The screenshot shows the header of an email. It has a dark grey header with the Pharmacy Programs Administrator logo on the left. Below the header is a teal banner with the text "PASSWORD RESET".

Hi John Doe,

This email is to allow you to reset your password for the Pharmacy Programs Administrator Portal. If you did not request this please ignore this email.

[Reset your password](#)

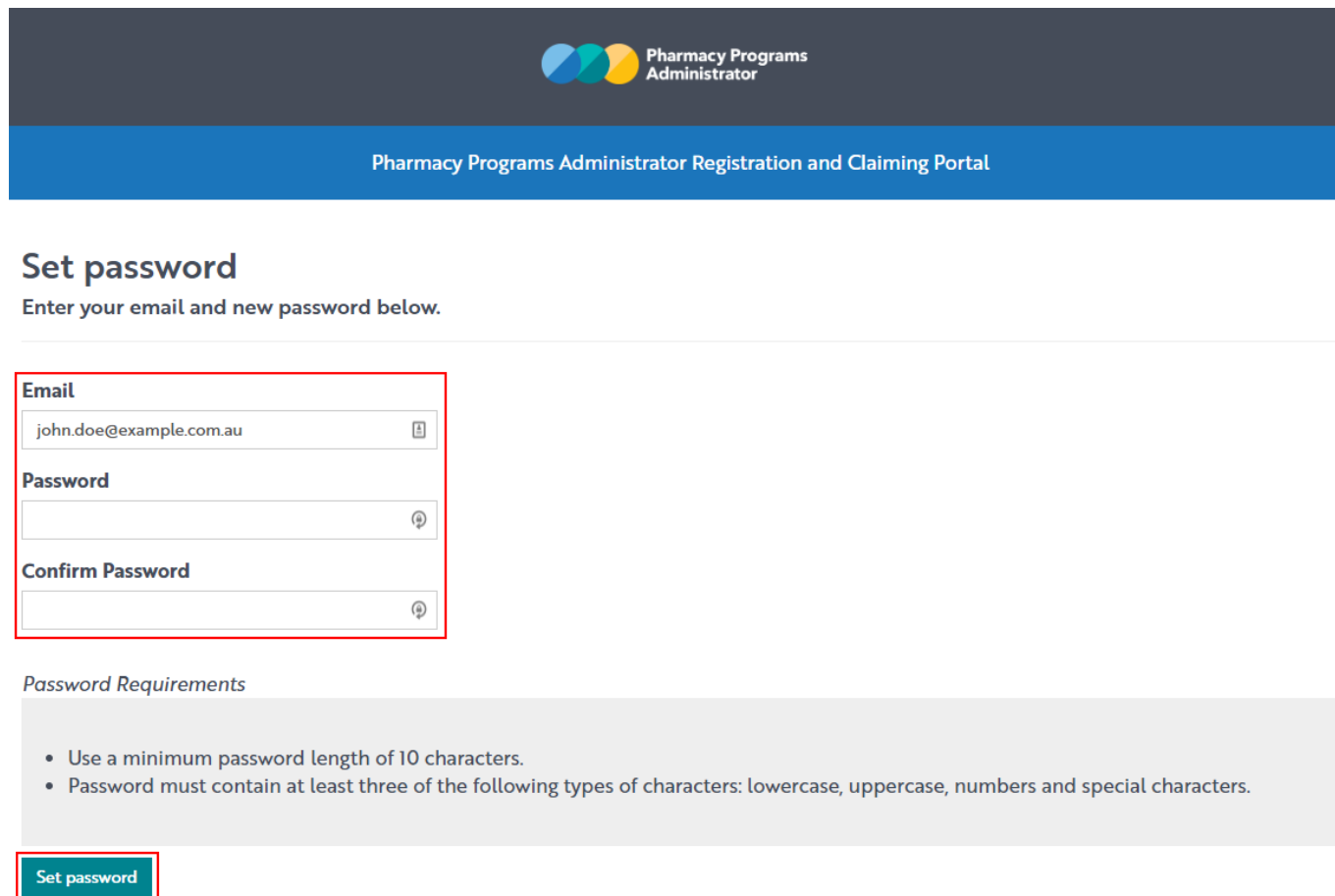
[Please click here](#) to reset your password for the Pharmacy Programs Administrator Portal.

Kind regards,

 Pharmacy Programs  
Administrator

## WHAT YOU NEED TO DO

- 5) You will be taken to the Set Password screen shown below. Enter your e-mail address again and new password (twice) and click **Set Password**



The screenshot shows the 'Set password' screen of the Pharmacy Programs Administrator Registration and Claiming Portal. The page has a dark blue header with the logo and title. Below the header is a blue banner with the text 'Pharmacy Programs Administrator Registration and Claiming Portal'. The main content area is white and contains the title 'Set password' and the instruction 'Enter your email and new password below.'.

**Email**

john.doe@example.com.au

**Password**

**Confirm Password**

**Set password**

*Password Requirements*

- Use a minimum password length of 10 characters.
- Password must contain at least three of the following types of characters: lowercase, uppercase, numbers and special characters.

- 6) Now your new password has been set-up, you can log-in to the Portal.

## WHAT YOU NEED TO DO

### Update your bank details (for Main Authorised Person only)

- 1) After you login the Portal will display your home page. This will show the Service Providers for which you are approved to act (as either the Main Authorised Person or an Authorised Person). For each Service Provider you will be able to see the Programs for which it is registered

TEST PHARMACY ▼

[\\$ View Remittance Advices](#)
[+ Register for New Program](#)
[✎ Update Details](#)

PROGRAM NAME	STATUS	ACTION
Medscheck	Granted	<a href="#">View</a>
RMMR	Granted	<a href="#">View</a>
QUM	Granted	<a href="#">View</a>
CI	Granted	<a href="#">View</a>
DAA	Pending	<a href="#">View</a>

First « 1 » Last

Show 10 entries

Total number of entries: 5

- 2) If you are the Main Authorised Person, click the **Update Details** link to review / update the Service Provider's details

- 3) Scroll to the bottom of the screen to see the section for bank details

BANK DETAILS

Account Name

BSB

Account Number

- 4) Complete the bank details and the **Next** button to save these details. **Note that claims cannot be paid until this step is completed.**

## WHAT YOU NEED TO DO

### Managing Authorised Persons

Other staff can register on the Portal and apply to become an Authorised Person for a Service Provider for which you are the MAP. Once approved by you (the Main Authorised Person), they will be able to submit claims for the Service Provider.

