# WorkCover <br> Q U E E N S L A N D 

Medical Items Table of Costs

Effective 1 December 2021

## Medical Items Table of Costs

## Rules for use

This document outlines the maximum 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 Medical Benefits Schedule.

## Multiple operation rule

If two or more MBS items from Category 3, Group 78 are being performed on a patient on the one occasion, fees should be calculated using the multiple operation rule.

Items in Subgroup 12 of Group T8 (ie. amputations) are not subject to this rule.
The multiple operation rule is applied as follows:

## Surgical procedures:

Includes surgical procedures set out in MBS Group T8, Subgroups 1 to $11,13,16$ and 17

- $100 \%$ 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/Hand surgery procedures:

Includes orthopaedic procedures set out in MBS Group T8, Subgroups 14 and 15

- $100 \%$ for the item with the greatest WorkCover fee;
- plus $75 \%$ for the item with the next greatest WorkCover fee;
- plus 75\% for each other item.

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

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The following table illustrates how the multi operation rule will be applied to multiple item numbers:

| MBS SUB-GROUP | $\begin{gathered} 100 \% \text { OF } \\ \text { FEE } \end{gathered}$ | ORTHOPAEDIC/HAND SURGERY 100/75 / 75\% | $\begin{aligned} & \text { SURGICAL } \\ & 100 / 50 / 25 \% \end{aligned}$ |
| :---: | :---: | :---: | :---: |
| 1 to 11 <br> (Items 30001-44136) |  |  | $\checkmark$ |
| 12 - Amputations (Items 44325-44376) | $\checkmark$ |  |  |
| 13 - Plastic and Recon Surgery (Items 45000-45996) |  |  | $\checkmark$ |
| 14 - Hand Surgery <br> (Items 46300-46534) |  | $\checkmark$ |  |
| 15 - Orthopaedic (Items 47000-50658) |  | $\checkmark$ |  |
| 16 - Radiofrequency and Microwave Tissue Ablation |  |  | $\checkmark$ |
| 17 - Spinal Surgery <br> (Items 51011-51171) |  |  | $\checkmark$ |

## 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 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.

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## Perioperative Nurse Surgical Assistants (PNSA) <br> 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 approval 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 (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 www.worksafe.qld.gov.au/service-providers or contacting WorkCover on free call 1300362128.

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Medical Fees

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 3 | \$43 |
| 4 | * derived |
| 23 | \$86 |
| 24 | * derived |
| 36 | \$158 |
| 37 | * derived |
| 44 | \$240 |
| 47 | * derived |
| 52 | \$43 |
| 53 | \$86 |
| 54 | \$158 |
| 57 | \$240 |
| 58 | * derived |
| 59 | * derived |
| 60 | * derived |
| 65 | * derived |
| 99 | * derived |
| 104 | \$188 |
| 105 | \$100 |
| 106 | \$188 |
| 107 | \$250 |
| 108 | \$166 |
| 109 | \$290 |
| 110 | \$355 |
| 111 | \$100 |
| 112 | * derived |
| 113 | \$131 |
| 114 | \$232 |
| 115 | \$100 |
| 116 | \$164 |
| 117 | \$154 |
| 119 | \$88 |
| 120 | \$88 |
| 122 | \$425 |
| 128 | \$225 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 131 | \$163 |
| 132 | \$615 |
| 133 | \$310 |
| 141 | \$810 |
| 143 | \$540 |
| 145 | \$975 |
| 147 | \$655 |
| 149 | * derived |
| 160 | \$365 |
| 161 | \$595 |
| 162 | \$805 |
| 163 | \$1,000 |
| 164 | \$1,185 |
| 170 | \$315 |
| 171 | \$330 |
| 172 | \$410 |
| 173 | \$43 |
| 177 | \$117 |
| 179 | \$28 |
| 181 | * derived |
| 185 | \$61 |
| 187 | * derived |
| 189 | \$117 |
| 191 | * derived |
| 193 | \$86 |
| 195 | * derived |
| 197 | \$158 |
| 199 | \$240 |
| 203 | \$173 |
| 206 | * derived |
| 214 | \$357 |
| 215 | \$595 |
| 218 | \$833 |
| 219 | \$1,072 |
| 220 | \$1,191 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 221 | \$190 |
| 222 | \$200 |
| 223 | \$243 |
| 224 | \$96 |
| 225 | \$222 |
| 226 | \$307 |
| 227 | \$433 |
| 228 | \$342 |
| 229 | \$233 |
| 230 | \$184 |
| 231 | \$114 |
| 232 | \$114 |
| 233 | \$116 |
| 235 | \$114 |
| 236 | \$195 |
| 237 | \$325 |
| 238 | \$84 |
| 239 | \$144 |
| 240 | \$239 |
| 243 | \$131 |
| 244 | \$61 |
| 259 | \$60 |
| 260 | * derived |
| 261 | \$116 |
| 262 | * derived |
| 263 | \$170 |
| 264 | * derived |
| 265 | \$60 |
| 266 | * derived |
| 268 | \$116 |
| 269 | * derived |
| 270 | \$170 |
| 271 | * derived |
| 272 | \$116 |
| 276 | \$170 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE | $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL <br> FEE |
| :---: | :---: | :---: | :---: |
| 277 | \$116 | 350 | \$395 |
| 279 | \$116 | 352 | \$200 |
| 281 | \$147 | 353 | \$116 |
| 282 | \$216 | 355 | \$230 |
| 283 | \$150 | 356 | \$340 |
| 285 | * derived | 357 | \$520 |
| 286 | \$214 | 358 | \$570 |
| 287 | * derived | 359 | \$620 |
| 288 | * derived | 361 | \$500 |
| 289 | \$615 | 364 | \$98 |
| 291 | \$810 | 366 | \$196 |
| 293 | \$540 | 367 | \$295 |
| 296 | \$440 | 369 | \$445 |
| 297 | \$440 | 370 | \$490 |
| 299 | \$520 | 371 | \$150 |
| 300 | \$98 | 372 | \$214 |
| 302 | \$196 | 384 | \$131 |
| 304 | \$295 | 385 | \$355 |
| 306 | \$445 | 386 | \$164 |
| 308 | \$490 | 387 | \$425 |
| 319 | \$445 | 388 | \$225 |
| 320 | \$98 | 389 | * derived |
| 322 | \$196 | 410 | \$43 |
| 324 | \$295 | 411 | \$86 |
| 326 | \$445 | 412 | \$158 |
| 328 | \$495 | 413 | \$240 |
| 330 | \$162 | 414 | * derived |
| 332 | \$260 | 415 | * derived |
| 334 | \$355 | 416 | * derived |
| 336 | \$515 | 417 | * derived |
| 338 | \$550 | 585 | \$262 |
| 342 | \$122 | 588 | \$262 |
| 344 | \$158 | 591 | \$197 |
| 346 | \$235 | 594 | \$85 |
| 348 | \$295 | 599 | \$505 |

