

# MYNT Billing - Guide for Hospitals

This guide has been prepared for FYDO Hospitals that are also MYNT Billing clients.

## Invoicing

The MYNT Billing team will invoice your private health fund patients two to three times per week. Please note that this excludes uninsured, third party, Workcover and overseas patients (unless requested).

In order for the MYNT Billing Team to generate invoices, the following steps must be completed by staff at your facility:

1. Ensure the Episode Status is **Discharged**

2. Complete Theatre Screen information accurately, including the following information at a minimum;

a. **Anaesthetic Type**

b. **Time In Theatre** and **Time Out Theatre**

c. **Item numbers/Code**

d. **Other Services**, if required, such as prostheses, disposables, surcharges

e. **Theatre Complete** tick box checked

The screenshot displays the MYNT Billing Theatre Screen interface for a patient named POBRY, Georgy. The interface is divided into several sections:

- Appointment Header:** Shows patient details including MRN 128 - POBRY, Georgy, EpiNo. 21, Admission Date/Time 26/09/2025 06:00, Discharge Date/Time 26/09/2025 14:00, Sex Female, FileNo, Dr/Surgeon EYES, Bright, Fund MPL, Speciality Ophthalmologist, and Location Shaes Private Hospital (QLD). Total amount is \$2,568.00.
- Theatre Visits:** Includes fields for Visit to Theatre (No Unplanned Visit to Theatre), ASA Score, Planned Time in Theatre (29 mins), Date (26/09/2025), and various time points: Anaesthetic Start (10:30), Time In Theatre (10:31), Surgical Time Out, Procedure Start, Procedure Finished, and Time Out Theatre (11:00). A dropdown menu for Anaesthetic Type is set to IV/Sedation.
- Theatre Information:** Features a 'Theatre Complete' checkbox (checked), Recovery 1-3, Stage 1-3 Recovery Nurse, Ready for Pickup, Invoice On Hold, Theatre On Hold, Pathology Nil, and # of Specimens.
- Items:** A table listing procedure codes and descriptions:

Code	Description	Band	Action
32229	Removal of one or more polyps during colonoscopy, in association with a service to which item 32222, 32223, 32224...	3	
32222	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient: (a) following a positive faecal occult...	2	
30473	Oesophagoscopy (not being a service to which item 41816 or 41822 applies), gastroscopy, duodenoscopy or...	1	
- Other Services:** A table listing additional services:

Code	Description	Qty	Date of Srv	Send Invoice To	Serial #	Data	Action
SURCH	Surcharge	1	26/09/2025	Patient			
		0					

It is imperative that facility staff ensure the accuracy of this information, as the MYNT Billing team does not have access to medical records to verify.

3. Ensure Episode is Coded and Grouped, by completing the **Diagnosis, Procedure and DRG** sections in the Coding Screen – see [Hospital Coding – FYDO Wiki](#)

APPOINTMENTS > CODING SCREEN \* Total: \$2,568.00 Save & Continue Save Cancel

MRN 128 - **PORGY, Georgy** DOB 07/07/1987 (38) Sex Female File No Fund MPL Location Shaes Private Hospital (QLD)  
 Admission No. 1065 EpiNo. 21 Admission Date/Time 26/09/2025 06:00 Discharge Date/Time 26/09/2025 14:00 Dr/Surgeon EYES,Bright Speciality Ophthalmologist Anaesthetist BROWN,Emmett  
 Procedure Notes Colonoscopy & Gastroscopy Other Notes

**Diagnosis** Documents

Coder: A (Altura) Copy Previous Coding Select Episode Coding on Hold Show Proc Notes

#	Type	Code	Description	Indicator	Action
1	P - Principal Diagnosis	K21.0	Gastro-oesoph reflux dis w oesophagitis	Y - Condition present on admission	X
2	A - Additional Diagnosis	R52.2	Chronic pain	Y - Condition present on admission	X
3	M - Morphology	M88221	Abdominal fibromatosis	Y - Condition present on admission	X
4	E - External cause	W78	Inhalation of gastric contents	Y - Condition present on admission	X
5					X

**Procedure** Show MBS Coding Assist

Anaesthetic Type: IV/Sedation Anaesthetic Type Visit to Theatre: No Unplanned Visit to Theatre

#	Code	Description	Surgeon/Dr	Date	Location	Action
1	13506-00	Gastro-oesophageal balloon tamponade	Eyes, Bright	26/09/2025		X
2	61381-00	Gastric emptying study	Eyes, Bright	26/09/2025		X
3	30473-04	Oesophagoscopy with biopsy	Eyes, Bright	26/09/2025		X
4						X

Save & Continue Save Cancel

**DRG**

DRG Code: G47C Gastroscopy, Minor Complexity MDC: 06 Date Grouped: 03/11/2025 DRG Version: 8.0

Actual Length of Stay: 1 National Average Cost  
 National Length of Stay: National Cost Weight

Run Groupier Download

For many disciplines, coding may be impacted by pathology results, or awaiting doctor verification of items performed. If coding is on hold, please designate a **Theatre on Hold** reason (e.g. Pending Pathology, Awaiting Item Numbers, etc) in the Theatre Screen. (Additional reasons can be added in Settings > Theatre Hold Reasons.)

Appointments | Theatre Screen \* Total: \$2,568.00 Cancel Save & Continue Save & Exit

MRN 128 - **PORGY, Georgy** DOB 07/07/1987 (38) Sex Female File No Fund MPL Location Shaes Private Hospital (QLD)  
 Admission No. 1065 EpiNo. 21 Admission Date/Time 26/09/2025 06:00 Discharge Date/Time 26/09/2025 14:00 Dr/Surgeon EYES,Bright Speciality Ophthalmologist Anaesthetist BROWN,Emmett  
 Procedure Notes Colonoscopy & Gastroscopy Other Notes

**Theatre Visits** Show Proc Notes

Visit to Theatre: No Unplanned Visit to Theatre ASA Score Planned Time in Theatre

Date: 26/09/2025 29 mins

Pre-Op: 10:30 Anaesthetic Type: IV/Sedation  
 Anaesthetic Start: Anaesthetic Type  
 Time In Theatre: 10:31 Complications  
 Surgical Time Out:   
 Procedure Start:   
 Procedure Finished:   
 Time Out Theatre: 11:00

Scrub Nurse: BECKHAM, Victoria Scout Nurse: BROWN, Melanie  
 Nurse/Assistant: CHISHOLM, Melanie Other Nurse/Assistant: HALLIWELL, Geri  
 Surgical Assistant: Other Surgical Assistant:  
 Other Staff: ADUB, Scrub

Notes

**Theatre Information** Theatre Complete

Recovery 1: Stage 1 Recovery Nurse  
 Recovery 2: Stage 2 Recovery Nurse  
 Recovery 3: Stage 3 Recovery Nurse

Ready for Ward: Ready for Pickup  
 Invoice On Hold: Theatre On Hold # of Specimens  
 Pathology Nil: Side  
 Pathology:

**Items**

Code	Description	Band	Action
32229	Removal of one or more polyps during colonoscopy, in association with a service to which item 32222, 32223, 32224...	3	
32222	Endoscopic examination of the colon to the caecum by colonoscopy, for a patient: (a) following a positive faecal occult...	2	
30473	Oesophagoscopy (not being a service to which item 41816 or 41822 applies), gastroscopy, duodenoscopy or...	1	

**Other Services**

Code	Description	Qty	Date of Srv	Send Invoice To	Serial #	Data	Action
SURCH	Surcharge	1	26/09/2025	Patient			
		0					

The MYNT Billing team will run a Billing Status Report for your site, once per week, to identify any episodes that cannot be invoiced and outline the reasons for this (e.g. waiting on coding).

