

# Explanatory Statement

## Health (Fees) Determination 2007 (No 2)

### Disallowable Instrument DI2007-161

made under the

***Health Act 1993, s 192 (Determination of Fees)***

---

This Determination of Fees revokes and replaces the Determination of Fees DI2007-52, dated 19 February 2007.

The Determination comes into effect on 1 July 2007 and reproduces Determination DI2007-52 except for:

- Update of references to legislation within the definitions section;
- Items on Attachment A, which have increased by the Wage Price Index rate of 4% (subject to rounding);
- Items on Attachment B, which have increased by the National Consumer Price Index rate of 2.4% (subject to rounding);
- Items on Attachment C, which are new or deleted fees;
- Items on Attachment D, which have increased by other factors as outlined in the attachment; and
- the date of effect.

## Attachment A – Wage Price Indexation

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST	
<b>D Hostel Fees</b>					
2	Group House - Maintenance Fee	per fortnight	\$10.00	\$10.40	n/a
<b>G Pathology Service Fees</b>					
a	BCL-2 Translocation	per test	\$104.00	\$108.00	n/a
b	Cystic Fibrosis - Delta F508 mutation	1 mutation	\$88.00	\$91.50	n/a
c	Cystic Fibrosis - 36 mutation screen	36 mutations	\$207.00	\$215.00	n/a
d	DNA Extraction and Storage	per test	\$70.00	\$73.00	n/a
e	IgH & TCR gamma Gene rearrangements	per test	\$207.00	\$215.00	n/a
f	ThinPrep Pap Test	per test	\$24.90	\$25.90	n/a
g	Spore Testing	per ampoule	\$8.00	\$8.50	\$9.35
h	FiSH - Haematology Oncology	per test	\$250.00	\$260.00	n/a
i	Prenatal - Interphase Fish	per test	\$250.00	\$260.00	n/a
k	Constitutional/Microdeletions	per test	\$250.00	\$260.00	n/a
l	Collection and transport of specimens for Paternity Testing	per test	\$30.00	\$31.00	\$34.10
m	Histology testing on Coronal post mortems	per post mortem	\$284.00	\$295.00	\$324.50
<b>J Capital Region Cancer Service</b>					
1	Copies of mammograms	per set	\$31.10	\$32.30	n/a
<b>K Staff Vaccinations for Private Purposes</b>					
	Service Fee	per visit	\$10.70	\$11.00	\$12.10
<b>L Facilities Hire</b>					
2Facility Hire - Community Health Conference, Meeting and Group Rooms					
a	Commercial Use				
	i) - Non-Health Related	per hour	\$26.50	\$27.50	\$30.25
	ii) - Sessional Health Related	per hour	\$18.50	\$19.00	\$20.90
b	Community Use				
	i) - Non-Health Related	per hour	\$18.50	\$19.00	\$20.90
	ii) - Health Related	per hour	\$14.50	\$15.00	\$16.50
	iii) Theatre (Moore Street Building)	per hour	\$79.50	\$82.50	\$90.75
3Facility Hire - Health Protection Service Conference / Meeting EOC room					
a	Commercial Use				
	i) - Non-Health Related	per hour	\$26.50	\$27.50	\$30.25
	ii) - Sessional Health Related	per hour	\$18.50	\$19.00	\$20.90
b	Community Use				
	i) - Non-Health Related	per hour	\$18.50	\$19.00	\$20.90
	ii) - Health Related	per hour	\$14.50	\$15.00	\$16.50

