AUSTRALIAN CAPITAL TERRITORY

HEALTH AND COMMUNITY CARE SERVICES ACT 1996

DETERMINATION OF FEES AND CHARGES

INSTRUMENT NO. 110 OF 2001

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. 334 of 2000, dated 30 October 2000, which was notified in the Australian Capital Territory Gazette No. 45 on 9 November 2000; and
- 2. MAKE the following determination to take effect from 1 July 2001.
 - (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

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

as

- (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 sixth day of June 2001

MICHAEL MOORE
Minister for Health, Housing

and Community Services

Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
A. Hospital Accommodation Fees – Standard 1. If the patient is a private patient other than a compensable patient or a non-eligible person, and is:	l Patients		
(a) in a multiple-bed room,(b) in a single room, otherwise than at the	per day	\$235.00	n/a
patients request, (c) in a single room at the patients request.	per day	\$235.00	n/a
(e) in a single room at the patients request.	per day	\$406.00	n/a
2. If the patient is a compensable patient or a non-eligible person.	per day	\$724.00	n/a
B. Hospital Accommodation Fees – Day Car If the patient is a private patient and is provided with:	e Patients		
1. Type-B professional attention as determined under paragraph 4B(a) of the <i>Commonwealth National Health Act</i> 1953,	per day	\$169.00	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	\$191.00	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	\$211.00	n/a

Column 1		Column 2	Column 3
Service		Amount	Amount
			inclusive of GST
		GST	(if applicable)
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	\$235.00	n/a
C. Hospital Accommodation Fees – Nursing l	Home Type P	atients	
1. If the patient has attained the age of 16	• •		
years and is:			
(a) a hospital patient,	per day	\$29.65	n/a
(b) a private patient.	per day	\$105.10	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	\$75.45	n/a
(*) * [* * * * * * * * * * * * * * * * *	1	,	
D. Hostel Fees			
Hostel Accommodation Fees	per day	\$22.60	n/a
E. Accommodation where the person is other Whether the accommodation is in a hospital or a nursing home or a hostel:	than a patien	t	
1. On wards	per day	\$5.93	\$6.50
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	\$25.56	\$28.10
(b) second person	per day	\$12.58	\$13.85
(c) children 12 years and under	1	,	, 22130
(maximum of two persons including	per day	\$6.29	\$6.90
children per room)	- •		
(d) family rooms (3 persons)	per day	\$46.01	\$50.60

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	Column 2	Column 3
Service	Amount	Amount
	exclusive of	inclusive of GST
	GST	(if applicable)

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.

Single room			
(a) first person	per day	\$18.41	\$20.25
(b) second person	per day	\$10.48	\$11.55
(c) children 12 years and under	per day	\$6.29	\$6.90
(maximum of two persons including			
children per room)			
(d) family rooms (3 persons)	per day	\$35.79	\$39.35
4. Flats			
(a) one bedroom	per week	\$146.73	\$161.40
(b) two bedroom	per week	\$161.40	\$177.55

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	Column 2	Column 3
Service	Amount	Amount
	exclusive of	inclusive of GST
	GST	(if applicable)

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.

G. Pathology Service Fees

Where the pathology service is provided by the ACT to:

- 1. a compensable person,
- 2. a non-eligible person.

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.

H. Outpatient Service Fees

Compensable non-inpatients and noneligible persons:

1. First visit	per visit	\$123.70	n/a
2. Second and subsequent visits.	per visit	\$81.70	n/a

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.