## Rejected Claims

The MYNT Billing team will review rejections daily, and strive to address any rejections within two business days. If we are awaiting information or action from your facility in relation to a rejection, notes will be recorded in the **Financial Notes** tab for the episode.

No.	Adm #	Adm. Date	Dis. Date	Status	Nights	Procedure	Other Notes	Fund	Surgeon	Location
21	1065	26/09/2025	26/09/2025	Discharged	D/O	Colonoscopy & Gastroscopy				
20	1025	09/09/2025	-	Cancelled	-	Right Cat & IOL				
19	1008	29/08/2025	29/08/2025	Discharged	D/O	Right Knee Arthroscopy				
18	961	30/07/2025	30/07/2025	Discharged	D/O	Left Cat & IOL	210CNWET3@168*			
16	882	01/05/2025	01/05/2025	Discharged	D/O	Left Cat & IOL				

Inv #	To	Charge inc GST	Adjustments	Payments	Balance Due	Last Audit Date/Time	Last User Edited
674		\$2,571.00	\$0.00	\$0.00	\$2,571.00	20/08/2025 7:45 AM	

Inv #	To	DOS From	Acc Period	T	Code	Description	Qty	B	Charge inc GST	GST	T	Audit Date	User
674		30/07/2025	20/08/2025	A	ACCOM		1	3	\$0.00	0.00	H	20/08/2025 7:45 AM	
674		30/07/2025	20/08/2025	R	B01C	Gls Unrelated to Principal Diagnosis, Minor Complexity	-		\$2,273.00	0.00	H	20/08/2025 7:45 AM	
674		30/07/2025	20/08/2025	O	AL025	AcrySof Multipiece Models MN60MA, MN60AC	1	6	\$232.00	0.00	H	20/08/2025 7:45 AM	
674		30/07/2025	20/08/2025	O	AL005	DUOVISC VISCOELASTIC SYSTEM	1	6	\$66.00	0.00	H	20/08/2025 7:45 AM	

## Debtors

The MYNT Billing team will be responsible for following up with debtors. A weekly Debtors Report will be sent to the site to outline reasons for any claims outstanding greater than 45 days (e.g. issues with the claim or slower payments - for example some smaller funds, as well as paper-based claims, can take longer to be paid).

## Hospital Health Fund Fees - Importing DRG Fees

FYDO now has the option to import DRG fees from an Excel file.

**It is important to note that the file must be an Excel file, and must be set out in the same way as the sample template below.**

Or click the link below to download a blank template:

[FYDO DRG Import Demo File](#)

**Using the same column titles as can be seen in this spreadsheet example.**

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T
1	DRG	ChargeSD	ChargeIP	CWO	SSTrim	SSFee	LS1From	LS1To	LS1Fee	LS2From	LS2To	LS2Fee	LS3From	LS3To	LS3Fee	TRF	TRFDisc	GST	exclpros	ExcludePrivateRoom
2																				

Column headings need to be:

A - DRG

B - ChargeSD

C - ChargeIP

D - CWO

E - SSTrim

F - SSFee

G - LS1From

H - LS1To

I - LS1Fee

J - LS2From  
K - LS2To  
L - LS2Fee  
M - LS3From  
N - LS3To  
O - LS3Fee  
P - TRF  
Q - TRFDisc  
R - GST  
S - Exclpros  
T - ExcludePrivateRoom

The above layout reflects the content, and order of information, that is displayed in FYDO.



DRG	Secondary	IP Rate	CWO	OS	OS Fee	LS 1	LS 1 To	LS 1 Fee	LS 2	LS 2 To	LS 2 Fee	LS 3	LS 3 To	LS 3 Fee	TRF	TRF Disc	Secondary	IP Rate	CWO	OS	OS Fee	LS 1	LS 1 To	LS 1 Fee	LS 2	LS 2 To	LS 2 Fee	LS 3	LS 3 To	LS 3 Fee	TRF	TRF Disc	GST	Exclude Other Services	Exclude
-----	-----------	---------	-----	----	--------	------	---------	----------	------	---------	----------	------	---------	----------	-----	----------	-----------	---------	-----	----	--------	------	---------	----------	------	---------	----------	------	---------	----------	-----	----------	-----	------------------------	---------

**If the file is not formatted in this way, with the exact column titles, the data will not be able to be imported into FYDO, or will upload into the wrong fields.**

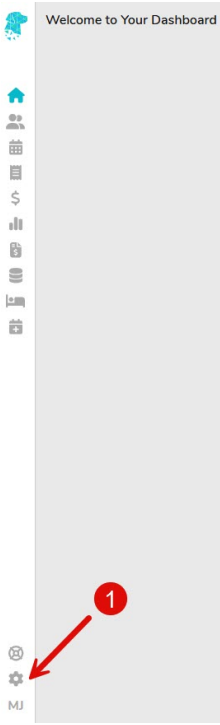
## How to Format an Excel File for DRG Upload

Data from a Health Fund contract can be transferred into the relevant columns of the template, or a copy of a contract can be modified using the following steps:

1. Save a copy of the contract (do not edit the master copy)
2. Go to DRG tab or section in the contract
3. Remove any lines above the DRG header table so that there is only one header row
4. Delete any columns that do not contain the required information as per the images above
5. Ensure the names and order of all columns and the header row match the template exactly

## How to Upload DRG File into FYDO

1. Go to **Settings** & select **Fees Setup**



2. Choose your location from the dropdown menu (only applicable to multi-site users)
3. Select required **Fund**
4. Ensure **Same Day Fees** tab is selected and Click **Edit**

Current Fees				Old Fees		
Band	Full Fee	Basic Fee	Full Fee Rebate	Full Fee	Basic Fee	Full Fee Rebate
1	100.00	100.00	100.00	100.00	100.00	100.00
2	200.00	200.00	200.00	200.00	200.00	200.00
3	600.00	600.00	600.00	600.00	600.00	600.00
4	400.00	400.00	400.00	400.00	400.00	400.00
C	100.00	100.00	100.00	100.00	100.00	100.00

Current Fees				Old Fees	
Band	Full Fee	Full Fee Rebate	Full Fee	Full Fee Rebate	
1A	100.00	100.00	100.00	100.00	
1	150.00	150.00	150.00	150.00	
2	200.00	200.00	200.00	200.00	
3	900.00	900.00	900.00	900.00	
4	400.00	400.00	400.00	400.00	
5	500.00	500.00	500.00	500.00	
6	600.00	600.00	600.00	600.00	
7	700.00	700.00	700.00	700.00	
8	800.00	800.00	800.00	800.00	
9A	0.00	0.00	0.00	0.00	

5. Update **Start of Current Fee** and **End of Current Fee** dates
6. Click **Save**

Current Fees				Old Fees		
Band	Full Fee	Basic Fee	Full Fee Rebate	Full Fee	Basic Fee	Full Fee Rebate
1	100.00	100.00	100.00	100.00	100.00	100.00
2	200.00	200.00	200.00	200.00	200.00	200.00
3	600.00	600.00	600.00	600.00	600.00	600.00
4	400.00	400.00	400.00	400.00	400.00	400.00
C	100.00	100.00	100.00	100.00	100.00	100.00

Current Fees				Old Fees	
Band	Full Fee	Full Fee Rebate	Full Fee	Full Fee Rebate	
1A	100.00	100.00	100.00	100.00	
2	200.00	200.00	200.00	200.00	
3	900.00	900.00	900.00	900.00	
4	400.00	400.00	400.00	400.00	
5	500.00	500.00	500.00	500.00	
6	600.00	600.00	600.00	600.00	
7	700.00	700.00	700.00	700.00	
8	800.00	800.00	800.00	800.00	
9A	0.00	0.00	0.00	0.00	

