

Department of Veterans'Affairs

Provider Hotline Number: **1800 550 457** – choose Option 1 for Aids & Appliances provided under the Rehabilitation Appliances Program (RAP).

This form is to be used for requesting items through the RAP. For prior approval items, please attach clinical justification or use DVA specified forms.

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Rehabilitation Appliances Program (RAP) and other government services (such as the National Disability Insurance Scheme (NDIS), Home Care Package or Commonwealth Home Support Program (CHSP)) – Aids, appliances and modifications can be provided by RAP or other government services, such as NDIS/Home Care Package/CHSP, as long as the same aid/appliance/modification is not duplicated by both RAP and NDIS/Home Care Package/CHSP.

Assessing health provider details					
	/LMO Other (Sp	ecify profession)			
Provider Stamp (if applicable)	Name				
	Provider number				
	Employer				
	Address				
				POSTCODE	
	Phone number	[]	Fax []	
	Mobile number				
	Email address				
Client Delivery details					
Surname					
Given name(s)					
Date of birth					
DVA File number					
Card type		Gold – Forward the completed form to ONE of the DVA contracted suppliers listed on the last page of this form.			
		ease contact DVA on 1800 5 ent's Accepted Disability(ies)		ck eligibility under the	
	clie Se If a	etail the client's clinical need and medical condition for which the lient requires the equipment in the box below. end the completed form to <u>RAPGeneralEnquiries@dva.gov.au</u> . approved, DVA will forward the order directly to the nominated upplier.			

Surname			DVA File number			
Client D	Client Delivery details continued					
	and Care Facility (DACE)?	No Yes Please refer to the RAP in Residential Aged Care List to determine items available to residents of aged care facilities. The list is available at <u>https://www.dva.gov.au/providers/rehabilitation-appliances-program- rap/rap-overview#rap-items-for-our-clients-in-residential-aged-care</u> Where an aged care facility is funded to provide an aid or appliance, it is expected to do so. DVA does not seek to duplicate these arrangements. In exceptional circumstances DVA may consider on a case-by-case basis requests for items not on the list. Please provide adequate justification with this request.				
Clie	nt's contact phone number	[]	Alternative	number []		
	Residential address			POST	CODE	
	Delivery address (if different to above)	POSTCODE				
Order	details (Assessing health p	provider to complete)				
Please refer to the RAP National Schedule of Equipment available at https://www.dva.gov.au/providers/rehabilitation-appliances-program-rap/rap-schedule The RAP Schedule lists quantity and financial limits that must be adhered to when prescribing aids and appliances.					pliances.	
RAP Schedule No.	Product catalogue No.	Name/Description of Aid Quantity Cexceeds quant or \$ limit)				
For additiona	l items please attach details					

For **prior approval items AN11 and AN19 and, if exceeding financial limits, AN18 and AN20**, please attach clinical justification including functional and product assessment and quotes to this form, and send to <u>RAPGeneralEnquiries@dva.gov.au</u>. Note AN11's assessment can be found below. If approved, DVA will forward the order directly to the nominated supplier.

urname	DVA File number
Assessment for CCTV reque	ests (Prior Approval required)
Is this request for AN11	No Vou do not need to complete this section
(Closed Circuit Television CCTV)?	Yes Does the client live in a residential aged care facility?
	No
	Yes Residential Aged Care Facilities are funded to provide CCTV for clients with a clinical need.
	Where an aged care facility is funded to provide an aid or appliance, it is expected to do so. DVA does not seek to duplicate these arrangements.
	In exceptional circumstances DVA may consider on a case- by-case basis requests for items not on the list. Please provide adequate justification with this request.
Client's vision-related diagnosis	
Non-vision related diagnosis	
Non Noion Telated diagnosis	
Visual acuity	
Unaided vision – Distance	Right
Aided vision – Distance	Right Left
Aided vision - Near (binocularly)	
Field defect	
Fluency of reading – Client to read a for at least one minute to determine	a paragraph of text at N8 (newspaper size) words per minute
Functional status	
Physical function, including mobility and details of any equipment used	
Upper limb function	
-FF	
Cognitive function and competence to operate CCTV	
- •	

Surname	DVA File number
Assessment for CCTV requ	ts continued
Client's social situation	
Cli	t lives: Alone With a partner
	Other (specify)
If applicable, partner/carer to carr tasks for which the CCT\ requested e.g	out thes being
CCTV assessment results	
Provide details of the equipment trialled	
CCTV trialled an	results
Accessories	
Accessories Provide deta	s of any
necessary act required with	ssories

Surname		DVA File number	
CCTV Recommended			
Price			
Clinical reasoning			
Supplier If no prior approval is required, send complete	ed form attaching clinical	iustification to ONF of the cont	tracted suppliers.
	Quantum VisAbility	Royal Society for Vision Australia	
Certification			
I certify that the client has been clinically assessed and that the RAP National Schedule of Equipment and RAP National Guidelines have been taken into account.	Signature		Date

DVA Rehabilitation Appliances Program

Contracted Suppliers of Low Vision Equipment

Effective 1 September 2019

Supplier	ATE – Adaptive Technology	DLA – Daily Living Aids and Appliances	Phone	FAX - General	Email
Quantum	\checkmark	×	1300 883 853	(02) 9875 1646	info@quantumrlv.com.au
Royal Society for the Blind	\checkmark	\checkmark	1300 944 306	(08) 8232 4807	intake@rsb.org.au
VisAbility	\checkmark	\checkmark	1800 847 466	(08) 9361 8696	lowvisionaids@visability.com.au
Vision Australia	\checkmark	\checkmark	1300 365 492	1300 847 329	visionstore@visionaustralia.org

Prescribers are reminded that the choice of contracted supplier is theirs. However, prescribers can only prescribe low vision equipment under RAP from a contracted supplier

The alphabetical listing above is for administrative ease only.