

# 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	

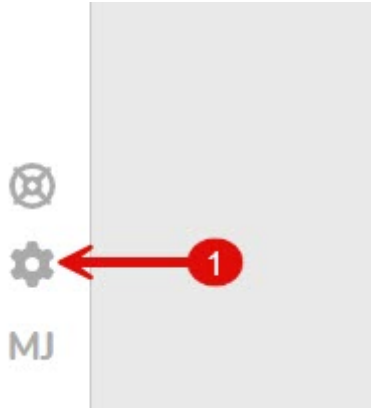
<<RefPracId>>	Referring Doctor Practice ID	
<<RefAdd1>>	Referring Doctor Address 1	
	If Address Line 2 is empty, this will show Suburb State	
<<RefAdd2>>	Postcode	
	otherwise it will show Address Line 2	
	If Address Line 2 is empty, this will show Suburb State	
<<RefAdd3>>	Postcode	
	otherwise it will 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	

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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.

ID	4
Type	Appointments
Name	Appointment Reminder
Description	Hi <<patfirstn>>, this is a reminder of your appointment at the <<ListLocName>> breast screening clinic on <<listdate>> at <<listtime12h>>.

**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.

Save

For some SMS Template ideas see our helpful wiki page

<https://wiki.fydo.cloud/sms-template-examples/>

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## 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.*

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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**.

Arrears (Hospital)

Location  
All Locations  
Doctor  
All Doctors  
Fund  
All Funds

Period  
All Debt  
☐ Minimum Balance  
☐ Show accounts requiring a refund only

Report Types  
☒ Detail ☐ Summary  
As at  
13/01/2021

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.

Invoice for Admission: 10628 | Admission Date: 02/10/2020

Episode Total 714.00

Balance Due 64.00

Invoice Options

Show voided transactions

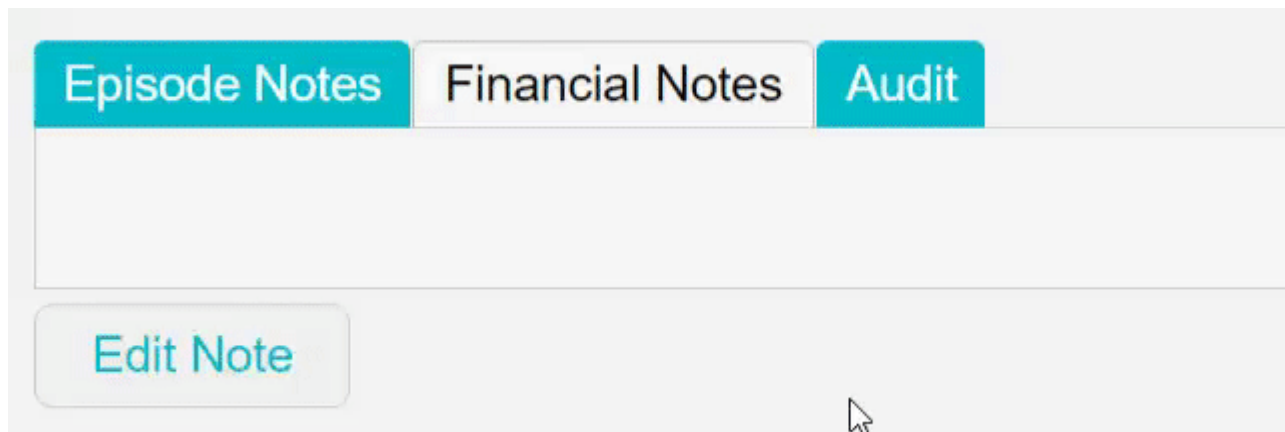
Inv #	To	DOS From	Acc Period	T Code	Description	Qty	B	Charge inc	GST	GST	T	Audit Date	User
749	HCF	02/10/2020	02/10/2020	D	DEPOS Deposit Applied: Cash	-		\$-650.00	0.00		H	12/11/2020 4:49PM	JK
749	HCF	02/10/2020	12/11/2020	A	ACCOM	1	3	\$0.00	0.00		H	12/11/2020 4:50PM	JK
749	HCF	02/10/2020	12/11/2020	C	32222 Episodic Case Payment - Colonoscopy	-		\$714.00	0.00		H	12/11/2020 4:50PM	JK
Episode From Document													

