Tokens – Mailing Label

Token Name	Data	Notes
<<PracticeName>>	Practice Name	
<<Title>>	Title	
<<FirstName>>	First Name	
<<LastName>>	Surname	
<<MailingAdd1>>	Location Address 1	
<<MailingAdd2>>	Location Address 2	
<<MailingAdd3>>	Location Address 3	

Tokens – Documents & Letters

Token Name	Data	Notes
<<DocFullName>>	Doctor Full Name	eg. SMITH, John
<<DocFirstname>>	Doctor First Name	eg. John
<<DocSurname>>	Doctor Second Initial	eg. SMITH
<<DocTitle>>	Doctor Title	
<<DocID>>	Doctor ID	
<<DocAdd1>>	Doctor Address 1	
<<DocAdd2>>	If Address Line 2 is empty, this will show Suburb State Postcode otherwise it will show Address Line 2	
<<DocAdd3>>	If Address Line 2 is empty, this will show nothing otherwise it will show Suburb State Postcode	
<<DocSuburb>>	Doctor Suburb	UPPERCASE
<<DocState>>	Doctor State	UPPERCASE
<<DocPC>>	Doctor Post Code	
<<DocMob>>	Doctor Mobile	9999 999 999
<<DocPh>>	Doctor Phone	99 9999 9999
<<DocFax>>	Doctor Fax	99 9999 9999
<<DocEmail>>	Doctor Email	

<<DocQualif>>	Doctor Qualification	
<<DocLoc>>	Doctor Location	
<<DocProv>>	Doctor Provider Number	
<<DocABN>>	Doctor ABN	
<<DocInvAs>>	Invoice As for Clinic	
<<DocAccName>>	Doctor Account Name	
<<DocBSB>>	Doctor BSB	
<<DocAccNum>>	Doctor Account Number	
<<DocBankAdd>>	Doctor Bank Address	
<<DocBank>>	Doctor Bank Name	
<<RefFullName>>	Referring Doctor Full Name	eg. SMITH, John
<<RefFirstName>>	Referring Doctor First Name	eg. John
<<RefSurname>>	Referring Doctor Surname	eg. SMITH
<<RefTitle>>	Referring Doctor Title	
<<RefID>>	Referring Doctor ID	
<<RefPractice>>	Referring Doctor Practice	
<<RefPracId>>	Referring Doctor Practice ID	
<<RefAdd1>>	Referring Doctor Address 1	
<<RefAdd2>>	If Address Line 2 is empty, this will show Suburb State Postcode otherwise it will show Address Line 2	
<<RefAdd3>>	If Address Line 2 is empty, this will show Suburb State Postcode otherwise it will show Address Line 2	
<<RefSuburb>>	Referring Doctor Suburb	UPPERCASE
<<RefState>>	Referring Doctor State	UPPERCASE
<<RefPC>>	Referring Doctor Postcode	
<<RefMob>>	Referring Doctor Mobile	9999 999 999
<<RefPh>>	Referring Doctor Phone	99 9999 9999
<<RefFax>>	Referring Doctor Fax	99 9999 9999
<<RefEmail>>	Referring Doctor Email	
<<RefQualif>>	Referring Doctor Qualification	
<<RefSpecID>>	Referring Dr Speciality ID	
<<RefSpec>>	Referring Dr Speciality Description	
<<RefLoc>>	Referring Doctor Location	
<<RefProv>>	Referring Doctor Provider Number	

Hospital Data Extracts – Reference Guides

PHDB

https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-casemix-data-collections-about-PHDB

HCP

https://www.health.gov.au/topics/hospital-care/our-role/hcp-data

QLD – QHAPDC

https://www.health.qld.gov.au/hsu/collections/qhapdc

NSW – PHISCO

https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2005_210.pdf

VIC – VAED

https://www.health.vic.gov.au/data-reporting/victorian-admitted-episodes-dataset

SA – APC

https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/about+us/our+performance/our+data+collections/admitted+patient+care/admitted+patient+care

WA – HMDS (formerly HA22)

https://www.health.wa.gov.au/~/media/Files/Corporate/general-documents/Clinical-Information-Assurance/Part-A-HMDS-Ref-Manual-2018-19.pdf

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Adding SMS templates

Do you regularly SMS patients? If so, you can create custom SMS templates to save time typing up the message every time and to send tailored messages, complete with the patient's name, appointment time, serving doctor, and more.

To begin, first go to **Settings**.



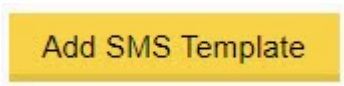
Then click on **SMS Templates** under the templates menu.



This reveals the SMS templates currently available. By default, an **Appointment Reminder** template will be available to you.

Adding a new SMS template

To add a new SMS template, click on the **Add SMS Template** button.



Then, select the SMS **Type**, enter the template **Name**, and type out the SMS content in the **Description** field.



SMS Tokens

You can use ‘SMS tokens’ which are commands that look like: <<*patfirstn*>> to send tailored SMS messages. The aforementioned token for instance dynamically pulls the patient’s first name.

There are SMS tokens for patient details, appointment details, doctor/ practice details, referral details, and more.

For a full list of tokens, click the link below:

https://wiki.fydo.cloud/?s=tokens

Once you’re happy with the contents of your SMS template, click **Save** and you’re done! Your new SMS template will be available next time you wish to send a custom SMS message.



For some SMS Template ideas see our helpful wiki page
https://wiki.fydo.cloud/sms-template-examples/

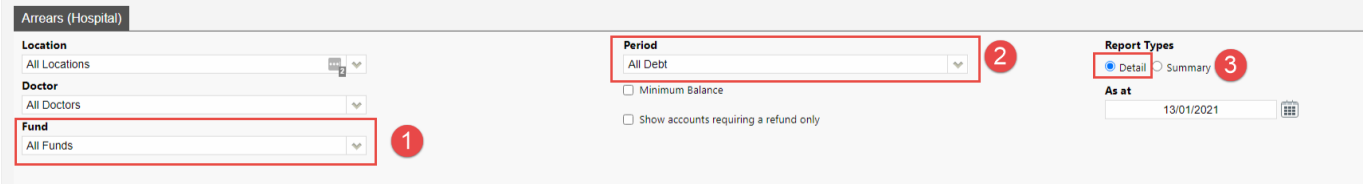
Dealing with Overdue Hospital Debtors

PLEASE READ FIRST

This guide is intended for users who have too many or out of control debtors. This wiki page does not cover the basics, it is an in depth look at how to work through the debtors.