* See Appendix A for derived fee descriptions


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| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 600 | \$505 |
| 699 | \$148 |
| 721 | \$285 |
| 723 | \$245 |
| 729 | \$114 |
| 731 | \$114 |
| 732 | \$144 |
| 733 | \$47 |
| 735 | \$280 |
| 737 | \$79 |
| 739 | \$395 |
| 741 | \$135 |
| 743 | \$505 |
| 745 | \$190 |
| 747 | \$170 |
| 750 | \$225 |
| 758 | \$280 |
| 761 | * derived |
| 763 | * derived |
| 766 | * derived |
| 769 | * derived |
| 788 | * derived |
| 789 | * derived |
| 812 | \$37 |
| 820 | \$300 |
| 822 | \$450 |
| 823 | \$600 |
| 825 | \$184 |
| 826 | \$295 |
| 827 | * derived |
| 828 | \$400 |
| 830 | \$300 |
| 832 | \$450 |
| 834 | \$600 |
| 835 | \$184 |
| 837 | \$295 |
| 838 | \$400 |


| ITEM <br> NO. | MEDICAL FEE | $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 855 | \$275 | 2463 | \$76 |
| 857 | \$415 | 2464 | \$147 |
| 858 | \$555 | 2465 | \$216 |
| 861 | \$275 | 2471 | \$22 |
| 864 | \$415 | 2472 | \$42 |
| 866 | \$555 | 2475 | \$75 |
| 867 | \$80 | 2478 | \$121 |
| 868 | * derived | 2480 | \$28 |
| 871 | \$164 | 2481 | \$61 |
| 872 | \$77 | 2482 | \$117 |
| 873 | \$156 | 2483 | \$173 |
| 876 | * derived | 2631 | * derived |
| 880 | \$97 | 2633 | * derived |
| 885 | \$230 | 2635 | * derived |
| 891 | * derived | 2700 | \$145 |
| 894 | \$71 | 2701 | \$213 |
| 896 | \$138 | 2712 | \$235 |
| 898 | \$203 | 2713 | \$196 |
| 900 | \$410 | 2715 | \$184 |
| 941 | \$176 | 2717 | \$350 |
| 942 | \$252 | 2721 | \$187 |
| 2100 | \$46 | 2723 | * derived |
| 2121 | \$89 | 2725 | \$267 |
| 2122 | * derived | 2727 | * derived |
| 2125 | * derived | 2729 | \$187 |
| 2126 | \$101 | 2731 | \$267 |
| 2137 | * derived | 2733 | \$220 |
| 2138 | * derived | 2735 | \$315 |
| 2143 | \$195 | 2799 | \$232 |
| 2147 | * derived | 2801 | \$355 |
| 2150 | \$172 | 2806 | \$164 |
| 2179 | * derived | 2814 | \$88 |
| 2195 | \$287 | 2820 | * derived |
| 2196 | \$254 | 2824 | \$425 |
| 2199 | * derived | 2832 | \$225 |
| 2220 | * derived | 2840 | \$163 |
| 2461 | \$35 | 2946 | \$300 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 2949 | \$450 |
| 2954 | \$600 |
| 2958 | \$184 |
| 2972 | \$295 |
| 2974 | \$400 |
| 2978 | \$300 |
| 2984 | \$450 |
| 2988 | \$600 |
| 2992 | \$184 |
| 2996 | \$295 |
| 3000 | \$400 |
| 3003 | \$232 |
| 3005 | \$355 |
| 3010 | \$164 |
| 3014 | \$88 |
| 3015 | * derived |
| 3018 | \$425 |
| 3023 | \$225 |
| 3028 | \$163 |
| 3032 | \$300 |
| 3040 | \$450 |
| 3044 | \$600 |
| 3051 | \$184 |
| 3055 | \$295 |
| 3062 | \$400 |
| 3069 | \$300 |
| 3074 | \$450 |
| 3078 | \$600 |
| 3083 | \$184 |
| 3088 | \$295 |
| 3093 | \$400 |
| 5000 | \$64 |
| 5001 | \$136 |
| 5003 | * derived |
| 5004 | \$225 |
| 5011 | \$225 |
| 5012 | \$355 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 5014 | \$450 |
| 5016 | \$600 |
| 5019 | \$695 |
| 5020 | \$128 |
| 5021 | \$136 |
| 5023 | * derived |
| 5027 | \$225 |
| 5030 | \$355 |
| 5032 | \$450 |
| 5033 | \$600 |
| 5036 | \$695 |
| 5039 | \$325 |
| 5040 | \$235 |
| 5041 | \$615 |
| 5042 | \$325 |
| 5043 | * derived |
| 5044 | \$615 |
| 5060 | \$360 |
| 5063 | * derived |
| 5200 | \$64 |
| 5203 | \$128 |
| 5207 | \$235 |
| 5208 | \$360 |
| 5220 | * derived |
| 5223 | * derived |
| 5227 | * derived |
| 5228 | * derived |
| 6004 | \$199 |
| 6007 | \$285 |
| 6009 | \$100 |
| 6011 | \$200 |
| 6013 | \$280 |
| 6015 | \$355 |
| 6016 | * derived |
| 6018 | \$309 |
| 6019 | \$154 |
| 6023 | \$540 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 6024 | \$270 |
| 6025 | \$232 |
| 6026 | * derived |
| 6028 | \$101 |
| 6029 | \$87 |
| 6031 | \$154 |
| 6032 | \$232 |
| 6034 | \$309 |
| 6035 | \$70 |
| 6037 | \$124 |
| 6038 | \$185 |
| 6042 | \$247 |
| 6051 | \$309 |
| 6052 | \$154 |
| 6057 | \$540 |
| 6058 | \$270 |
| 6059 | \$232 |
