



PRINTED COPIES ARE NOT CONTROLLED

Policy

Costs associated with care initiated by the practice (C1.5 A - B)

Accreditation links: [C 1.5 A](#), [C 1.5 B](#)

Consultation Fees and Billing Policy

Consultation fees are determined by the Practice Manager in collaboration with the Principal GP and reviewed annually. Following each review, the Practice Manager is responsible for updating the billing policy and communicating any changes to the team and patients.

All consultations attract a fee; consultation fees must be paid at the time of the consultation.

Our billing policy outlines our use of private fees and details any patients eligible for bulk billing. Patients are required to present a current Medicare card at each visit, and their Medicare details are recorded in their health record.

This policy is available:

- on our [website](http://www.mygptamworth.com) www.mygptamworth.com
- as printed material at reception
- via email or post upon request

Standard Fee Schedule

Consultation Fee Schedule

| Consult Type | Duration | Fee |
|--------------------------|------------------|------------|
| Script with no Consult | — | \$30.00 |
| Referral with no Consult | — | \$35.00 |
| Standard Consult | Up to 15 minutes | \$108.00 |
| Long Consult | Up to 30 minutes | \$148.00 |
| Prolonged Consult | Up to 45 minutes | \$198.00 |

After-Hours Consultation Fees

| Consult Type | Duration | Fee |
|--------------------------------|------------------|------------|
| Standard Consult (After-hours) | Up to 15 minutes | \$128.00 |

| Consult Type | Duration | Fee |
|--|------------------|------------|
| Long Consult (After-hours) | Up to 30 minutes | \$168.00 |
| Prolonged Consult (After-hours) | Up to 45 minutes | \$218.00 |

Informing Patients About Out-of-Pocket Costs (C1.5 A)

To help patients make informed decisions about their healthcare, our practice ensures that all fees and potential out-of-pocket costs are clearly communicated. This includes:

- Billing policy and standard consultation fees available on the website, in printed form at reception, and verbally upon enquiry.
- Patients are advised prior to any consultation or procedure if additional charges may apply.

Potential Additional Costs May Include:

- Brief, standard, long consultations
- Missed appointments (fail-to-attend fees)
- Extended telephone or electronic communication (if applicable)
- Nursing consultations
- Specialist Consultations
- Total Body Machines
- Allied Health
- After-hours care
- Procedures and additional services

Healthcare providers will advise of additional costs prior to services including:

- Minor surgeries (e.g., excisions, suturing)
- ECG and spirometry
- Wound care, plasters, dressings

Billing for COVID-19 Vaccination

- All COVID-19 vaccination services must be bulk-billed. No booking, gap, or administration fees can be charged.
- Medicare claims are processed at the time of consultation.
- Charging any cost for COVID-19 vaccination violates national program requirements.

Veteran Patients (DVA)

- Services can be billed using standard MBS item numbers.
- Veteran Gold Card: accepted as usual.
- Veteran White Card: services must relate to an accepted condition (clinician judgment applies).

Informing Patients of Costs for Referred Services (C1.5 B)

When referring patients for investigations or specialist care, our clinicians inform patients that additional fees may apply. Patients are:

- Provided the name and contact details of the service provider
- Encouraged to contact the provider directly to confirm service costs

A current contact list of local service providers is maintained and updated by the Practice Manager.

References and Supporting Resources

- Shared Debt Recovery Scheme – Services Australia
- Bulk Billing and Additional Charges – Department of Health and Aged Care