First, lets run the report so we can identify patients that need to be investigated. There are 3 Filters we will want to use.

1. **Fund –** It may be best to look at one **fund** at a time, and action those together
2. **Period –** We can filter the report to only show us debtors that are **45 days** and older, if your debtors is really bad you may wish to start at **60 days.**
3. **Details –** Offers a detailed view of the report, showing patient information, **make sure this is always on.**



ACSS Hospital

Arrears (Hospital) Detail as at 13/01/2021

For All Locations and All Funds and All Doctors and All Debt

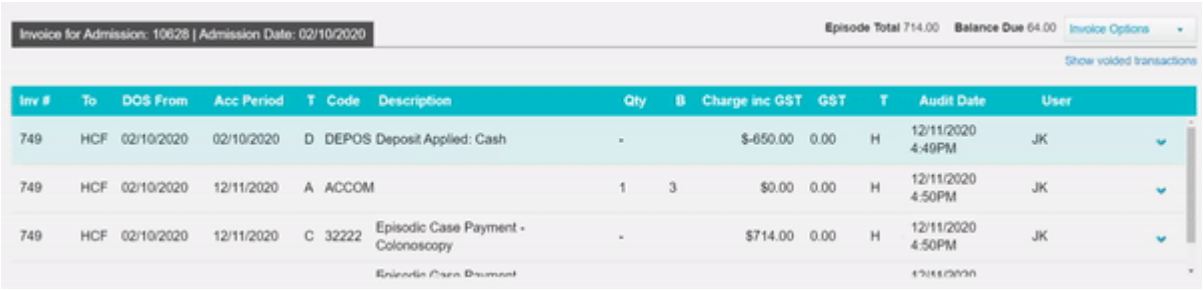
Patient Name	DOS	Doctor	Inv Num	Inv Date	Balance Outstanding	Current	30 Days	45 days	60 days	90 Days	120+ Days
AHM - Australian Health Management											
ROGAN, Joe	30/12/2020	CAREY, Mariah	742	12/11/2020	125.00	0.00	0.00	0.00	575.00	-450.00	0.00
ROGAN, Joe	29/12/2020	CITIZEN, John	553	27/11/2020	288.90	0.00	0.00	788.90	0.00	0.00	-500.00
ROGAN, Joe	30/12/2020	CAREY, Mariah	145	17/08/2020	-0.01	0.00	0.00	0.00	0.00	-787.25	787.24
ROGAN, Joe	30/12/2020	CAREY, Mariah	750	12/11/2020	633.90	0.00	0.00	0.00	633.90	0.00	0.00
ROGAN, Joe	30/12/2020	CAREY, Mariah	735	12/11/2020	650.24	0.00	0.00	0.00	650.24	0.00	0.00
ROGAN, Joe	30/12/2020	CAREY, Mariah	1276	17/12/2020	446.00	446.00	0.00	0.00	0.00	0.00	0.00
					2,144.03	**446.00**	**0.00**	**788.90**	**1,859.14**	**-1,237.25**	**287.24**

In the above example, I can see that there are some patients with outstanding debtors, ranging from 45 to 120+ days. The **Balance Outstanding** column shows me how much each outstanding patient has. The next step is to select one of these patients to follow up on, and we can go through the steps of what has to occur next.

Checking Invoice Status

The next thing we want to do, is head to the patients **Episodes** so we can see the details of the invoice, the outstanding amount and check the invoice status, so we know what part of the process the invoice had issues on.

To see the **Invoice Status,** simply select it from the **Invoice Options** drop down menu, found near the balance for that episode. As you can see below, the status will show us which batch the invoice is currently in, as well as what the **Status** of the batch currently is. The batch we have investigated below is sitting as **Sent**. As this episode was from 02/10/2020, this is probably not a good sign, so it is worth taking a further look into it.

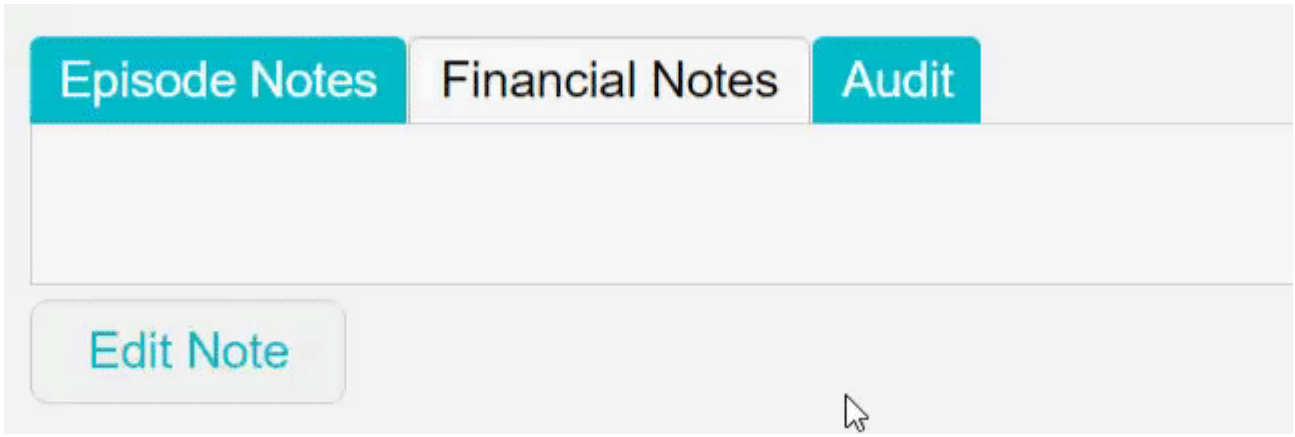


There are three main **Status's** you may run into:

- **Sent –** Invoice received no response
- **Processed –** Invoice has an exception file but no payment
- **Rejected –** Invoice was just flat out rejected

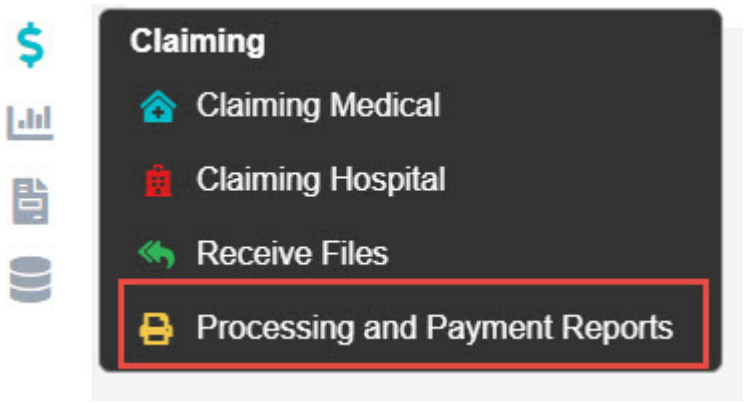
In all of the above cases, if a batch is old enough to be in the 45+ days Debtors and has an above status, it is time to call or email the **Health Fund** regarding its issue. They will be able to help with either resubmitting or amending the invoice, depending what is needed.

