

AUSTRALIAN CAPITAL TERRITORY
HEALTH AND COMMUNITY CARE SERVICES ACT 1996

DETERMINATION OF FEES AND CHARGES

INSTRUMENT NO. 334 OF 2000

UNDER section 32 of the *Health and Community Care Services Act 1996*, I, MICHAEL MOORE, Minister for Health, Housing and Community Care:

1. REVOKE the Determination of Fees and Charges No. 213 of 2000, dated 23 June 2000, which was notified in the Australian Capital Territory Gazette No.S27 on 27 June 2000; and
2. MAKE the following determination to take effect from 1 December 2000.

- (1) In this Determination, unless the contrary intention appears:

"A right to recover from any person, by way of compensation or damages" does not include a right to recover compensation pursuant to the *Criminal Injuries Compensation Act 1983*;

"Act" means *Health and Community Care Services Act 1996*;

"Australian resident" means a person who is ordinarily resident in Australia and includes a person domiciled in Australia but does not include a person who is:

- (a) the head of a diplomatic mission, or the head of a consular post, established in Australia;
- (b) a member of the staff of a diplomatic mission, or a member of the consulate, established in Australia;
- (c) a member of the family of a person referred to in paragraph (a) or (b), being a member who forms part of the household of that person; or
- (d) employed on a full-time basis to perform domestic or other private services for a person referred to in paragraphs (a), (b) or (c);

being a person who is not an Australian citizen or is not a person domiciled in Australia;

"community health centre" means a community health centre conducted by the ACT Health and Community Care Service;

"compensable patient" means in relation to a hospital, an inpatient of the hospital who in the opinion of the Chief Executive of The Canberra Hospital, has, or may have, a right to recover from any other person, by way of compensation of damages, the cost of the service;

"concessional" means a person who is the:

- (a) holder of a Pensioner Concession Card or a dependent of the holder of a Pensioner Concession Card; or
- (b) holder of a Health Care Card or a dependent of the holder of Health Care Card; or
- (c) holder of a Commonwealth Seniors Health Card; or
- (d) holder of a Repatriation Health Card for All Conditions; or
- (e) holder of a Repatriation Health Card for Specific Conditions;

"day care patient" means a person other than:

- (a) a compensable patient; or
- (b) a non-eligible person,

who attends hospital for a period that does not include a part of an overnight stay for the purpose of permitting the provision of professional attention to the person;

"general" means a person who is not concessional;

"GST" means tax that is payable under the GST law and imposed as goods and services tax by any of these:

- (a) the *A New Tax System (Goods and Services Tax Imposition – General) Act 1999*; or
- (b) the *A New Tax System (Goods and Services Tax Imposition – Customs) Act 1999*; or
- (c) the *A New Tax System (Goods and Services Tax Imposition – Excise) Act 1999*.

"hostel" means a hostel conducted by the Health and Community Care Service;

"hospital" means the premises known as The Canberra Hospital;

"hospital patient" in relation to a hospital, means an inpatient of the hospital other than a private patient;

"inpatient" means a person who is formally admitted to hospital and then after a period of time discharged;

"medical practitioner" means a person registered as a medical practitioner under the *Medical Practitioners Act 1930*;

"Medicare Benefits Schedule Book" means the table of medical services prescribed for the purposes of subsection 4(1) of the *Health Insurance Act 1973 (Cth)*;

"multiple-bed room" means a room in which 2 or more beds are situated;

"non-eligible person" means -

- (a) a person who is not an Australian resident; or
- (b) a person in respect of whom, or a person included in a class of persons in respect of which, there is in force an order under Subsection 6(2) of the *Health Insurance Act 1973 (Cth)*;

"non-inpatient" with respect to a hospital, means a patient other than an inpatient of the hospital who receives any examination(s), consultation(s) or other service(s) from an individual functional unit of a health services facility;

"nursing-home type patient" means a nursing-home type patient for the purposes of the *Health Insurance Act 1973 (Cth)* but does not include a compensable patient or a non-eligible person;

"occupational therapy service" means an occupational therapy service provided to:

- (a) a compensable non-inpatient; or
- (b) a non-eligible person,

at a community health centre conducted by the ACT Government or at a hospital;

"outpatient service" means any examination, consultation, treatment or other service provided to:

- (a) a non-inpatient; or
- (b) a non-eligible person,

not being an inpatient of the hospital at a health services facility other than a community health centre, but does not include a Physiotherapy or Occupational Therapy Service;

