

EXCEPTIONAL CIRCUMSTANCES

REQUEST FORM

For consideration of a request to be approved outside of regular Program Rules, please complete this form.

Email the completed form, along with any supporting documents, to support@ppaonline.com.au. We will then refer your request to the Department of Health and Aged Care for their consideration. The Exceptional Circumstances process can take up to 30 days to be completed.

What is the name of your Service Provider/Organisation as shown in the PPA Portal?

Please select which PPA Portal Service Provider Organisation Type this request is for:

- S90 Community Pharmacy If S90 pharmacy selected, please enter PBS Approval number:
Is your S90 pharmacy a Single Pharmacist Pharmacy? Yes No
- Sole Trader
- Pty Ltd Company
- CPE/RITA Participant
- Residential Aged Care Home (RACH) If RACH selected, please enter NAPS ID:

What Program(s) does this request relate to?

What month/period is the request for? *Please note for missed claims this is not the month the claim was due for submission but rather the month the services /activities were undertaken.*

How many services/claims is the request for? *Please enter per program for the whole period being requested. See below for some examples of how to answer:*

For DAAs – claims missed for 28 DAA services provided during January for 12 patients

For Staged Supply – claims missed for 20 services in total for 10 patients over a 2 month period

For the ACOP Measure – one claim missed for 20 days worked in July at one RACH, two claims missed for days worked in August (20 days and 31 days) at two RACHs

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The Department of Health and Aged Care defines exceptional circumstances as circumstances that are out of the ordinary, unavoidable or unexpected, and may have affected your ability to make a claim for payment that meets the requirements of the General Terms and Conditions and the relevant Program Rules.

Please provide details of the exceptional circumstances that relate to this request, including dates:

Do you have any supporting evidence? Yes No

If yes, please ensure you attach the supporting evidence (e.g. rosters, medical certificates etc) along with this form in your email to support@ppaonline.com.au.

If yes, please list the evidence attached or write N/A if you answered No to the above question

Only answer the following question if applicable

If you experienced technical difficulties when submitting your claim, please provide further information as to why you believed at the time your claim had been successfully submitted:



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