AUSTRALIAN CAPITAL TERRITORY

HEALTH AND COMMUNITY CARE SERVICES ACT 1996

DETERMINATION OF FEES AND CHARGES

INSTRUMENT NO. 201 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. 110 of 2001, dated 6 June 2001, which was notified in the Australian Capital Territory Gazette No. 24 on 14 June 2001; and
- 2. MAKE the following determination to take effect from the date of gazettal.
 - (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;

"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;

[&]quot;general" means a person who is not concessional;

"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 23rd day of July 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 – Standa 1. If the patient is a private patient other than a compensable patient or a non-eligible person, and is:	rd 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	per day	\$235.00	n/a
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 Ca If the patient is a private patient and is provided with:	are 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
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

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. Hospital Accommodation Fees – Nursing	Home Type	e Patients	
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
D. Hostel Fees			
Hostel Accommodation Fees	per day	\$22.60	n/a
Troster Accommodation I ces	per day	\$22.00	II/ a
E. Accommodation where the person is other whether the accommodation is in a hospital or a pursing home or a hostel:	er than a pa	tient	
hospital or a nursing home or a hostel:			
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 ,		
(maximum of two persons including children per room)	per day	\$6.29	\$6.90
(d) family rooms (3 persons)	per day	\$46.01	\$50.60
3. In residences associated with a			
hospital, a nursing home or a hostel,			
where the person is a pensioner or a			
where the person is a pensioner of a			

health care card holder.

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)
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			
(maximum of two persons including children per room)	per day	\$6.29	\$6.90
(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

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-totime.

Column 1 Service		Column 2 Amount	Column 3 Amount
		exclusive of	inclusive of
		GST	GST (if applies his)
			(if applicable)
G. Pathology Service Fees			
Where the pathology service is provided by	the ACT to:	An amount	equal to the fee
		specified in	n respect of that
1. a compensable person,			gy service in the
			ees listed in the
2. a non-eligible person.			nefits Schedule
		Book as amende	
			time.
H. Outpatient Service Fees			
Compensable non-inpatients and non-			
eligible persons:			
4. 77	• •,	Ф122.70	,
1. First visit	per visit	\$123.70 \$81.70	n/a n/a
2. Second and subsequent visits.	per visit	Ф01.70	11/a
I. Physiotherapy and Occupational Ther Compensable non-inpatients and non- eligible persons at Community Health Center's and Hospitals:	apy		
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
Tutionis at Ivaising Homes	per day	Ψ1.50	11/ W
K. Mass Vaccinations			
Where there is a contract/agreement to			
vaccinate work groups against:		4	
1. Hepatitis A	per vaccine	\$65.00	n/a
2. Hepatitis B	per vaccine	\$18.90	n/a
3. Influenza 4. Other (Adult Diphtheria Tetapus	per vaccine	\$22.00	n/a
4. Other (Adult Diphtheria Tetanus, Measles Mumps Rubella, Rubella, Sabin)	per vaccine	\$10.50	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 Hire1. The Canberra Hospital			
(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
(ii) Sessional Teath Related	per nour	Ψ10.30	Ψ10.00
(b). Community Use	1	ф1 C 2 C	¢10.00
(i) Non-Health Related(ii) Health Related	per hour per hour	\$16.36 \$12.27	\$18.00 \$13.50
3. ACT Community Care - Theatrette	per hour	\$69.53	\$76.50
M. Medical Records and Health Reports 1. Medical Practitioner Reports	1		
(a). Preparation of a medical report by a treat practitioner appointed to or employed by the Community Care Service requiring no further examination of the patient.	Health and	\$161.40	\$177.50
(b) Preparation of a medical report by a medical report by a medical report by a medical report by the practitioner appointed to or employed by the Community Care Service who has not previous the patient and no further examination of the required.	Health and busly treated	\$187.58	\$206.35
(c) A report made by a treating medical pracappointed to or employed by the Health and Care Service where a re-examination is requ	Community	\$214.83	\$236.30
(d) A report made by a treating medical pracappointed to or employed by the Health and Care Service who has not previously treated and where an examination is required.	Community	\$268.30	\$295.15

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	\$47.14	\$51.85
(b) Where less than 5 days notice is given.	\$78.58	\$86.40
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

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.	\$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
(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.	\$268.30	\$295.15
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.	\$118.41	\$130.25
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.	\$118.41	\$130.25
N. Pathology Coronial post mortems	\$198.06	\$217.85