| 6060 | * derived |
| 6062 | \$375 |
| 6063 | \$227 |
| 6064 | \$87 |
| 6065 | \$154 |
| 6067 | \$232 |
| 6068 | \$309 |
| 6071 | \$70 |
| 6072 | \$124 |
| 6074 | \$185 |
| 6075 | \$247 |
| 6082 | \$103 |
| 6084 | \$77 |
| 10660 | \$89 |
| 10661 | \$71 |
| 10801 | \$300 |
| 10802 | \$300 |
| 10803 | \$300 |
| 10804 | \$300 |
| 10805 | \$300 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 10806 | \$300 |
| 10807 | \$300 |
| 10808 | \$300 |
| 10809 | \$300 |
| 10816 | \$300 |
| 10905 | \$135 |
| 10907 | \$67 |
| 10910 | \$135 |
| 10911 | \$135 |
| 10912 | \$135 |
| 10913 | \$135 |
| 10914 | \$135 |
| 10915 | \$135 |
| 10916 | \$67 |
| 10918 | \$67 |
| 10921 | \$334 |
| 10922 | \$334 |
| 10923 | \$334 |
| 10924 | \$422 |
| 10925 | \$334 |
| 10926 | \$334 |
| 10927 | \$422 |
| 10928 | \$334 |
| 10929 | \$422 |
| 10930 | \$334 |
| 10940 | \$128 |
| 10941 | \$77 |
| 10942 | \$67 |
| 10944 | \$145 |
| 10945 | \$67 |
| 10946 | \$135 |
| 10947 | \$67 |
| 10948 | \$135 |
| 11000 | \$390 |
| 11003 | \$785 |
| 11004 | \$1,735 |
| 11005 | \$1,735 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 11012 | \$300 |
| 11015 | \$410 |
| 11018 | \$595 |
| 11021 | \$410 |
| 11024 | \$270 |
| 11027 | \$400 |
| 11200 | \$96 |
| 11204 | \$220 |
| 11205 | \$220 |
| 11210 | \$220 |
| 11211 | \$220 |
| 11215 | \$385 |
| 11218 | \$485 |
| 11219 | \$142 |
| 11220 | \$142 |
| 11221 | \$275 |
| 11224 | \$150 |
| 11235 | \$385 |
| 11237 | \$220 |
| 11240 | \$220 |
| 11241 | \$325 |
| 11242 | \$220 |
| 11243 | \$220 |
| 11244 | \$215 |
| 11300 | \$470 |
| 11303 | \$470 |
| 11304 | \$760 |
| 11306 | \$52 |
| 11309 | \$62 |
| 11312 | \$90 |
| 11315 | \$118 |
| 11318 | \$148 |
| 11324 | \$90 |
| 11327 | \$56 |
| 11330 | \$45 |
| 11332 | \$285 |
| 11333 | \$102 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 11336 | \$102 | 11731 | \$81 |
| 11339 | \$102 | 11800 | \$525 |
| 11503 | \$395 | 11801 | \$890 |
| 11505 | \$99 | 11810 | \$440 |
| 11506 | \$50 | 11820 | \$2,836 |
| 11507 | \$260 | 11830 | \$555 |
| 11508 | \$755 | 11833 | \$620 |
| 11512 | \$148 | 11900 | \$73 |
| 11600 | \$146 | 11903 | \$290 |
| 11602 | \$108 | 11906 | \$290 |
| 11604 | \$108 | 11909 | \$430 |
| 11605 | \$108 | 11912 | \$430 |
| 11607 | \$238 | 11915 | \$430 |
| 11610 | \$108 | 11917 | \$1,110 |
| 11611 | \$108 | 11919 | \$1,110 |
| 11612 | \$200 | 11921 | \$230 |
| 11614 | \$108 | 12000 | \$110 |
| 11615 | \$162 | 12001 | \$110 |
| 11627 | \$580 | 12002 | \$110 |
| 11704 | \$118 | 12004 | \$168 |
| 11705 | \$59 | 12005 | \$183 |
| 11707 | \$59 | 12012 | \$48 |
| 11713 | \$235 | 12017 | \$210 |
| 11714 | \$91 | 12021 | \$340 |
| 11716 | \$445 | 12022 | \$407 |
| 11717 | \$235 | 12024 | \$465 |
| 11719 | \$225 | 12200 | \$82 |
| 11720 | \$225 | 12201 | \$3,430 |
| 11721 | \$235 | 12203 | \$1,370 |
| 11723 | \$122 | 12204 | \$1,370 |
| 11724 | \$495 | 12205 | \$1,370 |
| 11725 | \$640 | 12207 | \$1,370 |
| 11726 | \$320 | 12208 | \$1,370 |
| 11727 | \$325 | 12213 | \$1,475 |
| 11728 | \$81 | 12215 | \$1,635 |
| 11729 | \$410 | 12217 | \$1,475 |
| 11730 | \$410 | 12250 | \$780 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 12254 | \$2,150 |
| 12261 | \$2,255 |
| 12268 | \$2,420 |
| 12306 | \$275 |
| 12312 | \$275 |
| 12315 | \$275 |
| 12320 | \$275 |
| 12321 | \$275 |
| 12322 | \$275 |
| 12325 | \$82 |
| 12326 | \$82 |
| 12500 | \$520 |
| 12524 | \$415 |
| 12527 | \$275 |
| 12533 | \$245 |
| 13015 | \$731 |
| 13020 | \$743 |
| 13025 | \$332 |
| 13030 | \$469 |
| 13100 | \$435 |
| 13103 | \$230 |
| 13104 | \$430 |
| 13106 | \$285 |
| 13109 | \$690 |
| 13110 | \$690 |
| 13200 | \$5,735 |
| 13201 | \$5,365 |
| 13202 | \$860 |
| 13203 | \$1,435 |
| 13206 | \$2,460 |
| 13209 | \$245 |
| 13290 | \$585 |
| 13292 | \$1,170 |
| 13300 | \$152 |
| 13303 | \$225 |
| 13306 | \$1,100 |
| 13309 | \$855 |


| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 13312 | \$96 |
| 13318 | \$630 |
| 13319 | \$565 |
| 13400 | \$245 |
| 13506 | \$445 |
| 13700 | \$800 |
| 13703 | \$290 |
| 13706 | \$200 |
| 13750 | \$330 |
| 13755 | \$330 |
| 13757 | \$178 |
| 13760 | \$1,850 |
| 13815 | \$280 |
| 13818 | \$580 |
| 13830 | \$180 |
| 13832 | \$2,345 |
| 13834 | \$1,305 |
| 13835 | \$300 |
| 13837 | \$1,305 |
| 13838 | \$300 |
| 13839 | \$78 |
| 13840 | \$1,570 |
| 13842 | \$220 |
| 13848 | \$445 |
| 13851 | \$1,305 |
| 13854 | \$300 |
| 13857 | \$370 |
| 13870 | \$950 |
| 13873 | \$705 |
| 13876 | \$200 |
| 13881 | \$385 |
| 13882 | \$300 |
| 13885 | \$435 |
| 13888 | \$230 |
| 13899 | \$615 |
| 13950 | \$265 |
| 14050 | \$146 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 14100 | \$710 |
| 14106 | \$710 |
| 14115 | \$1,190 |
| 14118 | \$1,510 |
| 14124 | \$710 |
| 14201 | \$679 |
| 14202 | \$344 |
| 14203 | \$128 |
| 14206 | \$81 |
| 14209 | \$225 |
| 14212 | \$515 |
| 14216 | \$514 |
| 14217 | \$441 |
| 14218 | \$255 |
| 14219 | \$514 |
| 14220 | \$441 |
| 14221 | \$136 |
| 14224 | \$164 |
| 14227 | \$255 |
| 14234 | \$940 |
| 14237 | \$1,720 |
| 14245 | \$300 |
| 14247 | \$5,309 |
| 14249 | \$5,309 |
| 14255 | \$370 |
| 14256 | \$660 |
| 14257 | \$1,265 |
| 14258 | \$370 |
| 14259 | \$660 |
| 14260 | \$1,265 |
| 14263 | \$160 |
| 14264 | \$320 |
| 14265 | \$160 |
| 14266 | \$320 |
| 14270 | \$425 |
| 14272 | \$425 |
| 14277 | \$680 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 14278 | \$680 | 15328 | \$2,100 |
| 14280 | \$680 | 15331 | \$1,885 |
| 14283 | \$680 | 15332 | \$2,005 |
| 14285 | \$680 | 15335 | \$1,705 |
| 14288 | \$680 | 15336 | \$1,825 |
| 15000 | \$114 | 15338 | \$2,105 |
| 15003 | * derived | 15339 | \$192 |
| 15006 | \$310 | 15342 | \$480 |
| 15012 | \$168 | 15345 | \$1,285 |
| 15100 | \$154 | 15348 | \$146 |
| 15106 | \$180 | 15351 | \$385 |
| 15112 | \$400 | 15354 | \$450 |
| 15211 | \$130 | 15357 | \$128 |
| 15215 | \$172 | 15500 | \$545 |
| 15218 | \$172 | 15503 | \$745 |
| 15221 | \$172 | 15506 | \$1,175 |
| 15224 | \$172 | 15509 | \$470 |
| 15227 | \$172 | 15512 | \$400 |
| 15245 | \$225 | 15513 | \$740 |
| 15248 | \$225 | 15515 | \$700 |
| 15251 | \$225 | 15518 | \$490 |
| 15254 | \$225 | 15521 | \$970 |
| 15257 | \$225 | 15524 | \$1,925 |
| 15275 | \$315 | 15527 | \$470 |
| 15303 | \$905 | 15530 | \$770 |
| 15304 | \$905 | 15533 | \$1,515 |
| 15307 | \$1,705 | 15536 | \$970 |
| 15308 | \$1,825 | 15539 | \$1,925 |
| 15311 | \$845 | 15550 | \$1,135 |
| 15312 | \$845 | 15553 | \$1,225 |
| 15315 | \$1,645 | 15555 | \$1,285 |
| 15316 | \$1,755 | 15556 | \$1,235 |
| 15319 | \$1,025 | 15559 | \$1,495 |
| 15320 | \$1,025 | 15562 | \$2,080 |
| 15323 | \$1,825 | 15565 | \$11,055 |
| 15324 | \$1,940 | 15600 | \$4,725 |
| 15327 | \$1,985 | 15700 | \$158 |