We also suggest making use of the **Financial Notes,** also found on the **episodes** tab. This will let you keep up to date notes, as well as allow all users to see the same notes, so you can track right on the patient record what you have done as a follow up.

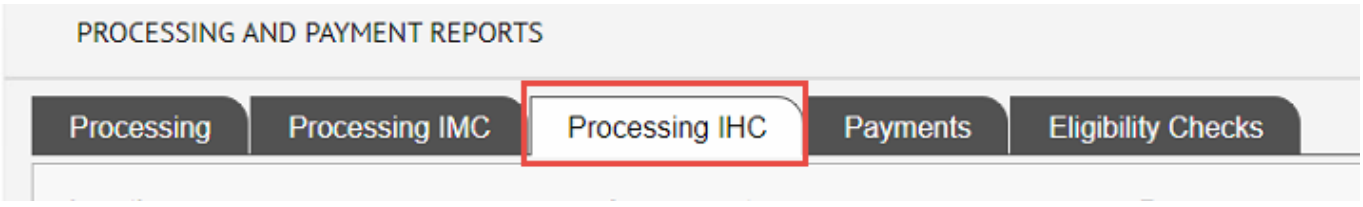


Processing Reports

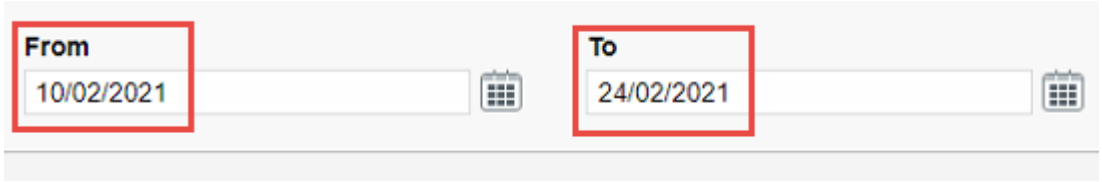
Once you have established that an invoice has an issue, it can be a good idea to check the **Processing Report** for that claim. Generally, these reports will include a rejection if there was one, and can help you figure out the issue. We can access the processing and payment reports section via the **$** and selecting the appropriate option.



Once here, we need to select the **Processing IHC** tab at the top.

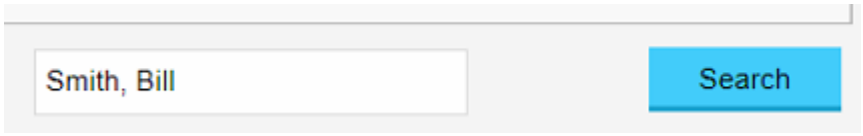


Now we will be able to view and filter processing reports depending what we need to look at. Make sure to select appropriate filters, since we may be looking at some processing reports we will need to use the **From and To** filter.



The important date to change is the **From** date. Since if you have this set to a recent date, Fydo will not display older processing reports. I suggest setting it to the date you sent your claim, so you know the processing report will be in range.

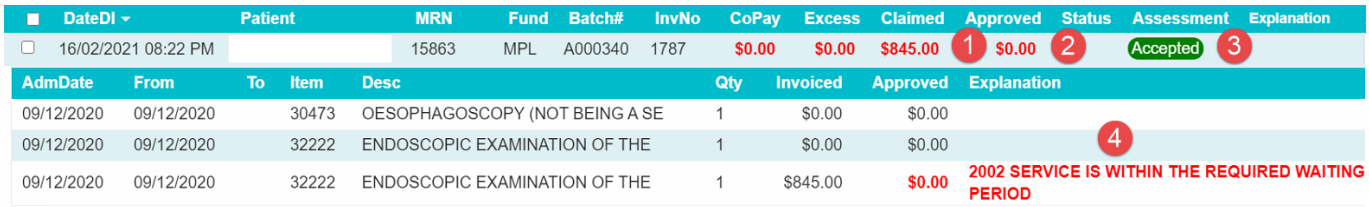
Since we are looking for a specific patient, you should then go ahead and search for that patient.



The can simply search by doing **Lastname, Firstname.** Now its time to look at the processing report, and try to assess why we were rejected.

Assessing the Processing Report

There are a few main things to look at in the processing report, covered below.



1. **Claimed –** This is how much you claimed for the invoice
2. **Approved –** This is how much the fund approved. $0 means a rejection, but you may also receive short payments as well.
3. **Assessment –** It is important not to just look at this field, as the fund has marked it **Accepted**, even though we clearly have a rejection. Make sure to look at all appropriate data.
4. **Explanation –** This is the important one, here you will see a brief description of why something has been rejected.

In the above case, I can see that for this patient, the service for 09/12/2020 was within the waiting period. My best bet would be to give MPL a call, and see if we are able to get it paid at all, since while we do know the rejection reason, there is no supporting information for how to get it paid.

In the cases of short payments, it is a good idea to compare the invoice you submitted to your **Contract** with the fund, and make sure you have charged the appropriate amount. If you have charged the correct amount, again contacting the fund is vital.

In almost all cases, it will end up best to contact the health fund, since many **Explanations** they

provide can be unhelpful, or too short to convey the real reason for a rejection, as such they are the main contact for help, and can assist to get it paid.