7. Click **DRG Fees** tab

8. Click **Edit**

DRG	Same Day Rate	IP Rate	CWO	SS Trim	SS Fee	LS 1 From	LS 1 To	LS 1 Fee	LS 2 From	LS 2 To	LS 2 Fee	LS 3 From	LS 3 To	LS 3 Fee	TFR Trim	TFR Disc	Same Day Rate	IP Rate	CWO	SS Trim	SS Fee	LS 1 From	LS 1 To	LS 1 Fee	LS 2 From	LS 2 To	LS 2 Fee	LS 3 From
C08Z	1,500.00	3,000.00	0.00	0	0.00	0	0	0.00	0	0	0.00	0	0	0.00	0	0.00	1,500.00	3,000.00	0.00	0	0.00	0	0	0.00	0	0	0.00	0

9. Click **More Actions** and select **Click to move all Current fees to Old** and follow instructions – *this step is optional, however it is recommended as it ensures that episodes prior to the new contract dates are billed at the appropriate rates, otherwise all unbilled episodes will be billed at the newly loaded rates*

10. Click **Save**

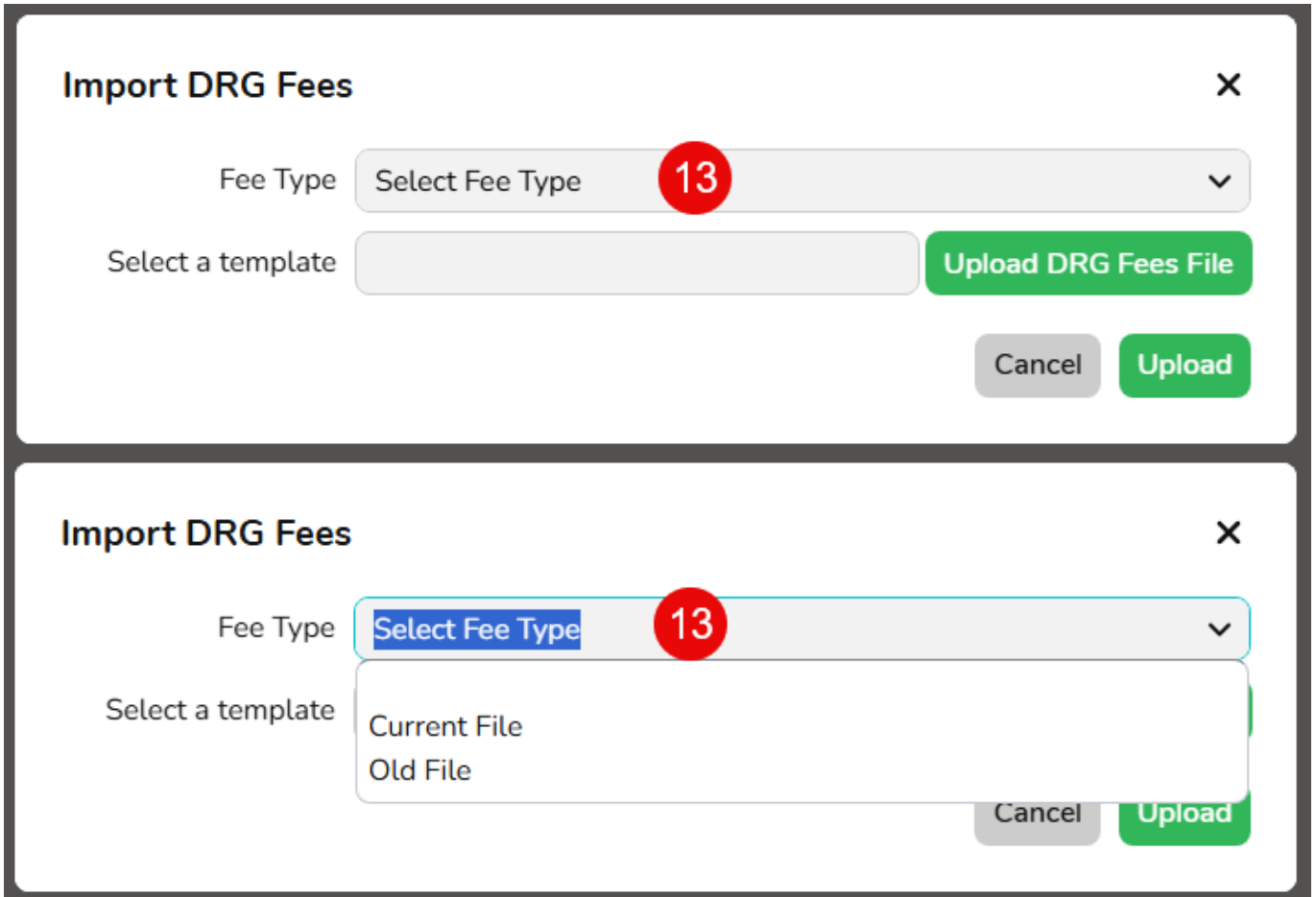
DRG	Same Day Rate	IP Rate	CWO	SS Trim	SS Fee	LS 1 From	LS 1 To	LS 1 Fee	LS 2 From	LS 2 To	LS 2 Fee	LS 3 From	LS 3 To	LS 3 Fee	TFR Trim	TFR Disc	Same Day Rate	IP Rate	CWO	SS Trim	SS Fee	LS 1 From	LS 1 To	LS 1 Fee	LS 2 From	LS 2 To	LS 2 Fee	LS 3 From
C08Z	1,500.00	3,000.00	0.00	0	0.00	0	0	0.00	0	0	0.00	0	0	0.00	0	0.00	1,500.00	3,000.00	0.00	0	0.00	0	0	0.00	0	0	0.00	0

11. Click **Edit**

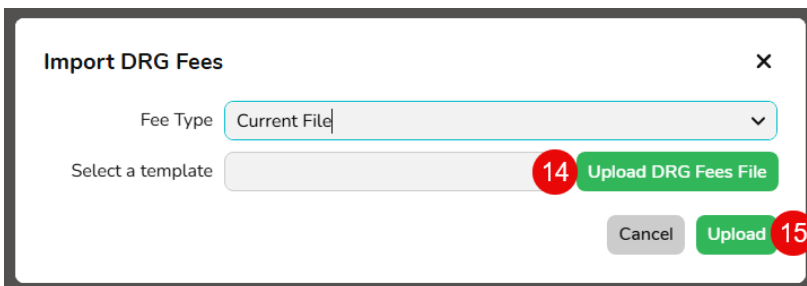
12. Click **More Actions** and select **Import Fees**

DRG	Same Day Rate	IP Rate	CWO	SS Trim	SS Fee	LS 1 From	LS 1 To	LS 1 Fee	LS 2 From	LS 2 To	LS 2 Fee	LS 3 From	LS 3 To	LS 3 Fee	TFR Trim	TFR Disc	Same Day Rate	IP Rate	CWO	SS Trim	SS Fee	LS 1 From	LS 1 To	LS 1 Fee	LS 2 From	LS 2 To	LS 2 Fee	LS 3 From
C08Z	1,500.00	3,000.00	0.00	0	0.00	0	0	0.00	0	0	0.00	0	0	0.00	0	0.00	1,500.00	3,000.00	0.00	0	0.00	0	0	0.00	0	0	0.00	0

13. Click **Fee Type** and select **Current File**



14. Click **Upload DRG Fees File** and locate the relevant Excel file to be uploaded
15. Click **Upload**



16. DRG items and fees will populate into the DRG Fees tab
17. Click **Save**
18. Select **Print** to print or download, then **conduct a spot check with the contract to ensure fees have populated correctly**

**Note:** *If a DRG no longer exists in the new fees, but there was an old rate, the line will remain in the fees screen and Current will show as \$0 (Old will show the previous rate). If a DRG has a zero-dollar balance under the Current fees AND the Old fees, FYDO will automatically remove this line from the fees page, as it is no longer required.*

# Adding MBS Item Numbers - Hospital

Adding or amending an MBS item in FYDO for the purpose of updating descriptions, adding facility specific cosmetic codes or removing items that are no longer needed.

