AUSTRALIAN CAPITAL TERRITORY

Regulations 1977 No. 24

Regulations under the Health Commission Ordinance 1975*

I, RALPH JAMES DUNNET HUNT, the Minister of State for Health, hereby make the following Regulations under the Health Commission Ordinance 1975.

Dated this twenty-seventh day of September 1977.

RALPH J. HUNT

Minister of State for Health

AMENDMENTS OF THE HEALTH COMMISSION (CHARGES) **REGULATIONS†**

1. These Regulations shall come into operation on 1 October 1977. Commencement

2. Regulation 2 of the Health Commission (Charges) Regulations Interpretation is amended-

- (a) by inserting after the definition of "ordinary patient" the following definition:
 - "' pathology service' means a professional service in respect of which a fee is specified in an item in Part 7 of the standard medical benefits table, being an item that includes the symbol '(OP)'"; and
- (b) by omitting the definition of "single room" and substituting the following definitions:

"' single room ' means a room in which 1 bed is situated; 'standard medical benefits table' means the table of medical services set out in Schedule 1 to the *Health* Insurance Act 1973, as in force on 1 October 1977.".

3. Regulation 3A of the Health Commission (Charges) Regulations Out-patient fees is amended-

- (a) by inserting in paragraph (1) (a) ", other than a pathology service," after "professional service"; and
- (b) by omitting from sub-regulation (2) "not being services" and substituting " not being pathology services or services ".

Notified in the Commonwealth of Australia Gazette on 30 September 1977.
† Regulations 1975, No. 13 as amended by Regulations 1976, No. 18; and 1977, Nos. 11 and 15.

Nursinghome fees 4. Regulation 4 of the Health Commission (Charges) Regulations is amended—

- (a) by omitting from paragraph (a) "\$17.40" and substituting "\$20.35";
- (b) by omitting from paragraph (b) "\$18.83" and substituting "\$21.78";
- (c) by omitting from paragraph (c) "\$20.26" and substituting "\$23.21";
- (d) by omitting from paragraph (d) "\$20.40" and substituting "\$26.35";
- (e) by omitting from paragraph (e) "\$21.83" and substituting "\$27.78"; and
- (f) by omitting from paragraph (f) " \$23.26" and substituting " \$29.21".

5. Regulation 6A of the Health Commission (Charges) Regulations is repealed and the following regulations are substituted:—

"6A.(1) Subject to this regulation, the prescribed charge for the purpose of sub-section 74 (1) of the Ordinance for a professional service, other than a pathology service, provided by the Commission to a privately insured person is an amount equal to—

- (a) 85 per cent of the fee specified in respect of that professional service in the standard medical benefits table in relation to the State of New South Wales; or
- (b) if the amount calculated under paragraph (a) is less by more than \$5 than the fee referred to in that paragraph the difference between that fee and \$5.

"(2) Where an amount calculated in accordance with subregulation (1) is not a multiple of 5 cents, the amount shall be increased to the next higher amount that is a multiple of 5 cents.

"(3) Sub-regulation (1) does not apply in relation to—

- (a) a professional service provided—
 - (i) in pursuance of the Public Health (Medical and Dental Inspection of School Children) Regulations; or
 - (ii) in the course of a programme of child health care conducted by the Commission; or
- (b) a professional service provided at a hospital conducted by the Commission.

Fees for medical services, other than pathology services "6B. (1) Subject to this regulation, the prescribed charge for the Fees for purpose of sub-section 74 (1) of the Ordinance for a pathology service provided by the Commission is an amount equal to—

- (a) 85 per cent of the fee specified in relation to that pathology service in the standard medical benefits table in relation to the State of New South Wales; or
- (b) if the amount calculated under paragraph (a) is less by more than \$5 than the fee referred to in that paragraph the difference between that fee and \$5.

"(2) Where an amount calculated in accordance with subregulation (1) is not a multiple of 5 cents, the amount shall be increased to the next higher amount that is a multiple of 5 cents.

"(3) Sub-regulation (1) does not apply in relation to-

- (a) a pathology service provided to a person in connexion with the taking from that person of blood for use in, or in connexion with, the treatment of another person;
- (b) a pathology service provided at the request of a member of a police force of the Commonwealth or of the Territory acting in his capacity as such a member;
- (c) a pathology 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;
- (d) a pathology service provided to a person who is a patient at a hospital conducted by the Commission, being—
 - (i) a person who is neither a privately insured person nor a patient referred to in paragraph (b) of the definition of 'private patient' in regulation 2; or
 - (ii) a privately insured person who has made an election under sub-regulation 3 (8); or
- (e) a pathology service provided in the course of a programme of child health care conducted by the Commission.".

6. (1) The Health Commission (Charges) Regulations, as amended Application by these Regulations, do not apply in relation to a professional service provided by the Commission where any act forming part of the provision of that service was done before the commencement of these Regulations.

(2) The Health Commission (Charges) Regulations, as in force immediately before the commencement of these Regulations, continue to apply in relation to a professional service provided by the Commission where any act forming part of the provision of that service was done before the commencement of these Regulations.

(3) In this regulation, "professional service" has the same meaning as in the Health Commission (Charges) Regulations, as amended by these Regulations.