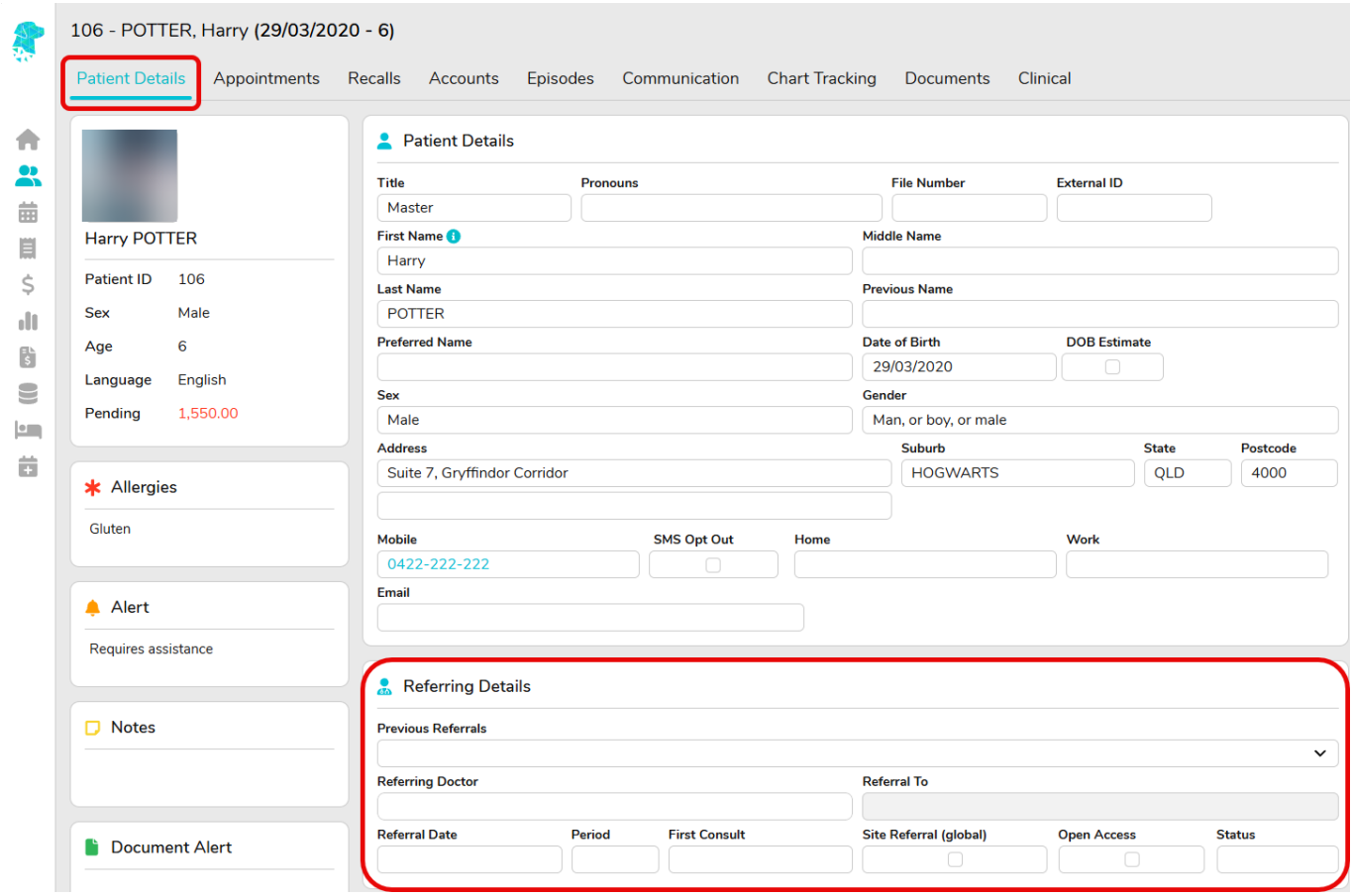
Contacting Funds

See our health fund contacts page.

How to create a referral

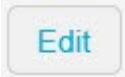
If needing referrals applies to your discipline, read on to learn how to create new referring doctors on your FYDO system; and how to create referrals on patient records.

Start off by opening a patient's record. Below is an example of a patient record, with the referral section highlighted.



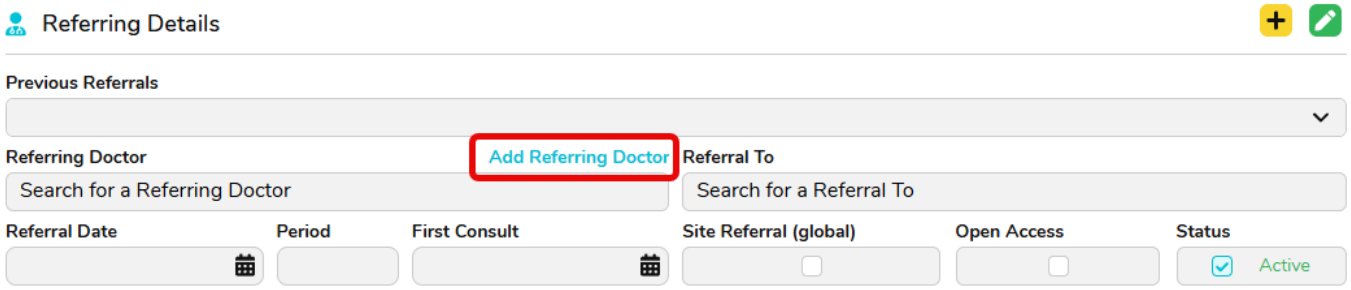
Notice that the data fields on the record are white and you cannot commit any changes. This is because you are not in *edit mode* and therefore cannot make any edits.

So click on the **Edit** button to continue.

