Queensland Health

MASS-eApply with a Focus on MASS Palliative Care Equipment Program (PCEP)

Medical Aids Subsidy Scheme

9 July 2026

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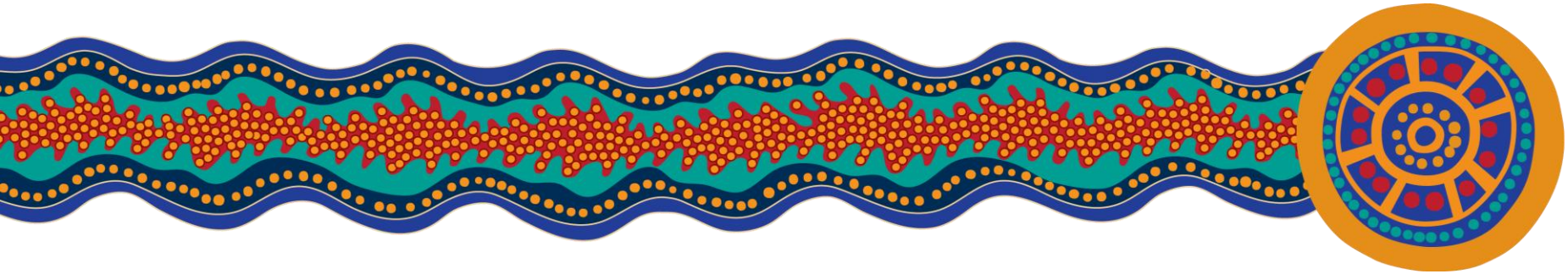
Queensland Government



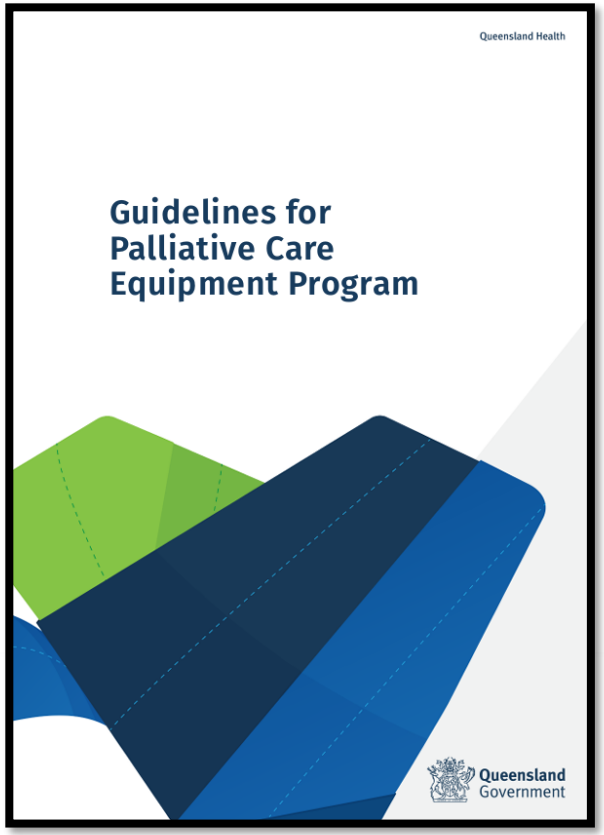
The Queensland Government respectfully acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional and Cultural Custodians of the lands on which we live and work to deliver healthcare to all Queenslanders and recognises the continuation of First Nations peoples' cultures and connection to the lands, waters and communities across Queensland.

Session Outline

- General information on PCEP and MASS-eApply
- Registration
- Application process
- Live walkthrough
- Application tips and feedback

Palliative Care Equipment Program (PCEP)

Queensland Health



Eligibility: Qld resident, Medicare card, Palliative Confirmation form

Service Areas:

- Continence*
- Daily Living Aids and Mobility Aids*
- Home Oxygen

*Apply through MASS-eApply

MASS Palliative Care Equipment Program

PCEP Daily Living and Mobility Aids Applicant Elgibility Workflow

Palliative Care Recorded Webinars

Queensland Health

Palliative Care

Webinars about Palliative Care and MASS Palliative Care Equipment Program (PCEP) and Palliative Care Syringe Driver Program (PCSDP).

