

Ambulatory Pricing Schedule 2010-11 - Fees Guide for Non Residents

GST 15%

Outpatient services

Service Name	RC Code	Purchase Unit Description / Treatments / Procedure Codes	Purchase Unit Code	Price	GST	Price GST Inclusive
Immunology	24145	First Specialist Appointment	M70002	\$386.96	\$58.04	\$445.00
		Subsequent Attendance	M70003	\$360.87	\$54.13	\$415.00
Dermatology	24480	First Specialist Appointment (long tertiary consultation)	M15002	\$378.26	\$56.74	\$435.00
		First Specialist Appointment (standard consultation)	M15002	\$230.43	\$34.57	\$265.00
		Subsequent Attendance (consultation fees only)	M15003	\$234.78	\$35.22	\$270.00
		Ultra Violet - Phototherapy Narrow Band UVB	M15004	\$95.65	\$14.35	\$110.00
		Ultra Violet -Phototherapy UVA	M15004	\$104.35	\$15.65	\$120.00
		Treatments - one of the following based on duration				
		DERMATOLOGY PROCEDURE 30 MINS	M15901	\$613.04	\$91.96	\$705.00
		DERMATOLOGY PROCEDURE 45 MINS	M15901	\$717.39	\$107.61	\$825.00
		DERMATOLOGY PROCEDURE 1 HR	M15901	\$817.39	\$122.61	\$940.00
		DERMATOLOGY PROCEDURE 75 MINS	M15901	\$917.39	\$137.61	\$1,055.00
		DERMATOLOGY PROCEDURE 90 MINS	M15901	\$1,021.74	\$153.26	\$1,175.00
		DERMATOLOGY PROCEDURE 105 MINS	M15901	\$1,121.74	\$168.26	\$1,290.00
		DERMATOLOGY PROCEDURE 2 HRS	M15901	\$1,226.09	\$183.91	\$1,410.00
		DERMATOLOGY PROCEDURE 2 HRS 30 MINS	M15901	\$1,430.43	\$214.57	\$1,645.00
Sexual Health	24780	First Specialist Appointment	SH01001	\$208.70	\$31.30	\$240.00
		Subsequent Attendance	SH01002	\$156.52	\$23.48	\$180.00
Diabetes	24702	First Specialist Appointment	M20004	\$373.91	\$56.09	\$430.00
		Subsequent Attendance	M20005	\$230.43	\$34.57	\$265.00
		Diabetes Education and Management - one of the following:	M20006			
		Dietician - New	M20006	\$230.43	\$34.57	\$265.00
		Dietician - Follow-Up	M20006	\$160.87	\$24.13	\$185.00
		Dietician - Annual review	M20006	\$152.17	\$22.83	\$175.00
		Nurse - New	M20006	\$352.17	\$52.83	\$405.00
		Nurse - Follow-Up	M20006	\$213.04	\$31.96	\$245.00
		Nurse - Annual review	M20006	\$208.70	\$31.30	\$240.00
		Hea - New	M20006	\$286.96	\$43.04	\$330.00
		Hea - Follow-Up	M20006	\$217.39	\$32.61	\$250.00
		Diabetes Retinal Screening - one of the following:	M20007			
		Eye photography - new	M20007	\$113.04	\$16.96	\$130.00
		Eye photography - follow-up	M20007	\$108.70	\$16.30	\$125.00
		Optometrist follow-up	M20007	\$147.83	\$22.17	\$170.00
		Optometrist follow-up eye photography	M20007	\$152.17	\$22.83	\$175.00
		Optometrist follow-up slit lamp	M20007	\$78.26	\$11.74	\$90.00
		Community Podiatry - one of the following	AH01006			
		Podiatry - new	AH01006	\$195.65	\$29.35	\$225.00
		Podiatry - follow-up	AH01006	\$173.91	\$26.09	\$200.00
		Podiatry - annual review	AH01006	\$160.87	\$24.13	\$185.00
Endocrinology	24115	First Specialist Appointment	M20002	\$539.13	\$80.87	\$620.00
		Rapid new patient (08:30)	M20002	\$278.26	\$41.74	\$320.00
		Subsequent Attendance	M20003	\$343.48	\$51.52	\$395.00
		Community Referred Tests (2 scans)	CS04005	\$134.78	\$20.22	\$155.00
		Radioiodine fixed dose new - two part price:	M20002			
		1. Appointment fee, plus		\$226.67	\$34.00	\$260.67
		2. Radioactive iodine - determined by the service. Depends on amount and current costs.		contact endocrinology		
		Other Non Medical Tests:	MS01001U			
		APD	MS01001U	\$382.61	\$57.39	\$440.00