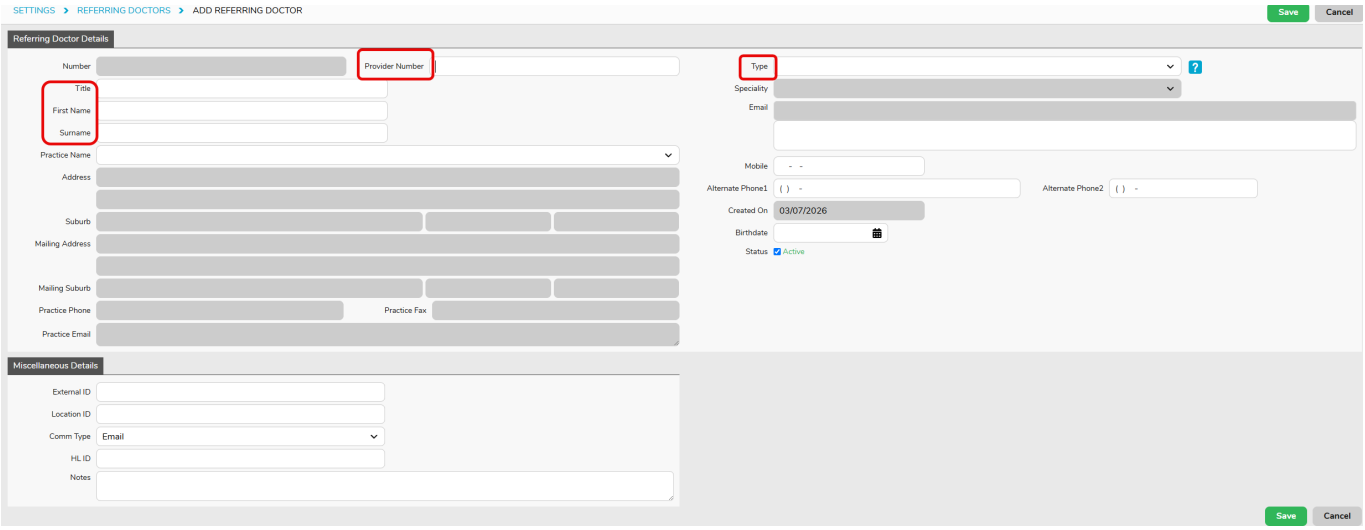


You will now be able to make edits to this record, scroll down to the **Referring Details** section.

If the referring doctor has never been entered into your FYDO system, click on the blue **ADD REFERRING DOCTOR** button to add a *NEW* referring doctor.



This will present you with the below screen, where the main data fields are highlighted. So go ahead and fill this in along with any other additional information you'd like to store about this referring doctor.

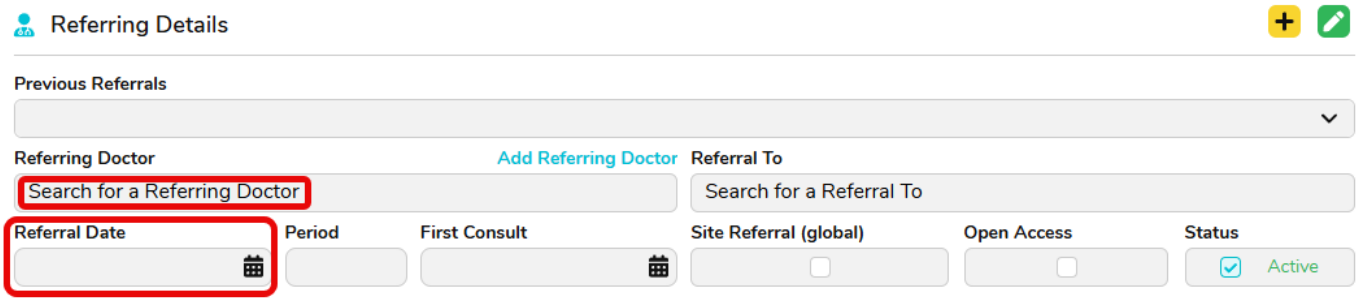


Note: this only needs to be done **once** per referring doctor.

Referring doctor 'Type'

- **GP**: by default, GP referrals have a referral period of 12 months
- **Specialist**: by default, Specialist referrals have a referral period of 3 months

If the referring doctor has already been entered into FYDO as a referrer, you will be able to search for them by clicking on the search box pictured below. You may search by the doctor's first or last name.



Next, enter the **Referral Date** and you're done! This is the minimum data set for adding a referral to a patient's record.

Notes on other data fields in 'Referring Details'

- **Period**: this is how many months the referral is valid for. It may be overwritten by the user, at their discretion
- **First consult**: if the first *Date of Service* is after the *Referral Date*, you may enter the date of service into this field so that the *Referral Period* is calculated from this date, rather than the referral date
- **Referral to**: this is which provider the referral is for. If left blank, upon billing it will get linked to that provider;
- **Site Referral (global):** allows this referral to be used by any provider rather than one specific provider.

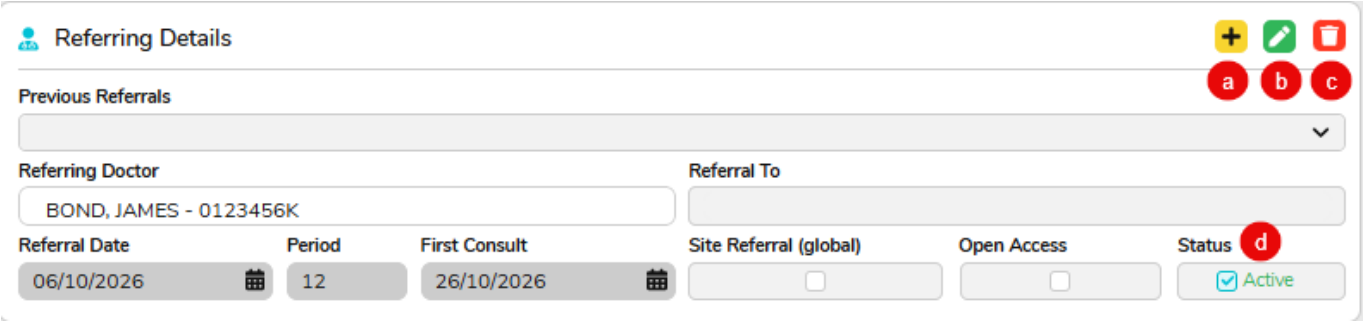
That's it! You've added a new referring doctor to your FYDO system and created a referral on a patient's record. Click on the green **Save** button on the top right corner of the patient record to save your changes.



Editing, deleting, and inactivating referrals

Made a mistake when creating the referral? No problem. Read on to see how to edit or delete referrals.

Start off by opening a patient's record. Below is an example of the referral section of a patient's record and click **Edit**.