The item numbers are updated in FYDO with each National Procedure Bandings Update.

Facilities will be responsible for updating the Theatre Band (State) according to their relevant contracts.

1. Go to **Settings**
2. Select **Items** from the General menu

Item #	Description	Category	Group	Sub Group	National Band	State Band	Day type	Rule	Status
30473	Oesophagoscopy (not being a service to which item 41816 or 41822 applies), gastroscopy, duodenoscopy or p...	Category 3	TB	1	1	1	B	Surgical	Active
30478	Oesophagoscopy (other than a service to which item 41816, 41822 or 41825 applies), gastroscopy, duodenos...	Category 3	TB	1	1	1	B	Surgical	Active
31456	Gastroscopy and insertion of nasogastric or nasoenteral feeding tube, where blind insertion of the feeding tube...	Category 3	TB	1	1	1	B	Surgical	Active
31458	Gastroscopy and insertion of nasogastric or nasoenteral feeding tube, where blind insertion of the feeding tube...	Category 3	TB	1	1	1	B	Surgical	Active

3. **Add all MBS Codes** will update all items in your FYDO system according to the current National Procedure Bandings.
4. Use the **filters** to search specific categories or groups etc
5. Use the **Show Inactive** tick box to view any items that have been made inactive in the database
6. Use the **Export To** option to export the list that is shown on the screen to an Excel spreadsheet
7. Use the **Search** field to find a specific item number or key word to determine if the item is already in the system. *All items that include the searched information in the description will also appear*
8. If the required item number displays, **double click** anywhere on the line to open the information
9. If the required item number doesn't appear, and it needs to be added, click **Add Item**

Item Details

10 Number  
11 Procedure Name  
12 Notes  
13 Link Procedures

14 Category  
15 Item Type  
17 Modal  
18 Rule  
19 100% rebate  
20 R-Type  
21 Stock Item  
22 Ask Quantity

Classifications - Hospital

23 Theatre Band (National)  
Theatre Band (State)  
Day Type  
Patient Class  
DWA Accommodation

24 Same Day Accom Band 1 Override  
25 Accom Item  
26 Eclips Code Mapping  
27 Item Excluded From PSG  
28 Miscellaneous/ADA code  
29 Timebase  
29 Submit as DRG

30 Save

10. Add the item number, or desired code, into the **Number NB**. *This field will never be editable after it has been created & saved*
11. Add the description for the item into the **Procedure Name** *(The Number & Procedure Name fields are both mandatory fields that are required to add an item)*

12. The **Notes** field is available for any notes that may be required that relate to the item. It has no effect on how the item number is billed or displayed & can only be seen by navigating to this screen
13. **Linked Procedures** give the ability to add ICD procedure code base items to link to this item number. This can make coding the ICD procedures easier. (Hovering over the for the explanation of this field at any time)
14. **Category, Group & Sub Group** are fields that will pre-populate when a real MBS item number is added. FYDO will look up all these values, from the MBS Schedule, and import them. These values will be updated whenever a new MBS update is loaded & there is no need to edit these manually
15. **Item Type** is a field that can help categorise the item being entered. (*NB. These Item Types can be added by going to **Settings, Item Types** & clicking **Add Item Type***). This field allows the user to allocate items to a group (e.g., cardiology, consults etc) and to run reports on the items that are grouped together by the category
16. **Qty on Hand** can be used in conjunction with the item type
17. **Modal** is not required for hospitals (*this is a clinic related field*)
18. **Rule** is used to determine the rules to apply step downs etc for doctor billing
19. **100% Rebate** is to be ticked when the Medicare benefit is 100%, rather than 85% for in room services and is only applicable for doctor billing
20. **R-Type** is to be ticked if the item requires a referral. NB. This only relates to radiology/imaging items for doctor billing
21. **Stock Item** is not required for hospitals (*this is a clinic related field*)
22. **Ask Quantity** is not required for hospitals (*this is a clinic related field*)
23. Use the following to ensure the item is classified correctly, according to the relevant banding & accommodation types:
  - Theatre Band (National) - *will be updated by FYDO automatically*
  - Theatre Band (State)
  - Day Type - *will be updated by FYDO automatically*
  - Patient Class - *will be updated by FYDO automatically*
  - DVA Accommodation
24. Tick **Same Day Accom Band 1 Override** if the item number can only have a band 1 accommodation billed in conjunction with it, regardless of the anaesthetic type or length of procedure
25. Tick **Accom Item** if the item being entered is required to be billed as an accommodation fee, as per the health fund contract
26. Tick **Eclipse Code Mapping** if the code being entered requires mapping to be able to be sent via Eclipse for billing. E.g., COL1, PKG38 or D001
27. Tick **Item Excluded from PSG** to exclude the item from the IHC PSG/MSG segment when being sent via eclipse. E.g., for NIB endoscopy claims
28. Tick **Miscellaneous/ADA Code** if the item is required to show in the Miscellaneous code section for data submission, instead of in the MBS code section. Commonly used for dental codes
29. Tick **Timebase** if this item is required to be billed according to the time it takes. Ticking this box will alert the system to look in the Timebase Fees set up for the chargeable fee
30. Click **Save**
31. To **Deactivate** an item number, follow steps 1-4 above & click **Edit**
32. Un-tick the **Active** box & the word will change to **Inactive**
33. Click **Save**
34. To **Re-Activate** an item, simply tick the **Inactive** box again & click **Save**
35. To remove an item number all together click on the Blue Drop Down Arrow on the right of the screen (*as seen in the first image above*) and click **Delete item**

36. You will be asked to confirm that you want to delete the item. Click **Yes**

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## **Hospital Invoicing / Billing an Episode - Simple**

Once the episode is complete, an invoice can be raised to a health fund or patient.

For an invoice to be raised, the episode needs to be:

- Admitted
- Discharged
- Theatre Complete tick box checked (*depending on the facility requirements*)
- Coding Grouped (*depending on the facility requirements*)

1. Open the **Appointments Screen** and locate the required episode
2. **Right Click** to reveal the menu & select **Create Invoice**

**Appointments** 3 Patients | 180 of 600 minutes Search for patient... Friday, 29 Aug 2025

ADMISSIONS DAY PROGRAM THEATRE 1 **THEATRE 2** THEATRE 3

Time	Name	MRN	Procedure
06:00			
06:15			
06:30			
06:45			
07:00	DREAM, Day	164	Left Knee Arthroscopy
08:00	SWAGGER, Bob Lee	154	
09:00	STEWART, Alfred	110	
10:00			
10:15			
10:30			
10:45			
11:00			
11:15			
11:30			
11:45			
12:00			
12:15			
12:30			
12:45			
13:00			
13:15			
13:30			
13:45			
14:00			
14:15			
14:30			
14:45			
15:00			

1

2

- Make an Appointment
- Create from Waitlist
- Edit Appointment
- Copy / Cut / Paste / Delete
- Episodes
- Documents
- Chart Tracking
- OEC
- IFC
- Send SMS
- Confirmed
- Arrived
- Admit
- Excess / Deposit
- Theatre
- Discharge
- Coding
- Create Invoice
- Rehab Screen
- Check List
- Inpatient
- Certificate
- Clinical Indicators
- Print Chart Label
- Print Wristband
- Quick Form
- HC21
- Create Letter