For guidance on clinical aspects of the prescription of assistive products in palliative care, see our recorded webinars at MASS Education Recordings

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Benefits of Using MASS-eApply

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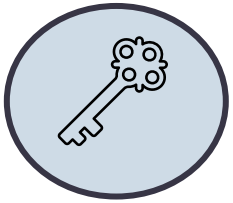
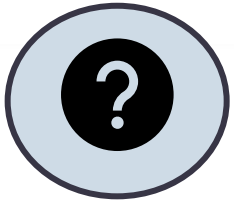
MASS administrative eligibility can be confirmed for adults with a live Centrelink database check



If a response is incomplete, prompts will appear requesting the information

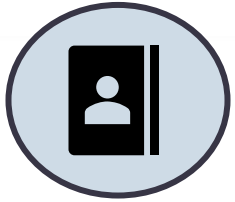


Only relevant questions relating to the type of assistive product being applied for need to be answered

A PDF copy of the application can be saved or printed off after you submit the application

Once you have registered as a prescriber and have completed one application:

MASS application will auto-populate prescriber information



Existing MASS client data can be auto-populated into an application

MASS-eApply Online Applications

MASS-eApply Help and Support

MASS-eApply Registration

MASS-eApply Login

Info for Organisations and Administrators

MASS Eligibility Card

MASS-eApply applicant search

MASS-eApply Alerts

For enquiries and technical assistance (8am – 4pm weekdays): MASS-eApply@health.qld.gov.au

Option to Change Appearance

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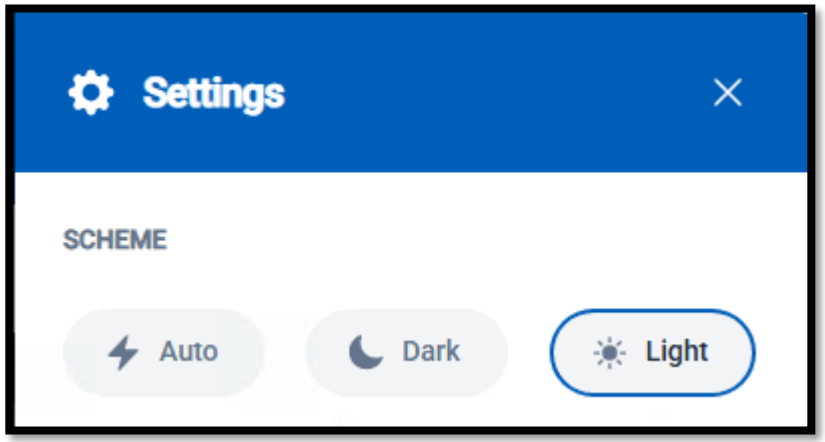

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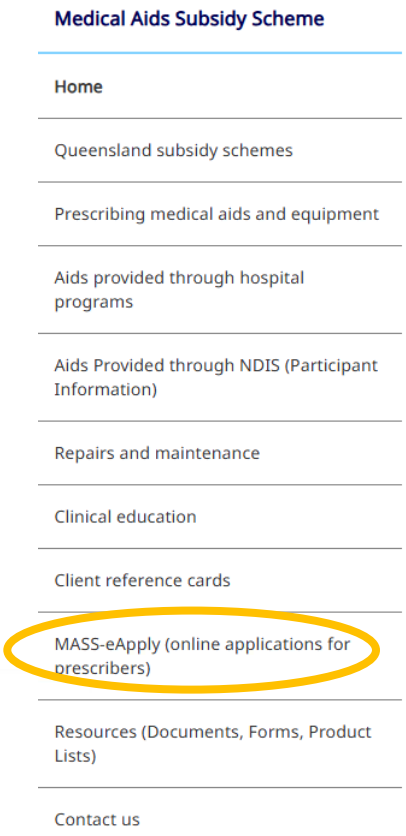
Accessing MASS-eApply

Queensland Health



The system is designed to work across multiple platforms: desktop computer, laptop, iPad, Android tablet or smartphone.

It is available for prescribers from community and acute settings.

On most MASS webpages, on the left-hand column, down the bottom, there is a link to MASS-eApply.

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Accessing MASS-eApply

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Medical Aids Subsidy Scheme's Online application system

Login | Register

Help

- Eligibility "The applicant details could not be verified online at this time" (PDF 364 kB)
- How to start an application
- How to continue an application
- How to download a pdf of an application
- How to check the status of an application
- Register an account
- Browser error message: The requested URL was rejected. Please consult with your administrator.

MASS-eApply is currently available.

If further support is required, refer to the help and support page.