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
<b>M Medical Records and Health Reports</b>				
1	Medical Practitioner / Health Professional Reports			
	a No further examination of the patient	\$184.00	\$191.00	n/a
	b As "a" by practitioner who has not previously treated patient	\$214.00	\$223.00	n/a
	c Where a re-examination is required	\$244.00	\$254.00	n/a
	d As "c" by practitioner who has not previously treated patient	\$305.00	\$317.00	n/a
2	Search Fees - includes time of birth, admin fee if nil records & cancellation fee	\$36.80	\$38.30	n/a
3	Clinical Notes provided to patient's solicitor	\$135.00	\$140.00	n/a
4	Clinical Notes provided to insurer	\$135.00	\$140.00	n/a
<b>O Dental Services</b>				
<b>Group 0 - Examination/Diagnostic</b>				
	Comprehensive Oral Exam	\$7.00	\$7.50	n/a
	Periodic Exam	\$5.50	\$5.50	n/a
	Emergency Restorative Course of Care	\$30.00	\$31.00	n/a
	Emergency Prosthodontic Course of Care	\$30.00	\$31.00	n/a
	Consult (incl Exam)	\$8.00	\$8.50	n/a
	Consult Ext + 30 (incl Exam)	\$13.00	\$13.50	n/a
	Consult by Ref (incl Exam)	nil	nil	n/a
	Consult by Ref Ext +30 (incl Exam)	nil	nil	n/a
	Letter of Referral	nil	nil	n/a
	X-Ray -1 film PA or BW	\$5.50	\$5.50	n/a
	Intraoral radiograph - occlusal, maxillary or mandibular - single film	\$7.50	\$8.00	n/a
	Extraoral radiograph - maxillary and/or mandibular - single film	\$8.50	\$9.00	n/a
	Caries activity screening test	\$5.00	\$5.00	n/a
	Biopsy of Tissue	\$15.50	\$16.00	n/a
	Pulp Test Per visit	nil	nil	n/a
	Diagnostic cast	\$7.50	\$8.00	n/a
	Photographic records - intraoral	\$5.50	\$5.50	n/a
<b>Group 1 - Preventative Services</b>				
	Removal of Plaque and / or stain	\$7.00	\$7.50	n/a
	Recontouring - pre existing restoration/s	\$2.50	\$2.50	n/a
	Calculus (supra & subging.) & Plaque Removal 1st visit	\$9.50	\$10.00	n/a
	Calculus (supra & subging.) & Plaque Removal Addit. visit	\$7.00	\$7.50	n/a
	Enamel micro- abrasion - per tooth	\$6.00	\$6.00	n/a
	Bleaching, internal - per tooth	\$34.00	\$35.50	n/a
	Bleaching, external - per tooth	\$30.00	\$31.00	n/a
	Fluoride - Topical (including tooth mousse)	\$4.50	\$4.50	n/a
	Concentrated fluoride, application single tooth	\$3.50	\$3.50	n/a
	Dietary advice. Analysis and advice	\$4.50	\$4.50	n/a

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
Oral Hygiene Instr. (if more than 10 mins.)		\$6.00	\$6.00	n/a
Fissure Sealant - per tooth		\$6.50	\$7.00	n/a
Apply Desensitising Agent		\$3.50	\$3.50	n/a
Odontoplasty - per tooth		\$6.50	\$7.00	n/a
Group 2 - Periodontics				
Treatment of acute Periodontal Infection		\$8.50	\$9.00	n/a
Root Planing & Curettage (per 8 teeth or less)		\$17.00	\$17.50	n/a
Non-surgical periodontal treatment not otherwise specified - per visit		\$13.00	\$13.50	n/a
Gingivectomy (per 8 teeth or less)		\$24.50	\$25.50	n/a
Periodontal flap surgery (per 8 teeth or less)		\$43.50	\$45.00	n/a
Osseous surgery (per 8 teeth or less)		\$52.00	\$54.00	n/a
Root resection - per root		\$28.00	\$29.00	n/a
Periodontal surgery involving one tooth or an implant		\$10.00	\$10.50	n/a
Group 3 - Oral Surgery				
Removal of tooth or parts		\$15.50	\$16.00	n/a
Sectional removal of tooth. Bone removal maybe necessary		\$20.50	\$21.50	n/a
Surgical removal of tooth or tooth fragment not including bone		\$26.50	\$27.50	n/a
Surgical removal of tooth or tooth fragment including bone		\$32.50	\$34.00	n/a
Surgical removal of tooth or tooth fragment requiring both bone and tooth division		\$40.50	\$42.00	n/a
Alvelectomy per segment		\$16.50	\$17.00	n/a
Ostectomy		\$66.50	\$69.00	n/a
Reduction of fibrous tuberosity		\$23.00	\$24.00	n/a
Reduction of flabby ridge - per segment		\$13.00	\$13.50	n/a
Removal of fibrous hyperplasia		\$33.00	\$34.50	n/a
Removal of tumour, cyst or scar		\$25.50	\$26.50	n/a
Removal of tumour, cyst or scar involving muscle, bone or deep tissue		\$89.50	\$93.00	n/a
Surgery to salivary duct		\$79.00	\$82.00	n/a
Surgery to salivary gland		\$27.00	\$28.00	n/a
Removal or repair of soft tissue (not elsewhere defined)		\$25.00	\$26.00	n/a
Surgical removal of foreign body		\$14.00	\$14.50	n/a
Marsupialization of cyst		\$46.50	\$48.50	n/a
Surgical exposure to unerupted tooth		\$104.50	\$108.50	n/a
Reposition tooth / Splint		\$23.50	\$24.50	n/a
Replantation of /& Splinting of tooth		\$47.50	\$49.50	n/a
Frenectomy		\$22.00	\$23.00	n/a
Drainage of abscess or cyst		\$12.00	\$12.50	n/a
Surgery involving the maxially antrum		\$104.50	\$108.50	n/a
Control of reactionary or secondary post operative haemorrhage		\$7.50	\$8.00	n/a