3. The **Create Invoice** page will display with the following necessary information:

APPOINTMENTS > CREATE INVOICE

MRN 164 - DREAM, Day EpiNo. 10 DOB 15/04/1926 (99) Sex Male FileNo Discharge Date/Time 29/08/2025 18:00 Dr/Surgeon TOE, Foot Fund AHM Speciality Surgeon Location Shaes Private Hospital (QLD) Anaesthetist STARR, Ringo

Admission No. 1004 Procedure Notes Left Knee Arthroscopy Other Notes

Send Invoice To AHM - Australian Health Management Group Limited Claim Details Time Theatre In 10:00 Out 11:00 60 min

Billing Type Default Accommodation Type Accom - Advanced Surgical Program Number

Status Full Fee Anaesthetic General Anaesthetic Mode Of Separation Other (includes discharge to usual residence)

Item	Description	Date of Procedure	Band	Band Type	Session	Action
49536	Knee, repair or reconstruction of, for chronic instability (open or arthroscopic, or both) involving either cruciate or collateral ligaments, including notchplasty when performed, not being a service associated with any other arthroscopic procedure of the knee. (Anaes.)	29/08/2025	5	National	1	X

Item	Description	Qty	Date of Service	Type	Bill To	Action
AB009	BioGlue Surgical Adhesive - Syringe 10cm Extender	1	29/08/2025		Health Fund	X
AB009	BioGlue Surgical Adhesive - Syringe 10cm Extender	1	29/08/2025		Health Fund	X

Financial Notes

Episode Notes

5 Proceed to see charges Cancel

- All patient information specific to the episode
- Billing information including:
  - Billing Type
  - Theatre Times
- Procedure Items being billed (*drawn from Theatre Screen if entered*)
- Other Services being billed (*drawn from Theatre Screen if entered*)
- The **Bill To** feature allows other services to be billed to the patient or a third-party company, even if the main invoice is being billed to a health fund. Selecting **Patient** from this dropdown will create a separate invoice/invoice number for the patient account
- The **Financial Notes & Episodes notes** fields will reflect notes that have been entered into the patients' Episodes screen.
- As long as all required information has been previously entered into the **Theatre Screen**, there should be few reasons that anything on the Create Invoice page needs to be amended
- Click **Proceed to see charges**

- The invoice information is displayed, including:
  - Accounting Period (That the revenue will be applied to)
  - Bill Type
  - ECLIPSE transmission status
- The **Accommodation** charges will be shown
- The **Theatre & Other Services Charges** will be displayed
- GST** can be amended with a **Right Click** in the **GST Field**
- Custom **Invoice Messages** are able to be added. (*Invoice Message Templates can also be added in **Settings > Invoice / IFC Messages**, so that they can easily be selected from the dropdown list*)
- Invoice template can be selected
- Print & Save** can be selected when the invoice isn't able to be sent via ECLIPSE & the user requires a printed or PDF copy of the invoice
- Save** can be selected when the invoice **is** able to be transmitted electronically via ECLIPSE & the user does not require a hard copy of the invoice

Once the user has selected Save for an invoice that can be transmitted electronically via ECLIPSE, they will then need to send this invoice by following the FYDO wiki instructions

[Claiming Hospital - Not Yet Sent](#)

For a more detailed explanation of FYDO invoicing please see:

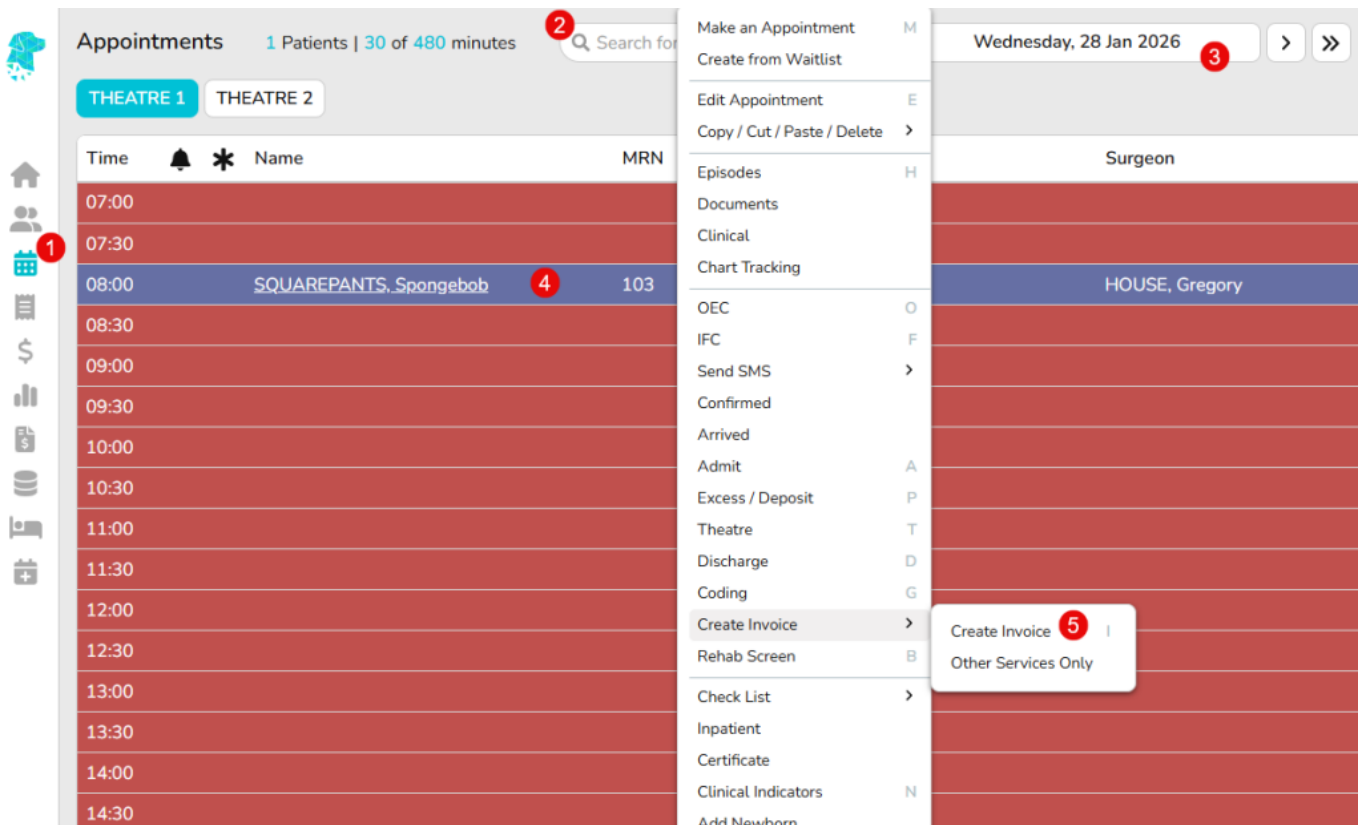
# [Hospital Invoicing / Billing an Episode - Detailed](#)

Once the episode is complete, an invoice can be raised to a health fund or patient. For an invoice to be raised, the episode needs to be **Admitted & Discharged**. Depending on the requirements that the facility has stipulated in **System Configuration**, the **Theatre Complete** tick box may need to be ticked in order to confirm the item numbers are correct for billing. And the episode may need to be **Grouped** in order for billing to be able to be done.

