

OFFICE USE

Batch									
Claim									



LATROBE HEALTH SERVICES INC.
32 McDONALD STREET, MORWELL
P.O. BOX 41, MORWELL 3840

ABN 95 159 348 533 RAN A0020602L

Phone: (03) 5128 9200 Fax: (03) 5128 9289 Ausdoc: DX 84027

Member Services Helpline 1300 362 144

SIMPLIFIED BILLING

CLAIMS BATCH HEADER

MAY BE USED AS REPLACEMENT OF INDIVIDUAL CLAIM FORMS WHEN ACCOUNT PROVIDES ALL NECESSARY DETAILS

PROVIDER NAME:

PROVIDER NO:

.....
Signature of practitioner or authorised person

DECLARATION – The above signature declares that:

- (i) *The services detailed on the attached accounts were provided by me or on my behalf. The services were rendered to the patient whilst a private in-patient of a hospital or approved day hospital facility.*
- (ii) *By forwarding the attached accounts I agree to bill Latrobe Health Services directly for the services detailed.*
- (iii) *It is acknowledged that the collection of any patient balance (i.e. the difference between medical benefits payable by Latrobe Health Services and the total fee) shall be my responsibility.*
- (iv) *The patients have been advised of any expected patient balance on the anticipated services prior to the procedure.*

DATE: / / NO OF CLAIMS INCLUDED:

TOTAL \$ AMOUNT OF CLAIMS: \$

Privacy Statement At Latrobe Health Services our commitment is to handle personal information in a way that is consistent with our Privacy Policy and our obligations under the National Privacy Principles. The collection of this information is necessary to process health insurance claims. To enable benefits to be paid we may need to disclose this information to a hospital, medical and other health service provider in relation to this episode. We may also disclose personal information to the member named as the policy holder (or any other person who lodges an authorised claim for benefits who would normally be the spouse of the member) where there is an entitlement to benefits under a family cover policy. If personal information is not provided, the consequences may include our inability to process this claim. If you would like access to your personal information or more details concerning our information handling practices, please contact Latrobe Health Services on 1300 362 155.