

Medical Provider – Member level of cover verification

The form can be completed online by typing in the fields below. Once completed please click on 'Submit' below.

Please allow 2 business days for a response.

Provider to complete

Provider name

Provider number

Contact person

Date

Phone number

Email

Member name

Member number

Date of birth

Estimated admission date

MBS item numbers

Non-MBS treatment group (eg. Dental, In-patient Podiatric surgery)

The above contact person confirms that the Member authorises them to request this information.

The Provider acknowledges:

- that the information provided by HBF in this form is an overview of the members cover effective as at the date the information is provided only. The information cannot be relied upon outside of this date;
- that where the information provided by the provider is incorrect or incomplete HBF may not pay a Benefit to the Provider.

Privacy statement

HBF Health Limited (**HBF**) complies with the *Privacy Act 1988 (Cth)* to ensure that your personal (including sensitive) information (**Information**) is protected. HBF will use the Information collected on this form to verify whether the above member is eligible for hospital benefits and to note this request and response on the members membership record with HBF. We may not be able to perform this function or only perform it to a limited extent if you do not provide us with the requested Information.

HBF collects, uses and discloses your Information in accordance with our Privacy Policy and if you are a provider Collection Statements: Providers / Health Practitioners, which is available at www.hbf.com.au or on request by calling an HBF Member Service Advisor on 133 423. Our Privacy Policy contains further information about how HBF handles your Information. This includes information on how you can access and/or seek the correction of your Information that we hold about you as required by law and make a complaint about the way your Information is being handled by HBF and how HBF will deal with your complaint.

If you have any questions about how HBF handles your Information, please contact our Privacy Officer by writing to GPO Box C101, Perth, Western Australia, 6839 or by telephoning 1300 883 530.

Submit

For HBF to complete

Product

Wait periods served Yes No

Excluded services

Restricted services

Comments

Processed by

If you or the member considers the above result may be incorrect, you should contact HBF immediately by calling us on 1300 810 475 or by email at eligibility@hbf.com.au