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
Group 4 - Endodontics				
Direct pulp capping		\$4.50	\$4.50	n/a
Pulpotomy		\$9.50	\$10.00	n/a
Complete Endodontic treatment, incisor or canine tooth (415 & 417)		\$56.00	\$58.00	n/a
Complete Endodontic treatment, premolar tooth (415,417,416,& 418)		\$81.00	\$84.00	n/a
Complete Endodontic treatment, molar tooth(415,417[2x416 & 2x418])		\$106.00	\$110.00	n/a
Extirpation of pulp and debridement of root canal(s) - emerg		\$17.00	\$17.50	n/a
Resorbable root canal filling - primary tooth		\$34.50	\$36.00	n/a
Periapical curettage - per root		\$34.50	\$36.00	n/a
Apicectomy- per root		\$36.00	\$37.50	n/a
Apical seal - per canal		\$15.50	\$16.00	n/a
Sealing of perforation		\$42.50	\$44.00	n/a
Surgical treatment or repair of external root resorption		\$56.00	\$58.00	n/a
Exploration and/or negotiation of calcified canal -per canal, per visit		\$13.00	\$13.50	n/a
Removal of root filling, per canal		\$13.00	\$13.50	n/a
Removal of cemented root canal post or post crown		\$13.00	\$13.50	n/a
Removing or bypassing fractured endodontic instrument		\$11.00	\$11.50	n/a
Additional visit for irrigation and/or dressing of the root canal system - per tooth		\$13.00	\$13.50	n/a
Interim therapeutic root filling - per tooth		\$17.50	\$18.00	n/a
Group 5 - Restorative Services				
Metallic restoration - 1 surface - direct		\$13.00	\$13.50	n/a
Metallic restoration - 2 surface - direct		\$16.00	\$16.50	n/a
Metallic restoration - 3 surface - direct		\$19.50	\$20.50	n/a
Metallic restoration - 4 surface - direct		\$23.00	\$24.00	n/a
Metallic restoration - 5 surface - direct		\$26.50	\$27.50	n/a
Adhesive restoration - 1 surface - Anterior tooth - direct		\$15.00	\$15.50	n/a
Adhesive restoration - 2 surface - Anterior tooth - direct		\$18.00	\$18.50	n/a
Adhesive restoration - 3 surface - Anterior tooth - direct		\$21.00	\$22.00	n/a
Adhesive restoration - 4 surface - Anterior tooth - direct		\$24.50	\$25.50	n/a
Adhesive restoration - 5 surface - Anterior tooth - direct		\$28.50	\$29.50	n/a
Adhesive restoration - 1 surface Posterior tooth - direct		\$16.00	\$16.50	n/a
Adhesive restoration - 2 surface Posterior tooth - direct		\$20.50	\$21.50	n/a
Adhesive restoration - 3 surface Posterior tooth - direct		\$25.00	\$26.00	n/a
Adhesive restoration - 4 surface Posterior tooth - direct		\$29.00	\$30.00	n/a
Adhesive restoration - 5 surface Posterior tooth - direct		\$32.50	\$34.00	n/a
Provisional (Intermediate / temporary) restoration		\$6.00	\$6.00	n/a
Provisional (Intermediate / temporary) restoration Endo		nil	nil	n/a
Metal band		\$5.00	\$5.00	n/a
Pin restoration -per pin		\$4.00	\$4.00	n/a

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
Stainless Steel Crown		\$36.50	\$38.00	n/a
Cusp capping - per cusp		\$4.00	\$4.00	n/a
Restoration of an incisal corner - per corner		\$4.00	\$4.00	n/a
Removal of inlay/onlay		\$12.00	\$12.50	n/a
Recementing onlay/inlay		\$10.00	\$10.50	n/a
Post - direct		\$18.50	\$19.00	n/a
Group 6 - Crown and Bridge				
Provisional Crown		\$19.00	\$20.00	n/a
Recement Crown or veneer		\$11.00	\$11.50	n/a
Recement bridge or splint		\$12.50	\$13.00	n/a
Removal of crown		\$7.50	\$8.00	n/a
Removal of bridge or splint		\$23.00	\$24.00	n/a
Group 7 - Prosthodontics				
Full Maxillary denture		\$96.00	\$100.00	n/a
Full Mandibular denture		\$96.00	\$100.00	n/a
Metal plate or mesh		\$184.00	\$191.50	n/a
Full Maxillary & Full Mandibular dentures		\$172.00	\$179.00	n/a
Partial Max Denture - resin base		\$78.00	\$81.00	n/a
Partial Mand Denture - resin base		\$78.00	\$81.00	n/a
Partial Max Denture - cast CO/CR base		\$273.00	\$284.00	n/a
Partial Mand Denture - cast CO/CR base		\$273.00	\$284.00	n/a
Retainer - per tooth		nil	nil	n/a
Occlusal rest - per rest		nil	nil	n/a
Tooth/ Teeth (Partial denture)		nil	nil	n/a
Overlays - per tooth		nil	nil	n/a
Immediate tooth replacement - per tooth		nil	nil	n/a
Resilient Lining in addit'n to new denture		\$20.00	\$21.00	n/a
Wrought Bar		\$22.00	\$23.00	n/a
Metal Backing - per backing		\$20.00	\$21.00	n/a
Denture Adjustment (not new)		\$30.00	\$31.00	n/a
Denture Adjustment ( new)		nil	nil	n/a
Reline -Complete denture		\$39.00	\$40.50	n/a
Reline -Part denture		\$30.00	\$31.00	n/a
Remodel - complete denture		\$71.00	\$74.00	n/a
Remodel - Partial denture		\$56.00	\$58.00	n/a
Clean and polish of pre-existing denture		\$30.00	\$31.00	n/a
Denture base modification		\$35.50	\$37.00	n/a
Reattaching pre-existing tooth or clasp to denture		nil	nil	n/a
Replacing/added clasp to denture		nil	nil	n/a
Repairing broken base of complete denture		nil	nil	n/a
Repairing broken base of partial denture		nil	nil	n/a
Added tooth to partial denture to replace an extraction or decoronated tooth		nil	nil	n/a
Repair to metal casting: one point		\$90.00	\$93.50	n/a

