



DECLINED CLAIMS THAT ARE NOT ELIGIBLE FOR RESUBMISSION

Some claim decline reasons are due to non-adherence to the 6CPA Programme Specific Guidelines and are therefore not eligible for resubmission.

These are:

- Claim was not submitted within required timeframe
- Patient has had HMR service within last 12 months
- Patient has had an RMMR service within last 12 months
- Patient has had MedsCheck/Diabetes MedsCheck service within last 12 months
- Timeframe between date of referral and date of service exceeds limit for programme
- Exceeds cap limit for programme
- Duplicate Claim submitted

If these decline reasons are due to an error in the claiming template, you may wish to resubmit the claim. If this is the case, please refer to 'How to Resubmit Claims When no 'Resubmit' Button Exists'.

If the claim template has been completed correctly and the claim has therefore been assessed on its merits, but you believe the non-adherence to 6CPA Programme Specific Guidelines is due to circumstances outside of your control, you may wish to apply for Exceptional Circumstances. To do this, please refer to 'How to Lodge a Claim for Exceptional Circumstances'.