\* See Appendix A for derived fee descriptions



# Medical items table of costs

### Rules for use

This document outlines the fees payable by workers' compensation insurers for medical service delivery to workers' compensation claimants in Queensland.

When invoicing for medical services, medical practitioners are expected to adhere to the MBS rules unless otherwise specified by WorkCover Queensland ('WorkCover') in this publication or the insurers' medical policies. WorkCover adopts the Medicare Benefits Schedule (MBS) items, explanations, definitions, rules and conditions for services provided by medical practitioners.

Fees in this schedule are payable **only** to medical practitioners who meet the provider eligibility criteria outlined in the current MBS.

# **Multiple Operation Rule**

The Fees for two or more operations, other than amputations, performed on a patient on the one occasion should be calculated using the following rules:

## Surgical procedures:

Inclusions – spinal procedures under MBS subgroup 17 Exclusions – orthopaedic procedures set out in MBS Group T8, subgroup 14 and 15

- 100 % for the item with the greatest WorkCover fee;
- plus 50% for the item with the next greatest WorkCover fee;
- plus 25% for each other item.

# Orthopaedic procedures:

Inclusions – orthopaedic procedures set out in MBS Group T8, subgroup 14 and 15 Exclusions – spinal procedures set out in MBS subgroup 17

- 100 per cent for the item with the greatest WorkCover fee;
- plus 75 per cent of each other item.

Where a medical practitioner performs both surgical and orthopaedic services on the one occasion, each rule applies in its entirety to the relevant items. This will result in two items with fees at 100%.

### Assistance at Operations

A flat 20% surgical assistant's fee is payable when a surgical assistant is employed for Therapeutic Procedures Category 3,

- Subgroup 14 (Hand Surgery),
- Subgroup 15 (Orthopaedic) and,
- Subgroup 17 (Spinal Surgery) of the Medical Benefits Schedule (MBS).
- Therefore, payment for surgical assistants is not limited to the MBS item numbers that specify eligibility for a surgical assistant benefit.
- Where surgical assistance is provided at two or more operations performed on a patient on the one occasion the multiple operation rule is applied to determine the surgeon's fee.
- For further details refer to Section T9 'Assistance at Operations' of the MBS.

# **Perioperative Nurse Surgical Assistants (PNSA)**

WorkCover recognises that Perioperative Nurse Surgical Assistants (PNSA) is filling a gap where there is a shortage of medical assistances. As a result, a 15% assistant's fee is payable based on the above rules for 'Assistance at Operations' for PNSA who are a member of the Australian Association of Nurse Surgical Assistants (AANSA Inc.)

# **Surgery Approval and Invoices**

WorkCover Queensland requires the request for surgery form to be completed in full.

If the surgical procedure changes during the operation and subsequently the item codes, please contact

the insurer to discuss. Prior to any surgical invoice being paid, the operation notes must be received.

#### **Aftercare**

All conditions detailed in the explanatory notes of the Medicare Benefits Schedule apply when treating injured workers. This includes the conditions surrounding any billing for routine post-operative care which is considered to be inclusive of the operation provided. If a patient requires additional services which are considered to be 'not normal aftercare' (NNAC), then the account should be endorsed with NNAC to enable separate payment for those services.

#### Other Services

Dental, nursing and allied health services for compensable injuries are covered under the relevant table of costs for those services.

#### Evidence based recommendations

WorkCover support the recommendations published by Choosing Wisely Australia and developed by Australia's peak colleges, societies and associations: http://www.choosingwisely.org.au/recommendations

This includes the recent joint publication from RACP and AFOEM regarding low value clinical practices, specifically:

- Do not certify a patient as totally unfit for work unless the work absence is clinically necessary and the patient is unfit for suitable alternative or restricted duties.
- Do not order X-rays or other imaging for acute nonspecific low back pain, unless there are red
  flags or other clinical reasons to suspect serious spinal pathology
- Do not prescribe opiates for the treatment of acute or chronic pain without assessing the
  patient's clinical condition, potential side effects, alternative analgesic options, work status,
  and capacity to perform safety critical activities such as driving a motor vehicle

#### **Further Information**

You can access more information by visiting <u>worksafe.qld.gov.au/medical</u> or contacting WorkCover on freecall 1300 362 128.