

Configurations for Bulk Bill Claim

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This article is part of the systems administration guide. You will require administration access to view the pages mentioned in this article.

Bulk Bill Claims are the claims between Patient and Medicare/DVA.

The checklist below walks you through the setup of IHC in the CareRight Billing and Claiming Module.

Global Settings > Require Bulk Bill Consent

Where customers manage bulk bill consent forms electronically, the system contains behaviour to block any bulk bill claims from being sent if an electronic consent or other evidence has been supplied. This is particular relevant for Telehealth.

By default; the system assumes your compliance is handled via paper based record keeping. Be aware, if transitioning to electronic bulk bill consent; all invoices pending claim will require update with evidence or for the patients to sign electronically.

Request Link Results

Require Bulk Bill Consent

true

false

Special Note	Steps	Full Article	Specific & Mandatory Fields
1st Time Setup only Note: Claims will be unsuccessful if Medicare Registration is not completed correctly.	1. Register for Medicare Online	Medicare Registration Information Pack	Please contact Medicare Australia for full details on 1800 700 199.
	2. Contact Clintel for Medicare Online Module installation.		Please contact your designated Clintel Project Manager or raise a Redmine Ticket.
System Administration Configuration in CareRight			
1st Time Setup only	3. Set the Location, Service Locations and Medical Providers.	Location Service Location Medical Provider	
	5. Item Types configuration	Item Code	

	6. Import MBS Pricing	Update MBS Pricing	
	7. Set Claim and Rate Contracts	Contracts	
	8. Configure Medicare and DVA as Guarantor, with Type:Other		