"pathology service" means a professional service in respect of which a fee is specified in an item in Section 4 of the Medicare Benefits Schedule Book, being an item that includes the symbol "(OP)";

"person domiciled in Australia" means a person whose domicile is in Australia, other than a person in respect of whom the Minister for Health and Community Care is satisfied that the person's permanent place of abode is outside Australia;

"physiotherapy service" means any treatment or other service provided to:

- (a) a compensable non-inpatient; or
- (b) a non-eligible person,

at a community health centre conducted by the Territory or at a hospital and which falls within the definition of physiotherapy in the *Physiotherapists Act 1977*;

"private patient", in relation to a hospital, means an inpatient of the hospital who:-

- (a) has made an election to be treated as a private patient, and who has not revoked that election; or
- (b) is accommodated in a single room in the hospital at a patient's own request;

"professional service" means a professional service within the meaning of the *Health Insurance Act 1973 (Cth)*;

"single room" means a room in which one bed is situated;

"standard patient", in relation to a hospital, means an inpatient of the hospital, other than:-

- (a) a day care patient; or
- (b) a nursing-home type patient.

(2) For the purposes of this Determination, a request by a patient shall, in relation to a patient who has not attained the age of 18 years, be read as

including a request by a parent or guardian of the patient.

(3) For the purpose of services listed at A, C, D, E, J, and S of the schedule to this Determination, the day on which a person commences to be accommodated in a hospital or a hostel as a patient and the day on which that person ceases to be so accommodated shall be counted together as one day.

(4) For the purposes of the services listed at A, B and C of the Schedule to this Determination, where a child whose age is less than 12 months and

the mother of that child are both accommodated in a hospital, they shall

be treated as one patient unless the child and the mother both receive treatment.

- (5) (a) For the purposes of the service listed at item D of the Schedule to this Determination, where a person who has been admitted to a hostel is absent from the hostel for a period not exceeding 3 days, the fee payable pursuant to the service listed at D shall apply as if the person had been accommodated in the hostel during the whole of the period.
- (b) For the purposes of sub-clause (5)(a) of this Determination, the day on which the absence of a person from a hostel begins and the day on which the person returns to the hostel shall be counted together as one day.
- (6) The fee for the purposes of the service listed in Column 1 of the Schedule to this Determination shall be the amount listed in Column 2 of the Schedule where GST is not payable or Column 3 where GST is payable.

Dated this 30th day of October 2000

MICHAEL MOORE
Minister for Health, Housing
and Community Care

SCHEDULE

This is the schedule referred to in the Determination of Fees and Charges under section 32 of the *Health and Community Care Services Act 1996*.

Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
A. Hospital Accommodation Fees – Standard Patients			
1. If the patient is a private patient other than a compensable patient or a non-eligible person, and is:			
(a) in a multiple-bed room,	per day	\$222.00	n/a
(b) in a single room, otherwise than at the patients request,	per day	\$222.00	n/a
(c) in a single room at the patients request.	per day	\$383.00	n/a
2. If the patient is a compensable patient or a non-eligible person.	per day	\$683.00	n/a
B. Hospital Accommodation Fees – Day Care Patients			
If the patient is a private patient and is provided with:			
1. Type-B professional attention as determined under paragraph 4B(a) of the <i>Commonwealth National Health Act 1953</i> ,	per day	\$159.00	n/a
2. procedures (other than those set out in paragraph 1) carried out under local anaesthetic, no sedation. Theatre time (actual time in theatre) less than one hour,	per day	\$180.00	n/a
3. procedures (other than those set out in paragraph 1) carried out under general or regional anaesthetic or intravenous sedation. Theatre time (actual time in theatre) less than one hour,	per day	\$199.00	n/a
4. procedures (other than those set out in paragraph 1) carried out under general or regional anaesthetic or intravenous sedation. Theatre time (actual time in theatre) one hour or more.	per day	\$222.00	n/a

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Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
C. Hospital Accommodation Fees – Nursing Home Type Patients			
1. If the patient has attained the age of 16 years and is:			
(a) a hospital patient,	per day	\$28.10	n/a
(b) a private patient.	per day	\$101.85	n/a
2. If the patient has not attained the age of 16 years and is:			
(a) a hospital patient,		nil	n/a
(b) a private patient.	per day	\$73.75	n/a
D. Hostel Fees			
Hostel Accommodation Fees	per day	\$21.40	n/a
E. Accommodation where the person is other than a patient			
Whether the accommodation is in a hospital or a nursing home or a hostel:			
1. On wards	per day	\$5.80	\$6.35
2. In residences associated with a hospital, a nursing home or a hostel, where the person is not a pensioner or a health care card holder.			
Single room			
(a) first person	per day	\$25.00	\$27.50
(b) second person	per day	\$12.30	\$13.50
(c) children 12 years and under (maximum of two persons including children per room)	per day	\$6.15	\$6.75
(d) family rooms (3 persons)	per day	\$45.00	\$49.50
3. In residences associated with a hospital, a nursing home or a hostel, where the person is a pensioner or a health care card holder.			