Contact

MASS-eApply Registration

MASS eApply Registration

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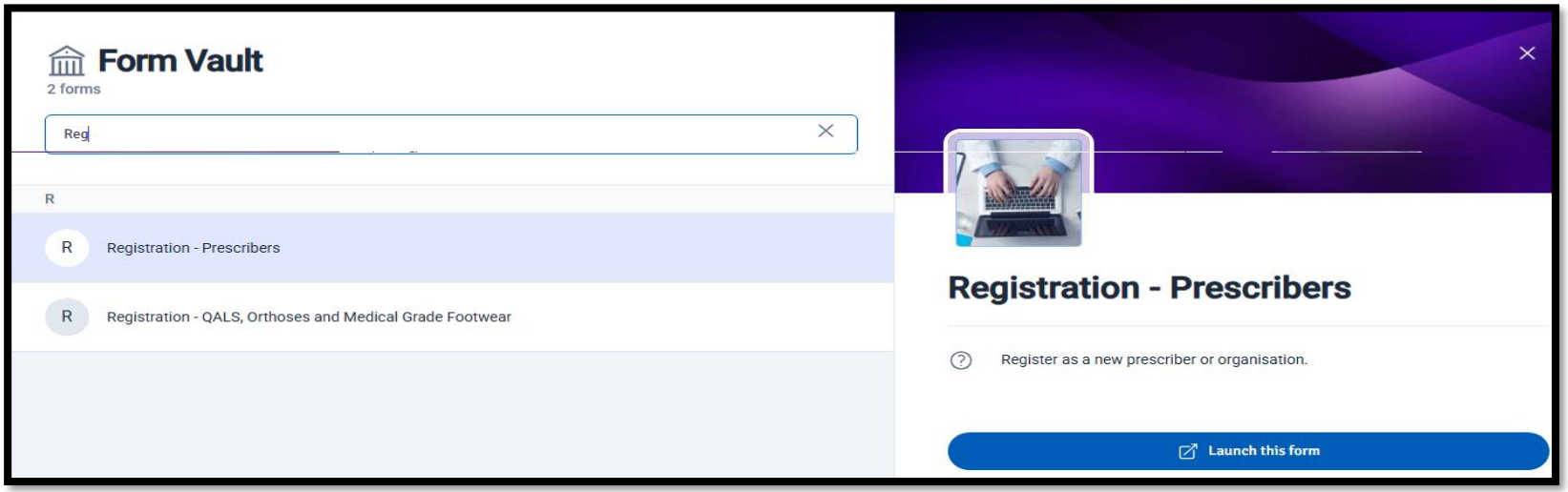
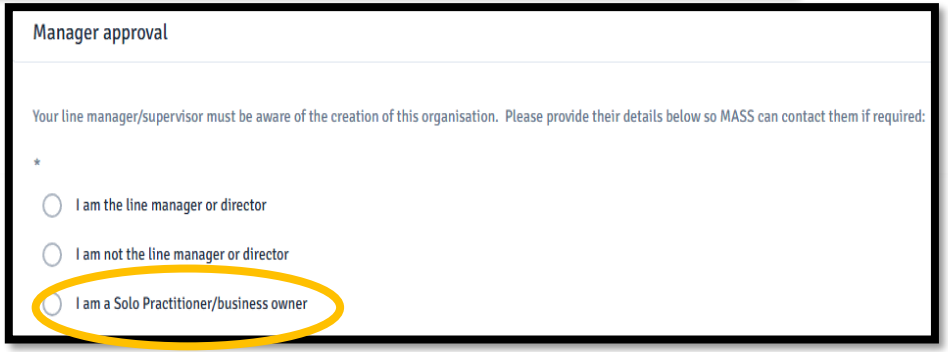


Prescribers register as an organisation.

If you are a sole trader or business owner, select the relevant option under ‘Manager approval’.



eApply Registration – Administrator Role

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Teams **should be registered at the local/ward level** to remain manageable for the users,e.g. QEII Physiotherapy Department is more manageable than QEII Hospital.