You can view the list of Authorised Persons in the first section of the **Update Details** page associated with the Service Provider. Any pending requests are shown in the **Pending Authorised Person Requests** section for you to review and approve.







The example below shows that:

- 1) The Pharmacy Owner is the **Main Authorised Person (MAP)**. The MAP can update business details, bank details, register for Programs and make claims.
- 2) The MAP has approved a Service Provider Contact as an **Authorised Person (AP)**. An AP can make claims on behalf of the Service Provider, but not perform any other actions.
- 3) The MAP can remove this AP at any time, by returning to this menu and clicking **Remove Authorised Person**.
- 4) The MAP can also approve or reject any Pending Authorised Person Requests. In the example below, a Registered Pharmacist has requested to be an AP for Test Pharmacy.

AUTHORISED PERSONS

Entries

Search


ID	USER	ROLE TYPE	DATE AUTHORISED	MAIN AUTHORISED PERSON	APPROVAL	
116		Pharmacy Owner	24/01/2019	Yes <sup>1</sup>	Granted	
216		Registered Pharmacist	28/01/2019	No	Pending	
217		Service Provider Contact	28/01/2019	No <sup>2</sup>	Granted	 <div>Remove Authorised Person <sup>3</sup></div>

First « 1 » Last

Show 10 entries

Total number of entries: 3

PENDING AUTHORISED PERSON REQUESTS

ID	USER NAME	ROLE TYPE	SERVICE PROVIDER	
216		Registered Pharmacist	Test Pharmacy	<div>Approve</div> <div>Reject <sup>4</sup></div>

PHARMACY / BUSINESS DETAILS

Type of Pharmacy / Business

Section 90 Pharmacy – Community Pharmacy

Name

Test Pharmacy



**CONTACT THE SUPPORT CENTRE:** 1800 951 285 | support@ppaonline.com.au

## APPENDIX: PROGRAM CLAIMING GUIDES

### A1

## Appendix: Program Claiming Guides

The appendix provides information about how to claim for the most common Community Pharmacy Programs, as follows:

- Dose Administration Aids
- MedsCheck and Diabetes MedsCheck
- Staged Supply
- Quality Use of Medicines
- Home Medicine Review
- Residential Medication Management Review
- Rural Pharmacy Maintenance Allowance.

Full User guides covering all aspects of all 23 Community Pharmacy Programs are available in the Program pages at our website <https://ppaonline.com.au> Guides explain how to register, apply, claim and submit deliverables for each Program.

### Please Note

#### Programs registration

- Your User data has been migrated to the new Portal from the 6CPA Portal, so you do not need to re-register for your Programs previously registered in the 6CPA Portal.
- If you wish to register for a Program which you did not previously participate in, or you have logged in to the new Portal and cannot see a Program you think you should be registered for, please consult the full Program User Guides available on our website.
- Some Community Pharmacy Programs were not accessible via the 6CPA Portal, and you may need to register for these Programs on the new Portal.

#### Claims for services delivered in January 2019

- The 6CPA Portal no longer accepts claims. Claims should be submitted via our new Portal, and for a number of Programs this can include claims for services provided in January 2019.
- If you have submitted a claim via the previous 6CPA Portal, this must not be claimed for again in the new Portal. Claims in respect of services provided prior to 1 February 2019 will be subject to review, and repayment will be required if duplicate claims are made.

## APPENDIX: PROGRAM CLAIMING GUIDES – DOSE ADMINISTRATION AIDS

### Dose Administration Aids


#### How to make a DAA Service Claim

This section details how to submit a DAA Claim through the Portal.

- 1) Once logged into the Portal, click on the **Home** icon to access a list of approved program registrations against one or more Service Providers
- 2) Click on the **View** button to make a claim against a program under the relevant Service Provider

EXAMPLE PHARMACY ▼

[\\$ View Remittance Advices](#)
[+ Register for new program](#)
[📄 Update Details](#)

PROGRAM NAME	STATUS	ACTION
DAA	Granted	 <b>View</b>

- 3) Once you have clicked on **View**, the following screen will display. Click on the **Service Claim** button

#### DOSE ADMINISTRATION AID

**Service Claim**
Initial Patient Registration
Deactivate Patient
6 Month Follow Up
View Claims


Claim type: Initial Patient Registration ▼


No entries found

- 4) The **Service Claim** screen will display (see part of form below). Complete the fields highlighted in red. You can also copy a table of data from a Microsoft Excel File arranged in this format and paste into the 'Patient Medicare/DVA Number' – this will add the necessary number of rows and complete it with the pasted data.

DOSE ADMINISTRATION AID

Service Claim
Initial Patient Registration
Deactivate Patient
6 Month Follow Up
View Claims

Patient Medicare/DVA number	Date of Service
	dd/mm/yyyy

+ Add
 Clear all

## APPENDIX: PROGRAM CLAIMING GUIDES – DOSE ADMINISTRATION AIDS

- 5) To add more than one DAA Service, click on the **Add** button.
- 6) Once you have finished adding in all the DAA services for the one-month period, press on the **Validate and View Caps** button.  
 If there are issues with any of the fields entered, an error message will appear (see below).  
 Correct or delete any entries with errors to submit the claim.  
 On the right it will indicate how many DAA claims have been entered and the relevant Cap. If the number of claims exceeds the Cap the system will identify the services that will not be paid.

### DOSE ADMINISTRATION AID

Service Claim
Initial Patient Registration
Deactivate Patient
6 Month Follow Up
View Claims

Patient Medicare/DVA number
Date of Service

× 216370445
01/01/2019
Cap: 1/30

The provided DVA or Medicare number is incorrect. Please include the individual reference number for Medicare.


- 7) Click on the **Submit Claim** button to submit the claim. An approval message will appear
- 8) To see a list of all submitted/approved claims (i.e. the DAA claims history), click on the **View Claims** button.

