

9 September 2019

DVA Ref: Treatment Cycle 00D



Australian Government
Department of Veterans' Affairs

Dear Allied Health Provider,

The new treatment cycle: changes to allied health referrals for DVA-funded care

From 1 October 2019, referrals for DVA clients to allied health services are changing. Referrals will be valid for up to 12 sessions or a year, whichever ends first. This new 'treatment cycle' aims to improve the quality of care for DVA clients.

DVA clients can have as many treatment cycles as their usual GP considers to be clinically necessary. Clients can also have treatment cycles for different allied health treatment types at the same time.

The treatment cycle does not apply to exercise physiology and physiotherapy services for veterans with a Totally and Permanently Incapacitated (TPI) Gold Card from DVA. You can continue service provision as usual to these clients. The DVA Gold Card clearly indicates if a client is a TPI veteran. The treatment cycle arrangements detailed in this letter do not apply to services you provide to DVA clients with a TPI Gold Card.

What do I need to do from 1 October 2019?

From 1 October 2019, referrals for DVA clients to allied health services will be valid for up to 12 sessions or a year, whichever ends first.

Under the treatment cycle, when you receive a referral for a DVA client you will need to prepare a treatment plan, including goals, with the client. At the end of the treatment cycle, you will need to prepare and send a report on the client's progress to their usual GP.

The new End of Cycle Report item

The report you produce on the client's progress is an important aspect of the treatment cycle and is designed to support good communication between allied health providers and GPs.

The GP will use the report to review the client's progress and assess if further allied health treatment is clinically required, and whether other treatment options are indicated. It is important that the report is sent to the client's usual GP as they are the client's care

coordinator. The client's usual GP is the GP or general practice that provides the majority of care to the client.

To support allied health providers, DVA is introducing a new End of Cycle Report item of \$30 (excl. GST) that you will be able to claim on completion of the report at the end of each treatment cycle.

Why is the treatment cycle being introduced?

The treatment cycle supports a more collaborative approach to the care of DVA clients. Better communication and coordination between GPs, allied health providers and the DVA client will help ensure they receive clinically appropriate care based on their needs.

It is important that GPs review the progress and outcomes of allied health treatment, as they coordinate care for DVA clients and are familiar with all their client's health care needs. This is particularly important when managing ongoing or chronic conditions.

Transitioning to the treatment cycle arrangements

All new referrals made from 1 October 2019 will be subject to treatment cycle arrangements.

Clients with an existing *indefinite* allied health referral can receive up to 12 sessions or one year access (whichever ends first) of allied health treatment after 1 October 2019 before requiring a new GP referral.

Clients with an existing *annual* allied health referral can receive up to 12 sessions of allied health treatment after 1 October 2019, or until their annual referral expires (if that occurs first).

Where can I find more information?

The leaflets for allied health providers and practice teams that come with this letter explain more about how treatment cycles work. You can also visit the DVA website for more information: www.dva.gov.au/treatment-cycle

If you have any questions about this letter you can contact DVA on 1800 550 457 (from the menu select option 3 followed by option 1).

Yours sincerely,

Kate Pope
First Assistant Secretary
Veterans' Services Design Division