

Medicare Two-way claim (MS001)

Purpose of this form

Medicare Two-way is a Services Australia initiative designed to make lodging private health insurer claims easier for people with private health insurance. Under Medicare Two-way, you can lodge all your in-hospital and ancillary claims either with your participating private health insurer or with Medicare.

There are over 35 private health insurers participating in Medicare Two-way. Contact your private health insurer to see if they participate in Medicare Two-way or ask at one of our service centres. If you have questions about private health insurance claims, contact your private health insurer.

Returning this form

• In person at one of our service centres

Complete this form and a **Medicare claim (MS014)** form. If you do not have this form, go to servicesaustralia.gov.au/forms or visit one of our service centres.

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

Provide your original accounts with receipts if the accounts have been paid.

Place in the drop box at one of our service centres.

We will process your Medicare claim and forward your private health insurance claim to your private health insurer for processing. Private health insurer payments will be paid by Electronic Funds Transfer (EFT). To receive payment by EFT, register your bank account details with your private health insurer.

• At a private health insurer

Complete your private health insurance claim form as well as a **Medicare claim (MS014)** form. If you do not have this form, go to servicesaustralia.gov.au/forms or visit one of our service centres.

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

Provide your original accounts with receipts if the accounts have been paid and return your completed forms and supporting documents to your private health insurer. Your private health insurer will forward your Medicare claim to Medicare for processing. Your claim will then be processed by us and your private health insurer.

• By post

Complete this form and a **Medicare claim (MS014)** form. If you do not have this form, go to servicesaustralia.gov.au/forms or visit one of our service centres.

Send your completed form with supporting documents to:

Services Australia
Medicare
GPO Box 9822
in your capital city

For more information

Go to servicesaustralia.gov.au/medicare or call 132 011. Call charges may apply.

Private health insurance member's details

1 Name of private health insurer

2 Private health insurance membership number

3 Family name

4 First given name

5 Postal address

Postcode

6 Do you want this recorded as your permanent postal address?

No ☐

Yes ☐

7 Phone number

()

Claiming the private health insurer medical gap benefit

The private health insurer medical gap benefit is the difference between the Medicare benefit and the Medicare schedule fee that your private health insurer will pay for in-hospital services.

8 Do you want to claim the private health insurer medical gap benefit?

No ☐ **Go to 13**

Yes ☐

9 Hospital name

10 Is this a public hospital?

No ☐ **Go to 12**

Yes ☐

11 Did you elect to be treated as a private patient?

No ☐

Yes ☐

12 Date of hospitalisation

From / / to / /

Ancillary claim details

Ancillary services are services such as dental, optical and physiotherapy. Ancillary claims do not attract a Medicare benefit. However, as part of the Medicare Two-way service, you are able to complete this form. Attach all original accounts with receipts if paid and lodge your ancillary claim at one of our service centres. Your claim will be forwarded to your private health insurer for processing.

13 Are you making a claim for any ancillary services? No ☐ **Go to 15**
Yes ☐

14 Ancillary claim details

Member's first given name	Services provided by	Account paid?
		No <input type="checkbox"/> Yes <input type="checkbox"/>
		No <input type="checkbox"/> Yes <input type="checkbox"/>
		No <input type="checkbox"/> Yes <input type="checkbox"/>
		No <input type="checkbox"/> Yes <input type="checkbox"/>
		No <input type="checkbox"/> Yes <input type="checkbox"/>
		No <input type="checkbox"/> Yes <input type="checkbox"/>
		No <input type="checkbox"/> Yes <input type="checkbox"/>

Privacy notice

15 The privacy and security of your personal information is important to us, and is protected by law. We need to collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Declaration

16 I hereby claim benefits for the professional services to which this claim relates and

I declare that:

- I have paid for, or am liable to pay, the expenses for these services.
- there is no entitlement to claim compensation or damages from any other source.
- the services were not for the purpose of health screening, superannuation entry or a health examination requested by an employer.
- the information I have provided in this form is complete and correct.

I understand that:

- giving false or misleading information is a serious offence.

I authorise:

- my private health insurer to contact the provider of any professional service for clarification of any details in this claim.
- Services Australia to forward my Medicare statement of benefit for in-hospital services associated with the attached **Medicare claim (MS014)** form electronically or manually to my private health insurer.

Private health insurance member's signature



Date

/ /