### DOSE ADMINISTRATION AID

Service Claim
Initial Patient Registration
Deactivate Patient
6 Month Follow Up
View Claims

Claim type: Service Claim

Search

DAA BATCH ID	DATE SUBMITTED	NUMBER OF SERVICES	PAID (AUD)	APPROVAL	
1	17/01/2019	1	\$6.08	Granted	

First
« 1 » Last

Show 10 entries

Total number of Programs: 1

**Details of patient registration for the purposes of collecting health outcomes data are available in the full DAA Program User Guide.**



## APPENDIX: PROGRAM CLAIMING GUIDES – MEDSCHECK AND DIABETES MEDSCHECK

### MedsCheck and Diabetes MedsCheck

#### How to Make a MedsCheck or Diabetes MedsCheck Claim

This section details how submit a claim for the MedsCheck and Diabetes MedsCheck Program.

- 1) Open the **Home** page to display a list of approved programs for a Service Provider
- 2) To make a claim, click the **View** button next to the MedsCheck program

TEST PHARMACY		
<a href="#">\$ View Remittance Advices</a> <a href="#">+ Register for New Program</a> <a href="#">✎ Update Details</a>		
PROGRAM NAME	STATUS	ACTION
Medscheck	Granted	<a href="#">View</a>
RMMR	Granted	<a href="#">View</a>

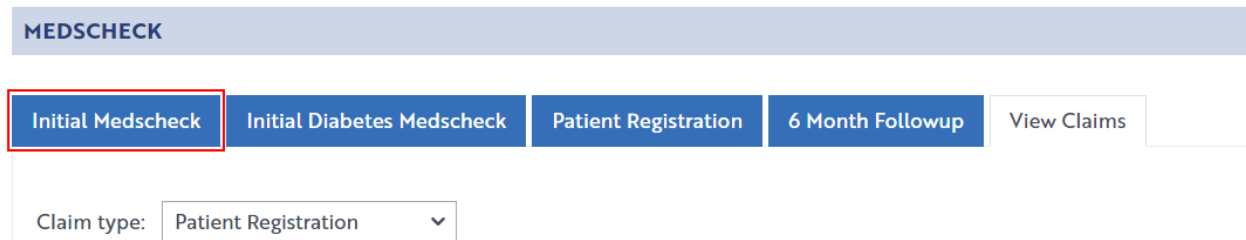
- 3) The home screen for claims will display a list of previous claims for all claims types:
  - Initial MedsCheck
  - Initial Diabetes MedsCheck
  - Patient registration
  - 6 Month Follow-up.

MEDSCHECK				
Initial Medscheck	Initial Diabetes Medscheck	Patient Registration	6 Month Followup	View Claims
Claim type: <span>Patient Registration</span>				

## APPENDIX: PROGRAM CLAIMING GUIDES – MEDSCHECK AND DIABETES MEDSCHECK

### Create an Initial MedsCheck Claim

- 1) To create an Initial MedsCheck claim, click **Initial MedsCheck** from the claims home screen



MEDSCHECK

Initial MedsCheck Initial Diabetes Medscheck Patient Registration 6 Month Followup View Claims

Claim type: Patient Registration ▼

- 2) Complete the fields and correct any validation errors displayed in red
- 3) Once all fields have been completed, the user can click **Save Claim** or **Submit Claim**.

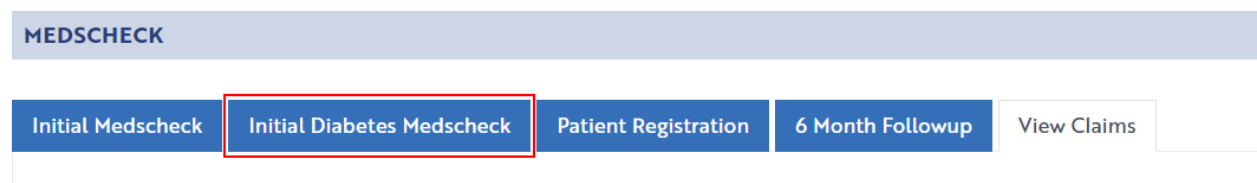
Save Claim

Submit Claim

- 4) If the **Save Claim** button is selected, the record will be saved and can be accessed from the **View Claims** screen at a later time.
- 5) If the **Submit Claim** is selected, the claim is submitted.

### Create a Diabetes MedsCheck Claim

- 1) To create a Diabetes MedsCheck claim, click **Diabetes MedsCheck** from the claims home screen



MEDSCHECK

Initial Medscheck Initial Diabetes Medscheck Patient Registration 6 Month Followup View Claims

- 2) Complete the fields and correct any validation errors displayed in red
- 3) Once all fields have been completed, the user can click **Save Claim** or **Submit Claim**

Save Claim

Submit Claim

- 4) If the **Save Claim** button is selected, the record will be saved and can be accessed from the **View Claims** screen another time
- 5) If the **Submit Claim** is selected, the claim is submitted.

**Details on patient registration for the purposes of collecting health outcomes data are available in the full MedsCheck and Diabetes MedsCheck Program User Guide.**

## APPENDIX: PROGRAM CLAIMING GUIDES – STAGED SUPPLY

### Staged Supply

#### How to make a Staged Supply Service Claim

This section details how to submit a Staged Supply Service Claim via the new Portal.

- 1) Once logged into the Portal, click on the **Home** icon to access a list of Approved Program registrations against one or more Service Providers
- 2) Click on the **View** button to make a claim against a program under the relevant Service Provider

<a href="#">\$ View Remittance Advices</a>	<a href="#">+ Register for New Program</a>	<a href="#">✎ Update Details</a>
PROGRAM NAME	STATUS	ACTION
QUMAX Community Pharmacy	Granted	<a href="#">View</a>
QUM	Granted	<a href="#">View</a>
ATSIPATS	Granted	<a href="#">View</a>
Medscheck	Granted	<a href="#">View</a>
Staged Supply	Granted	<a href="#">View</a>

- 3) Once you have clicked on **View**, the following screen will display. Click on the **Service Claim** tab

<b>Service Claim</b>	Initial Patient Registration	Six Month Follow Up	View Claims
----------------------	------------------------------	---------------------	-------------

- 4) The **Staged Supply Service Claim** screen will display. Some fields will be pre-populated based on the initial patient registration form already completed. You are not able to edit these fields
- 5) The **Service Claim** screen will display (part of form shown below)

STAGE SUPPLY			
Service Claim	Initial Patient Registration	Six Month Follow Up	View Claims

Service claims submitted this month: 1 out of 15

Patient Medicare Number or DVA Number

- 6) Once you have completed all fields and corrected any validation errors, read the declaration and then click on the **Submit** button to submit the claim. An approval message will appear. To see a list of all claims (pending, approved or rejected), click on the **View Claims** tab.