SCHEDULE

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Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
Single room			
(a) first person	per day	\$18.00	\$19.80
(b) second person	per day	\$10.25	\$11.25
(c) children 12 years and under (maximum of two persons including children per room)	per day	\$6.15	\$6.75
(d) family rooms (3 persons)	per day	\$35.00	\$38.50
4. Flats			
(a) one bedroom	per week	\$143.50	\$157.85
(b) two bedroom	per week	\$157.85	\$173.60

F. Fees for Professional Services other than the Pathology Service

These do not apply in relation to:

1. a professional service provided,

(a) in pursuance of the *Public Health (Medical and Dental Inspection of School Children) Regulations*; or

(b) in the course of a program of child health care,

2. a professional service provided at a hospital,

3. a professional service provided at the request of a member of the Australian Federal Police acting in his or her capacity as such a member;

4. a professional service provided in accordance with a request made, or a direction given under or for the purposes of, a law in force in the Territory, or

5. a professional service provided in the treatment or control of addiction to alcohol or drugs.

An amount equal to the fee specified in respect of that professional service in the Schedule of Fees listed in the Medicare Benefits Schedule Book as amended from time-to-time.

SCHEDULE

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)	
G. Pathology Service Fees			
Where the pathology service is provided by the ACT to:		An amount equal to the fee specified in respect of that pathology service in the Schedule of Fees listed in the Medicare Benefits Schedule Book as amended from time-to-time.	
1. a compensable person,			
2. a non-eligible person.			
H. Outpatient Service Fees			
Compensable non-inpatients and non-eligible persons:			
1. First visit	per visit	\$120.95	n/a
2. Second and subsequent visits.	per visit	\$79.95	n/a
I. Physiotherapy and Occupational Therapy			
Compensable non-inpatients and non-eligible persons at Community Health Center's and Hospitals:			
First and subsequent visit.	per visit	\$79.95	n/a
J. Patient's Personal Laundry			
Patients at Nursing Homes	per day	\$1.25	n/a
K. Mass Vaccinations			
Where there is a contract/agreement to vaccinate work groups against:			
1. Hepatitis A	per vaccine	\$63.55	n/a
2. Hepatitis B	per vaccine	\$18.45	n/a
3. Influenza	per vaccine	\$21.50	n/a
4. Other (Adult Diphtheria Tetanus, Measles Mumps Rubella, Rubella, Sabin)	per vaccine	\$10.25	n/a

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Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
L. Facilities Hire			
1. The Canberra Hospital			
(a). Use of theatrette (after hours)	per hour	\$118.90	\$130.75
2. ACT Community Care - Conference, Meeting and Group Rooms			
(a). Commercial Use			
(i) Non-Health Related	per hour	\$23.00	\$25.30
(ii) Sessional Health Related	per hour	\$16.00	\$17.60
(b). Community Use			
(i) Non-Health Related	per hour	\$16.00	\$17.60
(ii) Health Related	per hour	\$12.00	\$13.20
3. ACT Community Care - Theatrette	per hour	\$68.00	\$74.80
M. Medical Records and Health Reports			
1. Medical Practitioner Reports			
(a). Preparation of a medical report by a treating medical practitioner appointed to or employed by the Health and Community Care Service requiring no further examination of the patient.		\$157.85	\$173.60
(b) Preparation of a medical report by a medical practitioner appointed to or employed by the Health and Community Care Service who has not previously treated the patient and no further examination of the patient is required.		\$183.45	\$201.80
(c) A report made by a treating medical practitioner appointed to or employed by the Health and Community Care Service where a re-examination is required.		\$210.10	\$231.10
(d) A report made by a treating medical practitioner appointed to or employed by the Health and Community Care Service who has not previously treated the patient and where an examination is required.		\$262.40	\$288.60

