



How can I deliver services?

- Provider Transition
- Contracted Service Providers
- Hearing Practitioners
- Provider Factsheets**
- Using the portal
- Forms and publications

+ Claiming

+ Device Schedules

Compliance Monitoring and Support

+ CSPN's

Manufacturers and Suppliers

If you are having any problems downloading attached content or viewing links on this page please email hearing@health.gov.au.

Please note: PDF documents can be opened using free [Adobe Reader software](#).

Provider Factsheet - Coronavirus (COVID-19)-Updated 27 March 2020

As the COVID-19 situation continues to evolve, the Hearing Services Program (the program) understands that this is a particularly challenging time for many of our Contracted Service Providers (providers) and we are committed to keeping providers informed with the latest advice on COVID-19. There have been many issues raised by providers and it is important for providers to understand that the Department of Health manages and regulates the delivery of the Hearing Services Program to clients by providers, the Department does not regulate audiology services or the business practices of providers. Specifically, the program is not responsible for and does not manage the operational and business decisions of individual providers, such as, business opening hours or the opening and closing of sites. The following information is in relation to the Coronavirus and we remind all providers of the need to keep up to date.

Coronavirus (COVID-19) Updates

The Australian Government has a website for COVID-19 information: www.australia.gov.au/. This website contains information for states and territories, business, health, travellers, financial support etc.

In addition, find up-to-date information on COVID-19 at <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>. This includes

- [Advice for the health and aged care sector](#) including Public Health Unit guidelines, epidemiology reports and other resources.
- [Advice on using personal protective equipment \(PPE\)](#).

Information on the Australian Government's assistance packages for businesses can be found at

- <https://www.business.gov.au/Risk-management/Emergency-management/Coronavirus-information-and-support-for-business>
- <https://treasury.gov.au/coronavirus/businesses>
- www.pm.gov.au/media/supporting-australian-workers-and-business
- <https://www.servicesaustralia.gov.au/individuals/subjects/affected-coronavirus-covid-19>.

Personal Protective Equipment

Please see the information on the Department of Health's website regarding [PPE](#). As of 27 March, the highest priority of the Government is to ensure access to masks and other PPE for front line acute health service and primary care staff. This includes

- public hospitals (supporting the states and territories), general practices, community pharmacies, and other settings where people are most likely to be presenting with COVID-19
- residential aged care facilities in the event of an outbreak.

Temporary site closure due to the impact of COVID-19

If your business has decided to temporarily close, you should register the temporary site closure due to 'natural disaster' on the portal. Please call 1800 500 726, or email hearing@health.gov.au, if you require assistance.

When your site re-opens, you will need to update the site's status on the portal. For more information, please refer to the [Updating site details](#) user guide.

Temporary sites

From 27 March, until further notice, providers can operate from new temporary sites (e.g. community centres) by following the same requirements for home visits (please see below).

Home visits

When conducting home visit appointments providers can

- Use the site ID for the site you usually work from when submitting a claim.
- Charge clients a travel fee under private service arrangements (this does not apply to temporary sites).

If providers decide to conduct home visits for program clients, practitioners must perform a subjective assessment of the testing environment and ambient noise levels. Practitioners will need to document on the client file how they managed any ambient noise.

Practitioners should be reminded about their obligations under the Scope of Practice for Audiologists and Audiometrists, which states

- Clinicians must apply principles and methods in order to adhere to appropriate standards for calibration and maintenance of equipment and the testing environment (see Diagnostic Assessments under 'Overarching knowledge and tasks applicable to all client groups')

- Clinicians must assess and improve the test environment in order to make it more suitable for audiological assessment of the adult client (see Diagnostic Assessments under 'Knowledge and tasks applicable to adult clients').

Equipment Calibration

Audiometric equipment used for testing must be calibrated to the current Australian Standard/s relevant to each piece of equipment used. From 27 March, until further notice, providers are not required to perform equipment calibrations. It is expected that practitioners perform biological calibrations of their audiometer, and check the calibrations of their 2cc coupler and probe tubes.

Services Available to clients

Providers can deliver urgent services to clients of the program if their usual service provider is closed. The below arrangements apply from 27 March until further notice.

Relocating clients in the portal

If a client approaches your clinic for urgent assistance with their device/s, you will need to follow the usual processes by transferring them to your site in the portal, and obtaining their consent.

The transfer will initiate a notification of relocation email to the client's usual service provider. If you are the client's usual service provider, when you re-open you will need to contact the client to determine

- if they genuinely want to relocate to another service provider
- if they approached another service provider to seek urgent assistance during your closure, but wish to continue receiving services from you.

If the client has genuinely chosen to relocate, you should promptly forward their file to the current service provider.

If the client wishes to continue receiving services from you, you will need to transfer them back to you in the portal and obtain a record of their consent, as usual.

Damaged devices

If a client has a damaged hearing device that needs to be serviced in the clinic or sent to the manufacturer for repair (and their usual service provider is closed) they can attend any service provider of the program for assistance.

If a client in this instance attends your clinic for help, you can service the hearing device or dispatch it to the manufacturer for repair. If you send the hearing device to the manufacturer, you should include a covering note to ask that it is returned to the client's usual service provider.

In this situation, you should contact the client's regular service provider (if possible), before undertaking this process as there will be occasions where the regular service provider will be closed for a significant period of time.

Lost or damaged beyond repair devices

If the client has an urgent need for a lost device to be replaced, clients are not required to complete a statutory declaration. Instead providers must document the date and time the client notified the clinic of their lost device, and how, when and where their device was lost.