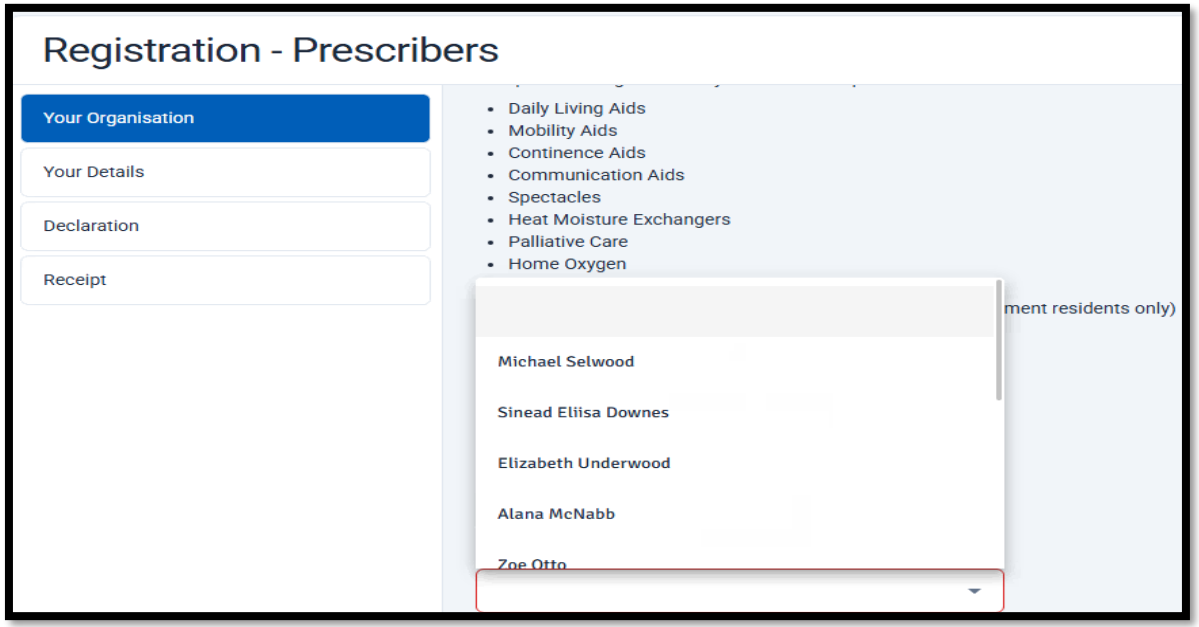
Only designated prescribers may submit applications using eApply.

The first person to register for a team will become the administrator. Others can be added so that there are multiple administrators per group. An administrator will approve new prescribers and maintain consistency in how people register.

MASS-eApply Organisation and Organisation Administrator Support

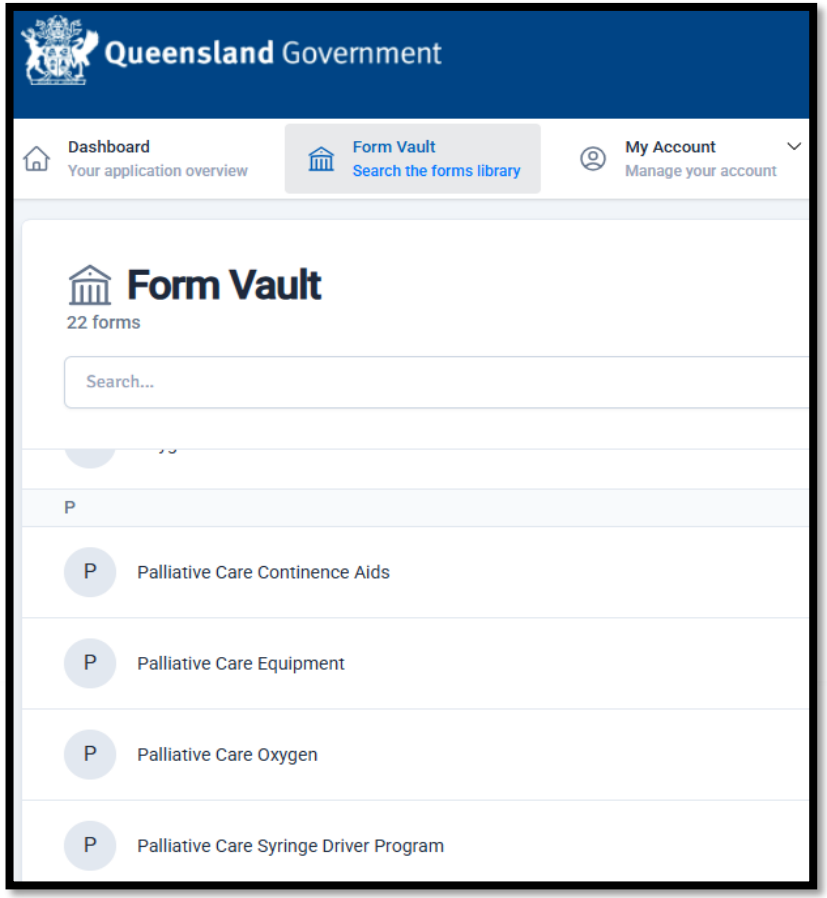
Multiple Administrator Roles

Multiple Administrator Roles



MASS-eApply Application Process

Starting Out



Once approved, you will receive an email with a hyperlink to complete your account set up by choosing a password. This hyperlink is valid for five days. Once completed, you can login and access:

Dashboard - check application status

Form vault - complete applications

➡ Select the category of forms you wish to complete, e.g. Palliative Care Continence Aids.

