

# Practice Incentives Program After Hours Incentive application

## Purpose of this form

Complete this form to apply for the Practice Incentives Program (PIP) After Hours Incentive. This form is only to be used by practices already registered for the PIP.

For the purposes of the PIP, after hours refers to:

- anytime outside 8.00 am to 6.00 pm weekdays
- anytime outside 8.00 am to 12.00 noon on Saturday, **and**
- all day on Sunday and public holidays.

The complete after hours period is further broken into:

- sociable after hours period – 6.00 pm through to 11.00 pm weeknights
- unsociable after hours period – 11.00 pm through to 8.00 am weekdays, hours outside of 8.00 am and 12.00 pm Saturdays and all day Sundays and public holidays.

## Important information

Health Professional Online Services (HPOS) provides secure and convenient online services for health professionals and administrators.

Using your Provider Digital Access (PRODA) account details, you can make claims and update your practice details through HPOS. Lodgement through HPOS is effective immediately.

To register for a PRODA account or to find out more about HPOS, go to [servicesaustralia.gov.au/hpos](http://servicesaustralia.gov.au/hpos)

If you are unable to apply using HPOS, you can complete this form and send it to us for manual processing.

## Filling in this form

- **Please use black or blue pen**
- Print in BLOCK LETTERS
- Mark boxes like this  with a ✓ or ✗

## Returning your form

Check that all required questions are answered and that the form is signed and dated.

Fax the completed form to **1300 587 696**.

## For more information

Go to [servicesaustralia.gov.au/pip](http://servicesaustralia.gov.au/pip)

If you need assistance completing this form, email [pip@servicesaustralia.gov.au](mailto:pip@servicesaustralia.gov.au) or call **1800 222 032** Monday to Friday, between 8.30 am and 5.00 pm, Australian Central Standard Time.

**Note:** Call charges may apply.

## Practice details

### 1 Practice ID

### 2 Australian Business Number (ABN)

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### 3 Practice name

### 4 Full practice address

The practice address is the address from which you render services. Do not provide PO Box addresses.

Building name

Unit  Suite  Shop  Floor number

Street number

Street name

Suburb

State  Postcode

### 5 Practice phone number

Fax number

Email

## Eligibility requirements

To be eligible for the PIP After Hours Incentive, the practice must meet the requirements set out in the ***PIP After Hours Incentive Guidelines*** available from [servicesaustralia.gov.au/pip](http://servicesaustralia.gov.au/pip)

### Core eligibility requirements

1. Be registered for the PIP and maintain eligibility for the entire quarter before the payment month.
2. Provide after hours care for patients in accordance with the Royal Australian College of General Practitioners (RACGP) *Standards for general practices*.
3. Clearly communicate after hours arrangements to patients.
4. Provide consultation notes back to the practice by the next day.
5. Ensure practice arrangements are outlined in a formal signed document.
6. Register the arrangements in the National Health Service Directory.

Practices that meet the core eligibility requirements may be eligible for one of the 5 payment levels of the PIP After Hours Incentive. You can only apply for one payment level. Please indicate which payment level you are applying for.

- 6 Indicate the payment level for which you are applying.

Tick **ONE** only

#### Level 1: Participation Payment

- Practices must have formal arrangements in place to ensure that practice patients have access to care in the **complete after hours period** (hours outside of 8.00 am to 6.00 pm weeknights, hours outside of 8.00 am to 12.00 pm Saturdays and all day Sundays and public holidays). The practice does not have to provide the care itself if it has formal arrangements in place for patients to access care through a third party.

#### Level 2: Sociable After Hours Cooperative Coverage Payment

- Practices must participate in a cooperative arrangement that provides after hours care to practice patients in the **sociable after hours period** (6.00 pm to 11.00 pm weeknights).
- Practices must ensure formal arrangements are in place to cover the **unsociable after hours period** (11.00 pm to 8.00 am weekdays, hours outside of 8.00 am and 12.00 pm Saturdays and all day Sundays and public holidays).
- The cooperative must meet the definition of a cooperative as outlined in the ***PIP After Hours Incentive Guidelines*** available from [servicesaustralia.gov.au/pip](http://servicesaustralia.gov.au/pip)
- Practices must provide the minimum levels of care towards the cooperative outlined in the after hours guidelines.

#### Level 3: Sociable After Hours Practice

##### Coverage Payment

- Practices must provide after hours care to practice patients directly through the practice in the **sociable after hours period** (6.00 pm to 11.00 pm weeknights).
- Practices must ensure formal arrangements are in place to cover the **unsociable after hours period** (11.00 pm to 8.00 am weekdays, hours outside of 8.00 am and 12.00 pm Saturdays and all day Sundays and public holidays).
- Practices cannot participate in a cooperative to be eligible for this payment.

#### Level 4: Complete After Hours Cooperative

##### Coverage Payment

- Practices must participate in a cooperative arrangement that provides after hours care to practice patients for the **complete after hours period** (hours outside of 8.00 am to 6.00 pm weeknights, hours outside of 8.00 am to 12.00 pm Saturdays and all day Sundays and public holidays).
- The cooperative must meet the definition of a cooperative as outlined in the ***PIP After Hours Incentive Guidelines*** available from [servicesaustralia.gov.au/pip](http://servicesaustralia.gov.au/pip)
- Practices must provide the minimum levels of care towards the cooperative outlined in the after hours guidelines.

#### Level 5: Complete After Hours Practice

##### Coverage Payment

- Practices must provide after hours care to practice patients in the **complete after hours period** (hours outside of 8.00 am to 6.00 pm weeknights, hours outside of 8.00 am to 12.00 pm Saturdays and all day Sundays and public holidays).
- Practices cannot participate in a cooperative to be eligible for this payment.
- Practices can only use a localised or practice based nurse triaging arrangement if they are in rural and remote areas RRMA 5 to 7.

## Privacy notice

**7** Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by Services Australia for the purposes of the Practice Incentives Program (PIP).

Your personal information will be disclosed to the Australian Government Department of Health to enable that department to administer aspects of PIP, including for program compliance purposes, for statistical and research purposes and to inform policy development.

Your personal information may be used by Services Australia, or given to other parties where you have agreed to that, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which Services Australia will manage your personal information, including our privacy policy, at [servicessaustralia.gov.au/privacy](https://servicessaustralia.gov.au/privacy)

## Declaration

The authorised contact person must be authorised by the practice owner(s) and listed in the Practice Incentives Program.

### 8 I agree to:

- advise Services Australia of any changes to practice arrangements:
  - online through Health Professional Online Services. Changes made through Health Professional Online Services are immediate and therefore can be made up to and on the relevant point-in-time date, **or**
  - by completing the ***Practice Incentives Change of practice details*** form (IP005), or advising in writing **no later than 7 days** before the relevant point-in-time date.

#### I declare that:

- the practice meets all the eligibility requirements for the payment level stated for the entire quarter before the payment month, including the point-in-time date.
- I will adhere to the eligibility requirements set out in the ***Practice Incentives Program After Hours Incentive Guidelines***.
- the information I have provided in this form is complete and correct.

#### I understand that:

- if this is not done, incentive payments may be reduced or recovered and the practice's eligibility for the Practice Incentives Program may be affected.
- the Australian Government Department of Health may conduct compliance audits and the practice may be required to provide information as evidence of compliance with the Practice Incentives Program eligibility requirements and that failure to do so may result in past Practice Incentives Program payments being recovered and/or future payments being suspended or ceased.
- giving false or misleading information is a serious offence.

Owner's full name

Owner's signature

Date

**OR**

Authorised contact person's full name

Authorised contact person's signature

Date