Column 1 Service		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
I. Physiotherapy and Occupational Therap Compensable non-inpatients and non- eligible persons at Community Health Center's and Hospitals:	y		
First and subsequent visit.	per visit	\$81.70	n/a
J. Patient's Personal Laundry	_		
Patients at Nursing Homes	per day	\$1.30	n/a
 K. Mass Vaccinations Where there is a contract/agreement to vaccinate work groups against: 1. Hepatitis A 2. Hepatitis B 3. Influenza 4. Other (Adult Diphtheria Tetanus, Measles) 	per vaccine per vaccine per vaccine	\$65.00 \$18.90 \$22.00	n/a n/a n/a
Mumps Rubella, Rubella, Sabin)	per vaccine	\$10.50	n/a
L. Facilities Hire 1. The Canberra Hospital	mon boyu	¢121.50	¢122.75
(a). Use of theatrette (after hours)	per hour	\$121.58	\$133.75
2. ACT Community Care - Conference, Meeting and Group Rooms			
(a). Commercial Use(i) Non-Health Related(ii) Sessional Health Related	per hour per hour	\$23.52 \$16.36	\$25.85 \$18.00
(b). Community Use(i) Non-Health Related(ii) Health Related	per hour per hour	\$16.36 \$12.27	\$18.00 \$13.50

Column 1 Service	Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
3. ACT Community Care - Theatrette per hour	\$69.53	\$76.50
M. Medical Records and Health Reports1. 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.	\$161.40	\$177.50
(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.	\$187.58	\$206.35
(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.	\$214.83	\$236.30
(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.	\$268.30	\$295.15
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	\$47.14	\$51.85
(b) Where less than 5 days notice is given.	\$78.58	\$86.40

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	Column 2	Column 3
Service	Amount	Amount
	exclusive of	inclusive of GST
	GST	(if applicable)
3. Search Fees	\$32.46	\$35.70

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:

- 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	\$107.92	\$118.70
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	\$161.40	\$177.50
(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.	\$187.58	\$206.35
(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.	\$214.83	\$236.30

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015 Consult Ext + 30 (incl Exam) \$10.50 n/a	013	Emerg Exam For Child & Youth Only		n/a
	014	Consult (incl Exam)	\$4.00	n/a
016 Consult by Ref (incl Exam) \$11.50 n/a	015	Consult Ext + 30 (incl Exam)	\$10.50	n/a
	016	Consult by Ref (incl Exam)	\$11.50	n/a

Colum	n 1	Column 2	Column 3
Service	e	Amount	Amount
		exclusive of	inclusive of GST
		GST	(if applicable)
017	Consult by Ref Ext +30 (incl Exam)	\$14.00	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	\$14.50	n/a
	more, including b/w)	·	
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	n/a
071	Diagnostic cast	Service \$5.00	n/a
071	Diagnostic Cast	ψ3.00	II/ U
	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	\$9.50	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
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 & Currettage (per 8 or less teeth)	\$11.00	n/a
225	Non-surgical periodontal treatment not otherwise	\$8.00	n/a
	specified - per visit		
231	Gingivectomy, per segment of 8 teeth or less	\$16.00	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

Colum		Column 2	Column 3
Service	e	Amount	Amount
			inclusive of GST
		GST	(if applicable)
245	Periodontal surgery involving one tooth	\$10.00	n/a
246	Papillectomy	\$6.00	n/a
	T	,	
	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	\$6.50	n/a
221	addition to 321	¢21.50	m /o
321 324	Surgical Extraction-Erupted	\$21.50 \$26.50	n/a
324	Surgical removal of unerupted or partly erupted tooth, both remove bone and tooth division	\$20.30	n/a
325	Surgical frag - Soft Tissue only	\$12.00	n/a
325	Surgical frag - Soft Tissue only Surgical frag -bone	\$12.00	n/a
329	Non-routine post-operative treatment - per visit	No Fee For This	n/a
349	Non-roudine post-operative treatment - per visit	Service	11/a
331	Alveolectomy per segment or quadrant	\$11.00	n/a
334	Excision of torus or exostosis	\$30.50	n/a
337	Reduction of fibrous tuberosity	\$36.50	n/a
338	Reduction of flabby ridge per segment	\$13.00	n/a
341	Removal of fibrous hyperplasia	\$12.00	n/a
376	Surgery to salivary gland	\$50.00	n/a
377	Removal or repair of soft tissue (not elsewhere	\$46.00	n/a
	defined)		
378	Surgical removal of foreign body	\$9.50	n/a
379	Marsupialisation of cyst	\$11.00	n/a
386	Splint / reposition tooth	\$20.50	n/a
387	Replantation of tooth	\$31.50	n/a
391	Frenectomy	\$13.00	n/a
392	Incis drain abcess/cyst	\$7.00	n/a
398	Minor soft tissue surgery	\$6.50	n/a
399	Insertion of suture where not integral part of another	\$6.50	n/a
700	item	No Fee For This	/
700	Post Op Check	Service	n/a
	Group 4: Endodontics		
411	Pulp cap -direct/ indirect	\$3.00	n/a
412	Pulpotomy - deciduous tooth	\$6.00	n/a
	1 J	+ 5.50	-2 4