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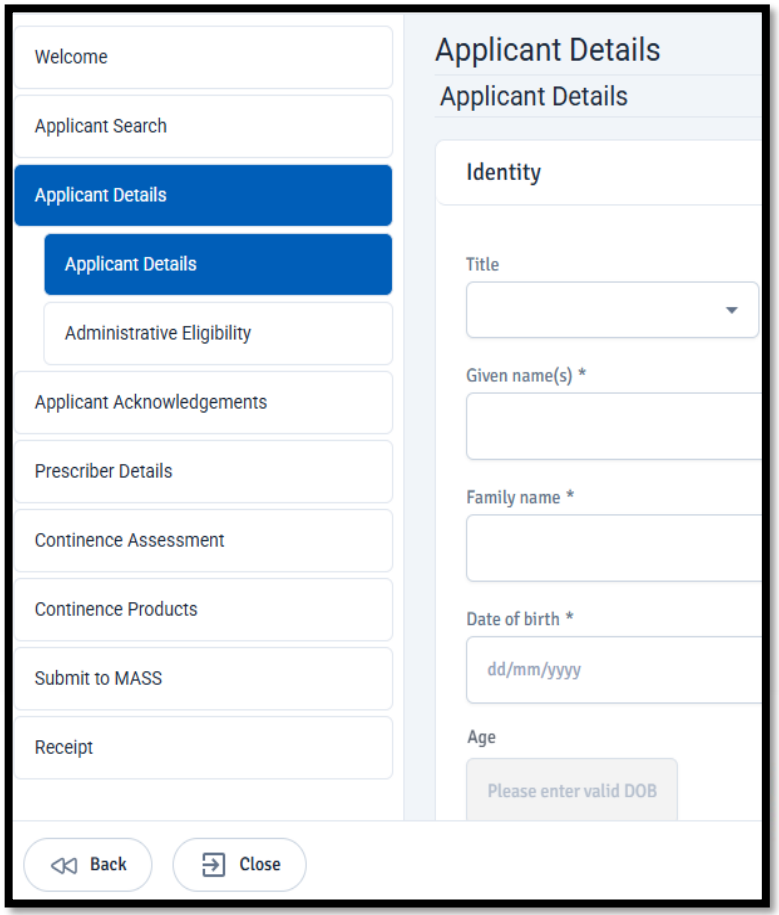
Commencing an Application

- Search MASS records for client details.
- The client's B number can be used, along with their surname and date of birth.

  Otherwise, the following fields are required:
  - Surname
  - Date of Birth
  - Concession type

- Client details will then load including their address and contacts. You should verify these are correct – you can make changes as required at this point.
- If the client is not found, you must enter all their personal details.



PCEP Palliative Confirmation Form

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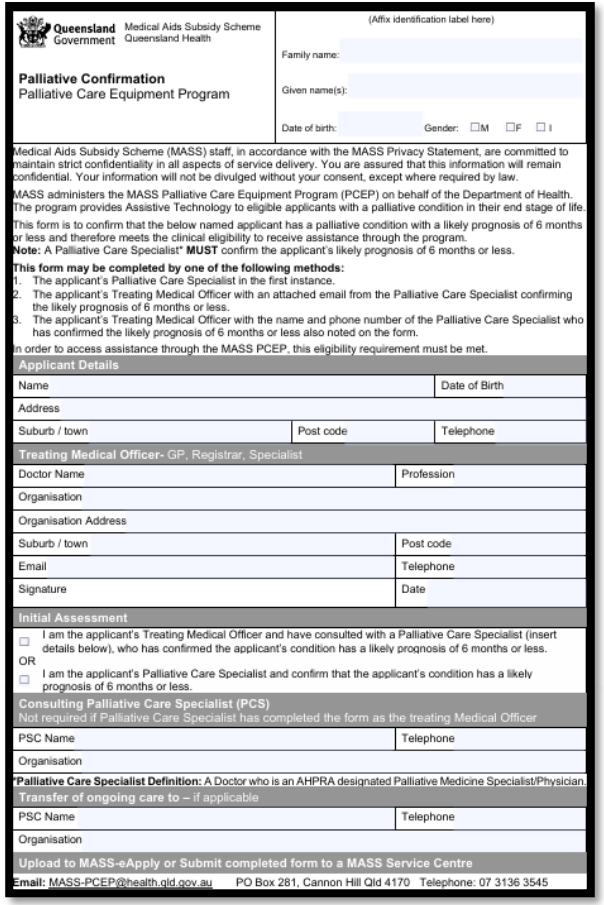
This form needs to be signed by:

- A palliative care specialist
- A treating specialist/GP with palliative care specialist consultation

It then needs to be uploaded in the PCEP application.