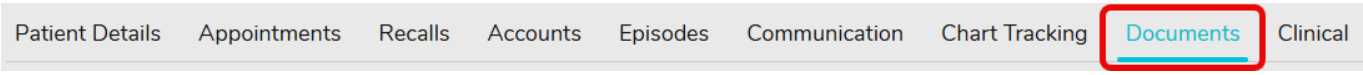
a. **Add another referral**: FYDO allows you to have multiple referrals for a given patient. Use this button to add another referral
b. **Edit referral**: this button allows you to make changes to any of the data fields of a given referral
c. **Delete this referral**: this button will remove the referral
d. **Active**: untick this checkbox to make the referral inactive

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Results of an OEC

If you have not submitted an OEC yet, please see our guide found here

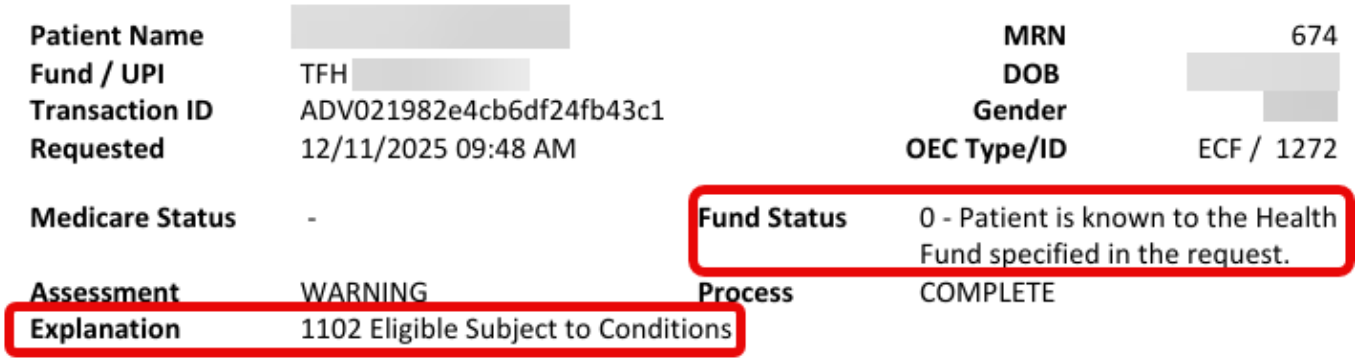
To find your **OEC**, first access the **Documents** from the patients record.



You will see a list of all the recorded documents for this patient. The **OEC's** that were returned will have the **Name** and **Type** of **OEC.** The MBS item number the OEC was ran on will also be included in the OEC name, eg; OEC-39323. Select one to view. These documents can be printed or downloaded as needed but will always be kept here, within the patient record.

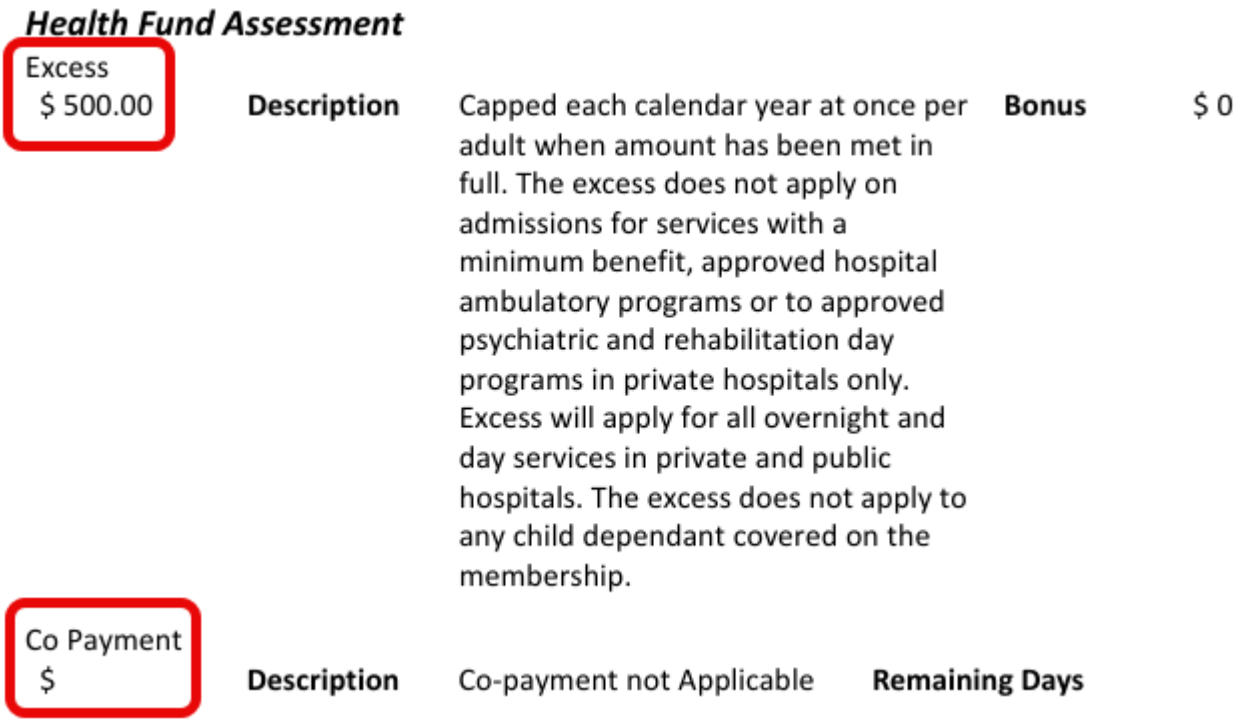


The first part of your **OEC** contains some patient information, as well as the **Fund** status on the check. It will also show the **Explanation**, on our **OEC** below we can see that the patient is eligible, but subject to conditions. The conditions will need to be confirmed with the fund:



Health Fund Assessment

The next part of the **OEC** details the patients financial eligibility. We can see any **Excess** or **Co Payments** that are applicable, as well as a description of what the patients cover is limited to.
*Any **Excess** shown here will be automatically updated in the **Appointments** screen for this patient.*



Just below the excess and co payment information, you will find the final details of the **OEC**. The fund will detail the members cover and the description will mention services that are excluded. There is also space for **Benefit Limitations** and **Exclusions**. If your **OEC** shows the patient as not having cover, these fields will detail what the exclusions are and why the patient is not covered.

