

## Proposed changes, HNELHD Patient Services & Centralised Revenue (CRU)

Dear Member,

Attached is correspondence the HSU has received from Hunter New England Local Health District regarding proposed changes to Patient Services & Centralised Revenue (CRU).

### Member feedback requested

We have been advised that his letter is a preliminary notification, and the LHD will provide further communications to inform the HSU of the details of the proposal and establish a consultative process.

Preliminary feedback on the contents of the letter are sought from members by 7 June 2018. Please direct your feedback to [ayshe.lewis@hsu.asn.au](mailto:ayshe.lewis@hsu.asn.au) with subject line *HNELHD Patient Services*.

**Not a member of the HSU? Now is time to join and have your say! You can join online at [www.hsu.asn.au/join](http://www.hsu.asn.au/join) or call 1300 HSU NSW and join over the phone.**

A union's effectiveness and negotiation power depends upon the strength and density of its membership base. Join your work colleagues today by becoming a member of the Health Services Union and help us continue to protect and improve your working life.

In unity,



Gerard Hayes  
Secretary, HSU NSW/ACT/QLD

**Director Finance**

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**Health**  
Hunter New England  
Local Health District

28 May 2018

Mr Gerard Hayes  
Secretary  
Health Services Union  
Level 2, 109 Pitt Street  
SYDNEY NSW 2000  
email: [gerard.hayes@hsu.asn](mailto:gerard.hayes@hsu.asn)

**For the Attention of:** Mr Michael Kearns, email: [mick.kearns@hsu.asn.au](mailto:mick.kearns@hsu.asn.au)

Dear Mr Hayes

**Re: HNELHD –Patient Services & Centralised Revenue (CRU) Restructure**

The Centralised Revenue Unit provides patient fee revenue services for the Hunter New England Local Health District including submitting claims, health fund eligibility checks, receipting & bank reconciliation and debt recovery.

The Centralise Revenue Unit is responsible for identifying if a patient is eligible for the service that they are receiving treatment for under their Health Fund coverage. Under the National Health Reform agreement and Ministry of Health Admitted Patient Election Processes for NSW Public Hospitals policy (PD2005\_221) the District is responsible for the patient receiving accurate information to obtain Informed Financial Consent (IFC) prior to making an election choice, and the fund eligibility is a crucial component of IFC.

Prior to November 2017, the eligibility checks for emergency admissions were completed retrospectively however this has implications for the patient as they are not fully informed of their financial consequences prior to making their election choice. This can result in the patient electing to be chargeable for a service that they are not covered for with the potential outcome of unforeseen out of pocket medical expenses.

To prevent unforeseen out of pockets for the patient a service change is required to extend hours of operation for fund eligibility checks to be performed in real-time, 24 hours, 7 days per week. This will insure that accurate information is provided to the patient with regards to policy coverage at the time of the admission process to obtain Informed Financial Consent (IFC).

In addition, the Team Leader structure across Patient Services & Centralised Revenue has been reviewed which identified that a strategic realignment of the roles and responsibilities and the implementation business rules, guidelines and protocols is required for better managing Patient Services and the service it provides.

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It has been identified that there is deficiencies in Team Leader allocation to work-flow in the Centralised Revenue Department and a need for Team Leader role within Patient Admission Services, John Hunter Admissions to enhance the growing and busy front line service.

It is proposed to introduce a structure that recognises the changes that will improve overall efficiencies, service provision and ensure that Excellence tools and tactics are consistently utilised within the service.

The Hunter New England Local Health District (LHD), intends to engage into full and comprehensive consultative process with both the staff and the Health Services Union (HSU). As this is only a preliminary notification, the LHD will provide further communication to inform the HSU of the specific details of the proposal and to establish a consultative process to provide a forum for ongoing discussions throughout the implementation of the changes.

The LHD now seeks the comments of the Health Services Union in relation to this proposal and requests a response by **Monday 11 June 2018**.

Should you have any questions or wish to discuss this matter could you please contact Jenna Bell, Human Resource Consultant on 02-49853260 or email at [jenna.bell@hnehealth.nsw.gov.au](mailto:jenna.bell@hnehealth.nsw.gov.au)

Yours sincerely



**Peter Evenden**  
**A/c Executive Director Finance**

c.c. Renae Lines, HNE Revenue and Patient Service Manager  
Kelley Martin, Manager, Centralised Revenue Unit

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