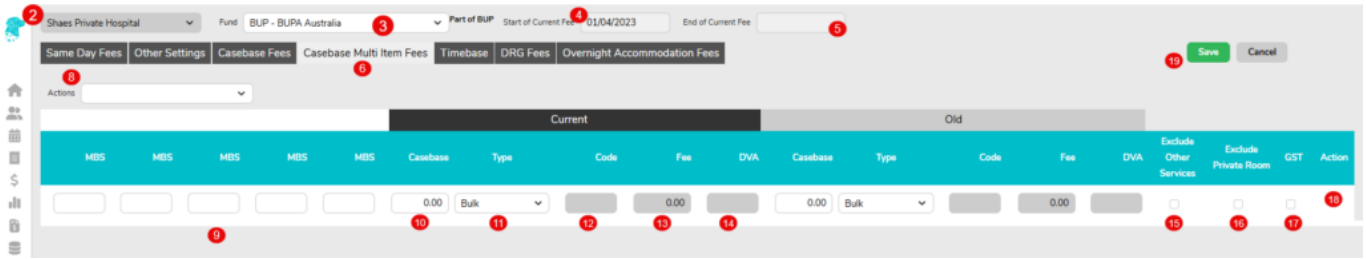
Hospital Health Fund Fees – Casebase Multi Item Fees

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



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 However, it is a good way to ensure accounts aren't accidentally billed at outdated prices)*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 ✗ 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