**Details on patient registration for the purposes of collecting health outcomes data are available in the full Staged Supply Program User Guide.**

## APPENDIX: PROGRAM CLAIMING GUIDES – QUALITY USE OF MEDICINES

### Quality Use of Medicine

#### Register an Aged Care Facility

- 1) To be able to register an Aged Care Facility for the QUM Program you must first be registered for the QUM Program
- 2) From the home screen, click on the **View** button against the QUM Program under the relevant Service Provider

QUMAX PHARMACY		
<a href="#">View Remittance Advices</a>	<a href="#">+ Register for New Program</a>	<a href="#">Update Details</a>
PROGRAM NAME	STATUS	ACTION
QUMAX Community Pharmacy	Granted	<a href="#">View</a>
QUM	Granted	<a href="#">View</a>

- 3) Once you have clicked on **View**, the following screen will display

#### QUALITY USE OF MEDICINES

Aged Care Facilities

**Register an Aged Care Facility**

- 4) Click on **Register an Aged Care Facility** to register an Aged Care Facility for the QUM Program. A list of previously registered aged care facilities will also be displayed here
- 5) The **QUM Register an Aged Care Facility Application** screen will display (part of form shown below). Complete all fields and upload a copy of your QUM Aged Care Facility Service Agreement

#### QUALITY USE OF MEDICINE

**QUM**

Register an Aged Care Facility

##### DETAILS OF AGED CARE FACILITY (ACF)

NAPS ID (If Known)


## APPENDIX: PROGRAM CLAIMING GUIDES – QUALITY USE OF MEDICINES

- 6) Once you have completed all fields and pressed the **Submit** button, a confirmation message will appear. The application will be assessed by an operator for approval.
- 7) To view the application, click on the **Aged Care Facilities** tab. The application will be in a pending state (see below). Once an operator has approved the application, the status will change to granted

Aged Care Facilities
Register an Aged Care Facility

**QUM Application List**

Q

ID	SERVICE AGREEMENT START DATE	SERVICE AGREEMENT END DATE	APPROVAL	RACF NAME			
23	01/01/2019	01/01/2020	Pending	Test ACF		<a href="#" style="background-color: #f2f2f2; padding: 2px 5px;">View Claim</a>	<a href="#" style="background-color: #0070c0; color: white; padding: 2px 5px;">Show Claims</a>

- 8) You will be notified of the outcome via email. Additionally, the status of the application will change from **pending** to either **granted** or **rejected**.


## APPENDIX: PROGRAM CLAIMING GUIDES – QUALITY USE OF MEDICINES



### How to make a QUM Service Claim

- 1) To be able to make a claim for the QUM Program you must have had approval for the registration of an Aged Care Facility. You will be able to make a claim against this Aged Care Facility.
- 2) Click on **New Claim** button in the row for the relevant aged care facility. The following screen will display.

**QUALITY USE OF MEDICINE**

QUM [Register an Aged Care Facility](#)

**QUM Application List**  

ID	SERVICE AGREEMENT START DATE	SERVICE AGREEMENT END DATE	APPROVAL	RACF NAME		
42	30/09/2018	30/07/2019	Granted	Granted	QUM Aged Care Facility White	 

First « 1 » Last

Total number of Programs: 1

Show 10 entries

- 3) The **QUM Claim** screen will display (part of screen below)

**QUALITY USE OF MEDICINE**

QUM [Register an Aged Care Facility](#) [Claim](#)

RACF Name  
QUM Aged Care Facility White


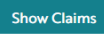

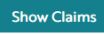


Start Date of the claiming quarter being claimed  
30/09/2018

End date of the claiming quarter being claimed  
29/12/2018

Number of beds at the Residential Aged Care Facility during claiming quarter  
100

\*Note, changes to the number of beds will be paid in the following quarter and NOT in this quarter

- 4) Complete all mandatory fields. If any error/validation messages appear, correct your responses. You can always press the **Save** button and return back to the application.
- 5) Read the declaration and then press the **Submit** button to submit the claim. An approval message will then appear.
- 6) To see a list of all submitted and/or saved claims for a specific Aged Care Facility, click on the **Show Claims** button.

ID	SERVICE AGREEMENT START DATE	SERVICE AGREEMENT END DATE	APPROVAL	RACF NAME		
112	01/02/2019	01/02/2020	Granted	Test Resi		New Claim 
146	01/01/2019	31/10/2019	Granted	QUM Aged Care Facility 1		New Claim 
147	01/10/2018	31/12/2019	Granted	QUM Aged Care Facility 2		New Claim 

## PROGRAM CLAIMING GUIDES – HOME MEDICINE REVIEW

### Home Medicine Review

#### How to Submit a HMR Program Variation

- 1) To be able to submit a program variation for the HMR Program you must first be registered for the Program
- 2) Click on the **View** button against the HMR Program under the relevant Service Provider

**ALEX PHARMACIST** ▼

[View Remittance Advices](#)
[+ Register for New Program](#)
[Update Details](#)

PROGRAM NAME	STATUS	ACTION
HMR Rural Allowance	Granted	<a href="#">View</a>
HMR	Granted	<a href="#">View</a>

[First](#)
[«](#)
[1](#)
[»](#)
[Last](#)

ⓘ Total number of Programs: 2
 Show  entries

- 3) Once you have clicked on **View**, the following screen will display
- 4) Select the type of variation request you would like to make, either:
  - For the interview to be conducted outside the patient's home, or
  - For the interview to be conducted by a registered pharmacist

#### HOME MEDICINE REVIEW

[Claims](#)
[New Claim](#)
[Variations](#)
[Interview by a Registered Pharmacist](#)
[Interview Outside patient's Home](#)

#### Steps for Request Variation – Interview to be conducted outside patient's home

- 1) After selecting the **Interview outside patient's home** button, the Variation screen will display (part of variation form below).