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		ARGININE STIMULATION	MS01001U	\$426.09	\$63.91	\$490.00
		SKIN BIOPSY FOR ENDOCRINOLOGY	MS01001U	\$313.04	\$46.96	\$360.00
		BONE MARROW BIOPSY	MS01001U	\$417.39	\$62.61	\$480.00
		BUSERELIN TEST	MS01001U	\$313.04	\$46.96	\$360.00
		CALCIUM SCREEN	MS01001U	\$313.04	\$46.96	\$360.00
		CALCIUM LOAD TEST	MS01001U	\$478.26	\$71.74	\$550.00
		CATECHOLAMINES	MS01001U	\$313.04	\$46.96	\$360.00
		CRH TEST	MS01001U	\$313.04	\$46.96	\$360.00
		GLUCOSE TOLERANCE 2 HOURS	MS01001U	\$426.09	\$63.91	\$490.00
		HCG STIMULATION TEST	MS01001U	\$308.70	\$46.30	\$355.00
		HORMONE PROFILE 2 HOURS	MS01001U	\$434.78	\$65.22	\$500.00
		IMPLANTS	MS01001U	\$308.70	\$46.30	\$355.00
		LAR TREATMENT	MS01001U	\$313.04	\$46.96	\$360.00
		LRH TEST	MS01001U	\$313.04	\$46.96	\$360.00
		LUCRIN INJECTION	MS01001U	\$313.04	\$46.96	\$360.00
		METYRAPONE TEST	MS01001U	\$313.04	\$46.96	\$360.00
		PLASMA METANEPHRINES	MS01001U	\$313.04	\$46.96	\$360.00
		PT-EDUCATION 1/2 HR	MS01001U	\$313.04	\$46.96	\$360.00
		RESTING SAMPLES 1 HR	MS01001U	\$313.04	\$46.96	\$360.00
		SPECIAL BLOOD	MS01001U	\$313.04	\$46.96	\$360.00
		SYNACTHEN TEST	MS01001U	\$313.04	\$46.96	\$360.00
		TESTOSTERONE INJECTION	MS01001U	\$313.04	\$46.96	\$360.00
		TRH TEST	MS01001U	\$308.70	\$46.30	\$355.00
		ZOLEDRONATE INFUSION	MS01001U	\$369.57	\$55.43	\$425.00
Rheumatology	24127	First Specialist Appointment	M70002	\$673.91	\$101.09	\$775.00
		Subsequent Attendance	M70003	\$365.22	\$54.78	\$420.00
TARPS	24157	First Specialist Appointment	PC0001	\$934.78	\$140.22	\$1,075.00
		Subsequent Attendance	PC0003	\$473.91	\$71.09	\$545.00
		Pain Mangement Programme	PC0009	\$3,091.30	\$463.70	\$3,555.00
Oral Health	24803	RPO clinic-includes consult, X-ray, a simple tooth extraction or temporary filling. Any additional extraction \$100 each.	D01005	\$226.09	\$33.91	\$260.00
		Denture, either upper or lower	D01002	\$1,178.26	\$176.74	\$1,355.00
		Oral surgery	D01002	\$408.70	\$61.30	\$470.00
		Periodontics	D01002	\$408.70	\$61.30	\$470.00
		Restoration	D01002	\$308.70	\$46.30	\$355.00
		Special Dental Service	D01002	\$308.70	\$46.30	\$355.00
		Orthodontics	S60003	\$356.52	\$53.48	\$410.00
Ophthalmology	24055	Acute Eye Clinic				
		Acute Eye - Initial Assessment		\$565.22	\$84.78	\$650.00
		Acute Eye - Followup Assessment		\$178.26	\$26.74	\$205.00