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

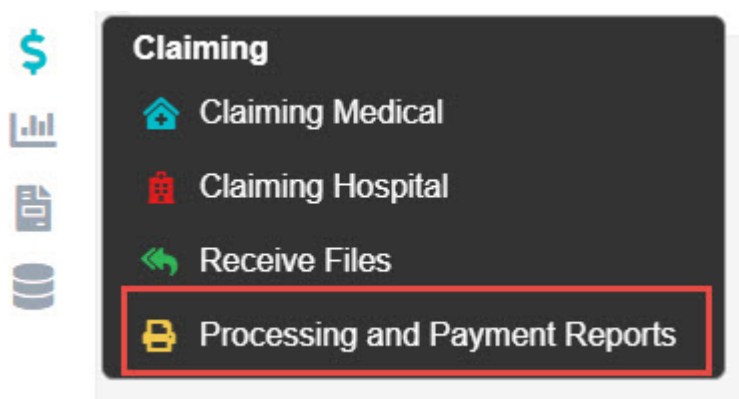
In all of the above cases, if a batch is old enough to be in the 45+ days Debtors and has an above status, it is time to call or email the **Health Fund** regarding its issue. They will be able to help with either resubmitting or amending the invoice, depending what is needed.

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.

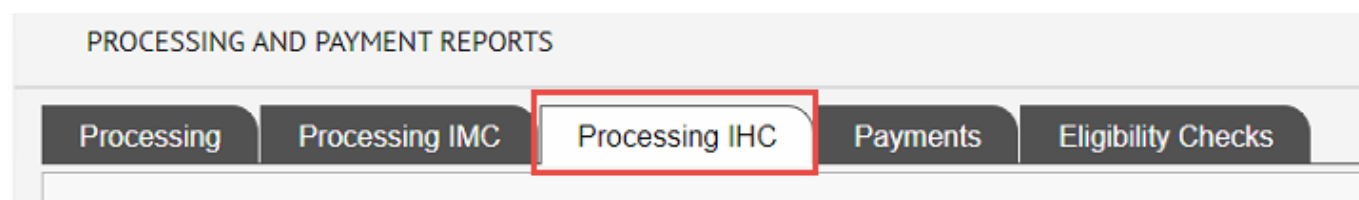


## Processing Reports

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.

**From**  
10/02/2021

**To**  
24/02/2021

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.

Smith, Bill

Search

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.

DateDI	Patient	MRN	Fund	Batch#	InvNo	CoPay	Excess	Claimed	Approved	Status	Assessment	Explanation
16/02/2021 08:22 PM		15863	MPL	A000340	1787	\$0.00	\$0.00	\$845.00	\$0.00	2	Accepted	3
AdmDate	From	To	Item	Desc	Qty	Invoiced	Approved	Explanation				
09/12/2020	09/12/2020		30473	OESOPHAGOSCOPY (NOT BEING A SE	1	\$0.00	\$0.00					
09/12/2020	09/12/2020		32222	ENDOSCOPIC EXAMINATION OF THE	1	\$0.00	\$0.00					
09/12/2020	09/12/2020		32222	ENDOSCOPIC EXAMINATION OF THE	1	\$845.00	\$0.00	2002 SERVICE IS WITHIN THE REQUIRED WAITING PERIOD				

- Claimed** - This is how much you claimed for the invoice
- Approved** - This is how much the fund approved. \$0 means a rejection, but you may also receive short payments as well.
- 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.
- 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.

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### **Contacting Funds**

See our health [fund contacts page](#).

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## **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.



## 117 - BURDETTE, Pamela

### Patient Details

### Other

### Appointments


### Recalls

### Accounts

### Episodes

### Communication


### Patient Details

Patient #	117	File Num		External ID	117
Title	Mrs	Gender	Female		
First Name	Pamela			Mi	
Last Name	BURDETTE				
Pref. Name					
Address	1 Scotts st				
Suburb	KILLARA	State	NSW	Postcode	2071
Mailing Address					
Suburb		State		Postcode	
Date of Birth	01/01/1920		Age	100	DOB Estimate <input type="checkbox"/>
Mobile	0423-555-552	Home	( ) -	Work	( ) -
Email	pamela@gmail.com				

### Medicare/DVA Details

Medicare Number	2111-11111-1	Ref	1	Exp	
Eligibility	Eligible - Australian Resident				
Veterans No.		Veteran Card Colour			
DVA Auth.No		DVA Auth. Date			
Entitlement Card				Exp	

### Referring Details

Previous Referrals					
Referring Doctor					
Referral Date			Period		First Consult
Referral To					
<input type="checkbox"/> Site Referral (global)					



Notice that the data fields on the record are greyed out 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.