Colum	nn 1	Column 2	Column 3
Servic	e	Amount	Amount
		exclusive of	inclusive of
		GST	GST
		(if applicable)
O. De	ntal 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) - Use 915 for Weekend	\$20.00	n/a
013b	Pros Emergency Visit	\$20.00	n/a
013	Emerg Exam For Child & Youth Only	No Fee (M'ship Required)	n/a
014	Consult (incl Exam)	\$4.00	n/a
015	Consult Ext + 30 (incl Exam)	\$10.50	n/a
016	Consult by Ref (incl Exam)	\$11.50	n/a
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 more, including bitewings)	\$14.50	n/a
022	X-Ray -1 film PA or BW	\$3.50	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 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)	\$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

Colui		Column 2 Amount exclusive of GST	Column 3 Amount inclusive of GST
			(if applicable)
	Crown 2. Pariodontias		
213	Group 2: Periodontics Acute Perio Infection TMT	\$5.50	n/a
222	Root Planing & Currettage (per 8 or less teeth)	\$3.30 \$11.00	
225	Non-surgical periodontal treatment not otherwise	\$8.00	
223	specified - per visit	ψ0.00	π/α
231	Gingivectomy, per segment of 8 teeth or less	\$16.00	n/a
232	Periodontal flap surgery, per segment of 8 teeth or	\$23.00	
232	less	Ψ23.00	11/ 4
233	Osseous surgery, per segment of 8 teeth or less	\$19.00	n/a
241	Root resection	\$19.00	
245	Periodontal surgery involving one tooth	\$10.00	
246	Papillectomy	\$6.00	n/a
	Group 3: Oral Surgery		
311	Extraction - perm tooth	\$10.00	n/a
313	Extraction - deciduous tooth	\$6.50	n/a
316	Extraction - Additional tooth near 311/313/316	\$6.50	n/a
321	Surgical Extraction-Simple	\$21.50	
324	Surgical Exraction-Complex	\$26.50	
325	Surgical frag - Soft Tissue only	\$12.00	
326	Surgical frag -bone	\$16.00	
329	Non-routine post-operative treatment - per visit	No Fee For Service	11/ a
331	Alveolectomy per segment or quadrant	\$11.00	
334	Excision of torus or exostosis	\$30.50	
337	Reduction of fibrous tuberosity	\$36.50	n/a
338	Reduction of flabby ridge per segment	\$13.00	
341	Removal of fibrous hyperplasia	\$12.00	
376	Surgery to salivary gland	\$50.00	
377	Removal or repair of soft tissue (not elsewhere	\$46.00	n/a
270	defined)	φο. 5 0	/
378	Surgical removal of foreign body	\$9.50	
379	Marsupialisation of cyst	\$11.00	
386	Splint / reposition tooth	\$20.50	
387 391	Replantation of tooth	\$31.50 \$13.00	
391	Frenectomy Incis drain abcess/cyst	\$13.00 \$7.00	
398	Minor soft tissue surgery	\$6.50	
399	Insertion of suture where not integral part of another	\$6.50 \$6.50	
377	item	φυ.30	11/ a
700	Post Op Check	No Fee For Service	n/a
, 50	1 out op cheek		11/α

Colun		Column 2	Column 3
Servic	ce	Amount	Amount
		exclusive of	inclusive of
		GST	GST
		((if applicable)
411	Group 4: Endodontics	\$2.00	n /o
411 412	Pulp cap -direct Pulpotomy - deciduous tooth	\$3.00 \$6.00	n/a n/a
414		\$6.00	n/a
414 A41	Pulpotomy-perm tooth Complete Endodontic treatment, incisor or canine	\$35.00	n/a
A41	tooth	\$33.00	II/a
A42	Complete Endodontic treatment, permolar tooth	\$45.50	n/a
A43	Complete Endodontic treatment, molar tooth	\$56.00	n/a
419	Extirpation of pulp and debridement of root canal(s) -		n/a
	emerg	Ψ10.00	11, 60
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 Service	n/a
458	Interim therapeutic rct	\$10.50	n/a
	Group 5: Restorative Services		
511	Metallic - 1S -Permanent Posterior	\$9.50	n/a
512	Metallic - 2S -Permanent Psoterior	\$11.50	n/a
513	Metallic - 3+S -Permanent Posterior	\$14.50	n/a
514	Metallic/Non-Metallic - 1S - deciduous tooth	\$8.50	n/a
515	Metallic/Non-Metallic - 2S - Perm deciduous tooth	\$10.50	n/a
516	Metallic/Non-Metallic - 3+S - Perm deciduous tooth	\$13.00	n/a
529	Adhesive Cervical GIC/Comp resin (non caries)	\$8.00	n/a
531	Non Metallic 1S - Permanent Posterior	\$9.50	n/a
532	Non Metallic 2S - Permanent Posterior	\$11.50	n/a
533	Non Metallic 3+S - Permanent Posterior	\$14.50	n/a
537	Non Metallic 1S - Anterior	\$10.00	n/a
538	Non Metallic 2S - Anterior	\$12.00	n/a
539	Non Metallic 3+S - Anterior	\$13.50	n/a