**HOME MEDICINE REVIEW**

[Claims](#)
[New Claim](#)
[Variations](#)
[Interview by a Registered Pharmacist](#)
[Interview Outside patient's Home](#)

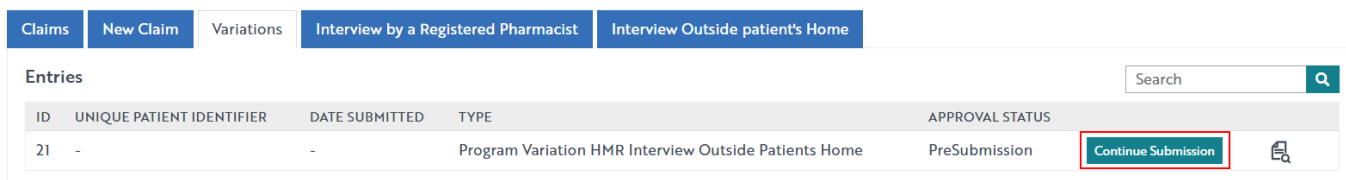
Program Variation HMR: Interview Outside Patients Home

**PATIENT DETAILS**

Unique Patient Identifier (Patient Medicare or DVA number should not be used)

## PROGRAM CLAIMING GUIDES – HOME MEDICINE REVIEW

- Once you have completed all fields, press the **Submit** button. If you wish to return to the form at another time you can do this by pressing the **Save** button.
- To access the variation at another time, click on the **Variations** tab. The following page will appear. Click on **Continue Submission**.



ID	UNIQUE PATIENT IDENTIFIER	DATE SUBMITTED	TYPE	APPROVAL STATUS
21	-	-	Program Variation HMR Interview Outside Patients Home	PreSubmission

- Once the variation has been submitted, it will be in a pending status and will be sent to the Department for approval. You will be notified of the outcome via email.

## Steps for Request Variation – Interview conducted by a registered pharmacist

- After selecting the **Interview by a Registered Pharmacist** tab, the variation screen will display (part of variation form below).



HOME MEDICINE REVIEW

Program Variation HMR: Interview By Registered Pharmacist

**PATIENT DETAILS**

Unique Patient Identifier (Patient Medicare or DVA number should not be used)

- If you wish to return to the application at another time press the **Save** button. To return to the variation record at another time click on the **Variations** tab, then click on **Continue Submission**.



ID	UNIQUE PATIENT IDENTIFIER	DATE SUBMITTED	TYPE	APPROVAL STATUS
22	-	-	Program Variation HMR Interview By Registered Pharmacist	PreSubmission
21	-	-	Program Variation HMR Interview Outside Patients Home	PreSubmission

- If you wish to submit the application, click on **Continue Submission** and complete the form. Click the **Submit** button.
- To view a list of program variations that have been submitted, click on the Variations button. The variations will be in a **pending** status and will need to be approved / rejected by an operator, once an outcome has been received by the Department. The status will then be changed from "pending" to either "granted" or "rejected".



## PROGRAM CLAIMING GUIDES – HOME MEDICINE REVIEW

### How to make a HMR Service Claim

- 1) To be able to make a claim for the HMR Program you must be registered for the Program.
- 2) Click on the **View** button (see below) to make a claim against a Program under the relevant Service Provider.

ALEX PHARMACIST		
<a href="#">View Remittance Advices</a> <a href="#">+ Register for New Program</a> <a href="#">Update Details</a>		
PROGRAM NAME	STATUS	ACTION
HMR Rural Allowance	Granted	<a href="#">View</a>
HMR	Granted	<a href="#">View</a>
First « 1 » Last		
Total number of Programs: 2		
		Show 10 entries

- 3) Once you have clicked on **View**, the following screen will display.

HOME MEDICINE REVIEW

[Claims](#)
[New Claim](#)
[Variations](#)
[Interview by a Registered Pharmacist](#)
[Interview Outside patient's Home](#)

No entries found

### Submitting a claim against a program variation (where a program variation has been submitted and approved)

- 1) If you have recently submitted a **program variation** and it has been approved, you will need to access the **Variations** tab and click on **Start Claim** button to make a claim against that variation.

HOME MEDICINE REVIEW				
<a href="#">Claims</a>	<a href="#">New Claim</a>	<a href="#">Variations</a>	<a href="#">Interview by a Registered Pharmacist</a>	<a href="#">Interview Outside patient's Home</a>
Entries <div> <input type="text"/> <input type="submit" value="Q"/> </div>				
ID	PATIENT FAMILY NAME	DATE SUBMITTED	TYPE	APPROVAL STATUS
41		14/01/2019	Program VariationHMR Interview By Registered Pharmacist	Granted [Approval Granted]
40		14/01/2019	Program VariationHMR Interview Outside Patients Home	Granted [Approval Granted]

- 2) The claim form will display (part of form shown below)

## PROGRAM CLAIMING GUIDES – HOME MEDICINE REVIEW

HOME MEDICINE REVIEW

Claims **New Claim** Variations Interview by a Registered Pharmacist Interview Outside patient's Home

HMR Service Claim

Written Patient Consent Held

☐ Yes

☐ No

**DETAILS OF SERVICE**

A HMR Service can only be performed for the same patient once every 24 months unless deemed clinically necessary by the Patient's GP

Medicare or DVA Number

3) Complete all fields, except for the Prior Approval Code, which will be pre-filled.

### Submitting a new claim (where no program variation is associated with the service)

1) To start a **new claim**, where a program variation has not been submitted, click on the **New Claim** tab.

HOME MEDICINE REVIEW

Claims **New Claim** Variations Interview by a Registered Pharmacist Interview Outside patient's Home

2) The claim form will display (part of form shown below).

HOME MEDICINE REVIEW

Claims **New Claim** Variations Interview by a Registered Pharmacist Interview Outside patient's Home

HMR Service Claim

Written Patient Consent Held

☐ Yes

☐ No

**DETAILS OF SERVICE**

A HMR Service can only be performed for the same patient once every 24 months unless deemed clinically necessary by the Patient's GP

Medicare or DVA Number

3) Once you have completed the form click on the **Submit** button.

## PROGRAM CLAIMING GUIDES – RESIDENTIAL MEDICATION MANAGEMENT REVIEW

### Residential Medication Management Review

#### Register an Aged Care Facility

- 1) To be able to register an Aged Care Facility for the RMMR Program you must have first registered for the RMMR Program.
- 2) From the home screen, click on the **View** button against the RMMR Program under the relevant Service Provider

S100 PHARMACY		
<a href="#">View Remittance Advices</a> <a href="#">+ Register for New Program</a> <a href="#">Update Details</a>		
PROGRAM NAME	STATUS	ACTION
Section 100	Granted	<a href="#">View</a>
Intern Incentive Allowancefor Rural Pharmacies Extension	Granted	<a href="#">View</a>
RMMR	Granted	<a href="#">View</a>

- 3) Once you have clicked on **View** button the following screen will display

RESIDENTIAL MEDICATION MANAGEMENT REVIEW

[Aged Care Facilities](#)
[New Aged Care Facility](#)

- 4) Click on **New Aged Care Facility** to register an Aged Care Facility for the RMMR Program. A list of previously submitted applications will also be displayed here.
- 5) The **RMMR Register and Aged Care Facility Application** screen will display (part of form shown). Complete all fields and upload a copy of your RMMR Aged Care Facility Service Agreement.