* See Appendix A for derived fee descriptions


# WorkCover 

QUEENSLAND

| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 15705 | \$260 | 17650 | \$546 | 18280 | \$910 |
| 15710 | \$260 | 17655 | \$728 | 18282 | \$728 |
| 15715 | \$265 | 17680 | \$364 | 18284 | \$728 |
| 15800 | \$330 | 17690 | \$182 | 18286 | \$728 |
| 15850 | \$570 | 18213 | \$364 | 18288 | \$910 |
| 15900 | \$710 | 18216 | \$728 | 18290 | \$1,820 |
| 16003 | \$1,670 | 18219 | * derived | 18292 | \$910 |
| 16006 | \$1,280 | 18222 | \$273 | 18294 | \$1,820 |
| 16009 | \$875 | 18225 | \$364 | 18296 | \$1,365 |
| 16012 | \$760 | 18226 | \$1,365 | 18297 | \$273 |
| 16015 | \$7,635 | 18227 | * derived | 18298 | \$1,820 |
| 16018 | \$4,580 | 18228 | \$455 | 18350 | \$330 |
| 16401 | \$245 | 18230 | \$1,820 | 18351 | \$358 |
| 16408 | \$182 | 18232 | \$728 | 18353 | \$660 |
| 16500 | \$116 | 18233 | \$728 | 18354 | \$330 |
| 16501 | \$470 | 18234 | \$910 | 18360 | \$330 |
| 16502 | \$116 | 18236 | \$455 | 18365 | \$330 |
| 16505 | \$116 | 18238 | \$273 | 18366 | \$430 |
| 16508 | \$116 | 18240 | \$455 | 18368 | \$715 |
| 16509 | \$116 | 18242 | \$273 | 18375 | \$615 |
| 16511 | \$770 | 18244 | \$728 | 18377 | \$358 |
| 16512 | \$220 | 18248 | \$637 | 18379 | \$615 |
| 16514 | \$118 | 18250 | \$455 | 20100 | \$455 |
| 16515 | \$3,320 | 18252 | \$728 | 20102 | \$546 |
| 16518 | \$1,660 | 18254 | \$728 | 20104 | \$364 |
| 16519 | \$3,320 | 18256 | \$455 | 20120 | \$455 |
| 16520 | \$3,320 | 18258 | \$455 | 20124 | \$364 |
| 16522 | \$4,690 | 18260 | \$637 | 20140 | \$455 |
| 16527 | \$3,320 | 18262 | \$455 | 20142 | \$455 |
| 16528 | \$3,320 | 18264 | \$728 | 20143 | \$546 |
| 17609 | * derived | 18266 | \$455 | 20144 | \$637 |
| 17610 | \$182 | 18268 | \$637 | 20145 | \$637 |
| 17615 | \$364 | 18270 | \$637 | 20146 | \$455 |
| 17620 | \$546 | 18272 | \$455 | 20147 | \$546 |
| 17625 | \$728 | 18274 | \$637 | 20148 | \$364 |
| 17640 | \$182 | 18276 | \$910 | 20160 | \$546 |
| 17645 | \$364 | 18278 | \$637 | 20162 | \$637 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 20164 | \$364 | 20474 | \$1,183 |
| 20170 | \$546 | 20475 | \$910 |
| 20172 | \$637 | 20500 | \$1,365 |
| 20174 | \$819 | 20520 | \$546 |
| 20176 | \$910 | 20522 | \$364 |
| 20190 | \$455 | 20524 | \$364 |
| 20192 | \$910 | 20526 | \$910 |
| 20210 | \$1,365 | 20528 | \$728 |
| 20212 | \$455 | 20540 | \$1,183 |
| 20214 | \$819 | 20542 | \$1,365 |
| 20216 | \$1,820 | 20546 | \$1,365 |
| 20220 | \$910 | 20548 | \$1,365 |
| 20222 | \$546 | 20560 | \$1,820 |
| 20225 | \$1,092 | 20600 | \$910 |
| 20230 | \$1,092 | 20604 | \$1,183 |
| 20300 | \$455 | 20620 | \$910 |
| 20305 | \$1,365 | 20622 | \$1,183 |
| 20320 | \$546 | 20630 | \$728 |
| 20321 | \$910 | 20632 | \$637 |
| 20330 | \$728 | 20634 | \$910 |
| 20350 | \$910 | 20670 | \$1,183 |
| 20352 | \$455 | 20680 | \$273 |
| 20355 | \$1,092 | 20690 | \$455 |
| 20400 | \$273 | 20700 | \$273 |
| 20401 | \$364 | 20702 | \$364 |
| 20402 | \$455 | 20703 | \$364 |
| 20403 | \$455 | 20704 | \$910 |
| 20404 | \$546 | 20706 | \$637 |
| 20405 | \$728 | 20730 | \$455 |
| 20406 | \$1,183 | 20740 | \$455 |
| 20410 | \$364 | 20745 | \$637 |
| 20420 | \$455 | 20750 | \$455 |
| 20440 | \$364 | 20752 | \$546 |
| 20450 | \$455 | 20754 | \$637 |
| 20452 | \$546 | 20756 | \$819 |
| 20470 | \$546 | 20770 | \$1,365 |
| 20472 | \$910 | 20790 | \$728 |