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
Tissue conditioning preparatory to impressions - per application		\$7.00	\$7.50	n/a
Impression for denture repair		nil	nil	n/a
Identification		\$4.50	\$4.50	n/a
Group 7 - Provision for New Dentures (No ADA Item Numbers)				
1st Impression (New Denture) Per Impression		nil	nil	n/a
2nd Impression (New Denture) Per Impression		nil	nil	n/a
Bite (New Denture)		nil	nil	n/a
Try In (New Denture)		nil	nil	n/a
Re Try (New Denture)		nil	nil	n/a
Group 8 - Orthodontics (When Used for an Adult)				
Passive removable appliance - one arch		nil	nil	n/a
Active removable appliance - one arch		nil	nil	n/a
Functional orthopaedic appliance		nil	nil	n/a
Passive fixed appliance		nil	nil	n/a
Extra-oral appliance		nil	nil	n/a
Orthodontic adjustment		nil	nil	n/a
Repair removable appliance		nil	nil	n/a
Repair removable appliance - clasp, spring or tooth additional to removable appliance		nil	nil	n/a
Relining removable appliance		nil	nil	n/a
Group 9 - General Services				
Palliative care		\$6.00	\$6.00	n/a
After hours emergency		nil	nil	n/a
Travel to provide service		\$8.50	\$9.00	n/a
Provision of medication/ medicaments		\$3.50	\$3.50	n/a
Local anaesthesia (dignosis or pain relief)		\$2.50	\$2.50	n/a
Treatment under G.A.		\$264.00	\$274.50	n/a
Minor Occlusal adjustment		\$6.50	\$7.00	n/a
Occlusal splint		\$65.00	\$67.50	n/a
Adjust occlusal splint		\$9.50	\$10.00	n/a
Repair/addition - occlusal splint		\$37.50	\$39.00	n/a
Splinting and stabilization - direct - per tooth		\$12.00	\$12.50	n/a
Post-operative care not elsewhere included		\$8.50	\$9.00	n/a
Treatment not otherwise included		\$6.00	\$6.00	n/a
Group A - Restorative Referral Scheme (No ADA Item Numbers)				
Complete Endodontic treatment, incisor or canine tooth (415 & 417)		\$68.50	\$71.00	n/a
Complete Endodontic treatment, premolar tooth (415,417,416,& 418)		\$81.00	\$84.00	n/a
Complete Endodontic treatment, molar tooth(415,417[2x416 & 2x418])		\$106.00	\$110.00	n/a
Group B - Child & Youth Dental				
Assessment or Screening Examination Visit		nil	nil	n/a
Standard Annual Fee		\$45.00	\$47.00	n/a
Free for families meeting eligibility criteria.		nil	nil	n/a
Group C - Child and Youth Extra Fee Services				