Colum	n 1	Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of GST
		GST	(if applicable)
414	Pulpotomy-perm tooth	\$6.00	n/a
415	Prep of root canal	\$19.50	n/a
416	Prep of additional root canal	\$7.00	n/a
417	Obturation -1 canal	\$16.00	n/a
418	Obturation - addt. canal	\$4.00	n/a
419	Extirpation of pulp and debridement of root canal(s) -	\$10.50	n/a
	emerg		
431	Periapical curettage	\$31.50	n/a
432	Apicectomy 1 root	\$54.50	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)	\$15.00	n/a
445	Explore blocked rt. canal	\$17.00	n/a
451	Removal of root filling, per canal	\$17.00	n/a
452	Removal of post or post crown	\$25.50	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	n/a
450	Interior the second one	Service	/-
458	Interim therapeutic rct	\$10.50	n/a
	Group 5: Restorative Services		
511	Amalgam - 1S -Perm	\$8.50	n/a
512	Amalgam - 2S -Perm	\$10.50	n/a
513	Amalgam- 3+S -Perm	\$13.00	n/a
514	Amalgam - 1S - deciduous tooth	\$8.50	n/a
515	Amalgam - 2S -Perm deciduous tooth	\$10.50	n/a
516	Amalgam- 3+S -Perm deciduous tooth	\$13.00	n/a
521	G.I.C 1S	\$9.00	n/a
522	G.I.C 2S	\$10.00	n/a
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	\$10.00	n/a
538	Comp resin 2S -Anterior	\$12.00	n/a
539	Comp resin 3+S -Anterior	\$13.50	n/a
	•	,	

Colum	n 1	Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of GST
		GST	(if applicable)
571	Recement inlay	\$6.50	n/a
	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	\$7.50	n/a
575	Pin retentsion -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	\$17.50	n/a
599	Complex crown - Comp resin	\$19.00	n/a
	Group 6: Crown and Bridge		
611	Resin Jacket crown	\$75.50	n/a
619	Cast gold crown with facing	\$109.50	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
711	Group 7: Prosthodontics	\$50.50	1
711	Full upper denture	\$59.50	n/a
712	Full lower denture	\$59.50	n/a
/16A	Metal palate or plate (additional to items 711, 712, 719)	\$158.00	n/a
716B	Mesh only	\$130.00	n/a
	FU & FL dentures	\$101.50	n/a
721	Part Max denture - Acrylic with Retainers	Ψ101 . 20	12 0
	Partial max denture - acrylic base1-4 teeth, insert	\$47.00	n/a
	appliance		
721B	Partial max denture - acrylic base, 5-9 teeth inclusive,	\$55.50	n/a
7210	insert appliance	Ψ33.30	11/4
721C	Partial max.denture - acrylic base, 10-12 teeth	\$62.00	n/a
700 1	inclusive, insert appliance	ф.4 7 .00	,
722A	Partial mand denture - acrylic base1-4 teeth, insert appliance	\$47.00	n/a
722B	Partial mand denture - acrylic base, 5-9 teeth inclusive,	\$55.50	n/a

mn 2 nount ive of GST	Column 3 Amount inclusive of GST (if applicable)
62.00	n/a
04.00	n/a
14.50	n/a
22.50	n/a
04.00	n/a
14.50	n/a
22.50	n/a
\$4.00	n/a
11.50	n/a
\$3.50	n/a
\$3.50	n/a
23.50	n/a
21.55	n/a
32.50	n/a
\$5.00	n/a
\$8.50	n/a
17.00	n/a
25.50	n/a
11.50	n/a
\$6.00	n/a
68.50	n/a
39.00	n/a
\$4.50	n/a
\$8.50	n/a
	n/a
\$2.50	n/a
29.00	n/a
38.50	n/a
	\$8.50 13.50 \$2.50 29.00