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(Affix identification label here)

Family name:

Given name(s):

Date of birth: Gender: ☐M ☐F ☐I

Palliative Confirmation
Palliative Care Equipment Program

Medical Aids Subsidy Scheme (MASS) staff, in accordance with the MASS Privacy Statement, are committed to maintain strict confidentiality in all aspects of service delivery. You are assured that this information will remain confidential. Your information will not be divulged without your consent, except where required by law.

MASS administers the MASS Palliative Care Equipment Program (PCEP) on behalf of the Department of Health. The program provides Assistive Technology to eligible applicants with a palliative condition in their end stage of life.

This form is to confirm that the below named applicant has a palliative condition with a likely prognosis of 6 months or less and therefore meets the clinical eligibility to receive assistance through the program.
Note: A Palliative Care Specialist* **MUST** confirm the applicant's likely prognosis of 6 months or less.

This form may be completed by one of the following methods:
1. The applicant's Palliative Care Specialist in the first instance.
2. The applicant's Treating Medical Officer with an attached email from the Palliative Care Specialist confirming the likely prognosis of 6 months or less.
3. The applicant's Treating Medical Officer with the name and phone number of the Palliative Care Specialist who has confirmed the likely prognosis of 6 months or less also noted on the form.

In order to access assistance through the MASS PCEP, this eligibility requirement must be met.

Applicant Details

Name	Date of Birth
Address	
Suburb / town / Post code / Telephone	

Treating Medical Officer- GP, Registrar, Specialist

Doctor Name	Profession
Organisation	
Organisation Address	
Suburb / town	Post code
Email	Telephone
Signature	Date

Initial Assessment

☐ I am the applicant's Treating Medical Officer and have consulted with a Palliative Care Specialist (insert details below), who has confirmed the applicant's condition has a likely prognosis of 6 months or less.

OR

☐ I am the applicant's Palliative Care Specialist and confirm that the applicant's condition has a likely prognosis of 6 months or less.

Consulting Palliative Care Specialist (PCS)
Not required if Palliative Care Specialist has completed the form as the treating Medical Officer

PSC Name	Telephone
Organisation	

***Palliative Care Specialist Definition:** A Doctor who is an AHPRA designated Palliative Medicine Specialist/Physician

Transfer of ongoing care to – if applicable

PSC Name	Telephone
Organisation	

Upload to MASS-eApply or Submit completed form to a MASS Service Centre

Email: MASS-PCEP@health.qld.gov.au PO Box 281, Cannon Hill Qld 4170 Telephone: 07 3136 3545

PCEP Acknowledgements of Obligations Form

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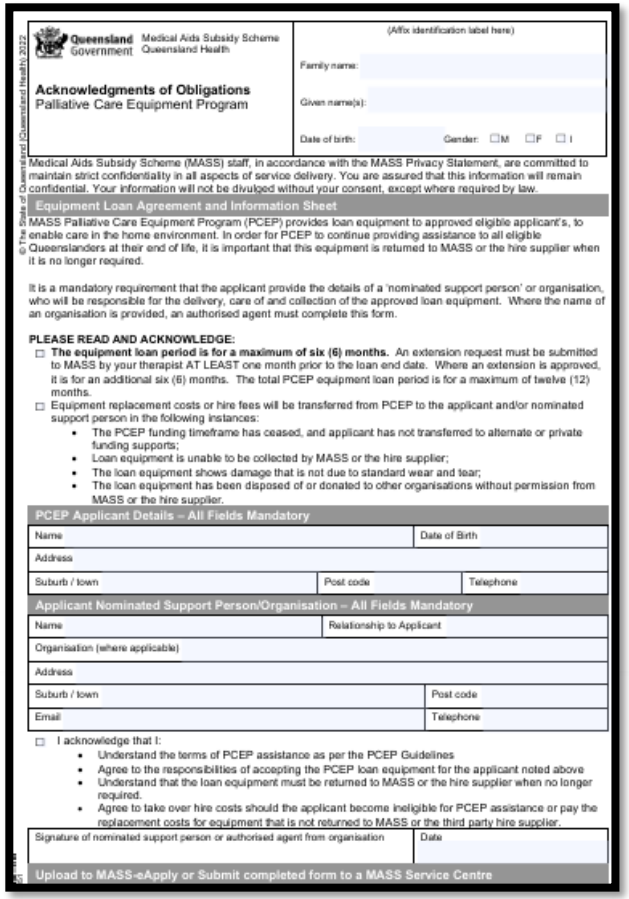