RESIDENTIAL MEDICATION MANAGEMENT REVIEW

[Aged Care Facilities](#)
[New Aged Care Facility](#)

Aged Care Facility Service Agreement: RMMR

Details of Aged Care Facility (ACF)


NAPS ID (If Known)

- 6) Once you have completed all fields and pressed the **Submit** button, a confirmation message will appear. The application will be assessed by an operator for approval.
- 7) To view the application, click on the **Aged Care facilities** button. The application will be in a pending state (below). Once an operator has approved the application, the status will change to granted.

## PROGRAM CLAIMING GUIDES – RESIDENTIAL MEDICATION MANAGEMENT REVIEW

Aged Care facilities – Make claims or view submitted claims.

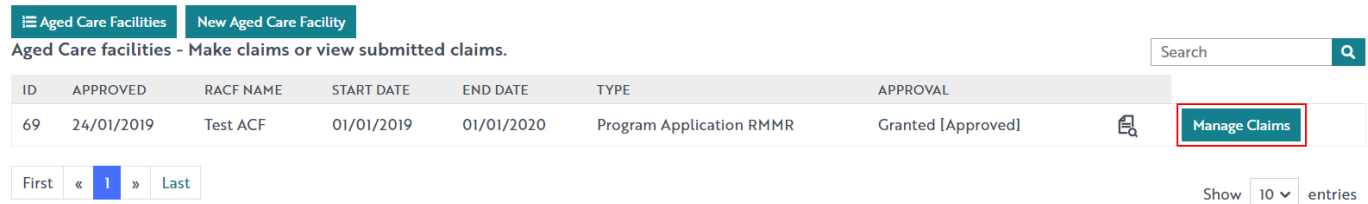
ID	APPROVED	RACF NAME	START DATE	END DATE	TYPE	APPROVAL	
164	30/01/2019	Test ACF	01/01/2019	01/01/2020	Program Application RMMR	Pending	

- 8) You will be notified of the outcome via email. Additionally, the status of the application will change from **pending** to either **granted** or **rejected**.

## PROGRAM CLAIMING GUIDES – RESIDENTIAL MEDICATION MANAGEMENT REVIEW

### How to Make a RMMR Service Claim

- 1) To be able to make a claim for the RMMR Program you must have had approval for the registration of an Aged Care Facility. You will be able to make a claim against this Aged Care Facility.
- 2) When you are in the **Aged Care Facility**, click on **Manage Claims**. The following screen will display.



Aged Care Facilities   New Aged Care Facility

Aged Care facilities – Make claims or view submitted claims.

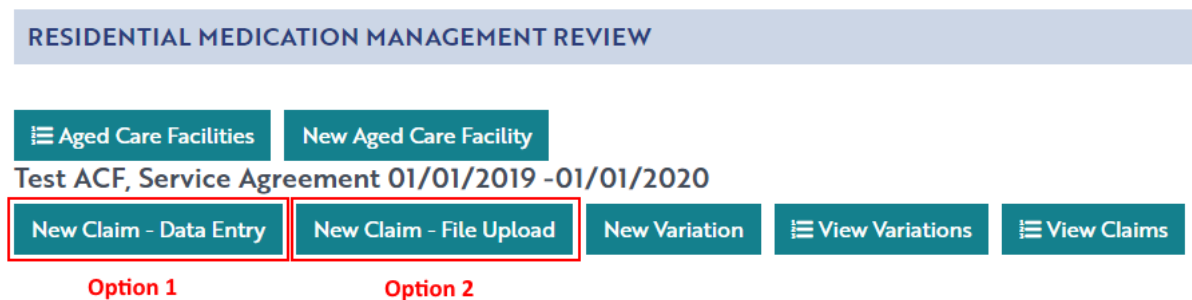
ID	APPROVED	RACF NAME	START DATE	END DATE	TYPE	APPROVAL
69	24/01/2019	Test ACF	01/01/2019	01/01/2020	Program Application RMMR	Granted [Approved]

First « 1 » Last

Show 10 entries

**Manage Claims**

- 3) The **RMMR Claim** screen will display (part of screen below). You will have two options available to you to claim for the RMMR Program. **Option 1** involves entering claim data directly into the portal. **Option 2** involves uploading a file with your data to the Portal. Both options are described below.



RESIDENTIAL MEDICATION MANAGEMENT REVIEW

Aged Care Facilities   New Aged Care Facility

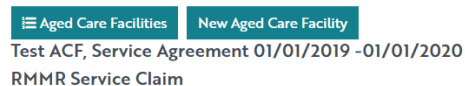
Test ACF, Service Agreement 01/01/2019 -01/01/2020

**New Claim - Data Entry**   **New Claim - File Upload**   New Variation   View Variations   View Claims

**Option 1**   **Option 2**

#### Option 1 – New Claim with Data entry

- 1) New Claim – Data Entry: To make a claim against an ACF registration that **does not have a program variation** associated with it, click on the **New Claim – Data Entry** button.
- 2) The following screen will display (part of form shown).



Aged Care Facilities   New Aged Care Facility

Test ACF, Service Agreement 01/01/2019 -01/01/2020

RMMR Service Claim

**DETAILS OF SERVICE**

For a Variations Service claim please go to the Variations Tab.

There are two methods of claiming available for RMMRs – 'Data Entry' and 'File Upload'.

**Data Entry:** Under this method claim information is entered directly into the claiming portal. Information is validated on entry and once submitted the claim will be automatically

- 3) Complete all mandatory fields. If any error messages appear, correct your responses. You can always press the **Save** button and return back to the application.
- 4) Read the declaration and then press the **Submit** button to submit the claim. **Claims submitted via this method will be paid within 3 business days of submission**

## PROGRAM CLAIMING GUIDES – RESIDENTIAL MEDICATION MANAGEMENT REVIEW

5) To see a list of all submitted and/or saved claims, click on the **View Claims** tab.