SCHEDULE

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
2. Health records required to be produced by subpoena		
(a) Where at least 5 days notice is given for the production of the record to the Court	\$46.10	\$50.70
(b) Where less than 5 days notice is given.	\$76.85	\$84.50
3. Search Fees		
	\$31.75	\$34.90
Other than requests made by a party concerned with a patient's continued treatment or future management		
A search fee is to be charged where:		
<ul style="list-style-type: none">• the applicant subsequently advises that a report/record is no longer required.• where a thorough search has ascertained that the patient has never attended the hospital for that episode of illness.• for Motor Accident and Comcare medical certificates completed other than at the time of consultation.• the fee also applies to requests for information on date or time of birth.		
4. Medical Records Department		
Preparation of a report by the Medical Records Department as part of its medico-legal responsibilities	\$105.55	\$116.10
5. Health Professional Reports		
(a) Preparation of a report by a treating health professional, other than a medical practitioner, appointed to or by the Health and Community Care Service requiring no further examination of the patient	\$157.85	\$173.60

SCHEDULE

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
(b) Preparation of a report by a treating health professional, other than a medical practitioner, appointed to or by the Health and Community Care Service who has not previously treated the patient and no further examination is required.	\$183.45	\$201.80
(c) Preparation of a report by a treating health professional, other than a medical practitioner, appointed to or by the Health and Community Care Service where a re-examination is required.	\$210.10	\$231.10
(d) Preparation of a report by a treating health professional, other than a medical practitioner, appointed to or by the Health and Community Care Service who has not previously treated the patient and where an examination is required.	\$262.40	\$288.60
6. Clinical Notes provided to patient's solicitor		
(a) Upon receipt of written consent from the patient for the solicitor to have copies of all or part of the clinical notes - Provision of a copy of the medical record or part thereof, e.g. continuation notes, pathology reports and charts.	\$115.80	\$127.35
7. Clinical Notes provided to insurer		
(a) Upon written consent from the patient allowing the insurer to have copies of all or part of their clinical notes and indicating their awareness of the possible inclusion of confidential medical information irrelevant to the claim - Provision of a copy of the medical record, or part thereof, e.g. continuation notes, pathology reports and charts.	\$115.80	\$127.35
N. Pathology Coronial post mortems	\$193.70	\$213.05

SCHEDULE

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
O. Dental Services		
Group 0: Examinations/Diagnostic		
011 Initial Exam (Min. \$20 for Course of Treatment)	\$4.00	n/a
011A Initial & Restorative Referral Scheme Exam	\$7.50	n/a
012 Periodic Exam	\$3.50	n/a
013A Emerg Exam (Min. \$20: Restorative Emergencies) -	\$20.00	n/a
013B Pros Emergency Visit	\$20.00	n/a
013 Emerg Exam For Child & Youth Only	Child & Youth Membership	n/a
014 Consult (incl Exam)	\$4.00	n/a
015 Consult Ext + 30 (incl Exam)	\$10.00	n/a
016 Consult by Ref (incl Exam)	\$11.50	n/a
017 Consult by Ref Ext +30 (incl Exam)	\$13.50	n/a
018 Written Report	\$4.00	n/a
019 Letter of Referral	\$1.50	n/a
021 Complete intraoral series of radiographs (10 films or more, including b/w)	\$14.00	n/a
022 X-Ray -1 film PA or BW	\$3.50	n/a
023 X-Ray -2 films PA or BW	\$5.50	n/a
024 X-Ray -Additional PA or BW	\$2.50	n/a
025 Intraoral radiograph - occlusal, maxillary or mandibular - single film	\$5.00	n/a
031 Extraoral radiograph - maxillary and/or mandibular - single film	\$5.50	n/a
051 Biopsy of Tissue	\$9.50	n/a
061 Pulp Vitality Test	No Fee For This Service	n/a
071 Diagnostic cast	\$5.00	n/a
Group 1: Preventative Services		
111 Plaque Removal	\$4.00	n/a
113 Recontour rest'n (existing) & Teeth	\$7.50	n/a
114 Calculus (supra & subging.) & Plaque Removal 1st visit	\$9.00	n/a
115 Calculus (supra & subging.) & Plaque Removal Addit. visit	\$9.00	n/a
121 Fluoride - Topical	\$3.00	n/a
141 Oral Hygiene Instr. (if more than 10 mins.)	\$4.00	n/a
151 Mouthguard (incl model)	\$77.50	n/a
161 Fissure Sealant	\$5.50	n/a
165 Apply Desensitising Agent	\$2.00	n/a