Edit

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.

Referring Details	
Previous Referrals	<input type="text"/>
Referring Doctor	<input type="text" value="Search for a Referring Doctor"/>
	<b>ADD REFERRING DOCTOR</b>
Referral Date	<input type="text"/>  Period <input type="text"/> First Consult <input type="text"/> 
Referral To	<input type="text" value="Search for a Referral To"/>
	<input type="checkbox"/> Site Referral (global) <input checked="" type="checkbox"/> <b>Active</b>
	<a href="#">ADD ANOTHER REFERRAL</a> <a href="#">EDIT REFERRAL</a>

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.

[SETTINGS](#) > [REFERRING DOCTORS](#) > [ADD REFERRING DOCTOR](#)

Referring Doctor Details	
Number	<input type="text"/>
Title	<input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
Practice Name	<input type="text"/>
Address	<input type="text"/>
Suburb	<input type="text"/>
Phone	<input type="text"/>
Fax	<input type="text"/>
Provider Number	<input type="text"/>
Type	<input type="text"/>
Speciality	<input type="text"/>
Email	<input type="text"/>
Mobile	<input type="text"/>
Created On	<input type="text" value="29/12/2020"/>
Birthdate	<input type="text"/>
Status	<input checked="" type="checkbox"/> <b>Active</b>

Miscellaneous Details	
External ID	<input type="text"/>
Location ID	<input type="text"/>
Comm Type	<input type="text"/>
Notes	<input type="text"/>

**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.

The screenshot shows the 'Referring Details' form. It has a 'Previous Referrals' dropdown. The 'Referring Doctor' field has a search box with the placeholder 'Search for a Referring Doctor'. Below it is a blue button 'ADD REFERRING DOCTOR'. The 'Referral Date' field has a calendar icon. The 'Period' field is a text input. The 'First Consult' field has a calendar icon. The 'Referral To' field has a search box with the placeholder 'Search for a Referral To'. Below these are checkboxes for 'Site Referral (global)' and 'Active' (which is checked). At the bottom are blue buttons 'ADD ANOTHER REFERRAL' and 'EDIT REFERRAL'.

## 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.

Save

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## 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.

**Referring Details**

Previous Referrals

Referring Doctor **SMITH, JOHN**

Referral Date **30/12/2020**  Period **12** First Consult

Referral To

☐ Site Referral (global) ☒ **Active**

**ADD ANOTHER REFERRAL** **EDIT REFERRAL** **DELETE THIS REFERRAL**

- **Add another referral:** FYDO allows you to have multiple referrals for a given patient. Use this button to add another referral
- **Edit referral:** this button allows you to make changes to any of the data fields of a given referral
- **Delete this referral:** this button will remove the referral
- **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 that patients record.

**Patient Details** **Other** **Appointments** **Recalls** **Accounts** **Episodes** **Communication** **Documents** **Clinical**

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**. Select one to view a preview. These documents can be printed or saved as needed, but will always be kept here within the patient record.

Document Name	Type	Created ↑	
OEC	OEC	13/05/2021 9:05:01 AM	Q ▼
OEC	OEC	13/05/2021 9:04:49 AM	Q ▼
IFC 2021-05-05	IFC	05/05/2021 1:14:26 PM	Q ▼
IFC 2021-04-29	IFC	29/04/2021 4:38:59 PM	Q ▼
OEC	OEC	29/04/2021 1:23:38 PM	Q ▼
OEC	OEC	29/04/2021 1:23:19 PM	Q ▼

100 ▼ Records/Page Records 1-6 of 6 (Page 1 of 1)

The first part of your **OEC** contains some patient information, as well as the **Medicare** and **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:

### FYDO - ECLIPSE Online Eligibility Check

<b>Patient Name</b>		<b>MRN</b>	09261
<b>Fund / UPI</b>	BUP	<b>DOB</b>	27/09/1963
<b>Transaction ID</b>	ADV02011b87b5f4739b8bc00	<b>Gender</b>	Male
<b>Requested</b>	27/08/2020 02:42 PM	<b>OEC Type/ID</b>	ECF / 12

**Medicare Status** - Successful

**Fund Status** 0 - Successful

**Assessment** W

**Process** COMPLETE

**Explanation** 1102 ELIGIBLE SUBJECT TO CONDITIONS

### Health Fund Assessment

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

### Health Fund Assessment

Excess

\$ 500.00

Description

Capped each calendar year at once per adult when amount has been met in full. The excess does not apply on admissions for services with a minimum benefit, approved hospital ambulatory programs or to approved psychiatric and rehabilitation day programs in private hospitals only. Excess will apply for all overnight and day services in a public hospital. The excess does not apply to any child dependant covered on the membership.