Colum	n 1	Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of GST
		GST	(if applicable)
021	A discourse and the continues of the con	¢50.00	/-
821	Active removable appliance - one arch	\$50.00	n/a
822	Active removable appliance - two arches	\$100.00	n/a
823	Functional orthopaedic appliance	\$122.00	n/a
829	Partial banding - one arch	\$155.00	n/a
830	Partial banding - two arches	\$258.50	n/a
831	Full arch banding - one arch	\$235.00	n/a
834	Full arch banding - two arches	\$392.00	n/a
841	Fixed palatal or lingual arch appliance	\$124.00	n/a
843	Rapid maxillary expansion appliance	\$124.00	n/a
845	Space maintainer - fixed	\$41.50	n/a
851	Extra-oral appliance	\$165.50 No Fees For This	n/a
871	Orthodontic adjustment	Service	n/a
875	Repair removable appliance	\$13.00	n/a
877	Orthodontic extrusion of tooth	\$93.00	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	n/a
0364	Failed to attend appointment	Service \$20.00	n/a
	Cancelled By Patient with insufficient notice IE On the	\$20.00	n/a
930 D	DAY	\$20.00	II/a
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	n/a
		For GA Appointment	
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
	Corres As Destaurie D.C. 101		
A 21	Group A: Restorative Referral Scheme	ф о 1 го	,
A31	Mucoperiosteal flap to remove tooth or root (321 or	\$21.50	n/a

Colum			Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST (if applicable)
A41	324) Complete Endodontic treatment, incis	or or canine tooth	\$35.00	n/a
A42	(415 & 417) Complete Endodontic treatment, pren (415,417,416,& 418)	nolar tooth	\$45.50	n/a
A43	Complete Endodontic treatment, mola tooth(415,417[2x416 & 2x418])	ur	\$56.00	n/a
A51	· ,	urface(Av	\$9.50	n/a
A52	Complex filling, involving proximal sur 513,538 & 539)	face (Av.	\$12.50	n/a
A53	Full coverage complex restoration, inc bonding (598)	luding pins/ or	\$17.00	n/a
CHILI	O AND YOUTH DENTAL ANNUAL	MEMBERSHIP F	EES	
CITICA	Category A:- Full fee (per child)	WILMBERSTIN 1	\$40.00	n/a
	Category B:- Reduced fee (per child))	\$20.00	n/a
	Category C:- No Fees		Nil	n/a
MAXI	MUM ANNUAL FAMILY FEE			
	Category A:- Full fee		\$100.00	n/a
	Category B:- Reduced fee for families	s receiving more		
	than the minimum rate of Centrelink Fapayment).	amily Allowance	\$50.00	n/a
	ohol and Drug Service			
	rice reports supplied to insurance and solicitors	per session	\$36.81	\$40.50
	hadone dispensed to clients on public done program for 6 months or more	per week	\$15.00	n/a
Q. Me	eals on Wheels			
Supplie	ed to Red Cross for distribution.	per meal	\$2.51	\$2.75

Column 1	Column 2	Column 3
Service	Amount	Amount
	exclusive of	inclusive of GST
	GST	(if applicable)
R. Magnetic Resonance Imaging		
Compensable patients, non-eligible patients and research.	specified in respect of that	
	1 05	ce in the Schedule
		d in the Medicare
	Benefits	Schedule Book as
	amended f	from time-to-time.