* See Appendix A for derived fee descriptions


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QUEENSLAND

| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 20791 | \$910 |
| 20792 | \$1,183 |
| 20793 | \$1,365 |
| 20794 | \$1,092 |
| 20798 | \$910 |
| 20799 | \$546 |
| 20800 | \$273 |
| 20802 | \$455 |
| 20803 | \$364 |
| 20804 | \$910 |
| 20806 | \$637 |
| 20810 | \$364 |
| 20815 | \$546 |
| 20820 | \$455 |
| 20830 | \$364 |
| 20832 | \$546 |
| 20840 | \$546 |
| 20841 | \$728 |
| 20842 | \$364 |
| 20844 | \$910 |
| 20845 | \$910 |
| 20846 | \$910 |
| 20847 | \$910 |
| 20848 | \$910 |
| 20850 | \$1,092 |
| 20855 | \$1,365 |
| 20860 | \$546 |
| 20862 | \$637 |
| 20863 | \$910 |
| 20864 | \$910 |
| 20866 | \$910 |
| 20867 | \$910 |
| 20868 | \$910 |
| 20880 | \$1,365 |
| 20882 | \$910 |
| 20884 | \$455 |
| 20886 | \$546 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 20900 | \$273 |
| 20902 | \$364 |
| 20904 | \$637 |
| 20905 | \$910 |
| 20906 | \$364 |
| 20910 | \$364 |
| 20911 | \$455 |
| 20912 | \$455 |
| 20914 | \$637 |
| 20916 | \$637 |
| 20920 | \$364 |
| 20924 | \$364 |
| 20926 | \$364 |
| 20928 | \$546 |
| 20930 | \$364 |
| 20932 | \$364 |
| 20934 | \$546 |
| 20936 | \$728 |
| 20938 | \$364 |
| 20940 | \$364 |
| 20942 | \$455 |
| 20943 | \$364 |
| 20944 | \$546 |
| 20946 | \$728 |
| 20948 | \$364 |
| 20950 | \$455 |
| 20952 | \$364 |
| 20954 | \$910 |
| 20956 | \$364 |
| 20958 | \$455 |
| 20960 | \$637 |
| 21100 | \$273 |
| 21110 | \$455 |
| 21112 | \$364 |
| 21114 | \$455 |
| 21116 | \$546 |
| 21120 | \$546 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 21130 | \$273 |
| 21140 | \$1,365 |
| 21150 | \$910 |
| 21155 | \$910 |
| 21160 | \$364 |
| 21170 | \$728 |
| 21195 | \$273 |
| 21199 | \$364 |
| 21200 | \$364 |
| 21202 | \$364 |
| 21210 | \$546 |
| 21212 | \$910 |
| 21214 | \$910 |
| 21216 | \$1,274 |
| 21220 | \$364 |
| 21230 | \$546 |
| 21232 | \$455 |
| 21234 | \$728 |
| 21260 | \$364 |
| 21270 | \$728 |
| 21272 | \$364 |
| 21274 | \$546 |
| 21275 | \$910 |
| 21280 | \$1,365 |
| 21300 | \$273 |
| 21321 | \$364 |
| 21340 | \$364 |
| 21360 | \$455 |
| 21380 | \$273 |
| 21382 | \$364 |
| 21390 | \$273 |
| 21392 | \$364 |
| 21400 | \$364 |
| 21402 | \$637 |
| 21403 | \$910 |
| 21404 | \$455 |
| 21420 | \$273 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 21430 | \$364 | 21682 | \$364 |
| 21432 | \$455 | 21685 | \$910 |
| 21440 | \$728 | 21700 | \$273 |
| 21445 | \$910 | 21710 | \$364 |
| 21460 | \$273 | 21712 | \$455 |
| 21461 | \$364 | 21714 | \$455 |
| 21462 | \$273 | 21716 | \$455 |
| 21464 | \$364 | 21730 | \$273 |
| 21472 | \$455 | 21732 | \$364 |
| 21474 | \$455 | 21740 | \$455 |
| 21480 | \$364 | 21756 | \$546 |
| 21482 | \$455 | 21760 | \$637 |
| 21484 | \$455 | 21770 | \$728 |
| 21486 | \$637 | 21772 | \$546 |
| 21490 | \$273 | 21780 | \$364 |
| 21500 | \$728 | 21785 | \$910 |
| 21502 | \$546 | 21790 | \$1,365 |
| 21520 | \$364 | 21800 | \$273 |
| 21522 | \$455 | 21810 | \$364 |
| 21530 | \$1,365 | 21820 | \$273 |
| 21532 | \$728 | 21830 | \$364 |
| 21535 | \$910 | 21832 | \$637 |
| 21600 | \$273 | 21834 | \$364 |
| 21610 | \$455 | 21840 | \$728 |
| 21620 | \$364 | 21842 | \$546 |
| 21622 | \$455 | 21850 | \$364 |
| 21630 | \$455 | 21860 | \$273 |
| 21632 | \$546 | 21865 | \$910 |
| 21634 | \$819 | 21870 | \$1,365 |
| 21636 | \$1,365 | 21872 | \$728 |
| 21638 | \$910 | 21878 | \$273 |
| 21650 | \$728 | 21879 | \$455 |
| 21652 | \$910 | 21880 | \$637 |
| 21654 | \$728 | 21881 | \$819 |
| 21656 | \$910 | 21882 | \$1,001 |
| 21670 | \$364 | 21883 | \$1,183 |
| 21680 | \$273 | 21884 | \$1,365 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 21885 | \$1,547 |
| 21886 | \$1,729 |
| 21887 | \$1,911 |
| 21900 | \$273 |
| 21906 | \$455 |
| 21908 | \$546 |
| 21910 | \$819 |
| 21912 | \$455 |
| 21914 | \$546 |
| 21915 | \$455 |
| 21916 | \$455 |
| 21918 | \$455 |
| 21922 | \$546 |
| 21925 | \$364 |
| 21926 | \$364 |
| 21930 | \$546 |
| 21935 | \$455 |
| 21936 | \$455 |
| 21939 | \$273 |
| 21941 | \$637 |
| 21942 | \$910 |
| 21943 | \$455 |
| 21945 | \$455 |
| 21949 | \$455 |
| 21952 | \$364 |
| 21955 | \$455 |
| 21959 | \$455 |
| 21962 | \$455 |
| 21965 | \$455 |
| 21969 | \$728 |
| 21970 | \$1,365 |
| 21973 | \$455 |
| 21976 | \$455 |
| 21980 | \$455 |
| 21990 | \$273 |
| 21997 | \$364 |
| 22002 | \$364 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 22007 | \$364 |
| 22008 | \$364 |
| 22012 | \$273 |
| 22014 | \$273 |
| 22015 | \$546 |
| 22020 | \$364 |
| 22025 | \$364 |
| 22031 | \$455 |
| 22036 | \$273 |
| 22041 | \$182 |
| 22042 | \$91 |
| 22051 | \$819 |
| 22055 | \$1,092 |
| 22065 | \$455 |
| 22075 | \$1,365 |
| 22900 | \$546 |
| 22905 | \$546 |
| 23010 | \$91 |
| 23025 | \$182 |
| 23035 | \$273 |
| 23045 | \$364 |
| 23055 | \$455 |
| 23065 | \$546 |
| 23075 | \$637 |
| 23085 | \$728 |
| 23091 | \$819 |
| 23101 | \$910 |
| 23111 | \$1,001 |
| 23112 | \$1,092 |
| 23113 | \$1,183 |
| 23114 | \$1,274 |
| 23115 | \$1,365 |
| 23116 | \$1,456 |
| 23117 | \$1,547 |
| 23118 | \$1,638 |
| 23119 | \$1,729 |
| 23121 | \$1,820 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 23170 | \$1,911 |
| 23180 | \$2,002 |
| 23190 | \$2,093 |
| 23200 | \$2,184 |
| 23210 | \$2,275 |
| 23220 | \$2,366 |
| 23230 | \$2,457 |
| 23240 | \$2,548 |
| 23250 | \$2,639 |
| 23260 | \$2,730 |
| 23270 | \$2,821 |
| 23280 | \$2,912 |
| 23290 | \$3,003 |
| 23300 | \$3,094 |
| 23310 | \$3,185 |
| 23320 | \$3,276 |
| 23330 | \$3,367 |
| 23340 | \$3,458 |
| 23350 | \$3,549 |
| 23360 | \$3,640 |
| 23370 | \$3,731 |
| 23380 | \$3,822 |
| 23390 | \$3,913 |
| 23400 | \$4,004 |
| 23410 | \$4,095 |
| 23420 | \$4,186 |
| 23430 | \$4,277 |
| 23440 | \$4,368 |
| 23450 | \$4,459 |
| 23460 | \$4,550 |
| 23470 | \$4,641 |
| 23480 | \$4,732 |
| 23490 | \$4,823 |
| 23500 | \$4,914 |
| 23510 | \$5,005 |
| 23520 | \$5,096 |
| 23530 | \$5,187 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 23540 | \$5,278 | 23910 | \$8,645 |
| 23550 | \$5,369 | 23920 | \$8,736 |
| 23560 | \$5,460 | 23930 | \$8,827 |
| 23570 | \$5,551 | 23940 | \$8,918 |
| 23580 | \$5,642 | 23950 | \$9,009 |
| 23590 | \$5,733 | 23960 | \$9,100 |
| 23600 | \$5,824 | 23970 | \$9,191 |
| 23610 | \$5,915 | 23980 | \$9,282 |
| 23620 | \$6,006 | 23990 | \$9,373 |
| 23630 | \$6,097 | 24100 | \$9,464 |
| 23640 | \$6,188 | 24101 | \$9,555 |
| 23650 | \$6,279 | 24102 | \$9,646 |
| 23660 | \$6,370 | 24103 | \$9,737 |
| 23670 | \$6,461 | 24104 | \$9,828 |
| 23680 | \$6,552 | 24105 | \$9,919 |
| 23690 | \$6,643 | 24106 | \$10,010 |
| 23700 | \$6,734 | 24107 | \$10,101 |
| 23710 | \$6,825 | 24108 | \$10,192 |
| 23720 | \$6,916 | 24109 | \$10,283 |
| 23730 | \$7,007 | 24110 | \$10,374 |
| 23740 | \$7,098 | 24111 | \$10,465 |
| 23750 | \$7,189 | 24112 | \$10,556 |
| 23760 | \$7,280 | 24113 | \$10,647 |
| 23770 | \$7,371 | 24114 | \$10,738 |
| 23780 | \$7,462 | 24115 | \$10,829 |
| 23790 | \$7,553 | 24116 | \$10,920 |
| 23800 | \$7,644 | 24117 | \$11,011 |
| 23810 | \$7,735 | 24118 | \$11,102 |
| 23820 | \$7,826 | 24119 | \$11,193 |
| 23830 | \$7,917 | 24120 | \$11,284 |
| 23840 | \$8,008 | 24121 | \$11,375 |
| 23850 | \$8,099 | 24122 | \$11,466 |
| 23860 | \$8,190 | 24123 | \$11,557 |
| 23870 | \$8,281 | 24124 | \$11,648 |
| 23880 | \$8,372 | 24125 | \$11,739 |
| 23890 | \$8,463 | 24126 | \$11,830 |
| 23900 | \$8,554 | 24127 | \$11,921 |