Bonus

\$ 0.00

Co Payment

\$ 0.00

Description

0

Remaining Days

Co-payment not  
Applicable

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

8122672

Table Name

Mid Hospital \$500 Excess - Silver Plus with Budget Extras 60

Table Description

SILVER PLUS \*\*All hospitals\*\*: Excluded Services: Pregnancy and birth; Assisted reproductive services; Joint replacements (hip, knee other); Cataracts; Laser eye correction; Weight loss surgery; Dialysis for chronic kidney failure; Cosmetic surgery receive no benefits. Minimum Benefit (Restricted cover) services are not eligible for private room benefits. Minimum Benefit services: Hospital psychiatric services; Podiatric surgery. 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.

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
		0.00				

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## 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](mailto: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](tel:0262898058)

Email: [hcp@health.gov.au](mailto: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](mailto: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](mailto:hcp@mdhf.com.au)
- Hunter Health Insurance (formerly Cessnock Districts Health), send an email to [enquiries@cdhbf.com.au](mailto:enquiries@cdhbf.com.au)
- Latrobe Health, send an email to [hcp@lhs.com.au](mailto:hcp@lhs.com.au)
- St Lukes Health, send an email to [hcpdata@stlukes.com.au](mailto: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 Leszczynski

Phone: [02 9391 9995](tel:0293919995)

Email: [iscos@doh.health.nsw.gov.au](mailto:iscos@doh.health.nsw.gov.au)

Email: [Roman.Leszczynski@health.nsw.gov.au](mailto:Roman.Leszczynski@health.nsw.gov.au)

### VIC Health - VAED

Phone: [03 9096 8595](tel:0390968595)

Email: [hdss.helpdesk@dhhs.vic.gov.au](mailto:hdss.helpdesk@dhhs.vic.gov.au)

Website for more information [click here](#).

### QLD Health - QHAPDC

Phone: [07 3708 5679](tel:0737085679)

Email: [QHIPSMAIL@health.qld.gov.au](mailto:QHIPSMAIL@health.qld.gov.au)

For more information [click here](#).



## **WA Health - HMDS**

Phone: [08 9222 4362](tel:0892224362) (Inpatient Data Collections)

Email: [DoH.AdmittedDataCollection@health.wa.gov.au](mailto:DoH.AdmittedDataCollection@health.wa.gov.au)

## **ACT Health**

Phone: [02 6205 5249](tel:0262055249)

Email: [dsd.informationmanagementhub@act.gov.au](mailto:dsd.informationmanagementhub@act.gov.au)

Email: [Prathima.Karri@act.gov.au](mailto:Prathima.Karri@act.gov.au)

For more information [click here](#).

## **TAS Health**

Contact: Cynthia Rogers

Phone: [03 6166 1081](tel:0361661081)

For more information [click here](#).

## **SA Health - ISAAC**

Email: [Health.ISAACSubmissions@sa.gov.au](mailto:Health.ISAACSubmissions@sa.gov.au)

For more information [click here](#).

## **Cancer Registers**

### **NSW & ACT**

Email: [information@cancerinstitute.org.au](mailto:information@cancerinstitute.org.au)

Phone: [02 8374 5600](tel:0283745600)

For more information [click here](#).