Health Fund Ref	1501371
Table Name	Silver Plus Hospital $500 Excess
Table Description	SILVER PLUS **All hospitals**: Excluded Services: Pregnancy and birth; Assisted reproductive services; Weight loss surgery; Laser eye correction; Cosmetic surgery receive no benefits. Minimum Benefit (Restricted cover) shared room rate for Podiatric surgery for accommodation. If Minimum Benefits shared room rate is paid, excess is not deducted. **Members First Network Hospitals**: Cover for hospital accommodation theatre fees for services that are not Excluded or Minimum Benefit services. **Public Hospitals**: Minimum Benefits for shared room accommodation as set by the Australian Government plus fixed benefit per day for private overnight room accommodation. Special Benefits that help pay for certain in-hospital parent/partner accommodation and meals are included. Minimum Benefit services are not eligible for private room benefits. Excess does not apply for children.
Table Scale	SINGLE
Benefit	
Limitations	
Exclusions	

Finally, there is a field for any **Other Services** that were checked, such as **Prosthesis** items.

Items and Other Services

Type	Code	Charge	Fund Assess	Fund Amt	Med Assess	Med Amt

Hospital Data Extracts Setup

Each month you will be required to submit data of patient discharges to various agencies. This data submission is mandatory and is required approximately two weeks into the following month. Hospitals are required to submit data to:

- PHDB [Private Hospital Data Bureau]
- HCP [Hospital Casemix Protocol]
- State health departments also require data – you only need to submit data to the state the facility is located in

PHDB – Private Hospital Data Bureau

This data is collected by the Commonwealth. FYDO easily collects this information during the admission and discharge process, and at the end of month you can run a report to export this data to a file in the format PHDB requires.

Once FYDO produces the file, you will need to upload this file to the Data Submission Portal (DSP). To arrange access to the DSP please email hcp@health.gov.au with the following details:

- Facility Provider Number
- Facility Name
- Facility Address
- Facility Phone
- Name of data submitter (an individual)
- Email where verification reports can be sent to

For more information, please contact PHDB on:
Phone: 02 6289 8058
Email: hcp@health.gov.au

Visit the PHDB website click here.

HCP – Hospital Casemix Protocol

This monthly data submission is in a similar format to the PHDB file, however this data is sent to the patient's health fund. FYDO can produce a file at the end of each month for each health fund. If in the month of March there were no discharges for Medibank, then FYDO will not produce a file for Medibank.

You will need to contact each health fund and request access to their portal so that you can submit this data at the end of each month. *There is only one portal for the entire Australian Health Service Alliance (AHSA) group. For a list of health funds that are part of AHSA, click here.*

Below are some of the funds you may need to report to, and how to request access:

- AHSA portal click here
- BUPA portal, send an email to hcp@bupa.com.au
- HCF portal click here
- Medibank portal click here
- NIB portal click here
- Mildura Health, send an email to hcp@mdhf.com.au
- Hunter Health Insurance (formerly Cessnock Districts Health), send an email to enquiries@cdhbf.com.au
- Latrobe Health, send an email to hcp@lhs.com.au
- St Lukes Health, send an email to hcpdata@stlukes.com.au

State Health Departments

The state your facility resides in also requires data at the end of each month. Like PHDB and HCP data, FYDO makes this easy each month. FYDO is able to create a file in the format your state requires. Each state has a different file format.

You will need to contact the representative in your state and request access, and instructions on where to submit your file each month.

NSW Health – Phisco data

Contact: Roman Leszcynski
Phone: 02 9391 9995
Email: iscos@doh.health.nsw.gov.au
Email: Roman.Leszczynski@health.nsw.gov.au

VIC Health – VAED

Phone: 03 9096 8595
Email: hdss.helpdesk@dhhs.vic.gov.au
Website for more information click here.

QLD Health – QHAPDC

Phone: 07 3708 5679
Email: QHIPSMAIL@health.qld.gov.au
For more information click here.

WA Health – HMDS

Phone: 08 9222 4362 (Inpatient Data Collections)
Email: DoH.AdmittedDataCollection@health.wa.gov.au

ACT Health

Phone: 02 5124 6906
Email: dsd.informationmanagementhub@act.gov.au
Email: jane.mcintyre@act.gov.au
For more information click here.

TAS Health

Contact: Cynthia Rogers
Phone: 03 6166 1081
For more information click here.

SA Health – ISAAC

Email: Health.ISAACSubmissions@sa.gov.au
For more information click here.

Cancer Registers

NSW & ACT

Email: information@cancerinstitute.org.au
Phone: 02 8374 5600
For more information click here.

VIC

Email: vcr@cancervic.org.au
For more information click here.

For instructions on how to **Extract Hospital Data from FYDO** visit our wiki page:
Hospital Data Extraction

For instructions on how to **Re-Extract Hospital Data from FYDO** visit our wiki page:
Re-Submitting a Hospital Data Extraction

Medicare and Fund Contacts – Dealing with Rejections

Medicare & DVA

Organisation	Phone/ Email
Medicare	P: 1800 700 199F: 02 9895 3190
MBS Interpretation	P: 13 21 50E: askMBS@health.gov.au
DVA	P: 1300 550 017

Health Funds

Fund name	Contact for clinics	Contact for hospitals
ACA Health *ECLIPSE code: ACA* *HCP code: ACA*	P: 1300 368 390 acahealthit@acahealth.com.au	P: 1300 368 390 acahealthit@acahealth.com.au
Alliance (AHSA)	P: 03 9813 4088 access@ahsa.com.au	
AHM *ECLIPSE code: AHM* *HCP code: AHM*	P: 1300 524 456 Eclipse@medibank.com.au	P: 1300 560 680 Eclipse@medibank.com.au *AHM and Medibank have the same support team*
Australian Unity *ECLIPSE code: AUH* *HCP code: AUF*	P: 1800 035 360	P: 1800 035 360 dgilder@australianunity.com.au

