

Konnect NET

SureMed Time-Savers



V1.0

It's easy to get started with the SureMed electronic service, but like anything new, it can take getting used to. Here are some tips that will save you time:

1. PMARs – what exactly do insurers want?

When insurers send a PMAR request they want relevant notes, reports and test results for a defined history period (85% are for 5 years). They may also mention specific conditions or illnesses. Doctors may also be asked to make a brief comment.

2. Information requested falls outside history period?

If you receive a request for a specialist report or other information you have that falls outside the defined history period, add a comment to that effect on the **“CONFIRM”** tab. The insurer will submit another request if they still want the information.

3. Electronic record does not cover history period?

If a patient's electronic record covers a shorter period than requested, doctors should not search for additional information in their manual notes (at least for this initial request). If the information is known, doctors can update information on the **“MEDICAL HISTORY”** tab, or add comments on the **“CONFIRM”** tab, e.g. “please submit a separate request for information held in paper records”.

Alternatively, if the patient was previously with another doctor, provide a note to that effect.

4. Looks complicated? Likely to take longer than 20 minutes?

Doctors should be able to complete most requests within 20 minutes, but there can be various reasons why a particular request is more complex. Talk to us first if you think it will take you more than 20 minutes to complete. We will check with the insurer whether it's worth proceeding 'as is', or if the request can be simplified, making it easier to complete.

5. Doesn't seem to make sense?

If a request does not make sense to you, don't try to complete it. Call Konnect NET and we will clarify the instructions with the insurer. Alternatively you can decline the request, stating your reason.

6. Information held elsewhere?

If the information asked for is not currently available (e.g. it is held by a patient's previous medical practice or must be obtained from another medical source such as the hospital), don't chase it. Let us do the chasing.

7. Wrong patient information?

If you receive a request with incorrect patient information (e.g. wrong birth date) call us, or decline the request, stating your reason.

8. Concern about disclosure of information?

Insurance applicants/claimants (your patients) are informed by insurers when medical information is required, and a signed consent form is sent with the insurance medical request. Generally, our advice to doctors is to stick to the medical facts on diseases and conditions.

Coding of patient medical information

If patient information is coded or classified to a reasonable standard, SureMed medical history requests (e.g. PMARs) will automatically pre-populate with all the medical information required within the defined history period, with data under correct headings.

This reduces the level of intervention required by doctors, significantly speeding up the process. PMAR reports can be completed in 5-10 minutes where there are good systems and data.

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For more information visit:

www.konnectnet.com/gp-faqs

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