### **VIC**

Email: [vcr@cancervic.org.au](mailto: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](#)

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## **[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
<b>ACA</b> <b>HealthECLIPSE</b> code: ACA HCP code: ACA	P: 1300 368 390 acahealthit@acahealth.com.au	P: 1300 368 390 <a href="mailto:acahealthit@acahealth.com.au">acahealthit@acahealth.com.au</a>

<b>Alliance</b> <b>(AHSa)</b>	P: 03 9813 4088 access@ahsa.com.au
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<b>AHM</b> ECLIPSE code: AHM HCP code: AHM	P: 1300 524 456 <a href="mailto:Eclipse@medibank.com.au">Eclipse@medibank.com.au</a>	P: 1300 560 680 <a href="mailto:Eclipse@medibank.com.au">Eclipse@medibank.com.au</a> AHM and Medibank have the same support team
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<b>Australian</b> <b>Unity</b> ECLIPSE code: AUH HCP code: AUF	P: 1800 035 360 <a href="mailto:dgilder@australianunity.com.au">dgilder@australianunity.com.au</a>
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**BUPA***ECLIPSE code:**BUP**HCP code: BUP*

P: 134 135F: 1300 130 623 *for sending claims manually*

[dr.billing@bupa.com.au](mailto:dr.billing@bupa.com.au)

**Only** for sending claims with Problems / Rejections

[gapscheme@bupa.com.au](mailto:gapscheme@bupa.com.au)

**Only** for if you are unable to **fax**

P: 134 135

[gordon.barrett@bupa.com.au](mailto: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](mailto:providers@cbhs.com.au)

P: 1300 654 123

[access@cbhs.com.au](mailto:access@cbhs.com.au)

Alternatively

[julie.mckinnon@cbhs.com.au](mailto: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](mailto:enquiries@hunterhi.com.au)

P: 02 4990 1385

[CDH.BenefitsFund@Hunterhi.com.au](mailto:CDH.BenefitsFund@Hunterhi.com.au)

**CUA Health  
Limited**

*ECLIPSE*

*code: CHF*

*HCP code: CPS*

P: 1300 499 260

[cuahealth@cuahealth.com.au](mailto:cuahealth@cuahealth.com.au)

P: 1300 499 260

[cuahealth@cuahealth.com.au](mailto:cuahealth@cuahealth.com.au)

*Alternatively*

[karen.coventry@cua.com.au](mailto: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](mailto: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](mailto: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](mailto: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](mailto:Jamie-LeeGardham@gmhba.com.au)

[joannesheldon@gmhba.com.au](mailto:joannesheldon@gmhba.com.au)

**GU Health  
(FAI)**

*ECLIPSE*

*code: FAI*

*HCP code: FAI*

P: 1800 249 966

[corporate@guhealth.com.au](mailto:corporate@guhealth.com.au)

[providers@honeysucklehealth.com.au](mailto:providers@honeysucklehealth.com.au)

**HBF**

*ECLIPSE*

*code: HBF*

*HCP code: HBF*

P: 1300 810 475

[expresspayqueries@hbf.com.au](mailto:expresspayqueries@hbf.com.au)

P: 1300 810 475

[lorraine.hort@hbf.com.au](mailto: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](mailto:claims@hif.com.au)

P: 1300 134 060

[michelle.peacock@hif.com.au](mailto:michelle.peacock@hif.com.au)

**HCF**

*ECLIPSE*

*code: HCF*

*HCP code: HCF*

P: 1800 670 302

[medicoverenquiry@hcf.com.au](mailto:medicoverenquiry@hcf.com.au)

P: 1800 670 302

[MFarlow@hcf.com.au](mailto:MFarlow@hcf.com.au) (Maria)

Alternatively

[dfernandez@hcf.com.au](mailto:dfernandez@hcf.com.au) (David)

**Health Care  
Insurance**

*ECLIPSE*

*code: HCI*

*HCP code: HCI*

P: 1800 804 950

P: 1800 804 950

[jamie.gillam@hcilt.com.au](mailto:jamie.gillam@hcilt.com.au)

**Health  
Partners**

*ECLIPSE*  
*code: SPS*

*HCP code: SPS*

P: 1300 113 113

P: 1800 465 172

[hospitalclaims@healthpartners.com.au](mailto:hospitalclaims@healthpartners.com.au)  
[davids@healthpartners.com.au](mailto: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](mailto:hospitalteam@health.com.au)

*Alternatively*

[Catherine.Ngo@health.com.au](mailto:Catherine.Ngo@health.com.au)  
[Gemma.Oliver@health.com.au](mailto:Gemma.Oliver@health.com.au)

**Latrobe**

*ECLIPSE*  
*code: LHS*

*HCP code: LHS*

P: 1300 362 144

E: [info@lhs.com.au](mailto:info@lhs.com.au)

P: 1300 362 144

[tan@lhs.com.au](mailto:tan@lhs.com.au)