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST	
Passive removable appliance - one arch		\$44.50	\$46.50	n/a	
Active removable appliance - one arch		\$44.50	\$46.50	n/a	
Functional orthopaedic appliance		\$35.00	\$36.50	n/a	
Passive fixed appliance		\$29.00	\$30.00	n/a	
Extra-oral appliance		\$115.50	\$120.00	n/a	
Treatment under G.A.		\$264.00	\$274.50	n/a	
Orthodontic adjustment		nil	nil	n/a	
Repair removable appliance		\$10.00	\$10.50	n/a	
Repair removable appliance - clasp, spring or tooth additional to removable appliance		\$9.50 \$10.00	\$10.00 \$10.50	n/a n/a	
Relining removable appliance		\$18.00	\$18.50	n/a	
Occlusal splint		\$35.00	\$36.50	n/a	
<b>Q Medical Imaging Services</b>					
1	Services to patients - Copies of films to patients/solicitors/coroner/police/insurers etc.				
a	18cm x 24cm sheet	per sheet	\$5.20	\$5.40	n/a
b	24cm x 30cm sheet	per sheet	\$6.20	\$6.45	n/a
c	35cm x 43cm sheet	per sheet	\$8.30	\$8.65	n/a
d	35mm slides	each	\$7.25	\$7.55	n/a
e	Digital slides	each	\$2.05	\$2.15	n/a
f	Laminating	each	\$2.05	\$2.15	n/a
g	CDs	each	\$2.05	\$2.15	n/a
h	OPG sheets	per sheet	\$6.20	\$6.45	n/a
l	DVB Laser Film	per sheet	\$8.30	\$8.65	n/a
j	Service Fee	per order processed	\$26.00	\$27.00	\$29.70
2	Radiographer services to coroner				
a	Monday to Friday	per hour	\$117.00	\$122.00	\$134.20
b	Saturday and Sunday	per hour	\$128.00	\$133.00	\$146.30
c	Public Holidays	per hour	\$171.00	\$178.00	\$195.80
d	Film	per sheet	see above for rates excluding service fee		
f	Processing	per occasion of service	\$41.50	\$43.00	\$47.30
<b>R Pain Management Service</b>					
1	Multidisciplinary Assessment	per assessment	\$917.00	\$954.00	n/a
2	Cognitive Behaviour Therapy program	per program	\$3,890.00	\$4,046.00	n/a
3	Coping and Life Styles Program	per program	\$390.00	\$406.00	n/a
4	Exercise Program	per program	\$6.75	\$7.00	n/a
5	Psychology Assessment	per assessment	\$176.00	\$183.00	n/a
6(a)	Medical Assessment and Follow-ups - First visit	per visit	\$200.00	\$208.00	n/a
6(b)	Medical Assessment and Follow-ups - Subsequent visits	per visit	\$100.00	\$104.00	n/a
<b>S Biomedical Repairs</b>					
Repairs on equipment and advice/training provided during:					
1	Core hours	per hour	\$104.00	\$108.00	\$118.80
			+ parts	+ parts	+ parts



Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST	
2	After hours	per hour	\$135.00	\$140.00	\$154.00
			+ parts	+ parts	+ parts
T Community Rehabilitation Program					
1Community - Based Rehabilitation Services					
General services to whom fees apply and commercial consultancy services					
a	Allied Health Staff				
	i) Appointment		\$93.00	\$96.50	\$106.15
b	Education and/or Training (for student groups, private and public sector staff groups)				
	i) Per facilitator - business hours	per hour (half hr min)	\$54.00	\$56.00	\$61.60
	ii) Per facilitator - after hours	per hour (half hr min)	\$81.50	\$85.00	\$93.50
2Independent Living Centre					
a	Appointment fee for clients with third party payer				
	i) Assisted appointment	per hour (half hr min)	\$93.00	\$96.50	n/a
	ii) Non attendance at appointment		\$14.50	\$15.00	\$16.50
b	Unassisted appointments - service provided by staff member of another organisation	per hour (half hr min)	\$31.00	\$32.00	\$35.20
c	Education and/or Training (for student groups, private and public sector staff groups)				
	i) ILC Education	per half day	\$67.50	\$70.00	\$77.00
	ii) ILC Education	per full day	\$124.00	\$129.00	\$141.90
d	Second hand register (referral service)				
	i) for items over \$500		\$18.50	\$19.00	\$20.90
	ii) for items under \$500		\$9.00	\$9.50	\$10.45
	iii) for more than 1 item		\$18.50	\$19.00	\$20.90
e	Consultancy fee for commercial advisory services (including travel)	per hour (half hr min)	\$93.50	\$97.00	\$106.70
4	ACT Equipment Scheme				
		Per carton of continence pads or order of incontinence aids			
a	Continence pads and aids for incontinence		\$22.70	\$23.50	n/a
b	Orthopaedic footwear		10% of total cost	10% of total cost	
			\$57.00	\$59.50	n/a
c	Orthoses		10% of total cost	10% of total cost	
			\$22.70	\$23.50	n/a
d	Repairs to ACTES Equipment		1/3 of total cost	1/3 of total cost	
			\$22.70	\$23.50	n/a
e	Home modifications		10% of total cost	10% of total cost	
			\$22.70	\$23.50	n/a
f	Walking aids		10% of total cost	10% of total cost	
			\$22.70	\$23.50	n/a
g	Equipment and appliances for personal use		10% of total cost	10% of total cost	
			\$22.70	\$23.50	n/a
h	Wigs		\$22.70	\$23.50	n/a