Test ACF, Service Agreement 01/01/2019 -01/01/2020



The screenshot shows a navigation bar with five tabs: 'New Claim - Data Entry', 'New Claim - File Upload', 'New Variation', 'View Variations', and 'View Claims'. The 'View Claims' tab is highlighted with a red border. Below the tabs is a table with columns: ID, PATIENT FAMILY NAME, DATE SUBMITTED, TYPE, APPROVAL, and a 'Payment' dropdown. The table contains one row with ID 915, Patient Family Name Stretton, Date Submitted 30/01/2019, Type RMMR Service Claim, and Approval Granted. A search bar is located to the right of the table.

### Option 2 – New Claim with File Upload

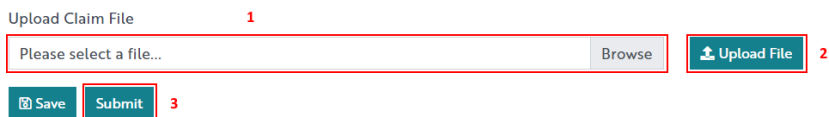
In choosing this option, you will need to be aware that the **File Upload** claiming method has been made available for pharmacies and other Service Providers that undertake a significant number of RMMRs and would prefer to upload data in Microsoft Excel format, as per previous arrangements.

Under this option, uploaded data will be entered into the system on your behalf by PPA staff using the 'Data Entry' method. The PPA will contact you regarding any claims that are not eligible and are not able to be entered into the system. If you choose this claiming method you should be aware that a 'PPA Admin' account will be granted permission to enter uploaded claims for your Service Provider. Submission of claims via the 'File Upload' approach is taken to be consent in this regard.

The steps are:

- 1) New Claim – File Upload: To make a claim against an Aged Care Facility registration that **does not have a program variation** associated with it, click on the **New Claim – File Upload** button.
- 2) The following screen will display (part of form shown).

If you wish to submit your claim via the 'File Upload' method, please upload your file below.



The screenshot shows the 'Upload Claim File' section. It includes a text input field with the placeholder 'Please select a file...' and a 'Browse' button. To the right is an 'Upload File' button with a red border and a red number '2' next to it. Below these buttons are 'Save' and 'Submit' buttons. The 'Submit' button is highlighted with a red border and a red number '3' next to it. A red number '1' is placed above the text input field.

- 3) Please select a file to upload (1), click on **Upload File** (2) and once uploaded, click on the **Submit** button.

**Please note:** Please ensure the file that you are uploading is named as follows: **Your Service Provider Name and Aged Care Facility Name.**

- 4) The PPA will enter claims data from the excel spreadsheet as a claim against the Aged Care Facility.
- 5) To see a list of all submitted and/or saved claims, click on the **View Claims** tab.

Test ACF, Service Agreement 01/01/2019 -01/01/2020



This screenshot is identical to the one above, showing the 'View Claims' tab highlighted in red in the navigation bar. The table below it shows the same data: ID 915, Patient Family Name Stretton, Date Submitted 30/01/2019, Type RMMR Service Claim, and Approval Granted. A search bar is located to the right of the table.

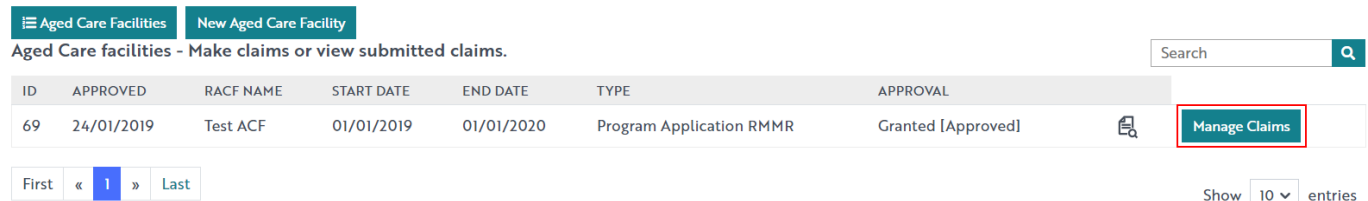
## PROGRAM CLAIMING GUIDES – RESIDENTIAL MEDICATION MANAGEMENT REVIEW

### How to Submit a RMMR Program Variation for Pharmacist Only Review

In the event that referral from a GP cannot be sourced for a patient, despite repeated and reasonable steps, then an RMMR Service Provider may seek approval from the Department to conduct a Pharmacist Only Review without the initial referral from a GP.

The pre-requisites for submitting a program variation include registering for the RMMR program and having an approved ACF registration.

- 1) If you're logging back in, then click on the **View** button. The following screen will display. Click on the **Manage Claims** button against the approved Program application.



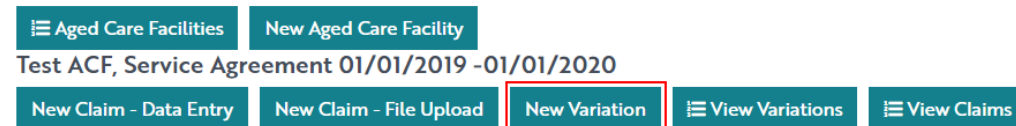
Aged Care facilities - Make claims or view submitted claims.

ID	APPROVED	RACF NAME	START DATE	END DATE	TYPE	APPROVAL	
69	24/01/2019	Test ACF	01/01/2019	01/01/2020	Program Application RMMR	Granted [Approved]	<b>Manage Claims</b>

First « 1 » Last

Show 10 entries

- 2) The following screen will display. Click on the **New Variation** button



Test ACF, Service Agreement 01/01/2019 -01/01/2020

**New Claim - Data Entry** **New Claim - File Upload** **New Variation** **View Variations** **View Claims**

- 3) Once you are in the Aged Care Facility screen, the following screen will display (part of form shown below)