Colum		Column 2	Column 3
Servic	e	Amount	Amount
		exclusive of	inclusive of
		GST	GST
		()	if applicable)
571	Recement inlay	\$6.50	n/a
572A	Temp. Restoration	\$5.00	n/a
572B	Temp. Restoration Endo Temp Dressing	No Fee For 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
	Group 7: Prosthodontics		
711	Full Maxillary denture	\$59.50	n/a
712	Full Mandibular denture	\$59.50	n/a
716a	Metal palate or plate (additional to items 711, 712, 719)	\$158.00	n/a
716b	Mesh only	\$130.00	n/a
719	Full Maxillary & Full Mandibular dentures	\$101.50	n/a
721a	Partial max denture - acrylic base1-4 teeth, insert appliance	\$47.00	n/a
721b	Partial max denture - acrylic base, 5-9 teeth inclusive, insert appliance	\$55.50	n/a
721c	Partial max.denture - acrylic base, 10-12 teeth inclusive, insert appliance	\$62.00	n/a
722a	Partial mand denture - acrylic base1-4 teeth, insert appliance	\$47.00	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,	\$204.00	n/a

Services Amount exclusive of GST (is applicable) Amount inclusive of GST (is applicable) 727b Partial max denture - cast CO/CR base, 5-9 teeth inclusive, insert appliance \$214.50 n/a inclusive, insert appliance 727c Partial max denture - cast CO/CR base, 10-12 teeth inclusive, insert appliance \$222.50 n/a inclusive, insert appl. 728a Partial mand denture - cast CO/CR base, 1-4 teeth, inclusive, insert appl. \$214.50 n/a insert appliance 728b Partial mand denture - cast CO/CR base, 5-9 teeth inclusive, insert appl. \$222.50 n/a inclusive, insert appl. 728c Partial mand denture - cast CO/CR base, 10-12 teeth inclusive, insert appl. \$222.50 n/a 730 Provision of casting \$163.00 n/a 731 Denture Retainer (each) \$2.50 n/a 734 Chrome cobalt onlay/backings \$26.00 n/a 737 Resiliant Lining in addit'n to new denture \$11.50 n/a 741A Adjust complet denture (not new) \$3.50 n/a 742B Adjust part denture (not new) \$3.50 n/a 742B Adjust part denture (not new) \$3.50 n/a 744B Reline -Partial denture - acryllic base, 1-4 teeth \$36.00 n/a	Colum	nn 1	Column 2	Column 3
Insert appliance	Servic	e	Amount	Amount
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771b Tissue conditioning - two treatments \$8.50 n/a 771c Tissue conditioning - three treatments \$13.50 n/a	769b	Repair to metal casting: each additional point	\$39.00	n/a
771c Tissue conditioning - three treatments \$13.50 n/a	771a	Tissue conditioning - one treatment	\$4.50	n/a
	771b	Tissue conditioning - two treatments	\$8.50	n/a
776 Impression for denture repair \$2.50 n/a	771c	Tissue conditioning - three treatments		n/a
	776	Impression for denture repair	\$2.50	n/a

Colum	nn 1	Column 2	Column 3
Servic	e	Amount	Amount
		exclusive of	inclusive of
		GST	GST
		(if applicable)
	Crown 9. Onthe douting (Wilson wood for on Adult)		
811	Group 8: Orthodontics (When used for an Adult) Passive removable appliance - one arch	\$29.00	n/a
812	* *.	\$38.50	
821	Passive removable appliance - two arches	\$50.00	n/a n/a
	Active removable appliance - one arch		
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	n/a
871	Orthodontic adjustment	No Fee For 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 Fee For Service	n/a
936A	Failed to attend appointment	\$20.00	n/a
936B	Cancelled By Patient with insufficient notice IE On	\$20.00	n/a
)30 D	the DAY	Ψ20.00	11/ 4
943	Sedation - Inhalation	\$5.00	n/a
949	Load treat under G.A.	\$20.00	n/a
ノマノ	Loud treat under G.71.		11/ 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

Colum		Column 2	Column 3
Service	e	Amount	Amount
		exclusive of	inclusive of
		GST	GST
		(if applicable)
	Provision for New Dentures		
100	1st Impression (New Denture) Per Impression	\$20.00	n/a
200	2nd Impression (New Denture) Per Impression	\$20.00	n/a
300	Bite (New Denture)	\$20.00	n/a
400	Try In (New Denture)	\$20.00	n/a
500	Re Try (New Denture)	\$20.00	n/a
	Group A: Restorative Referral Scheme		
A31	Mucoperiosteal flap to remove tooth or root (322, 323, or 324)	\$21.50	n/a
A41	Complete Endodontic treatment, incisor or canine tooth (415 & 417)	\$35.00	n/a
A42	Complete Endodontic treatment, permolar 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 Membership Fees		
Cat A	Standard Annual Fee	\$40.00	n/a
	Maximum Standard Annual Family Fee	\$100.00	n/a
Cat B	Reduced Annual Fee for Low Income Families	\$20.00	n/a
	Maximum Reduced Annual Family Fee	\$50.00	n/a
Cat C	Families Covered by a Concession Card	No Fee For Service	n/a