Item		Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST	
	i	Breast Prostheses Replacement		\$22.70	\$23.50	n/a
5	Prosthetic and Orthotic Services					
	a	New prosthesis for compensable and private clients - labour	per hour (half hr min)	\$93.00	\$96.50	n/a
	l	New orthoses	per hour (half hr min)	\$93.00	\$96.50	n/a
				+	+	
				components	components	
	j	Repairs to Orthoses	per hour (half hr min)	\$93.00	\$96.50	\$106.15
				+	+	+
				components	components	components
	k	Rehabilitation engineering maintenance/modification on equipment and advice/training	per hour (half hr min)	\$68.50	\$71.00	\$78.10
				+	+	+
				components	components	components
	l	Orthotics assessments for private and compensable clients	per hour (half hr min)	\$93.00	\$96.50	n/a
	Cost Ceiling for non-compensable and ALS exempt status client has to pay for labour and ALS approved components (item e,f,g,h)			\$227.00	\$236.00	
6	Driver Rehabilitation Service					
	a	Initial Assessment - Non compensable	per assessment	\$61.00	\$63.50	\$69.85
	b	Initial Allied Health Assessment	per assessment	\$652.00	\$678.00	n/a
	c	Initial Assessment Report and Driving Instruction	per assessment	\$298.00	\$310.00	n/a
	d	Lesson (compensable and non compensable)	per lesson	\$55.50	\$57.50	\$63.25
	e	Re-assessment - Non compensable	per assessment	\$55.50	\$57.50	\$63.25
	f	Allied Health Re-assessment	per assessment	\$279.00	\$290.00	n/a
	g	Re-assessment Report and Driving Instruction	per assessment	\$298.00	\$310.00	n/a
7	Wheelchair and Posture Seating					
	a	ACT residents, not including residential care (covered by concession card)		Component costs	Component costs	Components Cost + 10%
	b	Clients whom fees apply				
		i) Occupational Therapist	per hour (half hr min)	\$93.00	\$96.50	n/a
		ii) Community Medical Officer	per hour (half hr min)	\$109.00	\$113.00	n/a
		iii) Technician	per hour (half hr min)	\$68.50	\$71.00	n/a
				+ Component costs	+ Component costs	+ Component costs + 10%
U Health Protection Services						
1	Scientific Services					
	a	Other than the ACT Coroner's Office	per hour	\$133.00	\$138.00	\$151.80
	b	ACT Coroner's Office (Attorney-General's Dept)	per matter	\$846.00	\$880.00	\$968.00
2	Other					
	a	Consultation - Business Hours	per hour	\$93.50	\$97.00	\$106.70
	b	Consultation - After Hours	per hour	\$115.00	\$120.00	\$132.00
	c	Exhumations	per matter	\$333.00	\$346.00	\$380.60
V Audiometry						
	Adult Hearing Tests		per consultation	\$31.40	\$32.70	n/a
W Other Community Health Fees						
2	Community Health Care Program					

Item		Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
a	Chronic pain management course for compensation clients	per session	\$37.50	\$39.00	\$42.90
b	Nursing and Allied Health education - business hours	per hour	\$72.50	\$75.50	\$83.05
c	Nursing and Allied Health education - after hours	per hour	\$108.50	\$113.00	\$124.30
d	Nursing and Allied Health education (tertiary standard) - business hours	per hour	\$155.00	\$161.00	\$177.10
e	Nursing and Allied Health education (tertiary standard) - after hours	per hour	\$232.00	\$241.00	\$265.10
f	Sale of infection control manual	per manual	\$71.50	\$74.50	\$81.95
k	Day care meals	per meal	\$5.70	\$5.95	n/a
l	Consultation in private hospitals	per hour	\$73.50	\$76.50	\$84.15
m	Community nursing:	per hour	\$73.50	\$76.50	n/a
3 Allied Health					
a	Physiotherapy - Antenatal Exercise Classes	per visit	\$5.50	\$5.70	n/a
4 Other Medical Supplies					
c	Tubigrip - small/med	per metre	\$3.10	\$3.20	n/a
d	Tubigrip - large	per metre	\$10.40	\$10.80	n/a
e	Resistance Band	per metre	\$4.00	\$4.00	\$4.40
f	Exercise Putty	per container	\$7.25	\$7.55	n/a
g	Sportstape	per roll	\$6.00	\$6.00	\$6.60
m	Vaginal Cone	per item	\$16.60	\$17.30	n/a
n	TYOB Book	per item	\$18.50	\$19.00	\$20.90
o	TYON Book	per item	\$18.50	\$19.00	\$20.90
p	Women's Waterworks Book	per item	\$10.50	\$11.00	\$12.10
q	Lets Get Things Moving Book	per item	\$10.50	\$11.00	\$12.10
r	One Step at a time Book	per item	\$20.50	\$21.50	\$23.65
s	Parkinson's Disease Book	per item	\$4.00	\$4.00	\$4.40
t	Stroke Survival Guide	per item	\$12.50	\$13.00	\$14.30
5 Home Enteral Nutrition Program					
a	Equipment Only 0-6 years 11 months	per week	\$12.40	\$12.90	n/a
b	Equipment Only 7-12 years 11 months	per week	\$12.40	\$12.90	n/a
c	Equipment Only 13+ years	per week	\$12.40	\$12.90	n/a
d	Supplementary Feeding 0-6 years 11 months	per week	\$20.70	\$21.50	n/a
e	Supplementary Feeding 7-12 years 11 months	per week	\$36.30	\$37.80	n/a
f	Supplementary Feeding 13+ years	per week	\$37.30	\$38.80	n/a
g	Enteral Feeding 0-6 years 11 months	per week	\$25.90	\$26.90	n/a
h	Enteral Feeding 7-12 years 11 months	per week	\$41.50	\$43.20	n/a
i	Enteral Feeding 13+ years	per week	\$43.60	\$45.30	n/a