			n time-to-time.
S. Disability Services			
1. Respite Care Services (per day)			
(a) Under 16 years	per day	\$5.70	n/a
(b) 16-17 years	per day	\$22.10	n/a
(c) 18-20 years	per day	\$23.40	n/a
(d) 21 years and over	per day	\$24.60	n/a
2. Long Term Accommodation Fees			
(a) Under 16 years	per fortnight	\$80.15	n/a
(b) 16-17 years	per fortnight	\$309.20	n/a
(c) 18-20 years	per fortnight	\$327.80	n/a
(d) 21 years and over	per fortnight	\$345.00	n/a
3. Integrated day service (aCe Link)			
(a) Activities	per session	\$3.10	n/a
		+ consumables	
(b) Leapfrog Outdoor Adventure Program	per day	\$8.20	n/a
T. Biomedical Repairs			
Repairs on equipment and advice/training provided during:			
1. Core Hours	per hour	\$91.16	\$100.30
	_	+ parts	+ parts
0 AC TT		ф110.41	#120.25

1. Core Hours	per hour	\$91.16	\$100.30
		+ parts	+ parts
2. After Hours	per hour	\$118.41	\$130.25
		+ parts	+ parts

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

Column 2

Column 3

Service		Amount	Amount
			inclusive of GST
		GST	(if applicable)
			(11
U. Community Rehabilitation Program			
1. Independent Living Centre			
(a) Appointment fee for compensible injury/illr	ness and or work	x related injury/illne	ess
i) Assisted appointment and report	per hour	\$81.75	n/a
writing	1		
ii) Non attendance at appointment		\$11.85	\$13.05
(b) Unassisted appointments - service provided	d by staff memb	oer of another orga	nisation
i) Unassisted appointment under 1.5 hour	per hour	\$27.30	\$30.05
(c) Education and/or Training (for student ground	ups private and	public sector staff	groups)
i) Per facilitator - business hours	per hour	\$47.04	\$51.75
ii) Per facilitator - after hours	per hour	\$71.58	\$78.75
(d) Second hand register (referral service)	•		
i) for items over \$500		\$15.75	\$17.35
ii) for items under \$500		\$7.36	\$8.10
iii) for more than 1 item		\$15.75	\$17.35
(e) Consultancy fee for commercial advisory se	ervices (includin	g travel)	
(i) Consultancy Fee	per hour	\$81.75	\$89.95
2. Equipment Loan Service			
(a) Default on loan agreements		Cost of	Cost of
		replacement +	replacement +
		10% admin	11% admin
		charge (\$150	charge (\$165
		max.)	max.)
(b) Hire of pressure care products			
i) Pressure Relief Mattress or Overlay Hire	per month	\$81.80	n/a
ii) Pressure Relief Mattress or Overlay Hire –	per month	\$40.90	n/a
Pensioner Rate			
iii) Pressure Reduction Mattresses and	per month	\$20.45	n/a
Overlays			
2 4077 : 401			
3. ACT Equipment Scheme	D 4 C	ф 2 0,00	1
(a) Continence pads and aids for	Per carton of	\$20.00	n/a
incontinence conti	nence pads or		
ina	order of continence aids		
(b) Orthopaedic footwear	onunence aids	10% of total	n/a
(b) Orthopactic Tootweat		cost (\$50 min.)	11/a
		cost (\$50 Hill.)	

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	Column 2	Column 3
Service	Amount	Amount
	exclusive of	inclusive of GST
	GST	(if applicable)
(c) Orthoses	10% of total	n/a
	cost (\$20 min.)	
(d) Repairs to ACTES Equipment	1/3 of total cost	n/a
	(\$20 min.)	
(e) Home modifications	\$20.00	n/a
(f) Walking aids	10% of total	n/a
	cost (\$20 min.)	
(g) Equipment and appliances for	10% of total	n/a
personal use	cost (\$20 min.)	
(h) Wigs	\$20.00	n/a
(i) Breast Prostheses	\$20.00	n/a
Notes:		

- i) For items other than above a client contribution may be payable direct to supplier
- ii) Cost ceilings apply excess is paid direct to supplier.
- iii) Only charges levied by ACT Community Care (ACTCC) are listed above, additional costs may be payable to suppliers.
- iv) 'Total cost' above refers to cost of procurement or parts plus labour incurred by ACTCC.