Column 1		Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of
		GST	GST (if applicable)
			(п аррпсавіе)
P. Alcohol and Drug Service			
1. Service reports supplied to insurance		¢27.01	¢40.50
agents and solicitors	per session	\$36.81	\$40.50
2. Methadone dispensed to clients on			
public methadone program for 6 months			
or more	per week	\$15.00	n/a
O. M. Alexandra			
Q. Meals on Wheels Supplied to Red Cross for distribution.	per meal	\$4.82	\$5.30
Supplied to Red Closs for distribution.	per mear	Ψ+.02	ψ3.30
R. Magnetic Resonance Imaging			
Compensable patients, non-eligible patient	ts and		equal to the fee
research.		-	n respect of that
			gy service in the
			Fees listed in the enefits Schedule
		Book as amende	
		Doon as amond	time.
S. Disability Services			
1. Respite Care Services (per day)	man day	¢5 70	m/o
(a) Under 16 years(b) 16-17 years	per day per day	\$5.70 \$22.10	n/a n/a
(c) 18-20 years	per day	\$23.40	n/a
(d) 21 years and over	per day	\$24.60	n/a
· /	1 3		
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 (d) 21 years and over	per fortnight per fortnight	\$327.80 \$345.00	n/a n/a
(d) 21 years and over	per fortingit	Ψ3+3.00	II/ 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

Column 1		Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of
		GST	GST
			(if applicable)
T. Biomedical Repairs			
Repairs on equipment and advice/training			
provided during:			
Francisco america.			
1. Core Hours	per hour	\$91.16	\$100.30
	•	+ parts	+ parts
2. After Hours	per hour	\$118.41	\$130.25
	-	+ parts	+ parts
II Community Debabilitation Program			
U. Community Rehabilitation Program1. Independent Living Centre			
(a) Appointment fee for compensible injury/	illness and or	work related injur	w/illness
i) Assisted appointment and report	per hour	\$81.75	n/a
writing	per nour	ψ01.75	11/α
ii) Non attendance at appointment		\$11.85	\$13.05
(b) Unassisted appointments - service provide	ded by staff m		
i) Unassisted appointment under 1.5	per hour	\$27.30	\$30.05
hour	per nour	Ψ27.50	Ψ50.05
(c) Education and/or Training (for student gr	roups private	and public sector s	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)	r	, , , , , ,	,
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	services (inc	cluding 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	per month	\$40.90	n/a
Hire – Pensioner Rate	_	4-0	
iii) Pressure Reduction Mattresses and	per month	\$20.45	n/a
Overlays			

Column 1		Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of
		GST	GST
			(if applicable)
3. ACT Equipment Scheme			
(a) Continence pads and aids for	Per carton of	\$20.00	n/a
incontinence	continence pads		
	or order of		
	incontinence aids		
(b) Orthopaedic footwear		10% of total	n/a
		cost (\$50 min.)	
(c) Orthoses		10% of total	n/a
		cost (\$20 min.)	
(d) Repairs to ACTES Equipment		1/3 of total	n/a
		cost (\$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		(\$200pa max.)	
	apply)			
(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			

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) Community Medical Officer			
i) Consultation not covered by concession card	per hour	\$98.00	\$107.80
(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
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. C	Other than the ACT Coroner's OfficacT Coroner's Office (Attorney-	e per hour	\$116.60	\$128.25
	General's Dept)	per matter	\$742.00	\$816.20
	audiometry			
Adul	t Hearing Tests	per consultation	\$27.60	n/a
	ther ACT Community Care Fees			
	ation and/or Training			
1.	Per facilitator - business hours	per hour	\$47.04	\$51.75
2.	Per facilitator - after hours	per hour	\$71.58	\$78.75
Com	munity Health Care Program			
3.	Chronic pain management course			
	for compensation clients	per hour	\$30.68	\$33.75
4.	Nursing education - business hour	rs 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

Column 1		Column 2	Column 3
Service		Amount	Amount
		exclusive of	inclusive of
		GST	GST
			(if applicable)
11. Day care meals	per meal	\$5.10	n/a
12. Pressure relief mattress or overlay	per month		
hire	1	\$81.80	n/a
13. Pressure relief mattress or overlay	per month	·	
hire – pensioner rate	1	\$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
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