## Attachment B – National Consumer Price Indexation

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
<b>A Hospital Accommodation Fees - Standard Patients</b>				
a In multiple-bed room	per day	\$269.00	\$275.00	n/a
b In single room not at patients request	per day	\$269.00	\$275.00	n/a
c In single room at patients request	per day	\$466.00	\$477.00	n/a
d Hospital in the Home	per day	\$162.00	\$166.00	n/a
<b>B Hospital Accommodation Fees - Day Care Patients</b>				
a Type B	per day	\$195.00	\$200.00	n/a
b Local anaesthetic, no sedation - < 1 hour	per day	\$219.00	\$224.00	n/a
c General or regional anaesthetic/intravenous sedation - < 1 hour	per day	\$240.00	\$246.00	n/a
d General or regional anaesthetic/intravenous sedation - > 1 hour	per day	\$269.00	\$275.00	n/a

## Attachment C – New or Deleted Fees

Item	Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
<b>G Pathology Service Fees</b>				
1	Non-Medicare Testing			
j	Subtelomere FISH	per test	\$550.00	n/a
n	Collection fee for collection of research trials that do not have a current agreement (plus freight costs at cost recovery only)	per test	\$20.00	\$22.00
<b>H Non Eligible or Compensable Outpatient Service Fee</b>				
4	Compulsory Third Party Motor Vehicle Insurance - Continuing Care Program			
a	Initial Consultation (standard)	per visit	\$65.00	\$71.50
b	Initial Consultation (complex)	per visit	\$98.00	\$107.80
c	Initial Consultation Home Visit (standard)	per visit	\$80.00	\$88.00
d	Initial Consultation Home Visit (complex)	per visit	\$118.00	\$129.80
e	Review (standard)	per visit	\$55.00	\$60.50
f	Review (complex)	per visit	\$88.00	\$96.80
g	Review Home Visit (standard)	per visit	\$80.00	\$88.00
h	Review Home Visit (complex)	per visit	\$101.00	\$111.10
<b>K Staff Vaccinations for Private Purposes</b>				
All vaccinations attract a service fee plus the following vaccine cost -				
m	Cholera		\$44.30	n/a
n	Hepatitis A & Typhoid		\$101.20	n/a
o	Japanese Encephalitis (pack for 3 doses)		\$283.35	n/a
p	Yellow Fever		\$44.30	n/a
<b>L Facilities Hire</b>				
1 Use of Accommodation Facilities at The Canberra Hospital				
b	Use of Seminar Room (after hours, non-health related)			
	(ii) Health Related	per 4 hour block (min) or part thereof	\$124.30	\$136.73
c	Conference and Meeting rooms			
	(i) Non-Health Related	per 4 hour block (min) or part thereof	\$31.00	\$34.10
	(ii) Health Related	per 4 hour block (min) or part thereof	\$24.90	\$27.39
<b>T Community Rehabilitation Program</b>				
1 Community – Based Rehabilitation Services				
c	Maintenance Exercise Therapy session	Per session	\$6.00	n/a
2 Independent Living Centre				
f	Room Hire - Commercial Sector hirers	per hour	\$27.50	\$30.25
g	Room Hire - Public Sector and Community Hirers	per hour	\$19.00	\$20.90
h	Cancellation of Room Hire within seven days of booked date - Commercial Sector and Public Sector and Community Hirers	based on hours booked	50% of total booking fee	50% of total booking fee

Item		Frequency	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
3	Equipment Loan Service				
b	Hire of pressure care products				
	i) Pressure Relief Mattress or Overlay Hire	per month	\$93.00	DELETED	n/a
	ii) Pressure Relief Mattress or Overlay Hire - Pensioner Rate	per month	\$46.60	DELETED	n/a
	iii) Pressure Reduction Mattresses and Overlays	per month	\$23.20	DELETED	n/a
5	Prosthetic and Orthotic Services				
b	New prosthesis for compensable and private clients - components			Total cost of components	n/a
c	Repair prosthesis for compensable and private clients- labour	per hour (half hr min)		\$96.50	\$106.15
d	Repair prosthesis for compensable and private clients- components			Total cost of components	n/a
f	New prosthesis, non-compensable and not ALS exempt client – Components (cost ceilings apply)			15% of the total cost of components	n/a
g	Repair of prosthesis for non compensable clients and not ALS exempt client – Labour (cost ceilings apply)	per hour		15% of labour cost	15% of labour cost + 10%
h	Repair of prosthesis for non compensable clients and not ALS exempt – Components (cost ceilings apply)			15% of the total cost of components	n/a
W	Other Community Health Fees				
	4Other Medical Supplies				
	as silicone foot products	per item		At cost	n/a
	at sacro iliac supports	per item		At cost	n/a