**Medibank**

*ECLIPSE*  
*code: MPL*

*HCP code: MPL*

P: 1300 130 460

P: 1300 130 460

[eclipse@medibank.com.au](mailto:eclipse@medibank.com.au)

**Mildura**

*ECLIPSE*  
*code: MDH*

*HCP code: MDH*

P: 03 5023 0269

[providers@mildurahealthfund.com.au](mailto:providers@mildurahealthfund.com.au)

P: 03 5023 0269

[eclipse@mildurahealthfund.com.au](mailto:eclipse@mildurahealthfund.com.au)

**MO Health***ECLIPSE**code: MYO**HCP code: MYO*

P: 1800 333 004

P: 1800 333 004

[Vaibhav.Makin@aia.com](mailto:Vaibhav.Makin@aia.com)**Navy Health***ECLIPSE**code: NHB**HCP code: NHB*

P: 1300 217 736

[query@navyhealth.com.au](mailto:query@navyhealth.com.au)[query@navyhealth.com.au](mailto:query@navyhealth.com.au)**NIB***ECLIPSE**code: NIB**HCP code: NIB*

P: 1300 853 530

[medigap@nib.com.au](mailto:medigap@nib.com.au)[internationalclaims@nib.com.au](mailto:internationalclaims@nib.com.au) (For overseas claims)

P: 1300 853 530

[hospitaleclipse@nib.com.au](mailto:hospitaleclipse@nib.com.au)[provrel@nib.com.au](mailto:provrel@nib.com.au)**Nurse and  
Midwives***ECLIPSE**code: NMW**HCP**code: NMW*

P: 1300 344 000

[submit.claim@nmhealth.com.au](mailto:submit.claim@nmhealth.com.au)

P: 1300 344 000

[EclipseClaims@nmhealth.com.au](mailto:EclipseClaims@nmhealth.com.au)

Alternatively

[George.Drakakis@nmhealth.com.au](mailto:George.Drakakis@nmhealth.com.au)[dianne.roe@teachershealth.com.au](mailto:dianne.roe@teachershealth.com.au)**OneMediFund***ECLIPSE**code: OMF**HCP code: OMF*

P: 1800 148 626F: 1300 673 406

P: 1800 148 626

[info@onemedifund.com.au](mailto: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](mailto:info@peoplecare.com.au)

**Phoenix  
Health**

*ECLIPSE*

*code: PHF*

*HCP code: PWA*

P: 1800 028 817

P: 1800 028 817

[enquiries@phoenixhealthfund.com.au](mailto:enquiries@phoenixhealthfund.com.au)

[info@peoplecare.com.au](mailto:info@peoplecare.com.au)

**Police Health**

(also managed

by Emergency

Services Health) P: 1800 603 603F: 1800 008 554

*ECLIPSE*

*code: POL*

*HCP code: SPE*

P: 1800 603 603

[providerenquiries@policehealth.com.au](mailto:providerenquiries@policehealth.com.au)

**Queensland  
Country**

*ECLIPSE*

*code: QCH*

*HCP code: QCH*

P: 1800 813 415

P: 1800 813 415

[rharding@qccu.com.au](mailto: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](mailto:alice.caldwell@tuh.com.au)



**Reserve Bank  
health**

*ECLIPSE* P: 1800 027 299F: 1300 309 704  
*code: RBH*  
*HCP code: RBH*

P: 1800 027 299  
[info@myrbhs.com.au](mailto:info@myrbhs.com.au)

**RT Health**

*ECLIPSE* P: 1300 886 123 (option 5)  
*code: RTH* [access@rthealthfund.com.au](mailto:access@rthealthfund.com.au)  
*HCP code: RTE*

P: 1300 886 123  
[hospitals@rthealthfund.com.au](mailto:hospitals@rthealthfund.com.au)

**St Lukes**

*ECLIPSE*  
*code: SLM* P: 1300 651 988  
*HCP code: SLM*

P: 1300 651 988  
[general@stlukes.com.au](mailto:general@stlukes.com.au)

**Teachers  
Federation**

*ECLIPSE* P: 1300 728 188  
*code: TFH*  
*HCP code: NTF*

P: 1300 728 188  
[elizabeth.cashman@teachershealth.com.au](mailto:elizabeth.cashman@teachershealth.com.au)  
Alternatively, try:  
[EclipseClaims@teachershealth.com.au](mailto:EclipseClaims@teachershealth.com.au)  
[George.Drakakis@nmhealth.com.au](mailto:George.Drakakis@nmhealth.com.au)  
[dianne.roe@teachershealth.com.au](mailto:dianne.roe@teachershealth.com.au)

