



MMEEx User Manual

Setting Yourself Up for Patient Billing

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For On-line billing support for our clients.

If there is a break in communications or any network faults at the Medicare end, call the eBusiness team on 1800 700 199 or ebusiness@humanservices.gov.au

It is the user's responsibility to maintain and update a valid Medicare PKI certificate.

Setting Yourself Up for Patient Billing

To integrate MMEx with Medicare Online Claiming, please contact the MMEx support desk on 1 300 722 926 to notify us that you wish to do so. We will then issue you with a locationID (minorID). A locationID is eight characters long and will begin with the letters 'UWA'. LocationIDs are not your postcode or name of your site.

Next complete the ARIF (Acceptable Referee Identification Form), Duly Authorised Officer letter, Online Claiming Banking Details form, Online Claiming for Medicare and DVA Provider Agreement and Registered Medicare Australia Communities of Interest (Col) Site Certificate – downloadable from this page – to send to Medicare. For more information regarding these forms you can contact the Medicare help desk on 1800 700 199. Medicare will then send you a CD in the mail with the certificate that you ordered.

Send the files on this CD (labeled 'fac_encrypt.p12' and 'fac_sign.p12'), the passcode for the certificate and a list of the providers listed on the 'Online Claiming Banking' form with those peoples MMEx usernames as an mmex message to the Help Desk or as an email to help@mmex.net.au

- ARIF (Acceptable Referee Identification Form)
- Application for Public Key Infrastructure (PKI) Site Certificate
- Online Claiming Banking Details form
- Online Claiming for Medicare & DVA Provider Agreement (This form is only required if the provider has never submitted any electronic claims before. If you have submitted an electronic claim at a previous practice or using a different piece of software then this is not necessary for you to fill out.)
- Registered Medicare Australia Communities of Interest (Col) Site Certificate.

Online Patient Verification

During your claim, you may receive a message stating that, 'The patient details were last verified on [date] and the patient was found to be eligible for DVA claiming.' If this message appears, click the Verify Now link.

The Online Verification Page will open in a new tab (or window) in your Internet browser.

Click on the Verify DVA Details / Verify Medicare Details button at the top of the page.

If you receive a message stating, 'The patient details have been matched against the DVA/Medicare

record,' you may simply continue back to your claim.

If on the other hand, you receive a green message stating, 'The individual has been matched using the submitted data however differences were identified. Please check the information returned and update your records,' please click on the Accept Changes button at the top of the page before returning to and completing your claim.

In no way does the 'Update Medicare Details' change any information within MMEx. **Medicare numbers and expiry dates need to be changed in the patient file by the clinician/clinic admin only.** This is not an issue with MMEx in any way, shape or form. The Medicare service for verification does not present any data regarding the new card's expiry date.

Sending Immunisation Reports to AIR/Medicare

To set yourself up to send immunisation claims to Medicare, first go to your Profile page to ensure your details are correct.

On the profile page, ensure that your Provider and Location IDs are given. If your Location ID is not listed, please contact the MMEx Help Desk.

Next tick the Send Immunisations to AIR check box below.

To ensure that your Profile settings have been reset, you may need to sign out and back into MMEx again.

To then add a new immunisation record, open your patient record by clicking on the Patients tab in the top menu and selecting your patient from the list. Click on the Immunisations Tab, click on the Add Immunisation button to open the 'Add Immunisation Record' pop-up box.

Ensure that the date is correct, select the type of immunisation from the Type drop down list and select the site to where the immunisation was administered from the Site drop down list. Enter the batch number and dose of the immunisation and click the OK button.

The new immunisation will now appear listed back on the Immunisations Screen.

To send the claim to Medicare, go to Administration > Immunisation Reporting and click on AIR The newly made report will appear listed on the AIR screen. Click on a report to open it.

To expand the list of episodes in the encounter, click on the patient name in the Encounters section, you will then see the episodes listed below.

You can then send that report to Medicare individually by clicking the Send Report button. You can also edit the report before sending it by clicking on the Edit Report button if necessary. To send multiple reports at once, click the Back to Reports button, taking you back to the previous screen, and click the Send All Reports button.

After clicking Send, the report will be in a "Pending" state for approximately half an hour while being

processed by Medicare. Once processed and sent back, the report will be updated to show as "Succeeded".

Department of Health Validation rules

Australian Government Department of Human Services (the department) wishes to confirm that as a result of the Medicare Online June 2015 release, client names have had the validation rules updated:

For Bulk Bill (DBS) Patient Claims Interactive (PCI), Patient Claim Store and Forward (PCS) and Same Day Delete(SDD) claims, patient/claimant first names and surname fields have been updated. Characters accepted are alpha-numeric characters, apostrophes, hyphens and spaces, however spaces must not appear immediately before or after the apostrophes and hyphens.

For example: O'Toole - Valid O' Toole - Invalid (one or more spaces after apostrophe) O 'Toole - Invalid (one or more spaces before apostrophe)

Anne-Marie - Valid Anne -Marie - Invalid (one or more spaces before hyphen) Anne- Marie - Invalid (one or more spaces after hyphen) Anne - Marie - Invalid (one or more spaces before and after hyphen)

Robert AKA Bob - Valid Robert (Bob) - Invalid ('(' and ')') are not one of the allowed characters)

If you have received a 9201 return code (invalid format for data item) please do not resubmit the transmission to the department until you have checked and updated names fields according to the rules listed above.

Please ensure that the name used in these fields matches the name displayed on the Medicare card. For example, where William is on the Medicare card however the preferred name is Bill, please transmit William.