## Attachment D – Other Factors

Item	Frequency	Adjustment based on	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST
A Hospital Accommodation Fees - Standard Patients					
2 Compensable/Non-eligible					
a Critical Care					
i) ICU	per day	Cost	\$3,822.00	\$4,031.00	n/a
ii) NICU	per day	Cost	\$2,098.00	\$2,210.00	n/a
iii) CCU	per day	Cost	\$1,101.00	\$1,159.00	n/a
b Inpatient (other than critical care)	per day	Cost	\$796.00	\$835.00	n/a
c Hospital in the Home	per day	Cost	\$295.00	\$337.00	n/a
d Operating Room Charges					
i) If the treatment involves undergoing procedures that take longer than 1 hour carried out under general or regional anaesthetic or intravenous sedation and the patient is not a day only patient	per treatment	Cost	\$2,000.00	\$2,100.00	n/a
ii) Other procedures (including day only surgical patients)	per treatment	Cost	\$700.00	\$735.00	n/a
C Hospital Accommodation Fees - Nursing Home Type Patients					
1 Hospital patient	per day	Pension Rates	\$36.40	\$38.20	n/a
2 Private patient	per day	Pension Rates	\$122.30	\$127.65	n/a
D Hostel Fees					
1 Hostel Accommodation Fees	per day	Pension Rates	\$27.75	\$29.10	n/a
H Non Eligible or Compensable Outpatient Service Fee					
1 First visit	per visit	Cost	\$152.00	\$158.00	n/a
2 Second & subsequent visits	per visit	Cost	\$100.00	\$104.00	n/a
3 ED Presentation charge	per visit	Cost	\$357.00	\$371.00	n/a
K Staff Vaccinations for Private Purposes					
2 Vaccinations					
a ADT		Cost	\$5.00	\$10.75	n/a
b Flu		Cost	\$10.00	\$13.50	n/a
c Hepatitis A		Cost	\$31.00	\$55.80	n/a
d Hepatitis B		Cost	\$12.00	\$17.75	n/a
e Hepatitis A & B		Cost	\$42.00	\$48.30	n/a
f MMR		Cost	nil	\$24.15	n/a
g Meningococcal C		Cost	\$55.00	\$60.30	n/a
h Meningococcal A, C, W, Y		Cost	\$25.00	\$33.35	n/a
l Rabies		Cost	\$72.00	\$90.40	n/a
j Pertussis (Whooping Cough)		Cost	\$25.00	\$28.75	n/a
k Typhoid		Cost	\$26.00	\$33.35	n/a
l Varicella (Chicken Pox)		Cost	\$45.00	\$51.25	n/a
L Facilities Hire					
1 Use of Accommodation Facilities at The Canberra Hospital					
a Use of Theatre (after hours)	per hour	Cost	\$138.00	\$158.40	\$174.24
b Use of Seminar Room (after hours, non-health related)					
(i) Non-Health Related	per 4 hour block (min) or part thereof	Cost	\$124.00	\$147.00	\$161.70

Item	Frequency	Adjustment based on	2006-07 Charge ex. GST	2007-08 Charge ex. GST	2007-08 Charge Inc GST	
P Alcohol & Drug Service						
1	Opioid dispensed to clients on the Opioid Treatment Service for 6 months or more	per week	Cost	\$15.00	\$15.00	n/a
Q Medical Imaging Services						
3 a	Non-rebatable MRI services to outpatients	per scan	Cost	\$275.00	\$285.00	n/a
4	Where the Medical Imaging Service provided involves Inpatient Services					
a	a non-eligible patient		Schedule	100% of MBS Fee	100% of MBS Fee	n/a
b	a compensable patient		Schedule	125% of MBS Fee	125% of MBS Fee	n/a
c	a private patient		Schedule	100% of MBS Fee	100% of MBS Fee	n/a
T Community Rehabilitation Program						
W Other Community Health Fees						
2 Community Health Care Program						
g	Podiatric nail surgery (materials)	per intervention	Cost	\$50.00	At cost	At cost + 10%
h	Non moulded innersoles	per pair	Cost	\$25.40	At cost	n/a
i	Preformed Foot Orthoses	per pair	Cost	\$99.50	At cost	n/a
j	Custom made Foot Orthoses	per pair	Cost	\$135.00	At cost	n/a
n	Consultation overseas clients	per hour	Cost	\$71.50	\$74.50	n/a
4 Other Medical Supplies						
a	Orthotic Modifications	per pair	Cost	\$10.40	At cost	n/a
b	Foot Files	Per Item	Cost	\$3.00	At cost	At cost + 10%
h	Undertape	per metre	Cost	\$5.00	At cost	At cost + 10%
i	Lumbar Roll	per item	Cost	\$17.60	At cost	n/a
j	Neck Roll	Per Item	Cost	\$16.60	At cost	n/a
k	Collar	per item	Cost	\$10.40	At cost	n/a
l	PFX Probe	Per Item	Cost	\$20.70	At cost	n/a