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
182 Concentrated flouride, application - single tooth	\$4.00	n/a
Group 2: Periodontics		
213 Acute Perio Infection TMT	\$5.50	n/a
222 Root Planing & Curretage (per 8 or less teeth)	\$11.00	n/a
225 Non-surgical periodontal treatment not otherwise specified - per visit	\$8.00	n/a
231 Gingivectomy, per segment of 8 teeth or less	\$15.50	n/a
232 Periodontal flap surgery, per segment of 8 teeth or less	\$23.00	n/a
233 Osseous surgery, per segment of 8 teeth or less	\$19.00	n/a
241 Root resection	\$19.00	n/a
245 Periodontal surgery involving one tooth	\$10.00	n/a
246 Papillectomy	\$6.00	n/a
Group 3: Oral Surgery		
311 Extraction - perm tooth	\$10.00	n/a
312 Extract - Root Fragment (from 311/313)	\$5.00	n/a
313 Extraction - deciduous tooth	\$6.50	n/a
316 Extraction - Additional tooth near 311/313/316 in addition to 321	\$6.50	n/a
321 Surgical Extraction	\$21.50	n/a
324 Complex Surgical Extraction	\$26.50	n/a
325 Surgical frag - Soft Tissue only	\$12.00	n/a
326 Surgical frag -bone	\$15.50	n/a
329 Non-routine post-operative treatment - per visit	No Fee For This Service	n/a
331 Alveolectomy per segment or quadrant	\$10.50	n/a
334 Excision of torus or exostosis	\$30.00	n/a
337 Reduction of fibrous tuberosity	\$36.00	n/a
338 Reduction of flabby ridge per segment	\$13.00	n/a
341 Removal of fibrous hyperplasia	\$11.50	n/a
376 Surgery to salivary gland	\$49.50	n/a
377 Removal or repair of soft tissue (not elsewhere defined)	\$45.50	n/a
378 Surgical removal of foreign body	\$9.00	n/a
379 Marsupialisation of cyst	\$11.00	n/a
386 Splint / reposition tooth	\$20.50	n/a
387 Replantation of tooth	\$31.00	n/a
391 Frenectomy	\$13.00	n/a
392 Incis drain abcess/cyst	\$7.00	n/a

SCHEDULE

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
398 Minor soft tissue surgery	\$6.50	n/a
399 Insertion of suture where not integral part of another item	\$6.50	n/a
700 Post Op Check	No Fee For This Service	n/a
Group 4: Endodontics		
411 Pulp cap -direct/ indirect	\$3.00	n/a
412 Pulpotomy - deciduous tooth	\$6.00	n/a
414 Pulpotomy-perm tooth	\$6.00	n/a
415 Prep of root canal	\$19.50	n/a
416 Prep of additional root canal	\$6.50	n/a
417 Obturation -1 canal	\$15.50	n/a
418 Obturation - addt. canal	\$3.50	n/a
419 Extirpation of pulp and debridement of root canal(s) - emerg	\$10.50	n/a
431 Periapical curettage	\$31.50	n/a
432 Apicectomy 1 root	\$54.00	n/a
434 Retrograde Rt Fil 1 root	\$42.00	n/a
436 Sealing of perforation	\$42.00	n/a
437 Treatment of external root resorption and repair	\$42.00	n/a
441 Bleaching Non-vital (complete tmt)	\$14.50	n/a
445 Explore blocked rt. canal	\$16.50	n/a
451 Removal of root filling, per canal	\$16.50	n/a
452 Removal of post or post crown	\$25.00	n/a
453 Removing or bypassing fractured endodontic instrument	\$21.00	n/a
454 Preparation of root canal to receive dowel	\$7.00	n/a
455 Endo dressing visit additional	No Fee For This Service	n/a
458 Interim therapeutic rct	\$10.50	n/a
Group 5: Restorative Services		
511 Amalgam - 1S -Perm	\$8.00	n/a
512 Amalgam - 2S -Perm	\$10.50	n/a
513 Amalgam- 3+S -Perm	\$12.50	n/a
514 Amalgam - 1S - deciduous tooth	\$8.00	n/a
515 Amalgam - 2S -Perm deciduous tooth	\$10.50	n/a
516 Amalgam- 3+S -Perm deciduous tooth	\$12.50	n/a
521 G.I.C. - 1S	\$9.00	n/a
522 G.I.C. - 2S	\$9.50	n/a