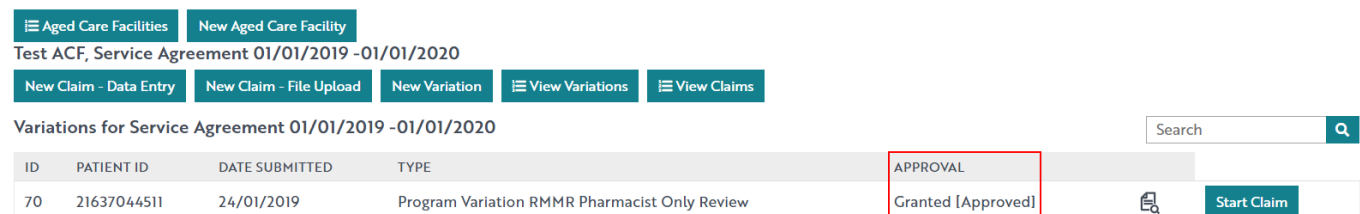


Test ACF, Service Agreement 01/01/2019 -01/01/2020

Program Variation RMMR Pharmacist Only Review

#### PATIENT DETAILS

- 4) Complete all fields and click the **Submit** button to submit the program variation. If you need to return back to the application at another time, press the **Save** button.
- 5) Once the program variation has been submitted, you will be able to access the submitted variation under the **Aged Care Facilities** screen. Click on **View Variations**. The following page will appear.



Variations for Service Agreement 01/01/2019 -01/01/2020

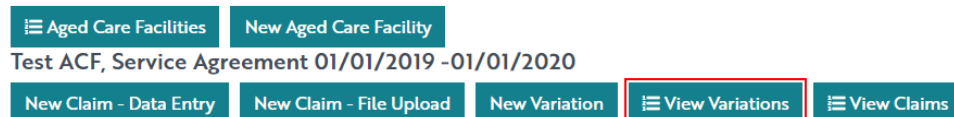
ID	PATIENT ID	DATE SUBMITTED	TYPE	APPROVAL	
70	21637044511	24/01/2019	Program Variation RMMR Pharmacist Only Review	Granted [Approved]	<b>Start Claim</b>

- 6) The status of the variation application will be **pending**. This will change to either **Granted** or **Rejected** based on the outcome of the assessment.

## PROGRAM CLAIMING GUIDES – RESIDENTIAL MEDICATION MANAGEMENT REVIEW

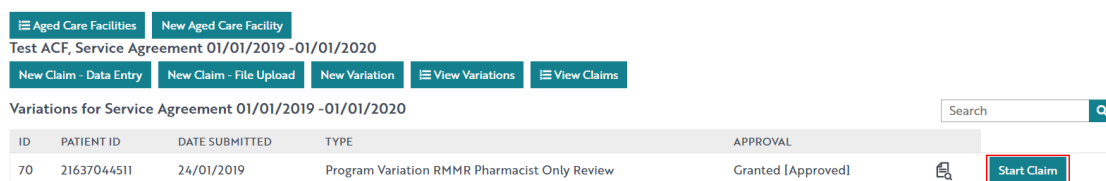
### New claim for an approved program variation

- 1) To make a **claim** where a **program variation** has been submitted and approved, click on the **View Variations** button to view your submitted program variations for the RMMR Program. This will only appear once the program variation has been approved.




Aged Care Facilities | New Aged Care Facility  
 Test ACF, Service Agreement 01/01/2019 -01/01/2020  
 New Claim - Data Entry | New Claim - File Upload | New Variation | **View Variations** | View Claims

- 2) The **View Variations** screen will display. Click on the **Start Claim** button.




Aged Care Facilities | New Aged Care Facility  
 Test ACF, Service Agreement 01/01/2019 -01/01/2020  
 New Claim - Data Entry | New Claim - File Upload | New Variation | View Variations | View Claims

Variations for Service Agreement 01/01/2019 -01/01/2020

ID	PATIENT ID	DATE SUBMITTED	TYPE	APPROVAL	
70	21637044511	24/01/2019	Program Variation RMMR Pharmacist Only Review	Granted [Approved]	 <b>Start Claim</b>

- 3) Enter the required data for the claim into the fields displayed (part of form shown below). Please note that the Prior Approval code cannot be edited.



Aged Care Facilities | New Aged Care Facility  
 Test ACF, Service Agreement 01/01/2019 -01/01/2020

#### DETAILS OF SERVICE

Medicare or DVA Number

- 4) Read the declaration and then press the **Submit** button to submit the claim associated with the program variation.



## PROGRAM CLAIMING GUIDES – RURAL PHARMACY MAINTENANCE ALLOWANCE

### Rural Pharmacy Maintenance Allowance

#### How to Submit a RPMA Application

- 1) In order to submit a new application for RPMA you must first register for the Program and this must be approved
- 2) Click on the **View** button to make a claim against the RPMA Program under the relevant Service Provider

QUMAX PHARMACY		
<a href="#">\$ View Remittance Advices</a>	<a href="#">+ Register for New Program</a>	<a href="#">✎ Update Details</a>
PROGRAM NAME	STATUS	ACTION
QUMAX Community Pharmacy	Granted	<a href="#">View</a>
QUM	Granted	<a href="#">View</a>
ATSIPATS	Granted	<a href="#">View</a>
Medscheck	Granted	<a href="#">View</a>
Staged Supply	Granted	<a href="#">View</a>
RPMA	Granted	<a href="#">View</a>

- 3) Once you have clicked on **View**, the following screen will display. Select the **"Application"** tab

[View Applications](#)
[Application](#)

- 4) The RPMA Application form will display (part of form shown below)

RURAL PHARMACY MAINTENANCE ALLOWANCE

[View Applications](#)
[Application](#)

Locality

Allowance Information

Have any of the applicants previously received an RPMA for this Service Provider?

☐ Yes
 ☐ No

- 5) Complete the fields in the RPMA Application form. If you need to return to the application at another time, press the **Save** button. Otherwise, continue filling out the application

## PROGRAM CLAIMING GUIDES – RURAL PHARMACY MAINTENANCE ALLOWANCE

- 6) Once you have completed all fields correctly you will be able to submit the application. Press the **Submit** button
- 7) To see a list of all approved claims, click on the **View Applications** tab. The following screen will appear.

View Applications

Current Claim Status

PERIOD STARTING	PERIOD ENDING	DATE APPROVED	APPLICATION STATUS	MORE INFO	
01/07/2018	30/06/2019	08/01/2019	Granted	Granted	<div> <div> <div>Payment</div> <div>▼</div> </div> </div>

First ◀ 1 ▶ Last

Total number of Programs: 1

Show 10 entries



**CONTACT THE SUPPORT CENTRE:** 1800 951 285 | support@ppaonline.com.au