BUPA*E* *CLIPSE code: BUP* *HCP code: BUP*	P: 134 135F: 1300 130 623 *for sending claims manually*dr.billing@bupa.com.au ***Only** for sending claims with Problems / Rejections* gapscheme@bupa.com.au ***Only** for if you are unable to **fax***	P: 134 135 gordon.barrett@bupa.com.au
CBHS Corporate Health & CBHS Health Fund *ECLIPSE code: CBC & CBH* *HCP code: CBC & CBH*	P: 1300 654 123 providers@cbhs.com.au	P: 1300 654 123 access@cbhs.com.au Alternatively julie.mckinnon@cbhs.com.au
Hunter Health Insurance (Formally known as 'Cessnock' or 'CDHBF Health') *ECLIPSE code: CDH* *HCP code: CDH*	P: 02 4990 1385 enquiries@hunterhi.com.au	P: 02 4990 1385 CDH.BenefitsFund@Hunterhi.com.au
CUA Health Limited *ECLIPSE code: CHF* *HCP code: CPS*	P: 1300 499 260 cuahealth@cuahealth.com.au	P: 1300 499 260 cuahealth@cuahealth.com.au *Alternatively* karen.coventry@cua.com.au
Defence Health *ECLIPSE code: DHF* *HCP code: AHB*	P: 1800 656 329	P: 1800 656 329 providerrelations@defencehealth.com.au
Doctors Health Fund *ECLIPSE code: AMA* *HCP code: AMA*	P: 1800 226 586	P: 1800 226 586 lesley.rutter@doctorshealthfund.com.au
Emergency Services Health (also managed by Police Health) *ECLIPSE code: ESH* *HCP code: SPE*	P: 1300 703 703 F: 1300 151 152	P: 1300 703 703 providerenquiries@eshealth.com.au
GMHBA *ECLIPSE code: GMH* *HCP code: GMH*	P: 1300 446 422 F: (03) 5222 7478	P: 1300 446 422 Jamie-LeeGardham@gmhba.com.au joannesheldon@gmhba.com.au
GU Health (FAI) *ECLIPSE code: FAI* *HCP code: FAI*	P: 1800 249 966 corporate@guhealth.com.au	providers@honeysucklehealth.com.au
HBF *ECLIPSE code: HBF* *HCP code: HBF*	P: 1300 810 475 expresspayqueries@hbf.com.au	P: 1300 810 475 lorraine.hort@hbf.com.au
HIF(Health Insurance Fund of Australia Limited) *ECLIPSE code: HIF* *HCP code: HIF*	P: 1300 134 060 claims@hif.com.au	P: 1300 134 060 michelle.peacock@hif.com.au
HCF *ECLIPSE code: HCF* *HCP code: HCF*	P: 1800 670 302 medicoverenquiry@hcf.com.au	P: 1800 670 302 MFarlow@hcf.com.au (Maria) Alternatively dfernandez@hcf.com.au (David)

Health Care Insurance *ECLIPSE code: HCI* *HCP code: HCI*	P: 1800 804 950	P: 1800 804 950 jamie.gillam@hciltd.com.au
Health Partners *ECLIPSE code: SPS* *HCP code: SPS*	P: 1300 113 113	P: 1300 113 113 hospitalclaims@healthpartners.com.au davids@healthpartners.com.au
Health.com.au *ECLIPSE code: HEA* *HCP code: HEA*	P: 1300 199 802	P: 1300 199 802 hospitalteam@health.com.au *Alternatively* Catherine.Ngo@health.com.au Gemma.Oliver@health.com.au
Latrobe *ECLIPSE code: LHS* *HCP code: LHS*	P: 1300 362 144 E: info@lhs.com.au	P: 1300 362 144 tan@lhs.com.au
Medibank *ECLIPSE code: MPL* *HCP code: MPL*	P: 1300 130 460	P: 1300 130 460 medibankhospital.network@medibank.com.au
Mildura *ECLIPSE code: MDH* *HCP code: MDH*	P: 03 5023 0269 providers@mildurahealthfund.com.au	P: 03 5023 0269 eclipse@mildurahealthfund.com.au
MO Health *ECLIPSE code: MYO* *HCP code: MYO*	P: 1800 333 004	P: 1800 333 004 Vaibhav.Makin@aia.com
Navy Health *ECLIPSE code: NHB* *HCP code: NHB*	P: 1300 217 736 query@navyhealth.com.au	query@navyhealth.com.au
NIB *ECLIPSE code: NIB* *HCP code: NIB*	P: 1300 853 530 medigap@nib.com.au Overseas Claims: internationalclaims@nib.com.au	P: 1300 853 530 hospitaleclipse@nib.com.au provrel@nib.com.au
Nurse and Midwives *ECLIPSE code: NMW* *HCP code: NMW*	P: 1300 344 000 submit.claim@nmhealth.com.au	P: 1300 344 000 EclipseClaims@nmhealth.com.au Alternatively George.Drakakis@nmhealth.com.au dianne.roe@teachershealth.com.au
OneMediFund *ECLIPSE code: OMF* *HCP code: OMF*	P: 1800 148 626 F: 1300 673 406	P: 1800 148 626 info@onemedifund.com.au
Peoplecare Health Insurance *ECLIPSE code: LHM* *HCP code: LHM*	P: 1800 808 690	P: 1800 808 690 info@peoplecare.com.au
Phoenix Health *ECLIPSE code: PHF* *HCP code: PWA*	P: 1800 028 817	P: 1800 028 817 enquiries@phoenixhealthfund.com.au info@peoplecare.com.au
Police Health (also managed by Emergency Services Health) *ECLIPSE code: POL* *HCP code: SPE*	P: 1800 603 603 F: 1800 008 554	P: 1800 603 603 providerenquiries@policehealth.com.au

Queensland Country *ECLIPSE code: QCH* *HCP code: QCH*	P: 1800 813 415	P: 1800 813 415 rharding@qccu.com.au
TUH(Queensland Teachers) *ECLIPSE code: QTU* *HCP code: QTU*	P: 1300 360 701	P: 1300 360 701 alice.caldwell@tuh.com.au
Reserve Bank health *ECLIPSE code: RBH* *HCP code: RBH*	P: 1800 027 299 F: 1300 309 704	P: 1800 027 299 info@myrbhs.com.au
RT Health *ECLIPSE code: RTH* *HCP code: RTE*	P: 1300 886 123 (option 5) access@rthealthfund.com.au	P: 1300 886 123 hospitals@rthealthfund.com.au
St Lukes *ECLIPSE code: SLM* *HCP code: SLM*	P: 1300 651 988	P: 1300 651 988 general@stlukes.com.au
Teachers Federation *ECLIPSE code: TFH* *HCP code: NTF*	P: 1300 728 188	P: 1300 728 188 elizabeth.cashman@teachershealth.com.au Alternatively, try: EclipseClaims@teachershealth.com.au George.Drakakis@nmhealth.com.au dianne.roe@teachershealth.com.au
Transport Health *ECLIPSE code: TFS* *HCP code: TFS*	P: 1300 806 808	P: 1300 806 808 hospitals@transporthealth.com.au
Westfund *ECLIPSE code: WFD* *HCP code: WFD*	P: 1300 937 838 medicalbenefits@westfund.com.au	P: 1300 937 838 sharpg@westfund.com.au