Queensland Government Medical Aids Subsidy Scheme Queensland Health

(Affix identification label here)

Family name:

Given name(s):

Date of birth: Gender: ☐M ☐F ☐I

Acknowledgments of Obligations
Palliative Care Equipment Program

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Equipment Loan Agreement and Information Sheet

MASS Palliative Care Equipment Program (PCEP) provides loan equipment to approved eligible applicant's, to enable care in the home environment. In order for PCEP to continue providing assistance to all eligible Queenslanders at their end of life, it is important that this equipment is returned to MASS or the hire supplier when it is no longer required.

It is a mandatory requirement that the applicant provide the details of a 'nominated support person' or organisation, who will be responsible for the delivery, care of and collection of the approved loan equipment. Where the name of an organisation is provided, an authorised agent must complete this form.

PLEASE READ AND ACKNOWLEDGE:

☐ **The equipment loan period is for a maximum of six (6) months.** An extension request must be submitted to MASS by your therapist AT LEAST one month prior to the loan end date. Where an extension is approved, it is for an additional six (6) months. The total PCEP equipment loan period is for a maximum of twelve (12) months.

☐ Equipment replacement costs or hire fees will be transferred from PCEP to the applicant and/or nominated support person in the following instances:

- The PCEP funding timeframe has ceased, and applicant has not transferred to alternate or private funding supports;
- Loan equipment is unable to be collected by MASS or the hire supplier;
- The loan equipment shows damage that is not due to standard wear and tear;
- The loan equipment has been disposed of or donated to other organisations without permission from MASS or the hire supplier.

PCEP Applicant Details – All Fields Mandatory

Name	Date of Birth
Address	
Suburb / town	Post code / Telephone

Applicant Nominated Support Person/Organisation – All Fields Mandatory

Name	Relationship to Applicant
Organisation (where applicable)	
Address	
Suburb / town	Post code
Email	Telephone

☐ I acknowledge that I:

- Understand the terms of PCEP assistance as per the PCEP Guidelines
- Agree to the responsibilities of accepting the PCEP loan equipment for the applicant noted above
- Understand that the loan equipment must be returned to MASS or the hire supplier when no longer required.
- Agree to take over hire costs should the applicant become ineligible for PCEP assistance or pay the replacement costs for equipment that is not returned to MASS or the third party hire supplier.

Signature of nominated support person or authorised agent from organisation	Date

Upload to MASS-eApply or Submit completed form to a MASS Service Centre

All sections of the PCEP Acknowledgements of Obligations form need to be completed, including a signature of the nominated person. Otherwise, this could lead to delays in processing the application.

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‘Advanced applicant search’ – Order status

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These are the options that you can see in ‘Order Status’ under ‘Advanced applicant search’ in the Dashboard:

- **DRAFT:** In a draft form, not submitted to MASS
- **SUBMITTED:** Acknowledges the application has been submitted to MASS
- **RECEIVED:** Received by MASS
- **RCVD CLINICIAN:** Received by MASS Clinician
- **APPROVED:** Approved by MASS
- **REJECTED:** Rejected by MASS

NB: ‘Rejected’ may appear because the client has not yet reached the point in time where they are eligible for more products (e.g. continence aids). An email is sent to the prescriber, asking them to reapply one (1) month prior to the renewal date. The client is also informed.