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
523 G.I.C. - 3+S	\$10.50	n/a
529 Adhesive Cervical GIC/Comp resin (non caries)	\$8.00	n/a
531 Comp resin 1S -Posterior	\$10.50	n/a
532 Comp resin 2S -Posterior	\$13.00	n/a
533 Comp resin 3+S -Posterior	\$16.00	n/a
537 Comp resin 1S -Anterior	\$9.50	n/a
538 Comp resin 2S -Anterior	\$12.00	n/a
539 Comp resin 3+S -Anterior	\$13.50	n/a
571 Recement inlay	\$6.50	n/a
572A Temp. Restoration	\$5.00	n/a
572B Temp. Restoration Endo Temp Dressing	No Fees For This Service	n/a
573 Temp Crown	\$12.50	n/a
574 Temp Rest'n & Metal band	\$7.00	n/a
575 Pin retension -per pin	\$2.50	n/a
577 Cusp capping - per cusp	\$3.00	n/a
584 Resin lam veneer facing	\$19.00	n/a
597 POST - cast,wrought or preformed	\$9.50	n/a
598 Complex crown -Amalgam	\$17.00	n/a
599 Complex crown - Comp resin	\$18.50	n/a
Group 6: Crown and Bridge		
611 Resin Jacket crown	\$74.50	n/a
619 Cast gold crown with facing	\$108.00	n/a
651 Recement Crown	\$7.00	n/a
652 Recement bridge or splint	\$8.00	n/a
655 Removal of crown	\$10.50	n/a
656 Removal of bridge or splint	\$10.50	n/a
Group 7: Prosthodontics		
711 Full upper denture	\$59.00	n/a
712 Full lower denture	\$59.00	n/a
716A Metal palate or plate (additional to items 711, 712, 719)	\$156.50	n/a
716B Mesh only	\$129.00	n/a
719 FU & FL dentures	\$100.00	n/a
721 Part Max denture - Acrylic with Retainers		n/a
721A Partial max denture - acrylic base 1-4 teeth, insert appliance	\$42.50	n/a
721B Partial max denture - acrylic base, 5-9 teeth inclusive, insert appliance	\$55.50	n/a

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
721C Partial max.denture - acrylic base, 10-12 teeth inclusive, insert appliance	\$62.00	n/a
722A Partial mand denture - acrylic base 1-4 teeth, insert appliance	\$42.50	n/a
722B Partial mand denture - acrylic base, 5-9 teeth inclusive, insert appliance	\$55.50	n/a
722C Partial mand.denture - acrylic base, 10-12 teeth inclusive, insert appliance	\$62.00	n/a
727A Partial max denture - cast CO/CR base, 1-4 teeth, insert appliance	\$221.00	n/a
727B Partial max denture - cast CO/CR base, 5-9 teeth inclusive, insert appliance	\$237.50	n/a
727C Partial max denture - cast CO/CR base, 10-12 teeth inclusive, insert appl.	\$248.00	n/a
728 Part mand denture - CO/CR with Retainers		n/a
728A Partial mand denture - cast CO/CR base, 1-4 teeth, insert appliance	\$221.00	n/a
728B Partial mand denture - cast CO/CR base, 5-9 teeth inclusive, insert appl.	\$237.50	n/a
728C Partial mand denture - cast CO/CR base, 10-12 teeth inclusive, insert appl.	\$248.00	n/a
734 Chrome cobalt onlay/backings/Per Tooth	\$4.00	n/a
737 Resilient Lining in addit'n to new denture	\$15.00	n/a
741A Adjust complete denture (not new)	\$4.00	n/a
741B Adjust complete denture (new)	No Fees In 1st 12 Months	n/a
742A Adjust part denture (not new)	\$4.00	n/a
742B Adjust part denture (new)	No Fees In 1st 12 Months	n/a
743 Reline -Complete denture	\$21.50	n/a
744 Reline -Part denture	\$16.50	n/a
746A Remodel -Partial denture - acrylic base, 1-4 teeth, insert appliance	\$35.50	n/a
746B Remodel -Part denture - acrylic base, 5-9 teeth inclusive, insert	\$48.50	n/a
746C Remodel - Part denture - acrylic base, 10-12 teeth inclusive, insert	\$55.00	n/a
749 Resilient lining (not new)	\$29.00	n/a
753 Clean and polish of denture	\$5.00	n/a
761 Repair - 1 Point	\$8.00	n/a
762 Repair - 2 Point	\$15.50	n/a

SCHEDULE

This is the schedule referred to in the Determination of Fees and Charges under section 32 of the *Health and Community Care Services Act 1996*.

Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
763 Repair - 3 Point	\$23.00	n/a
768A Add tooth due to extraction	\$10.50	n/a
768B Add extra per tooth due to extraction	\$5.50	n/a
769A Repair to metal casting: 1 point	\$68.00	n/a
769B Repair to metal casting: each additional point	\$38.50	n/a
771A Tissue conditioning - 1 treatment	\$4.50	n/a
771B Tissue conditioning - 2 treatments	\$8.50	n/a
771C Tissue conditioning - 3 treatments	\$12.50	n/a
776 Impression for denture repair	\$2.50	n/a
Group 8: Orthodontics (When used for an Adult)		
811 Passive removable appliance - one arch	\$28.50	n/a
812 Passive removable appliance - two arches	\$38.50	n/a
821 Active removable appliance - one arch	\$49.50	n/a
822 Active removable appliance - two arches	\$99.00	n/a
823 Functional orthopaedic appliance	\$120.50	n/a
829 Partial banding - one arch	\$153.50	n/a
830 Partial banding - two arches	\$256.00	n/a
831 Full arch banding - one arch	\$233.00	n/a
834 Full arch banding - two arches	\$388.00	n/a
841 Fixed palatal or lingual arch appliance	\$123.00	n/a
843 Rapid maxillary expansion appliance	\$123.00	n/a
845 Space maintainer - fixed	\$41.00	n/a
851 Extra-oral appliance	\$164.00	n/a
871 Orthodontic adjustment	No Fees For This Service	n/a
875 Repair removable appliance	\$13.00	n/a
877 Orthodontic extrusion of tooth	\$92.00	n/a
Group 9: General Services		
911 Palliative emergency care	\$4.00	n/a
912 Sedative dressing (emerg)	\$5.50	n/a
915 After hours emergency	\$4.00	n/a
924 Drug prescription	\$2.50	n/a
931 Home visit (additional to other items)	\$4.00	n/a
932 Hospital visit (additional to other items)	\$4.00	n/a
935 Interpreter (per 15 min)	No Fees For This Service	n/a
936A Failed to attend appointment	\$20.00	n/a
936B Cancelled By Patient with insufficient notice IE On the DAY	\$20.00	n/a

SCHEDULE

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Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
941 Local anaesthesia:- Diagnostic Local Anasthesia	\$1.50	n/a
943 Sedation - Inhalation	\$5.00	n/a
949 Load treat under G.A.	\$20.00 Flat Fee For GA Appointment	n/a
961 Minor Occlusal adjustment	\$5.00	n/a
965 Occlusal splint	\$43.00	n/a
966 Adjust occlusal splint	\$6.00	n/a
981 Splinting & Stabilisation	\$16.50	n/a
Provision for new dentures		
100 1st Impression (new denture) Per Impression	Minimum Fee For Appointment	n/a
200 2 nd Impression (new denture) Per Impression	Minimum Fee For Appointment	n/a
300 Bite (new denture)	Minimum Fee For Appointment	n/a
400 Try In (new denture)	Minimum Fee For Appointment	n/a
500 Re Try (new denture)	Minimum Fee For Appointment	n/a
Group A: Restorative Referral Scheme		
A31 Mucoperiosteal flap to remove tooth or root (321 or 324)	\$43.55	n/a
A41 Complete Endodontic treatment, incisor or canine tooth (415 & 417)	\$35.00	n/a
A42 Complete Endodontic treatment, premolar tooth (415,417,416,& 418)	\$45.50	n/a
A43 Complete Endodontic treatment, molar tooth(415,417[2x416 & 2x418])	\$56.00	n/a
A51 Simple filling, not involving proximal surface(Av 511,512,531,537 & 521)	\$9.50	n/a
A52 Complex filling, involving proximal surface (Av. 513,538 & 539)	\$12.50	n/a
A53 Full coverage complex restoration, including pins/ or bonding (598)	\$17.00	n/a
CHILD AND YOUTH DENTAL ANNUAL MEMBERSHIP FEES		
Cat A Category A:- Full fee (per child)	\$40.00	n/a
Cat B Category B:- Reduced fee (per child)	\$20.00	n/a
Cat C Category C:- No Fees	Nil	n/a