A simple invoicing & billing explanation can be found at:

[Hospital Invoicing / Billing an Episode - Simple](#)

1. Navigate to the **Appointments Screen**
2. Use the **Search** field to locate the required episode or
3. Use the **Calendar** to select required date & **Theatre Tabs** to select required theatre
4. Locate required episode & **Right Click** to reveal the menu
5. Select **Create Invoice**



6. The **Create Invoice** page will display with the following necessary information:

APPOINTMENTS > CREATE INVOICE

MRN 103 - SQUAREPANTS, Spongebob a      DOB 19/05/2005 (20)      Sex Male      FileNo      Fund MPL      Location Claires Private Hospital (QLD)

Admission No. 5      EpiNo. 1      Admission Date/Time 28/01/2026 07:30      Discharge Date/Time 28/01/2026 09:00      Dr/Surgeon HOUSE, Gregory      Speciality Surgeon      Anaesthetist

Procedure Notes Colonoscopy      Other Notes

b Send Invoice To: MPL - Medibank Private Limited      c Claim Details      d Time Theatre In: 08:00      Out: 08:30      30 min

e Billing Type: Default      f Accommodation Type: Accom - Medical      Program Number

g Status: Full Fee      h Anaesthetic: IV/Sedation      Anaesthetic: None      i Mode Of Separation: Other (includes discharge to usual)

j  Re-order Item Numbers

Item	Description	Date of Procedure	Band	Band Type	Session	Action
42702	Lens extraction and insertion of intraocular lens, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye (Anaes.)	28/01/2026	6	National	1	<span style="color: red;">x</span>
					1	<span style="color: red;">x</span>

Item	Description	Qty	Date of Service	Type	Bill To	Action
AL005	DUOVISC VISCOELASTIC SYSTEM	1	28/01/2026	Prostheses	Health Fund	<span style="color: red;">x</span>
AL025	AcrySof Multipiece Models MN60MA, MN60AC	1	28/01/2026	Prostheses	Health Fund	<span style="color: red;">x</span>
GAP	Gap payment	1	28/01/2026	Other	Patient	<span style="color: red;">x</span>
		1				<span style="color: red;">x</span>

Financial Notes

Episode Notes

8 Proceed to see charges Cancel

- a. All patient information specific to the episode
  - b. The health fund being invoiced
  - c. **Billing Type** can usually be left as default. This allows FYDO to review the fees entered for the health fund & bill accordingly by **Casebase, Per Diem** or **DRG**
  - d. The Status of the invoice being billed: either Full Fee or Basic Fee
  - e. The Accommodation Type
  - f. The anaesthetic type being billed
  - g. The theatre times that the invoice will be based on
  - h. The Mode of Separation
  - i. The items being billed
  - j. The **Other Services** being billed
  - k. The **Re-order Item Numbers** tick box allows users to keep the item numbers in the order they have been entered in. However, if this box is checked, then FYDO will order the item numbers from highest to lowest banding
  - l. The **Bill To** feature allows other services to be billed to the patient or a third-party company, even if the main invoice is being billed to a health fund. Selecting **Patient** from this dropdown will create a separate invoice/invoice number for the patient account
  - m. The **Financial Notes** & **Episodes notes** fields will reflect notes that have been entered into the patients' Episodes screen.
7. As long as all required information has been previously entered into the **Theatre Screen**, there should be few reasons that anything on the Create Invoice page needs to be amended
8. Click **Proceed to see charges**

APPOINTMENTS > CREATE INVOICE

MRN 103 - SQUAREPANTS, Spongebob      DOB 19/05/2005 (20)      Sex Male      FileNo      Fund MPL      Location Claires Private Hospital (QLD)

Admission No. 5      EpiNo. 1      Admission Date/Time 28/01/2026 07:30      Discharge Date/Time 28/01/2026 09:00      Dr/Surgeon HOUSE, Gregory      Speciality Surgeon      Anaesthetist

Procedure Notes Colonoscopy      Other Notes

Send Invoice To: MPL - Medibank Private Limited      Accounting Period: 28/01/2026      Bill Type: Per Diem       Send via ECLIPSE      Patient Cat: D/O

Dates: 28/01/2026 - 28/01/2026      Start At Day: 1      Mins in Theatre: 30 mins      Anaesthetic: IV/Sedation      NHTP: No      Mode of Separation: Other (includes discharge to usual residence)

**Accommodation**

From	To	Days	Description	Fee inc GST	GST	CC	Program#	BedType	Adm	Accom	Dis
28/01/2026	28/01/2026	1	SameDay Accommodation Fee Band : 3	600.00	0.00	CC		Shared	Same Day	Shared Room	Discharged

**Theatre and Other Charges**

From	T	Code	Description	Qty	Band	Fee inc GST	GST	Action
28/01/2026	T	42702	Lens extraction and insertion of intraocular lens, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye (Anaes.)	1	6	600.00	0.00	X
28/01/2026	O	AL005	DUOVISC VISCOELASTIC SYSTEM	1	6	66.00	0.00	X
28/01/2026	O	AL025	AcrySof Multipiece Models MN60MA, MN60AC	1	6	232.00	0.00	X
28/01/2026	O	GAP	Gap payment	1	7	1,800.00	0.00	X

Invoice Message

Total Charges: \$3,298.00  
Total GST: \$0.00  
Total Deposits/Payments: \$0.00  
Balance: \$3,298.00

Template: Invoice-Hospital                       

9. The **Accounting Period** date, which the revenue will be applied to, is displayed. *(The default date that is selected in this field is set in Settings > System Configuration)*
10. The **Bill Type** that has been used will be displayed
11. The invoice's ability to be transmitted via ECLIPSE will be shown with the tick box
12. The **Accommodation** charges will be displayed
13. The **Theatre & Other Services Charges** will be displayed
14. **GST** will be displayed if the fees for that item have been set up to include GST. Otherwise, users are able to calculate the GST amount by **Right Clicking** in the **GST Field**
15. Custom **Invoice Messages** are able to be added & the user is able to type the required messages. However, Invoice Message Templates can also be added in Settings > Invoice / IFC Messages so that they can easily be selected from the dropdown list
16. FYDO allows for multiple Invoice Templates to be added. A default template can be set, but if another template is required, it can be selected from the Template dropdown
17. **Print & Save** can be selected when the invoice isn't able to be sent via ECLIPSE & the user requires a printed or PDF copy of the invoice
18. **Save** can be selected when the invoice **is** able to be transmitted electronically via ECLIPSE & the user does not require a hard copy of the invoice

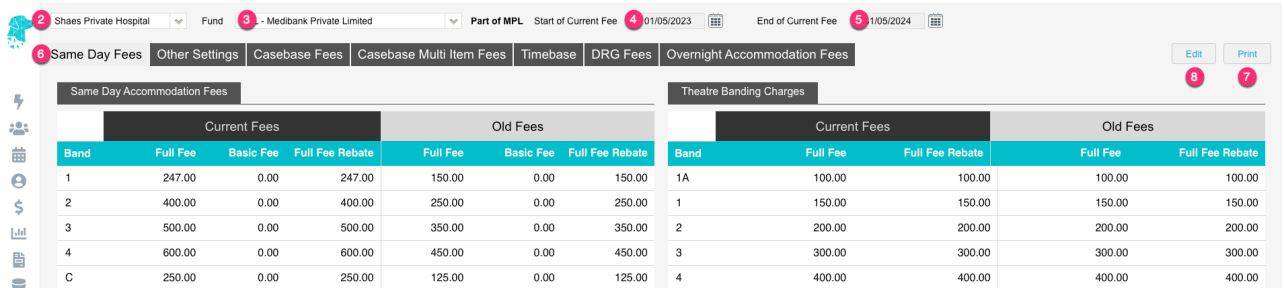
Once the user has selected Save for an invoice that can be transmitted electronically via ECLIPSE, they will then need to send this invoice by following the FYDO wiki instructions [Claiming Hospital - Not Yet Sent](#)

