

Infrastructure Charges Diagnostic Services Private Patients by Visiting Medical Practitioners

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Functional Sub group Corporate Administration - Fees

Summary Visiting Medical Practitioners are charged a percentage of diagnostic fees raised when they attend private patients to cover use of hospital equipment and resources.

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Applies to Area Health Services/Chief Executive Governed Statutory Health Corporation, Board Governed Statutory Health Corporations, Affiliated Health Organisations, Public Hospitals

Distributed to Public Health System, Public Hospitals

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Compliance with this policy directive is mandatory.

CIRCULAR

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**INFRASTRUCTURE CHARGES FOR DIAGNOSTIC SERVICES TO
PRIVATE PATIENTS IN RECOGNISED HOSPITALS
PROVIDED BY VISITING MEDICAL PRACTITIONERS**

There has been a long established practice that public hospitals should make a charge against medical practitioners (both visiting and salaried) for hospital radiology and laboratory facilities used in the care of their private patients.

Over recent months Commission officers have met with representatives of the Australian Medical Association (New South Wales Branch) regarding this subject, and agreement has been reached on those items listed on the attached schedule. Further discussions are being held regarding other diagnostic services not listed on the schedule, e.g. nuclear medical services and E.E.G's.

These charges relate only to services provided by visiting medical practitioners. Charges for services by salaried specialists are covered under the provisions of Circular 77/15.

Arrangements should be made for visiting medical practitioners providing diagnostic services to private patients of your hospital to be informed of the facility charges to be applied and for the charges to be implemented with effect from the date of this circular.

Even though the Royal Australasian College of Radiologists has agreed to the charges scheduled in respect of radiological services, no action should be taken to distribute moneys held in trust funds of visiting radiologists except for those radiologists who have entered into agreements.

KR BROWN,
Secretary

**FACILITY CHARGES FOR DIAGNOSTIC SERVICES TO PRIVATE PATIENTS IN
RECOGNISED HOSPITALS**

MEDICAL BENEFIT SCHEDULE BOOK REFERENCE		HOSPITALS SHARE OF FEES COLLECTED (PERCENTAGE)
PART 6 - MISCELLANEOUS		
794 - 797	Ultrasonic Echography	40
PART 7 - PATHOLOGY		
1007 - 1049	Haematology services	80
1063 - 1065	Bone Marrow examination	10
1081 - 1280	Haematology services	80
1302 - 1485	Biochemistry services	90
1530 - 1859	Microbiology services	80
1878 - 1998	Immunology services	80
2014 - 2023	Skin sensitivity testing	10
2042 - 2057	Histopathology services	10
2082 - 2112	Cytology services - Scanning only	90
	Cytology services - Involving review and report	10
2132 - 2174	Cytogenetic services	10
2202 - 2286	Infertility and pregnancy tests	80
PART 8 - RADIOLOGY		
2502 - 2638	General Radiology services	60
2642 - 2646	Cardiac examination	40
2650 - 2662	General Radiology services	60
2665 - 2697	Radiographic examination of urinary tract	40
2699 - 2728	Radiographic examination of alimentary tract, and biliary system	40
2730 - 2736	General Radiology services	60
2738 - 2742	Radiographic examination in connection with pregnancy	40
2796	Tomography	40
2798	Stereoscopic examination	60
2800 - 2802	Fluoroscopic examination	40
2805 - 2859	Preparation for radiological procedure	10
Part 8A - RADIOTHERAPY		
2861 - 2897	General Radiotherapy services	50
2899 - 2915	Insertion or implantation of sealed radioactive source	10
2917		60
2919 - 2922	Removal of sealed radioactive source	10
2924	Construction and application of radioactive mould	50
2928		
2931		
2926	Application of radioactive mould	20
2933		
2935 - 2941	Administration of therapeutic dose of radioisotope	10
Part 10 - OPERATIONS		
7001 - 7006	Cardiac catheterisation	40
7011 - 7013	Coronary arteriography	40

NOTE: For those services where the charge is 10%, the charge is only to apply where the practitioner wishes the hospital to issue accounts for these services. Where the practitioner does not wish the hospital to issue accounts for these specific services, no facility charge should be made.