**Transport  
Health**

*ECLIPSE* P: 1300 806 808  
*code: TFS*  
*HCP code: TFS*

P: 1300 806 808  
[hospitals@transporthealth.com.au](mailto:hospitals@transporthealth.com.au)

**Westfund***ECLIPSE**code: WFD**HCP code: WFD*

P: 1300 937 838

medicalbenefits@westfund.com.au

P: 1300 937 838

[sharp@westfund.com.au](mailto:sharp@westfund.com.au)

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## Closing the Accounting Period

Closing the '**Accounting Period**' refers to **locking down your financial figures** up to a **given date** (usually the end of the month) so that they **cannot be changed**.

We **do not** recommend closing the accounting period for the last month, on the first day of the current month. Rather, give yourself seven to ten days to get your figures to a point where you are happy. That is, after all rejections and adjustments are made.

In other words, it ensures that the figures seen on your revenue report run out of FYDO match the figures seen on your bank account, to the cent. And that those figures then cannot be amended in FYDO.

So let's see where the accounting period is closed.

Start off by going over to settings.



Then, click **Close Accounting Period**.

> Close Accounting Period

2

Enter the date you wish to **lock your figures** to and hit **Save**.

## Close Accounting Period



By locking the account period, transactions with an accounting period on or prior to the date below, will not be able to be modified nor deleted.

Location **Eccles**

Accounting Period Locked to

21/09/2020

3



4

Save

Cancel

I should also mention that this action is recorded in FYDO's audit log, so you can see who closed the accounting period and when.

To view the audit log, go to **Settings**, then click on **Logs**.

SETTINGS

**General**

- > Accommodation Categories
- > Appointment Types
- > Area Codes
- > Booking Codes
- > Cancelled Reasons
- > Checkers - Letters
- > Departments
- > Deposit Types
- > Doctors
- > Doctor Specialities
- > Document Types
- > ECLIPSE Mapping
- > End of Day Banking
- > Health Funds
- > Health Fund Participants
- > Hospitals
- > Invoice Messages
- > Items
- > Item Types
- > Locations
- > Logs **2**
- > Practices
- > Printer Configuration
- > Program Numbers
- > Recall Reasons
- > Referral Types
- > Referring Doctors
- > SMS History
- > Staff Roles
- > System Configuration
- > Templates
  - SMS Templates
  - Templates
- > Third Parties
- > User Groups
- > Users
- > Webhooks

**Clinic**

- > Appointments Setup
- > Rooms
- > Fee Management
  - Bulk Fee Update
  - Fee Levels
- > Close Accounting Period

**1**

You will see a log similar to this when the accounting period is closed.

Amir Balouchi (ACSS)  
(Backend)

Accounting period closed for Eccles [ID - 1] - changed from 21/09/2020 to 30/09/2020

20/10/2020 5:22:54 PM

## [Making a Referring Doctor Inactive](#)

Need to delete or remove an existing referring doctor? Read ahead to find out how we can make them **Inactive**.

1. Click on **Settings**



## 2. Then, **Referring Doctors**

[> Referring Doctors](#)

This will display a list of all the referring doctors you currently have.

3. Select the doctor you wish to make **Inactive** by clicking anywhere on their row in the list of doctors.

4. You will now see the details for this doctor, now click on **Edit** on the top right hand corner of the page. Simply untick the **Active** box next to **Status** as shown below.

A screenshot of a doctor's details form. At the top right is an 'Edit' button. The form contains the following fields: 'Type' (Specialist), 'Speciality' (Other), 'Email' (empty), 'Mobile' (- -), 'Created On' (12/03/2020), 'Birthdate' (empty with a calendar icon), and 'Status' (Active, with a checkbox).

Type	Specialist
Speciality	Other
Email	
Mobile	- -
Created On	12/03/2020
Birthdate	
Status	<input checked="" type="checkbox"/> Active

Now the doctor has been made **Inactive**; you will not find them when searching for them, and they will not appear on the list of **Referring Doctors**.

If you wish to view the doctor again, or make them **Active** again, simply tick the **Show Inactive** box from the **Referring Doctors** screen.

☒ Show Inactive

You will now be able to see the doctor, and you can edit them as per normal, including making them **Active** again.