Saving/Printing Application

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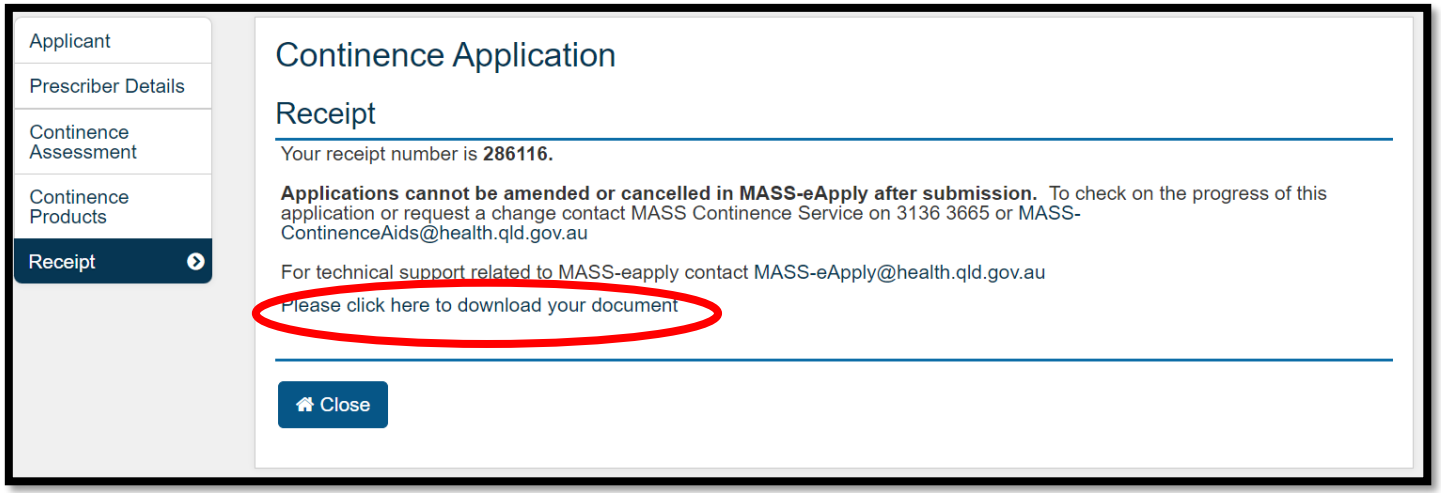
1. At the time of your application – easiest



Note: Unable to change an application or delete it after submitting

2. At a later time - Follow these instructions:

Dowloading a PDF of your application

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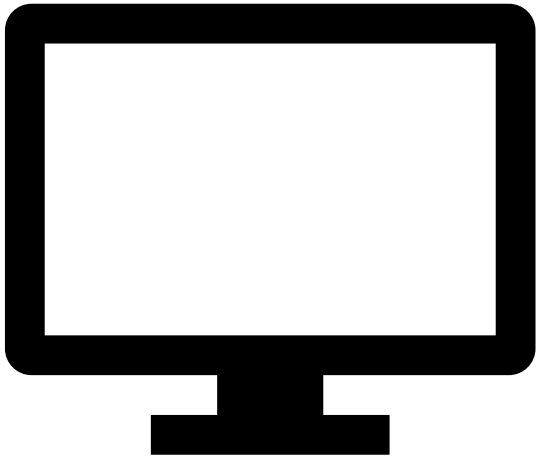
eApply Walkthroughs - Recordings

- Example: Daily living & mobility aids
- Example: Continence aids
- Example: PCEP Equipment

Screen Sharing



Application Tips and Feedback

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Applications

- Provide clinical justification for AT
- Ensure only necessary information is provided
- We don't access your clinical records
- Include all supporting documentation – PCF and Acknowledgement of Obligation form

Follow-up

- Always add another contact person on application
- Handover to another O.T.

Time Frames

- If urgent, submit application before midday
- Call PCEP to allow us to triage your application accordingly

Application Tips and Feedback

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Electric adjustable beds

- Full length versus split rails
- Knee break/bend – incline and decline
- Lo-Lo beds
- Not a “hospital bed” – manage client/carer expectations.

Ramps

- Provide length range e.g. 1200mm to 1800mm.
- MASS PCEP will not prescribe a ramp length based on a step height.

Recliners/Fall out chairs

- 2 motor or 4 motor
- Air comfort, Configura or other basic models
- Consider transfer technique e.g. Patient Transfer Platform versus hoist

Related Education

- DLA and Mobility eApply application example
- Applying for Continence Aids using MASS-eApply, after recent upgrades to the system 2024
- Guide to MASS-eApply Online Applications for Communication Aids and HMEs 2020
- MASS Clinical Education Webinar Recordings

Contact – General Enquiries/Repairs

Brisbane/Townsville Equipment Services (Mobility and DLA)	**(07) 3136 3524** **MASS-Equipment@health.qld.gov.au**
Palliative Care Equipment Program	**(07) 3136 3545** **MASS-PCEP@health.qld.gov.au**
Continence Services	**(07) 3136 3665 / 1300 443 570** **MASS-Continence@health.qld.gov.au**
Oxygen Services (incl. HMEs)	**Ph: (07) 3136 3510 / 1300 443 570** **MASS-Oxygen@health.qld.gov.au**
Specialised Services (for spectacles, communication aids, medical grade footwear and orthoses, palliative Care syringe drivers)	**(07) 3136 3696 / 1300 362 276** **MASS-SpecialisedServices@health.qld.gov.au**
All services – toll free	**1300 443 570**

Certificate of Attendance

Complete the Webinar Feedback Form to receive a certificate of attendance.

Thank you

MASS-Education@health.qld.gov.au

MASS-eApply@health.qld.gov.au