SCHEDULE

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Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
P. Alcohol and Drug Service			
1. Service reports supplied to insurance agents and solicitors	per session	\$36.00	\$39.60
2. Methadone dispensed to clients on public methadone program for 6 months or more	per week	\$15.00	n/a
Q. Meals on Wheels			
Supplied to Red Cross for distribution.	per meal	\$2.45	\$2.70
R. Magnetic Resonance Imaging			
Compensable patients, non-eligible patients and research.			An amount equal to the fee specified in respect of that pathology service in the Schedule of Fees listed in the Medicare Benefits Schedule Book as amended from time-to-time.
S. Disability Services			
1. Respite Care Services (per day)			
(a) Under 16 years	per day	\$5.60	n/a
(b) 16-17 years	per day	\$21.60	n/a
(c) 18-20 years	per day	\$22.90	n/a
(d) 21 years and over	per day	\$24.10	n/a
2. Long Term Accommodation Fees			
(a) Under 16 years	per fortnight	\$78.40	n/a
(b) 16-17 years	per fortnight	\$302.40	n/a
(c) 18-20 years	per fortnight	\$320.60	n/a
(d) 21 years and over	per fortnight	\$337.40	n/a
3. Independent Living Centre			
(a) Visits			
(i) General Public		\$5.00	\$5.50
(ii) Pension, health care cardholder or students		\$2.00	\$2.20

SCHEDULE

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Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
(b) Assisted appointment less than 1.5 hours		\$66.60	n/a
(c) Assisted Appointment over 1.5 hours		\$99.40	n/a
(d) Unassisted		\$26.70	\$29.35
(e) Non attendance for appointment		\$10.30	\$11.30
(f) Home Visits less than 1.5 hours (including travel)		\$66.60	n/a
(g) Home Visits more than 1.5 hours (including travel)		\$99.40	n/a
(h) Second Hand Register (referral service)			
(i) for items over \$500		\$15.40	\$16.90
(ii) for items under \$500		\$7.20	\$7.90
(iii) for more than 1 item		\$15.40	\$16.90
(i) Educational Tours for Groups			
(i) General Public		\$5.00	\$5.50
(ii) Pension, health care cardholder or students		\$2.00	\$2.20
(j) Building Access Advisory Service (including travel)	per hour	\$76.90	\$84.55
4. Integrated day service (aCe Link)			
(a) Activities	per session	\$3.00	n/a
		+ consumables	
(b) Leapfrog Outdoor Adventure Program	per day	\$8.00	n/a
T. Biomedical Repairs			
Repairs on equipment and advice/training provided during:			
1. Core Hours	per hour	\$89.15	\$98.05
		+ parts	+ parts
2. After Hours	per hour	\$115.80	\$127.35
		+ parts	+ parts
U. Radiation Safety Section			
Consultancy fees for services provided to outside organisations	per hour	\$92.25	\$101.45

SCHEDULE

This is the schedule referred to in the Determination of Fees and Charges under section 32 of the *Health and Community Care Services Act 1996*.

Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
V. ACT Government Analytical Laboratory			
Analytical services provided to:			
1. Other than the ACT Coroner's Office	per hour	\$114.00	\$125.40
2. ACT Coroner's Office (Attorney- General's Dept)	per matter	\$725.70	\$798.25
W. Audiometry			
Adult Hearing Tests	per consultation	\$27.00	n/a
X. ACT Community Care			
Education and/or Training			
1. Per facilitator - business hours	per hour	\$46.00	\$50.60
2. Per facilitator - after hours	per hour	\$70.00	\$77.00
Community Health Care Program			
3. Chronic pain management course for compensation clients	per session	\$30.00	\$33.00
4. Nursing education - business hours	per session	\$45.00	\$49.50
5. Nursing education - after hours	per session	\$70.00	\$77.00
6. Sale of infection control manual	per manual	\$61.50	\$67.65
7. Podiatric surgery (materials)	per intervention	\$32.00	\$35.20
8. Simple innersoles	per pair	\$22.00	n/a
9. Accommodative	per pair	\$84.00	n/a
10. Rigid innersoles	per pair	\$190.00	n/a
11. Day care meals	per meal	\$5.00	n/a
12. Pressure relief mattress or overlay hire	per month	\$80.00	n/a
13. Pressure relief mattress or overlay hire – pensioner rate		\$40.00	n/a
14. Pressure reduction mattresses and overlays	per month	\$20.00	n/a
15. Cushion hire	per month	\$20.00	\$22.00
16. Consultation for nurses in private hospitals	per hour	\$58.00	\$63.80
17. Home nursing	per hour	\$58.00	n/a
18. Consultation overseas clients	per hour	\$58.00	n/a

SCHEDULE

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Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
Women's Health Program			
19. Copies of mammograms	per set	\$26.65	\$29.30
Y. Pharmaceutical Co-payment			
Collection of a co-payment for medications or pharmaceuticals dispensed from hospital for:			
1. General non-inpatient	per item per month	\$15.00	n/a
2. Concessional non-inpatient	per item per month	\$3.20	n/a