



HEALTHMAN NEUROLOGY COSTING GUIDE 2012

COMPARATIVE TARIFFS

Code		Average Duration Professional	2012 HealthMan Practice Cost Tariff (VAT Incl.)	HealthMan RCF	FH In Hosp.	FH Out Hosp.	DH Prem A In Hosp.	DH Prem A Out Hosp.	DH Prem B	DH Classic Rate	DH Exec Rate								
												Terminology	150%	165%	137%	162%	147%	217%	300%
												<u>Units</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>
Consultations:																			
See the Notes below for All Tariffs																			
0109	Hospital follow-up visit	15	483.30	32.219	341.10	375.20	220.98	261.31	237.11	350.02	483.90								
0129	Prolonged first/follow-up consultation : 15 min	15	483.30	32.219	341.10	375.20	308.25	364.50	330.75	488.25	675.00								
0130	Telephone consultation (all hours)	12	386.60	32.219	409.20	450.10	370.17	437.72	397.19	586.33	810.60								
0132	Repeat Script	5	161.10	32.219	113.90	125.20	102.75	121.50	110.25	162.75	225.00								
0133	Writing of special motivations	9	290.00	32.219	204.60	225.10	184.81	218.54	198.30	292.73	404.70								
0145	Consultation : Away from doctor's room	6	193.30	32.219	-	-	123.44	145.96	132.45	195.52	270.30								
0146	Unscheduled consultation: Emergency (cons.room)	8	257.80	32.219	-	-	-	194.40	176.40	260.40	360.00								
0147	Unscheduled consultation:Emergency(not cons.room)	14	451.10	32.219	-	-	287.84	340.36	308.85	455.92	630.30								
0173	Hospital Consultation	15	483.30	32.219	591.00	-	535.67	-	574.77	848.47	1,173.00								
0174	Hospital Consultation	30	966.60	32.219	591.00	-	535.67	-	574.77	848.47	1,173.00								
0175	Hospital Consultation	45	1,449.90	32.219	591.00	-	535.67	-	574.77	848.47	1,173.00								
0190	Consultation	15	483.30	32.219	-	650.10	-	665.33	603.73	891.22	1,232.10								
0191	Consultation	30	966.60	32.219	-	650.10	-	665.33	603.73	891.22	1,232.10								
0192	Consultation	45	1,449.90	32.219	-	650.10	-	665.33	603.73	891.22	1,232.10								
0199	Chronic Medicine Forms	21.43	690.50	32.219	487.20	535.90	440.46	520.83	472.61	697.66	964.50								
Procedures																			
0713	Electromyography	75	2,416.40	32.219	1,056.20	1,161.80	954.50	1,128.70	1,024.20	1,511.90	2,090.30								
0730	Limb brain somatosensory studies (per limb)	49	1,578.70	32.219	690.00	759.00	623.60	737.40	669.20	987.80	1,365.60								
0733	Motor nerve conduction studies (single nerve)	26	837.70	32.219	366.20	402.80	330.90	391.30	355.10	524.10	724.60								
0735	Examinations of sensory nerve conduction by sweep averages (single nerve)	31	998.80	32.219	436.70	480.30	394.50	466.50	423.30	624.90	864.00								
1205	Intensive care: Category 2 (ICU): First day	100	3,221.90	32.219	1,408.20	1,549.00	1,272.70	1,505.00	1,365.60	2,015.90	2,787.00								
1206	Intensive care: Category 2 (ICU): Subsequent days, per day	50	1,611.00	32.219	704.10	774.50	636.40	752.50	682.80	1,008.00	1,393.50								
1210	Intensive care: Category 3 (ICU): Cases with multiple organ failure or Category 2 patients which may require multidisciplinary intervention: Subsequent days (per involved practitioner)	50	1,611.00	32.219	704.10	774.50	636.40	752.50	682.80	1,008.00	1,393.50								
2682	Visual evoked potentials (VEP): Bilateral	88	2,835.30	32.219	1,239.20	1,363.10	1,120.00	1,324.40	1,201.80	1,774.00	2,452.60								
2692	Short latency brainstem evoked potentials (AEP) neurological examination, single decibel: Bilateral	88	2,835.30	32.219	1,239.20	1,363.10	1,120.00	1,324.40	1,201.80	1,774.00	2,452.60								
2707	Full fee for complete neurological evoked potential evaluation including neurological AEP, bilateral VEP, and bilateral median and/or posterior tibial stimulation	220	7,088.20	32.219	3,098.00	3,407.70	2,800.00	3,311.00	3,004.40	4,435.00	6,131.40								
2711	Electro-encephalography: Taking of record	36.1	1,163.10	32.219	508.50	559.40	459.50	543.30	493.00	727.80	1,006.10								
2712	Electro-encephalography: Interpretation	24	773.30	32.219	337.80	371.60	305.50	361.20	327.80	483.80	668.90								
2717	Electromyography: First	75	2,416.40	32.219	1,056.20	1,161.80	954.50	1,128.70	1,024.20	1,511.90	2,090.30								