Damaged devices must be returned to the manufacturer to determine if they are damaged beyond repair (DBR). DBR letters from the manufacturer must be retained on the client's file.

Depending on availability, you may consider offering a hearing aid on loan while the client's device is sent for repair or awaiting replacement.

During this time providers can also claim the item 555 to cover the cost of the co-payment (for non-DVA gold or white card holders) for lost and DBR devices.

Information on alternative service delivery

On a daily basis hearing practitioners see the most vulnerable people within the Australian Community. Our priority is to ensure the safety of clients and reduce any risk. As a result, providers should limit all face-to-face contact with clients and strictly enforce social distancing and disinfecting procedures within their clinics.

We recognise the importance of ensuring clients can hear during this difficult time and we have looked at ways providers can continue to deliver and claim for services. We encourage providers to use teleaudiology services where appropriate, however, we have outlined below certain activities that must be completed face to face to minimise clinical risk. As normal, providers must keep detailed and accurate clinical notes on the client file, including client consent (verbal or written), device quotes, maintenance agreements etc.

Any exceptions listed below apply from **16 March 2020 until further notice**.

Service	Service Delivery	Claim an item
Assessment / Reassessment	Practitioner will need to use their clinical judgement to determine what tests are appropriate to fully assess the client's hearing and communication needs. Otoscapy, puretone audiometry and speech audiometry must be completed face to face.	600,800
Initial / Refitting	Practitioner should determine how best to program devices (e.g. 2cc coupler). Subjective verification of sound comfort/quality, and device insertion and management must be completed face to face.	630, 650, 660, 640, 820, 830 (631, 651, 661, 641, 821, 831) 760, 770 (761, 771)

		635, 655, 825 (636, 656, 826)
Follow-up of Initial / Refitting	Can be completed via teleaudiology if there are no issues with comfort, sound quality or management (i.e. a successful follow-up is completed). If the client requires adjustments or there are issues with the fitting, the client will need to attend a face to face appointment, unless the client's device enables remote programming.	630, 650, 660, 640, 820, 830, 760, 770 635, 655, 825
Reviews	Practitioners will need to use their clinical judgement to determine if annual reviews can be conducted, including which activities they can complete, via teleaudiology whilst maintaining client safety. If the client reports a change in hearing or ear health, they must be seen for a face to face appointment.	930, 940
Maintenance	Maintenance agreements can be renewed by gaining verbal consent. Note: As the client co-payment may be difficult to obtain during this time, providers may choose to waive this fee. Providers should consider <ul style="list-style-type: none"> • Posting batteries and spare parts. • Asking clients or carers to post device to clinic for repair. 	700, 710, 790, 791 (777)
Device Replacement	Can be completed via teleaudiology when replacing with like for like device. Client can notify provider of lost device over the phone (without a Stat Dec). File notes must include <ul style="list-style-type: none"> • the date and time of client's verbal notification of lost devices • how, when and where device was lost. Verbal consent for device quote can be obtained (a copy can be posted to client for their records). The date and time of phone call must be noted on file. Like for like devices must be programmed before posting to the client. Notes on file should include <ul style="list-style-type: none"> • information on the replacement device • device programming details • date posted to the client. If not replacing with like for like, subjective verification of sound comfort/quality, and device insertion and management must be completed face to face. Note: Lost devices must be replaced with same for same unless the lost devices are no longer on current approved device schedule. In this case the replacement should be in the same style and category as the lost device.	840, 850 (555, 888)
Spare Aid	Can be completed via teleaudiology if spare device is identical to their primary device. The spare aid must be programmed prior to posting to client. Notes on file must include <ul style="list-style-type: none"> • information on the spare aid • device programming details • date posted to the client • verbal consent for device quote. The date and time of phone call should be noted on file. If fitting a different spare aid, subjective verification of sound comfort/quality, and device insertion and management must be completed face to face.	960
Rehabilitation / Rehab Plus	Can be completed over the phone unless the client has specific communication training requirements. Group rehabilitation sessions should not be completed from 27 March until further notice.	670,680,681
Issuing Vouchers	Providers are required to confirm if ongoing services are required. This can be completed over the phone, confirmed by a signed battery and maintenance agreement or booked appointment.	

Printable PDF [Coronavirus \(COVID-19\)-Updated 27 March 2020 \(PDF 192 KB\)](#)

Printable Word [Coronavirus \(COVID-19\)-Updated 27 March 2020 \(DOC 520 KB\)](#)

<p>How can we help?</p> <p>Find a hearing services provider</p> <p>Apply for hearing services</p> <p>Information on the NDIS</p>	<p>Find information for</p> <p>Senior Australians</p> <p>Under 26 years</p> <p>Australian Defence Force</p>	<p>Find information on</p> <p>What's new</p> <p>Useful Links</p> <p>Program Statistics</p>	<p>For Hearing Professionals</p> <p>Compliance Monitoring and Support</p> <p>Legislation and contracts</p> <p>Provider Factsheets</p>
--	---	--	---

[Forms and Publications](#)

[Veterans](#)

[Using the portal](#)

[Portal Login](#)

[Aboriginal and Torres Strait](#)

[Islander People](#)

[Contact Us](#)

[Glossary](#)

[Accessibility](#)

[Sitemap](#)

[Privacy](#)

[Online Enquiry](#)

[Complaints](#)

[User Guides](#)

[RSS Feed](#)