

Frequently asked questions

What are the main features of the proposed arrangements and why should I join?

The Bupa Members First physiotherapy network gives you the opportunity to offer your patients (our members) the certainty of known out-of-pocket expenses for specified physiotherapy services.

Bupa members who visit a participating network physiotherapist will have access to higher benefits than from other recognised providers for the specified services and extras covers listed in Table 1.

In addition, fees and claims can be submitted electronically using electronic claiming terminals such as HealthPoint or HICAPS. Providers simply swipe the member card and any 'gap' can be paid on the spot. It's that easy.

We may also promote these arrangements to our members. For example, via the internet, or with literature displayed in Bupa centres.

Who is eligible to be part of the network?

If you are a recognised provider, we pay benefits for professional services that you provide in private practice to our members in accordance with our Fund Rules. If you are a recognised provider, you may also participate in our Bupa Members First physiotherapy network.

All registered physiotherapists in private practice who are recognised providers and meet and agree to the 'Rules of Participation' are eligible to apply.

Contact us if you're unsure if you are eligible to be part of our network.

Who is this agreement between?

While all Physiotherapists at the relevant location will be required to comply with these Rules of Participation, the Agreement will be between the Principal Physiotherapist and Bupa. Therefore, if the Agreement is terminated the termination will apply to all physiotherapists at the relevant location.

Am I locked into this arrangement?

The agreement has no fixed term. Your participation in these arrangements can be terminated by you or us with 60 days written notice.

Do I have to charge the Maximum Chargeable Amount at all times for the physiotherapy services listed?

To consistently provide our members with certainty on out-of-pocket expenses, you agree to charge below or at the Maximum Chargeable Amount for the services listed in Table 1.

Why does Bupa think quality is important?

We're committed to ensuring members always receive quality healthcare services. In doing so, we recognise the commitment that physiotherapists have made to being a quality practice.

Will Bupa restrict member's choice of physiotherapist?

No, members are free to go to a provider of their choice. However, higher benefits for the defined services listed in Table 1 will only be available to our members when they attend a physiotherapist participating in these arrangements.

How were the Maximum Chargeable Amounts developed?

The Maximum Chargeable Amounts were developed based on our claims data specific to each state for the services listed in Table 1.

Why do the Maximum Chargeable Amounts differ from state to state for the same services?

The charges vary because policy premiums and fees for physiotherapy services differ from state to state. The Maximum Chargeable Amounts were developed using our claims data specific to each state.

How will the Maximum Chargeable Amounts be reviewed?

The Maximum Chargeable Amounts will be reviewed periodically, in accordance with our business needs.

What do I do if I have a locum on a regular basis or at short notice?

All locums should be familiar with the requirements and details of operation of the Members First Agreement and abide by the Members First Rules of Participation.

Where it is intended that the services of an individual locum are to be used continuously or regularly for a period of more than 2 weeks, an application for a Medicare Provider number for that practice location should be lodged.

What if I change the location of the practice or sell the practice?

Participation on the network is non transferable and specific to the approved principal of the practice and practice location. A change in location or principal of the practice will require a new Rules of Participation application to be completed and assessed. Changes such as these will be assessed on Bupa's business needs.

Will all members have access to these arrangements?

Yes, all Bupa members will have access to these arrangements. Bupa Members First provider network benefits will be available to members with eligible extras cover listed in Table 1 (including package products) and in accordance with our Fund Rules, except those members with Emergency Ambulance Cover only.

If I'm a provider with your network can I also be a provider with other health funds?

You can become a provider with other health funds if you choose.

What should I do if I don't have electronic claiming, such as HealthPoint or HICAPS?

If your application is approved it is one of the 'Rules of Participation' that you must install and use (at your own cost), an electronic claiming machine before your status as a Bupa Members First physiotherapy network provider is effective.

Contact phone numbers

HealthPoint 1800 500 433
HICAPS 1800 805 780

What if I have more than one practice? Do I have to sign a 'Rules of Participation' for each practice?

Yes, you will need to sign the 'Rules of Participation' for each individual practice, which will cover all the physiotherapists at that practice. Each practice location is assessed on an individual basis. If a new physiotherapist or locum joins your practice, please notify us on 1800 688 880.

Does the Maximum Chargeable Amount and benefit include the GST amount that applies to the service?

Yes. The Maximum Chargeable Amount and benefit includes any GST amount that may be applied to a service.

What are the Physiotherapy Guidelines?

The Physiotherapy Guidelines listed in Table 2 of the 'Rules of Participation', are benefit payment guidelines developed to avoid duplicate payment of benefits due to processing errors and misitemisation. Bupa introduced the Physiotherapy Guidelines, to ensure the fair and correct payment of physiotherapy benefits for all members.