HEALTHMAN NEUROLOGY COSTING GUIDE 2012

COMPARATIVE TARIFFS

Code	 Terminology	Average Duration Professional	2012 HealthMan Practice Cost Tariff (VAT Incl.)	HealthMan RCF	FH In Hosp.	FH Out Hosp.	DH Prem A In Hosp.	DH Prem A Out Hosp.	DH Prem B	DH Classic Rate	DH Exec Rate
		<u>Units</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>	<u>R</u>
					150%	165%	137%	162%	147%	217%	300%
2800	Procedures for pain relief: Plexus nerve block	36	1,159.90	32.219	506.90	557.50	458.20	541.80	491.60	725.70	1,003.30
3284	Sensory nerve conduction studies	31	998.80	32.219	436.70	480.30	394.50	466.50	423.30	624.90	864.00
3285	Motor nerve conduction studies	26	837.70	32.219	366.20	402.80	330.90	391.30	355.10	524.10	724.60
5110*	Carotid ultrasound vascular study: B mode, pulsed and colour Doppler; bilateral study, internal, external and common carotid flow and anatomy	128	1,163.40	9.089	1,718.10	1,889.90	1,553.00	1,836.40	1,666.30	2,459.80	3,400.70
6010	Electroencephalogram monitoring: Monitoring for localisation of cerebral seizure focus using computerised sixteen or more channel EEG, which may include video recording (e.g. for pre-operative localisation): Each full 24 hour period	294.6	9,491.70	32.219	4,148.60	4,563.40	3,749.50	4,433.70	4,023.10	5,938.90	8,210.50
6011	Interpretation of item 6010: Electro-encephalogram monitoring: To be charged once only for each full 24 hour period of monitoring	128	4,124.00	32.219	1,810.80	1,991.90	1,629.10	1,926.40	1,748.00	2,580.40	3,567.40

Note:

1. The Healthman tariff for codes that relate to equipment have been retained at GEMS rate*
2. Tariffs may differ due to rounding
3. Above codes are the most frequently used codes and is not all inclusive of all the codes
4. Increases from 2011 is as follow:
 - a. GEMS = 2011 Scheme Tariff +6.65%
 - b. HealthMan Tariff = 2011 Tariff +6%
 - c. Discovery Health = 2011 Tariff +5.5% (Note that this increase is for the DH Rate only)
5. Discovery Premier A Procedure Rates have NOT been split between In-Hospital & Out-Hospital. Use as appropriate.
6. Please take note that the HealthMan Practice Cost Tariff is based on our 2008 Cost Studies adjusted with inflation

Disclaimer:

The above schedule is based on information available to HealthMan and HealthMan will NOT be held responsible for any losses incurred by practitioners resulting from this schedule.