## [Hospital Health Fund Fees - Same Day Fees](#)

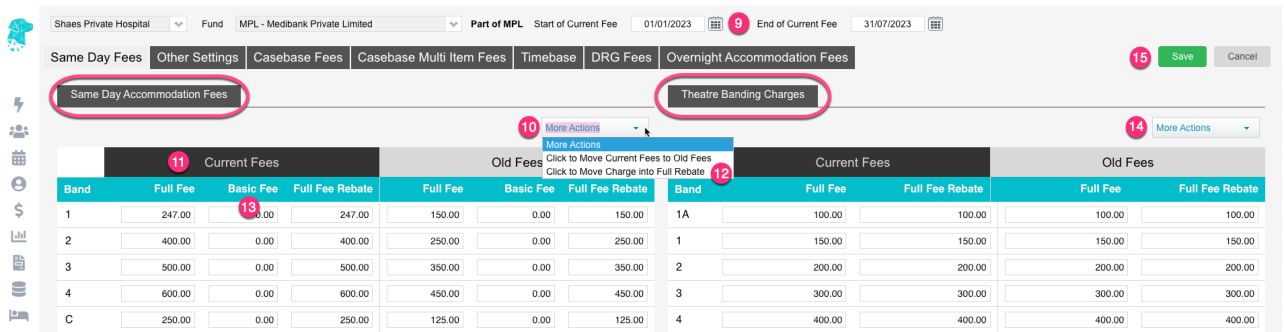
# Set Up

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

## 1. Fees can be entered in **Settings > Hospital > Fees Setup**



- For multi location databases, ensure the correct **Location** is selected
- Use the **Fund** drop down to select the required health fund
- The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees**
- The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. *(This date isn't mandatory. However, it is a good way to ensure accounts aren't accidentally billed at outdated prices)*
- The **Same Day Fees** tab contains the **Same Day Accommodation Fees** and the **Theatre Banding Charges**
- Users are also given the ability to **Print** the health fund fees, for the selected fund
- To edit these fees, click the **Edit** button



- Once in edit mode, you will be able to amend the **Start of Current Fee & End of Current Fee** dates to indicate when the new contract fees apply
- Use the **More Actions** drop down to **Click to Move Current Fees to Old Fees** **before the new fees are entered**. This will replicate all the current accommodation fees into the **Old Fees** columns
- Enter the new fees in the **Full Fee** column for the corresponding bands. *(C is for Type C procedures)*
- Once all Full Fees are entered, use the **More Actions** dropdown, and select **Click to Move Charge into Full Rebate**. This will copy all fees from the **Full Fee** column over into the **Full Fee Rebate** *(Do not do this step for un-insured fees or for other 'funds' that don't attract a rebate)*
- Depending on the contract agreement, facilities may need to add the **Full Fee** amount into the **Basic Fee** column. This can easily be done by using the **More Actions** drop down.
- Repeat the same steps 10 > 12 for the **Theatre Banding Charges** on the right side of the screen

15. Click **Save**

For further information on how to set up fees, please visit our pages:

[Other Settings](#)

[Casebase Fees](#)

[Casebase Multi Fees](#)

[DRG Fees](#)

[Overnight Accommodation Fees](#)

## [Hospital Health Fund Fees - Other Settings](#)

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The **Other Settings** tab allows the entry of the **Banding Percentages Breakdown**, along with more specific information regarding health fund contracts.

For more information on adding **Same Day Fees**, please see our page

[Hospital Health Fund - Same Day Fees Setup](#)

The screenshot shows the 'Other Settings' tab in the system. The top navigation bar includes 'Same Day Fees', 'Other Settings' (highlighted with a red circle 6), 'Casebase Fees', 'Casebase Multi Item Fees', 'Timebase', 'DRG Fees', and 'Overnight Accommodation Fees'. The main content area is divided into three sections:

- Left Panel (Red Circle 8):** Configuration options for Case/DRG - Crossover Threshold Charge Fee on Admission, PerDiem - Crossover Threshold Charge Fee on As Is, Order items by Band then MBS Price, Preferred Billing Method Default, Leave Period Append (to the end), Rounding at the Item Level Round to nearest, Round To 0.05, DRG IP Rate Threshold > SS Trim, and Exclude Sameday Rate. Below these are several checkboxes for Theatre Fees, Casebase rates, Multiple Item Rule, Charge Accom when Transferred to Another Hospital, Fund Rebate for Other Services when on Basic Cover, Charge GST when billing Per Diem, Add Private Room line on the Invoice (overnight only), Charge shared room rates (overnight only), When Type C - Charge Theatre fees, and When Type C - Ignore Type C accom fee.
- Top Right (Red Circle 7):** 'Edit' and 'Print' buttons.
- Right Panel (Red Circle 9):** 'Theatre Banding Percentages' table with columns 'Current' and 'Old'.
- Bottom Right (Red Circle 10):** 'Casebase Banding Percentages' table with columns 'Current' and 'Old'.
- Bottom Right (Red Circle 11):** 'Miscellaneous Fees' table with columns 'Current' and 'Old'.

	Current	Old
1st Procedure	100.00	100.00
2nd Procedure	33.00	50.00
3rd Procedure	20.00	40.00
4th Procedure +	20.00	30.00

	Current	Old
1st Casebase	100.00	100.00
2nd Casebase	33.00	100.00
3rd Casebase	20.00	100.00
4th Casebase +	20.00	100.00

	Current	Old
Private Room	0.00	0.00
Patient Contribution (NHTP)	0.00	0.00
Boarder Day Rate (inc GST)	0.00	0.00
Out Patient	0.00	0.00
Dental Multiple Rule	0.00	0.00

1. Fees can be entered in **Settings > Hospital > Fees Setup**

2. For multi-location databases, ensure the correct **Location** is selected

3. Use the **Fund** drop down to select the required health fund

4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (*See Same Day Fee Instructions to amend these dates*)

5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory. However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)

6. Select the **Other Settings** tab

7. Click **Edit**
8. Enter all details relevant to the particular contract (*hover over the for further details & information pertaining to the relevant field*)
9. Enter the **Theatre Banding Percentages** to ensure the system calculates the percentage breakdown of the subsequent theatre items correctly. If there are old fees entered, ensure that the percentage breakdown is also entered in the **Old** column
10. Enter the **Casebase Banding Percentages** to ensure the system calculates the percentages breakdown for subsequent casebase items correctly. If there are old fees entered, ensure that the percentage breakdown is also entered in the **Old** column
11. Enter all **Miscellaneous Fees** relevant to the particular contract
12. Click **Save**

For further information on how to set up fees, please visit our pages:

[Casebase Fees](#)

[Casebase Multi Fees](#)

[DRG Fees](#)

[Overnight Accommodation Fees](#)

## [Hospital Health Fund Fees - Casebase Fees](#)

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The Casebase Fees tab allows the entry of any contracted All Inclusive Procedure Fees.

For more information on adding Same Day Fees, please see our page

[Hospital Health Fund Fees - Same Day Fee Set Up](#)

1. Fees can be entered in **Settings > Hospital > Fees Setup**

The screenshot displays the 'Casebase Fees' configuration screen. At the top, there are fields for 'Fund' (U/- Un-Insured Accounts), 'Start of Current Fee' (01/01/2024), and 'End of Current Fee' (31/12/2025). Below these are tabs for 'Same Day Fees', 'Other Settings', 'Casebase Fees', 'Casebase Multi Item Fees', 'Timebase', 'DRG Fees', and 'Overnight Accommodation Fees'. The 'Casebase Fees' tab is active. The main area contains a table with columns for 'Current' and 'Old' fee details. The table has 17 columns: MBS, Casebase, Procedure, Type, DVA, Outlier Days, Outlier Rate, Casebase, Procedure, Type, DVA, Outlier Days, Outlier Rate, Ignore StepDown, GST, Exclude Other Services, and Exclude Private Room. The table contains several rows of fee data, with a 'Save' button at the bottom right.

