

## Terms and Conditions for Mildura Health Fund (MHF) Recognised Optical Providers

Effective 1 February 2021

### 1 TERMS AND CONDITIONS

- a) The Terms and Conditions for Mildura Health Fund Recognised Optical Providers apply to you from the date you become a Recognised Provider with Mildura Health Fund. In particular, they apply each time one of our Members claims a Benefit for goods or services you provide to them. It is your responsibility to regularly check the 'Forms' section of our website to ensure you are familiar with these Terms and Conditions and any changes to the Terms and Conditions.
- b) These Terms and Conditions also apply in addition to relevant requirements set out in the Mildura Health Fund Terms and Conditions for Recognised Providers of General Treatment (Extras) Services

### 2 APPLICATION

These Terms apply to optometrists, opticians, and optical dispensers.

### 3 REQUIREMENTS FOR PAYMENT OF BENEFITS

- a) Optical Appliances must be:
- (i) Dispensed by or under the direct supervision of a provider who meets the recognition requirements set out in the Mildura Health Fund Terms and Conditions for Recognised Providers of General Treatment (Extras) Services
  - (ii) Supported by a valid minimum prescription issued by an optometrist or other person who meets the requirements under the section 122 of the Health Practitioner Regulation National Law Act 2009.
  - (iii) Fitted instore (unless supplied by an online Provider).
  - (iv) Supplied within Australia; and
  - (v) Included a manufactures warranty that is explained to the member at the time of purchase and is either filed by the Provider or supplied to the member at the time of purchase.
  - (vi) Supplied for the purpose of correcting, remedying, or relieving any refractive abnormality of defect sight.
- b) Patient records must be retained for each member a Provider supplies an Optical

Appliance to that:

- (i) Comply with Section 8 – Member Accounts and Receipting Record Requirements in the Mildura Health Fund Terms and Conditions for Recognised Providers of General Treatment (Extras) Services
  - (ii) Contain prescription details including expiry date and the name of the Provider number of the prescribing practitioner.
  - (iii) Include itemised invoices that comply with Section 8 – Member Accounts and Receipting Record Requirements in the Mildura Health Fund Terms and Conditions for Recognised Providers of General Treatment (Extras) Services including service codes and any applicable discounts.
  - (iv) Details of the dispenser, order and collection date, and payment information; and
  - (v) Financial records including date of payment, product description product price, charge amount, benefit amount and Provider number.
  - (vi) Comply with the HICAPS User Agreement in its entirety, where HICAPS is being used.
- c) Sale and billing of Optical Appliances
- (i) A benefit can only be provided on the date of collection.
  - (ii) Benefits cannot be used at the date of ordering or as a deposit for an order.
  - (iii) A claim cannot be split over more than one annual claiming period when the claims relate to the same Optical Appliance dispensed at the same Provider.
  - (iv) A provider must take reasonable steps to ensure that a member benefit is not shared with anyone else other than the individual whom the Optical Appliance is prescribed.
  - (v) When a member purchases optical frames only, a benefit is only payable where it is supported by a valid

- prescription which is retained by you.
- (vi) Where a member is entitled to a refund for an Optical Appliance, whether due to cancellation, return, defect, or any other reason allowed by the Provider, any benefit paid for the Optical Appliance must be refunded to Mildura Health Fund (MHF) within 14 business days.
  - (vii) Benefits are not payable for non-prescription glasses, including sunglasses. A provider must not issue receipts or invoices that contain claimable service codes recognised by MHF, or any other Private Health Insurer.
- d) Dyslexia and Irlen lenses are eligible for a benefit, MHF choose to provide a benefit which will be paid towards both the frames and the lenses. The Dyslexia or Irlen lens prescription is required to support the members claim.

such details as are reasonably necessary for us to assess a claim (including the name and address of your practice, your Provider number(s), patient details and for each good or service provided, the relevant item number/s and/or service descriptions, , date of provision and the fee charged relevant to each item number/service).

**Mildura Health Fund, MHF, we, our and us** means MHF ABN 13 078 202 089.

**Mildura Health Fund or MHF Recognition** means our recognition of you as a Recognised Provider.

**Optical Appliance** means any appliance designed to correct, remedy, or relieve any refractive abnormality or defect of sight.

**Provider** means any health practitioner or business providing health goods or services recognised by MHF.

**You and your** means the Recognised Provider to whom these **Terms and Conditions** apply.

### 3 AUDIT

MHF may audit compliance with these Terms and Conditions, in accordance with Mildura Health Fund Terms and Conditions for Recognised Providers of General Treatment (Extras) Services

### 4 OPTICAL DESPENSERS PROVIDER NUMBERS

Provider numbers will not be issued to optical dispensers at an organisation level, MHF require the treating provider's provider number and details, or alternatively principal optometrist provider number and details to be reflected on the invoice/or receipt.

### 5 GENERAL

These **Terms and Conditions** are governed by the laws of Australian States and Territories

### 6 GLOSSARY

**Extras** means relating to any form of General Treatment that not Hospital-substitute or Dental Treatment.

**Benefit** means an amount of money payable by a private health insurer in respect of a health care treatment eligible for such payment under the Private Health Insurance Act 2007 (Cth).

**Business Day** means a day other than a Saturday, Sunday or public holiday in the Australian State or Territory in which the goods or services are provided.

**Member** means a person who holds, or is insured under, a MHF health insurance policy.

**Member Account** means a signed statement of account and receipt issued for a good or service you have provided to one of our Members which sets out