

## Registered specialists' costs

Effective 01 December 2018

## **ACC Information sheet**

This information sheet lists the Cost of Treatment Regulations amounts ACC can pay for specialist treatments.

Code	Item description	Fixed rate for first visit \$ (excl. GST)	Fixed rate for first visit \$ (incl. GST)	Fixed rate for follow up visit (excl. GST)	Fixed rate for follow up visit (incl. GST)
CS01	Visit to all registered specialists except those specified for CS02	75.03	86.28	37.52	43.15
CS02	Visit for Internal Medicine, Neurosurgery, Occupational Medicine, Paediatrics, Psychological Medicine or Psychiatry, Rehabilitation Medicine. (also known as CON)	95.70	110.06	37.52	43.15

Code	Item description	Flat rate \$ (excl. GST)	Flat rate \$ (incl. GST)		
Repair r	Repair recent wound				
SR1	Not exceeding 7cm, superficial	134.73	154.94		
SR2	Not exceeding 7cm, deeper tissue	179.63	206.57		
SR3	Exceeding 7cm, superficial	224.56	258.24		
SR4	Exceeding 7cm, deeper tissue	269.46	309.88		
Fractures (closed reduction)					
SF1	Phalanges	89.83	103.30		
SF2	Metacarpals, excluding Bennetts	161.68	185.93		
SF3	Metatarsals	125.76	144.62		
SF4	Bennetts	233.53	268.56		
SF5	Carpal bones	116.75	134.26		
SF6	Colles	215.55	247.88		
SF7	Radius and ulna – shafts	260.45	299.52		
SF8	Radius – head and neck	233.53	268.56		
SF9	Humerus	260.45	299.52		
SF10	Talus – neck	242.52	278.90		

Code	Item description	Flat rate \$ (excl. GST)	Flat rate \$ (incl. GST)		
Fractures (closed reduction) continued					
SF11	Calcaneus	242.52	278.90		
SF12	Other tarsals	152.72	175.63		
SF13	Ankle – fracture dislocation, Potts	377.23	433.81		
SF14	Tibia and fibula – shaft	431.10	495.77		
SF15	Tibia and fibula – upper end	377.23	433.81		
SF16	Tibia and fibula – involving joint traction	440.07	506.08		
SF17	Femur, any site, with/without traction	664.64	764.34		
Haemato	oma, abscess or other infection				
SH1	Small – aspiration	22.50	25.88		
SH2	Large – incision and drainage (local anaesthetic)	107.22	123.30		
SH3	Large – incision and drainage (general anaesthetic)	116.75	134.26		
Foreign	Foreign body removal				
SB1	Under local anaesthetic	85.38	98.19		
SB2	Under general anaesthetic	188.60	216.89		
SB3	From cornea or sclera	58.42	67.18		
SB4	From ear, other than by simple syringing	89.83	103.30		
SB5	From muscle, tendon, or other deep tissue	269.46	309.88		
SB6	From nose, other than by simple probing	107.78	123.95		
SB7	From throat, additional fee	89.83	103.30		
Dislocat	Dislocations (closed reduction)				
SD1	Elbow, wrist, thumb, and fingers with strapping/splint	179.63	206.57		
SD2	Shoulder	107.78	123.95		
SD3	Patella	152.72	175.63		
SD4	Hip	215.55	247.88		
Plaster					
SP1	Upper limb – above elbow	134.73	154.94		
SP2	Upper limb – below elbow	116.75	134.26		
SP3	Lower limb – above knee	161.68	185.93		
SP4	Lower limb – below knee	134.73	154.94		

Code	Item description	Flat rate \$ (excl. GST)	Flat rate \$ (incl. GST)		
Other					
SM1	Aspiration of joint	22.50	25.88		
SM2	Amputation of all or part of one digit	197.62	227.26		
SM3	Extensor tendon, primary repair	314.36	361.51		
SM4	Nail, simple removal of	89.83	103.30		

## Specific clauses

The clauses below are taken from the principal regulations that are in effect – the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003. The clauses have been updated in line with the amendments in the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Amendment Regulations 2018.

- 16 ... specialists' costs
- 1. This regulation applies if
  - a. a claimant visits or is visited by a ... medical practitioner who
    - i. is a ... specialist; and
    - ii. during the visit, is practising within a recognised branch of medicine included in his or her scope of practice; and
  - b. any treatment received by the claimant during the visit is specified in the Schedule under the heading "... specialists' costs".
- 2. For the first visit that the claimant has, the Corporation is liable to pay
  - a. Either
    - i. \$95.70 GST excl (\$110.06 GST incl), if the visit was within any of the following recognised branches of medicine:
      - a. internal medicine:
      - b. neurosurgery:
      - c. occupational medicine:
      - d. paediatrics:
      - e. psychological medicine or psychiatry:
      - f. rehabilitation medicine; or
    - ii. \$75.03 GST excl (\$86.28 GST incl), if the visit was with a specialist practising within any other recognised branch of medicine; plus
  - b. the amount specified for any treatment the claimant receives.
- 3. For each further visit that the claimant has with the specialist, in relation to the same injury, the Corporation is liable to pay
  - a. \$37.52 GST excl (\$43.15 GST incl); plus
  - b. the amount specified for any treatment the claimant receives.
- 4. If the claimant receives 2 or more treatments at the same visit, the Corporation is liable to pay
  - a. the amount specified for the more or most expensive treatment the claimant receives; plus
  - 50% of the amount specified for each other treatment the claimant receives.
- 5. However, if at the same visit the claimant receives a treatment and a more comprehensive treatment for the same injury, the Corporation is liable to pay only the amount specified for the more comprehensive treatment.

## Disclaimer

All information in this publication was correct at the time of printing, November 2018. This information is intended to serve only as a general guide to arrangements under the Accident Compensation Act 2001 and Regulations. For any legal or financial purposes this Act takes precedence over the contents of this guide.