4. Prosthetic and Orthotic Services

(a)	New prostheses or repairs for	per hour	\$81.75	n/a
	compensible clients		+ components	
(b)	New prostheses or repairs for non	per hour	15% of	n/a
	compensible clients not holding		total cost	
	concession cards (cost ceilings apply)		(\$200pa max.)	
(c)	New orthoses	per hour	\$81.75	n/a
(d)	Repairs to Orthoses	per hour	\$81.75	\$89.95
			+ components	+ components
(e)	Rehabilitation engineering	per hour	\$60.00	\$66.00
	maintenance/modification on		+ components	+ components
	equipment and advice/training			
(f)	Community Medical Officer			
	i) Consultation not covered by	per hour	\$98.00	\$107.80
	concession card			
(g)	Driver Rehabilitation Service			
	i) Initial Assessment	per hour	\$55.00	n/a
	ii) Initial Assessment- Compensible		\$850.00	\$935.00
	iii) Lesson	per hour	\$50.00	\$55.00
	iv) Lesson- Compensible	per hour	\$65.00	\$71.50

Column 1		Column 2	Column 3	
Service		Amount	Amount	
		exclusive of	inclusive of GST	
		GST	(if applicable)	
\ -		4-000	,	
v) Re-assessment	per hour	\$50.00	n/a	
vi) Re-assessment- compensible		\$400.00	\$440.00	
Notes:				
i) Cost ceilings apply to certain items - excess costs born by client				
ii) 'Total cost' above refers to cost of procurement or parts plus labour incurred by ACTCC.				
V. Scientific Services				
provided to:				
1. Other than the ACT Coroner's Office	per hour	\$116.60	\$128.25	
2. ACT Coroner's Office (Attorney-	1			
General's Dept)	per matter	\$742.00	\$816.20	
W. Audiometry				
Adult Hearing Tests	per consultation	\$27.60	n/a	
X. Other ACT Community Care Fees				
Education and/or Training				
Per facilitator - business hours	per hour	\$47.04	\$51.75	
2. Per facilitator - after hours	per hour	\$71.58	\$78.75	
2. 1 0. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.	per nous	φ, 1.0 σ	Ψ, σ., σ	
Community Health Care Program				
3. Chronic pain management course				
for compensation clients	per hour	\$30.68	\$33.75	
4. Nursing education - business hours	per hour	\$60.00	\$66.00	
5. Nursing education - after hours	per session	\$90.00	\$99.00	
6. Sale of infection control manual	per manual	\$62.88	\$69.15	
7. Podiatric surgery (materials)	per			
	intervention	\$32.72	\$36.00	
8. Simple innersoles	per pair	\$22.50	n/a	
9. Accommodative	per pair	\$85.90	n/a	
10. Rigid innersoles	per pair	\$194.30	n/a	
11. Day care meals	per meal	\$5.10	n/a	
12. Pressure relief mattress or overlay him		\$81.80	n/a	
13. Pressure relief mattress or overlay	per month			
hire – pensioner rate		\$40.90	n/a	
14. Pressure reduction mattresses and				
overlays	per month	\$20.45	n/a	
15. Cushion hire	per month	\$20.45	\$22.50	

Column 1		Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of GST
		GST	(if applicable)
16. Consultation for nurses in private			
hospitals	per hour	\$59.31	\$65.25
17. Home nursing	per hour	\$59.30	n/a
18. Consultation overseas clients	per hour	\$59.30	n/a
Child, Youth & Women's Health Program			
19. Copies of mammograms	per set	\$27.25	\$30.00
Y. Pharmaceutical Co-payment			
Collection of a co-payment for medications or pharmaceuticals dispensed from			
hospital for:			
1. General non-inpatient	per item	\$15.00	n/a
2. Concessional non-inpatient	per item	\$3.50	n/a