



## **1.7 Practice Consultation Fees**

### **1.7.1 Policy**

This policy outlines the billing procedures and fee structures at Nedlands Medical Centre, ensuring transparency, compliance with Australian healthcare regulations, and informed financial consent for all patients. It applies to all clinical and administrative staff involved in patient billing, and to all patients receiving services at the Centre.

### **1.7.2 Procedure**

Nedlands Medical Centre is a private billing practice. Each GP sets fees based on the time and complexity of the consultation, in accordance with Medicare guidelines when an MBS item is used. We are committed to providing care that respects each patient's dignity, values their autonomy, and places their health and wellbeing at the heart of every consultation.

DVA card holders will be bulk billed for consultations that are covered by the Department of Veterans' Affairs (DVA), with the level of care determined by the department. Consultations not covered by DVA will incur an out-of-pocket expense, and patients will be advised of these costs prior to any consultation or procedure.

#### **Payment of Fees**

Unless advised otherwise, payment is required on the day of consultation. In exceptional circumstances, prior arrangements may be made with the treating GP or Practice Manager. Accepted payment methods include EFTPOS, Visa, and MasterCard.

#### **Insurance Claims and Workers Compensation**

Our practitioners are available to consult with patients who have insurance claims or workers compensation matters. Patients are required to pay for consultations until written confirmation of liability acceptance is received from the insurer, along with a valid claim number. A copy of this documentation must be provided to the practice for record-keeping purposes.

#### **Fee Structure**

Fees are based on the Medicare Benefits Schedule (MBS) and the Australian Medical Association (AMA) Fee List. Common consultation fees include:

Standard Consultation (Item 23): \$100 – \$110

Long Consultation (Item 36): \$180 – \$190

Telehealth Consultation: Fees charged in line with face-to-face consultations

*(consults on a Saturday may attract a higher fee)*

It is important to note that fees are determined by the time and complexity of the consultation. As a result, our practice does not operate under a 'one size fits all' model.

#### Informed Financial Consent

Where a procedure is recommended, all known costs will be discussed with the patient to enable informed decision-making prior to service delivery, this can be explained by the doctor, reception team or nursing team.

For referrals to external providers where the cost is unknown (e.g., radiology or specialist services), patients may request an estimate of costs at the time of booking.

#### Telehealth Services

Telehealth services are available for eligible patients and may include:

Telephone consultations

Remote monitoring and follow-up

Fees for telehealth services are billed in accordance with face-to-face consultations. To receive a Medicare rebate, patients must meet the relevant eligibility criteria. If these criteria are not met, patients will be advised that the consultation will not attract a rebate and may choose to proceed as a fully private (out-of-pocket) consultation.

#### Fee Communication

Patients are informed of the costs associated with accessing care at our practice through the following channels:

Signage at reception (TV reel)

Our website

Our practice information sheet

Our reception team

#### Updates

This policy will be reviewed annually or when changes to Medicare regulations occur. Updates will be communicated via the practice website, waiting room TV reel, and staff briefings.