2. For multi-location databases, ensure the correct **Location** is selected

3. Use the **Fund** drop down to select the required health fund
4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (*See Same Day Fee Instructions to amend these dates*)
5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory. However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
6. Select **Casebase Fees** tab
7. Click **Edit**
8. If entering an amended contract, use the **Actions** dropdown to select **Move to Old Charge before the new fees are entered**. This will replicate the Current fees across to the Old Fees columns
9. Use the bottom row to **add new items**
10. Use the **X** to remove any items that are no longer required
11. Enter the item number in the **MBS** column
12. Enter the casebase fee, listed in the contract, in the **Casebase** column
13. If there is a procedure fee associated with the item number, it can be entered into the **Procedure** column
14. Select the relevant **Type** for the item being added.  
*Standard will prompt FYDO to bill just the fee documented in the Casebase column & no accommodation fee will be added*  
*PerDiem-Proc will add the relevant accommodation fee to the procedure fee*  
*PerDiem-Case will add the relevant accommodation fee to the casebase fee*
15. The **DVA** column is where the DVA codes are added (e.g. the "**H**" codes etc.). NB. All DVA items, with an associated item number, will need to be entered with the item number in the MBS column & will need to be billed using the MBS item number. FYDO will then send the associated DVA code via ECLIPSE to ensure claims are transmitted successfully
16. Enter the outlier days, listed in the contract, in the **Outlier Days** column
17. Enter the outlier fee, listed in the contract, in the **Outlier Rate** column
18. Tick **Ignore Step down** if facilities wish to ensure certain fees are not subject to the usual percentage breakdown and are calculated at 100%, even when the item is performed as a secondary or subsequent procedure.
19. Tick the **GST** box if the fee that has been entered is **inclusive of GST**
20. Tick the **Exclude Other Services** box if the other services/prosthesis are unable to have a charge raised when billed with the item number. E.g., If a contract stipulates that any prosthesis used is included in the casebase fee. *NB for this function to work, each applicable prosthesis code will need the **Exclude fee when billing** tick box ticked.*
21. Tick **Exclude Private Room** if hospitals are unable to charge for a private room add-on for certain admissions, while still allowing the private room add-on charge to be applied to all other Case Base or DRG fees.
22. Once all details have been entered click **Save**

For further information on how to set up fees, please visit our pages:

[Other Settings](#)

[Casebase Multi Fees](#)

[DRG Fees](#)

[Overnight Accommodation Fees](#)

# Hospital Health Fund Fees - Casebase Multi Item Fees

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The Casebase Multi Item Fees tab allows the entry of any contracted All Inclusive Package Fee for more than one item number. For example, a bundled fee for a colonoscopy & gastroscopy together.

For more information on adding Same Day Fees, please see our page

[Hospital Health Fund Fees - Same Day Fees Set Up](#)

Current										Old								
MBS	MBS	MBS	MBS	MBS	Casebase	Type	Code	Fee	DVA	Casebase	Type	Code	Fee	DVA	Exclude Other Services	Exclude Private Room	GST	Action
					0.00	Bulk		0.00		0.00	Bulk		0.00					

1. Fees can be entered in **Settings > Hospital > Fees Setup**
2. For multi location databases, ensure the correct **Location** is selected
3. Use the **Fund** drop down to select the required health fund
4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (*See Same Day Fee Instructions to amend these dates*)
5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory. However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
6. Select the **Casebase Multi Item Fees** tab
7. Click **Edit**
8. If entering amended prices, use the **Actions** dropdown to select **Move to Old Charge**, so that the fees listed in the current contracted fees can be moved into the **Old** fees fields, before they are updated
9. Enter the item numbers that coincide with the case base fee in the **MBS** columns
10. Enter the casebase fee amount in the **Casebase** column
11. Leave the **Type** as **Bulk**, unless there is a specific fund code that needs to be entered for those items. E.g., NIB codes COL1 or PKG38 etc., in which case, choose **Prefix** from the drop down
12. Selecting **Prefix** from the drop down will then allow the health fund specific code to be entered into the **Code** column **NB. Only codes that have previously been added to Settings > Items are able to be typed in this section & they may require Eclipse Mapping**
13. Selecting **AddOn** from the drop down will allow for a fee to be added to the **Fee** column. This would be used to add a surcharge fee when billing this combination of items to a health fund and would be outlined in the relevant health fund contract
14. The **DVA** column is used if there is a **"H" or other code** in the DVA contract that is relevant to the group of item numbers
15. Use the **Excl OS** column if the other services /prosthesis charges associated with the

procedure are unable to be raised in conjunctions with the case base fee. *NB for this function to work the **Exclude fee when billing** tick box will need to be ticked in each relevant prosthesis*

16. Tick the **Exclude Private Room** box if “**Add Private Room line on the Invoice (overnight only)**”, in the **Other Settings** tab, is being utilised for the particular health fund contract. However, that **doesn’t** apply to the particular item.
17. Use the **GST** tick box if the fee is **inclusive of GST**
18. Use the **X** in the **Action** column to remove any lines that are no longer needed
19. Click **Save**

For further information on how to set up fees, please visit our pages:

[Other Settings](#)

[Casebase Fees](#)

[DRG Fees](#)

[Overnight Accommodation Fees](#)

## [Hospital Health Fund Fees - DRG Fees](#)

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The DRG Fees tab allows the entry of any contracted fees pertaining to DRGs.

For more information on adding Same Day Fees, please see our page

[Hospital Health Fund Fees - Same Day Fees Set Up](#)

DRG Fees are also able to be imported into FYDO from an Excel file. Please see our instructional wiki page below to find out how to do this:

[Hospital Health Fund Fees - Importing DRG Fees](#)

1. Fees can be entered in **Settings > Hospital > Fees Setup**
2. For multi location databases, ensure the correct **Location** is selected
3. Use the **Fund** drop down to select the required health fund

4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (*See Same Day Fee Instructions to amend these dates*)
5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory. However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
6. Select the **DRG Fees** tab
7. Search for the required DRG or to update all fees click **Edit**
8. If entering amended prices, use the **Click to Move Current Charge into Old Charge** option so that the fees listed in the current contracted fees can be moved into the **Old** fees fields
9. Locate the required DRG in the **DRG Column**. They will be listed in alphabetical order. If adding a new DRG, a new line becomes available below the table to add the next DRG.
10. Add the applicable Same Day fee into the **Same Day Rate** column
11. Add the applicable Inpatient fee into the **IP Rate** column
12. Add the CWO (Charge Weight of One) rate to **CWO** column
13. Add the Short Stay Trim into the **SS Trim** column
14. Add the applicable Short Stay Fee into the **SS Fee** column
15. Add the start of the long stay into the **LS1From** column
16. Add the end of the long stay into the **LS1To** column
17. Add the applicable Long Stay Fee into the **L1S Fee** column
18. Add the Transfer Trim into the **TFR Trim** column
19. Add the relevant Transfer Discount into the **TRF Disc** column
20. Tick the **GST** box (scroll right) if the fees are **inclusive of GST**
21. Tick the **Exclude Other Services** box if the other services/prosthesis are unable to have a charge raised when billed with the item number. E.g., If a contract stipulates that any prosthesis used is included in the casebase fee. *NB for this function to work, each applicable prosthesis code will need the **Exclude fee when billing** tick box ticked.*
22. Tick **Exclude Private Room** if hospitals are unable to charge for a private room add-on for certain admissions, while still allowing the private room add-on charge to be applied to all other Case Base or DRG fees.
23. Click **Save** once all fees are entered

For further information on how to set up fees, please visit our pages:

[Other Settings](#)

[Casebase Fees](#)

[Casebase Multi Fees](#)

[Overnight Accommodation Fees](#)