* See Appendix A for derived fee descriptions


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| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 24128 | \$12,012 |
| 24129 | \$12,103 |
| 24130 | \$12,194 |
| 24131 | \$12,285 |
| 24132 | \$12,376 |
| 24133 | \$12,467 |
| 24134 | \$12,558 |
| 24135 | \$12,649 |
| 24136 | \$12,740 |
| 25000 | \$91 |
| 25005 | \$182 |
| 25010 | \$273 |
| 25014 | \$91 |
| 25020 | \$182 |
| 25025 | * derived |
| 25030 | * derived |
| 25050 | * derived |
| 25200 | * derived |
| 25205 | * derived |
| 30001 | * derived |
| 30003 | \$77 |
| 30006 | \$134 |
| 30010 | \$220 |
| 30014 | \$460 |
| 30017 | \$940 |
| 30020 | \$1,860 |
| 30023 | \$940 |
| 30024 | \$940 |
| 30026 | \$160 |
| 30029 | \$240 |
| 30032 | \$215 |
| 30035 | \$320 |
| 30038 | \$240 |
| 30042 | \$535 |
| 30045 | \$320 |
| 30049 | \$550 |
| 30052 | \$745 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 30055 | \$220 |
| 30058 | \$420 |
| 30061 | \$64 |
| 30062 | \$174 |
| 30064 | \$290 |
| 30068 | \$805 |
| 30071 | \$200 |
| 30072 | \$200 |
| 30075 | \$510 |
| 30078 | \$132 |
| 30081 | \$290 |
| 30084 | \$160 |
| 30087 | \$80 |
| 30090 | \$350 |
| 30093 | \$355 |
| 30094 | \$555 |
| 30097 | \$270 |
| 30099 | \$240 |
| 30103 | \$540 |
| 30104 | \$325 |
| 30107 | \$575 |
| 30176 | \$2,685 |
| 30180 | \$360 |
| 30183 | \$725 |
| 30187 | \$655 |
| 30189 | \$375 |
| 30190 | \$1,010 |
| 30192 | \$100 |
| 30196 | \$320 |
| 30202 | \$120 |
| 30207 | \$110 |
| 30210 | \$435 |
| 30216 | \$67 |
| 30219 | \$67 |
| 30223 | \$435 |
| 30224 | \$700 |
| 30225 | \$785 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 30226 | \$440 |
| 30229 | \$790 |
| 30232 | \$650 |
| 30235 | \$870 |
| 30238 | \$440 |
| 30241 | \$940 |
| 30244 | \$940 |
| 30246 | \$2,065 |
| 30247 | \$2,210 |
| 30250 | \$3,615 |
| 30251 | \$5,310 |
| 30253 | \$2,410 |
| 30255 | \$3,205 |
| 30256 | \$1,015 |
| 30259 | \$575 |
| 30262 | \$174 |
| 30266 | \$435 |
| 30269 | \$440 |
| 30272 | \$870 |
| 30275 | \$5,090 |
| 30278 | \$134 |
| 30281 | \$340 |
| 30283 | \$575 |
| 30286 | \$1,165 |
| 30289 | \$1,475 |
| 30293 | \$1,300 |
| 30294 | \$5,090 |
| 30296 | \$2,960 |
| 30297 | \$2,960 |
| 30299 | \$1,855 |
| 30300 | \$2,225 |
| 30302 | \$1,485 |
| 30303 | \$1,780 |
| 30306 | \$2,370 |
| 30310 | \$2,310 |
| 30311 | \$1,786 |
| 30314 | \$1,675 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 30315 | \$3,615 |
| 30317 | \$3,950 |
| 30318 | \$3,615 |
| 30320 | \$3,950 |
| 30323 | \$3,950 |
| 30324 | \$3,950 |
| 30329 | \$715 |
| 30330 | \$2,080 |
| 30332 | \$775 |
| 30335 | \$2,060 |
| 30336 | \$2,475 |
| 30382 | \$3,780 |
| 30384 | \$3,215 |
| 30385 | \$1,640 |
| 30387 | \$1,870 |
| 30388 | \$4,620 |
| 30390 | \$640 |
| 30392 | \$1,690 |
| 30396 | \$2,940 |
| 30397 | \$670 |
| 30399 | \$925 |
| 30400 | \$1,830 |
| 30406 | \$160 |
| 30408 | \$1,135 |
| 30409 | \$570 |
| 30411 | \$255 |
| 30412 | \$152 |
| 30414 | \$1,995 |
| 30415 | \$3,990 |
| 30416 | \$2,170 |
| 30417 | \$3,255 |
| 30418 | \$4,620 |
| 30419 | \$2,360 |
| 30421 | \$5,780 |
| 30422 | \$1,955 |
| 30425 | \$3,780 |
| 30427 | \$4,515 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 30428 | \$4,830 |
| 30430 | \$6,725 |
| 30431 | \$1,605 |
| 30433 | \$2,100 |
| 30439 | \$540 |
| 30440 | \$1,530 |
| 30441 | \$395 |
| 30442 | \$540 |
| 30443 | \$2,140 |
| 30445 | \$2,365 |
| 30448 | \$2,815 |
| 30449 | \$3,130 |
| 30450 | \$1,520 |
| 30451 | \$785 |
| 30452 | \$1,090 |
| 30454 | \$2,680 |
| 30455 | \$2,970 |
| 30457 | \$3,990 |
| 30458 | \$2,970 |
| 30460 | \$2,500 |
| 30461 | \$4,355 |
| 30463 | \$5,250 |
| 30464 | \$6,305 |
| 30469 | \$4,980 |
| 30472 | \$2,690 |
| 30473 | \$645 |
| 30475 | \$1,040 |
| 30478 | \$945 |
| 30479 | \$1,390 |
| 30481 | \$1,030 |
| 30482 | \$730 |
| 30483 | \$515 |
| 30484 | \$1,050 |
| 30485 | \$1,640 |
| 30488 | \$260 |
| 30490 | \$1,515 |
| 30491 | \$1,595 |

* See Appendix A for derived fee descriptions


# WorkCover 

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| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 30492 | \$2,345 |
| 30494 | \$1,220 |
| 30495 | \$2,345 |
| 30515 | \$2,040 |
| 30517 | \$2,585 |
| 30518 | \$2,880 |
| 30520 | \$1,955 |
| 30521 | \$3,615 |
| 30526 | \$6,240 |
| 30529 | \$3,780 |
| 30530 | \$2,270 |
| 30532 | \$2,635 |
| 30533 | \$3,125 |
| 30559 | \$2,460 |
| 30560 | \$2,730 |
| 30562 | \$1,725 |
| 30563 | \$1,725 |
| 30565 | \$2,520 |
| 30574 | \$360 |
| 30577 | \$3,150 |
| 30583 | \$3,450 |
| 30584 | \$5,105 |
| 30589 | \$3,615 |
| 30590 | \$3,990 |
| 30593 | \$5,460 |
| 30594 | \$6,305 |
| 30596 | \$2,605 |
| 30599 | \$3,780 |
| 30600 | \$2,275 |
| 30601 | \$2,770 |
| 30606 | \$3,215 |
| 30615 | \$1,605 |
| 30621 | \$1,085 |
| 30628 | \$94 |
| 30629 | \$1,605 |
| 30630 | \$1,440 |
| 30631 | \$620 |


| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 30635 | \$870 |
| 30640 | \$2,645 |
| 30641 | \$1,085 |
| 30642 | \$2,330 |
| 30644 | \$1,605 |
| 30648 | \$1,333 |
| 30651 | \$1,495 |
| 30652 | \$1,495 |
| 30655 | \$2,625 |
| 30657 | \$3,738 |
| 30663 | \$420 |
| 30666 | \$134 |
| 30672 | \$1,140 |
| 30676 | \$1,110 |
| 30679 | \$260 |
| 30680 | \$3,460 |
| 30682 | \$3,460 |
| 30684 | \$4,260 |
| 30686 | \$4,260 |
| 30687 | \$1,390 |
| 30688 | \$1,080 |
| 30690 | \$1,665 |
| 30692 | \$1,080 |
| 30694 | \$1,665 |
| 30720 | \$1,278 |
| 30721 | \$1,386 |
| 30722 | \$1,495 |
| 30723 | \$1,495 |
| 30724 | \$1,502 |
| 30725 | \$2,663 |
| 30730 | \$2,777 |
| 30731 | \$2,083 |
| 30732 | \$11,403 |
| 30750 | \$5,916 |
| 30751 | \$5,916 |
| 30752 | \$4,437 |
| 30753 | \$4,937 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 30754 | \$4,937 |
| 30755 | \$3,703 |
| 30756 | \$2,500 |
| 30760 | \$1,687 |
| 30761 | \$2,177 |
| 30762 | \$4,770 |
| 30763 | \$1,937 |
| 30770 | \$2,399 |
| 30771 | \$4,839 |
| 30780 | \$4,030 |
| 30790 | \$2,012 |
| 30791 | \$1,250 |
| 30792 | \$3,426 |
| 30800 | \$2,066 |
| 30810 | \$3,291 |
| 30820 | \$528 |
| 31000 | \$1,565 |
| 31001 | \$1,955 |
| 31002 | \$2,350 |
| 31003 | \$1,666 |
| 31004 | \$2,083 |
| 31005 | \$2,500 |
| 31206 | \$290 |
| 31211 | \$370 |
| 31216 | \$435 |
| 31220 | \$555 |
| 31221 | \$555 |
| 31225 | \$985 |
| 31245 | \$1,110 |
| 31250 | \$1,110 |
| 31340 | * derived |
| 31345 | \$610 |
| 31346 | \$610 |
| 31350 | \$1,255 |
| 31355 | \$2,075 |
| 31356 | \$665 |
| 31357 | \$330 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 31358 | \$815 |
| 31359 | \$995 |
| 31360 | \$505 |
| 31361 | \$560 |
| 31362 | \$405 |
| 31363 | \$735 |
| 31364 | \$505 |
| 31365 | \$480 |
| 31366 | \$285 |
| 31367 | \$645 |
| 31368 | \$380 |
| 31369 | \$740 |
| 31370 | \$435 |
| 31371 | \$1,080 |
| 31372 | \$930 |
| 31373 | \$1,075 |
| 31374 | \$845 |
| 31375 | \$915 |
| 31376 | \$1,060 |
| 31400 | \$800 |
| 31403 | \$925 |
| 31406 | \$1,545 |
| 31409 | \$4,670 |
| 31412 | \$5,310 |
| 31423 | \$1,205 |
| 31426 | \$2,405 |
| 31429 | \$3,750 |
| 31432 | \$4,010 |
| 31435 | \$2,950 |
| 31438 | \$4,315 |
| 31454 | \$1,675 |
| 31456 | \$730 |
| 31458 | \$875 |
| 31460 | \$1,060 |
| 31462 | \$1,550 |
| 31466 | \$3,885 |
| 31468 | \$4,270 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 31472 | \$3,475 |
| 31500 | \$620 |
| 31503 | \$825 |
| 31506 | \$930 |
| 31509 | \$775 |
| 31512 | \$1,450 |
| 31515 | \$970 |
| 31516 | \$1,940 |
| 31519 | \$1,530 |
| 31524 | \$2,165 |
| 31525 | \$1,492 |
| 31530 | \$1,350 |
| 31533 | \$330 |
| 31536 | \$555 |
| 31548 | \$400 |
| 31551 | \$485 |
| 31554 | \$1,030 |
| 31557 | \$775 |
| 31560 | \$825 |
| 31563 | \$485 |
| 31566 | \$365 |
| 31569 | \$2,437 |
| 31572 | \$2,999 |
| 31575 | \$2,437 |
| 31578 | \$2,437 |
| 31581 | \$2,999 |
| 31584 | \$4,415 |
| 31585 | \$2,387 |
| 31587 | \$281 |
| 31590 | \$750 |
| 32000 | \$2,845 |
| 32003 | \$2,970 |
| 32004 | \$3,255 |
| 32005 | \$3,690 |
| 32006 | \$3,255 |
| 32009 | \$3,755 |
| 32012 | \$4,150 |

* See Appendix A for derived fee descriptions


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| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 32015 | \$4,895 |
| 32018 | \$4,330 |
| 32021 | \$1,545 |
| 32023 | \$1,595 |
| 32024 | \$3,755 |
| 32025 | \$5,085 |
| 32026 | \$5,475 |
| 32028 | \$5,865 |
| 32029 | \$1,175 |
| 32030 | \$2,925 |
| 32033 | \$4,290 |
| 32036 | \$5,270 |
| 32039 | \$4,150 |
| 32042 | \$3,565 |
| 32045 | \$1,335 |
| 32046 | \$2,125 |
| 32047 | \$2,475 |
| 32051 | \$6,370 |
| 32054 | \$5,845 |
| 32057 | \$1,545 |
| 32060 | \$6,370 |
| 32063 | \$5,845 |
| 32066 | \$1,545 |
| 32069 | \$4,715 |
| 32072 | \$158 |
| 32075 | \$285 |
| 32084 | \$340 |
| 32094 | \$1,565 |
| 32095 | \$365 |
| 32096 | \$705 |
| 32099 | \$950 |
| 32102 | \$1,795 |
| 32103 | \$2,150 |
| 32104 | \$2,760 |
| 32105 | \$1,335 |
| 32106 | \$3,755 |
| 32108 | \$2,760 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 32111 | \$1,745 |
| 32112 | \$2,150 |
| 32114 | \$475 |
| 32115 | \$360 |
| 32117 | \$2,760 |
| 32120 | \$705 |
| 32123 | \$920 |
| 32126 | \$1,505 |
| 32129 | \$1,745 |
| 32131 | \$1,485 |
| 32132 | \$124 |
| 32135 | \$184 |
| 32138 | \$1,115 |
| 32139 | \$1,115 |
| 32142 | \$192 |
| 32145 | \$385 |
| 32147 | \$124 |
| 32150 | \$790 |
| 32153 | \$184 |
| 32156 | \$465 |
| 32159 | \$1,145 |
| 32162 | \$1,335 |
| 32165 | \$1,745 |
| 32166 | \$585 |
| 32168 | \$375 |
| 32171 | \$245 |
| 32174 | \$245 |
| 32175 | \$460 |
| 32177 | \$475 |
| 32180 | \$700 |
| 32183 | \$1,565 |
| 32186 | \$1,565 |
| 32200 | \$840 |
| 32203 | \$1,800 |
| 32206 | \$1,625 |
| 32209 | \$2,610 |
| 32210 | \$725 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 32212 | \$385 |
| 32213 | \$1,920 |
| 32214 | \$970 |
| 32215 | \$365 |
| 32216 | \$1,720 |
| 32217 | \$455 |
| 32218 | \$455 |
| 32220 | \$2,560 |
| 32221 | \$2,560 |
| 32222 | \$1,015 |
| 32223 | \$1,015 |
| 32224 | \$1,015 |
| 32225 | \$1,015 |
| 32226 | \$1,015 |
| 32227 | \$1,435 |
| 32228 | \$1,015 |
| 32229 | \$715 |
| 32230 | \$1,917 |
| 32500 | \$325 |
| 32504 | \$805 |
| 32507 | \$1,605 |
| 32508 | \$1,605 |
| 32511 | \$2,390 |
| 32514 | \$2,790 |
| 32517 | \$3,595 |
| 32520 | \$1,605 |
| 32522 | \$2,390 |
| 32523 | \$1,605 |
| 32526 | \$2,390 |
| 32700 | \$4,345 |
| 32703 | \$3,715 |
| 32708 | \$4,390 |
| 32710 | \$4,880 |
| 32711 | \$5,370 |
| 32712 | \$3,810 |
| 32715 | \$3,810 |
| 32718 | \$3,595 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 32721 | \$5,700 |
| 32724 | \$6,490 |
| 32730 | \$4,915 |
| 32733 | \$5,700 |
| 32736 | \$1,260 |
| 32739 | \$3,910 |
| 32742 | \$4,495 |
| 32745 | \$5,120 |
| 32748 | \$5,540 |
| 32751 | \$3,595 |
| 32754 | \$4,495 |
| 32757 | \$1,260 |
| 32760 | \$1,260 |
| 32763 | \$3,595 |
| 32766 | \$4,075 |
| 32769 | \$825 |
| 33050 | \$4,425 |
| 33055 | \$3,550 |
| 33070 | \$2,560 |
| 33075 | \$3,255 |
| 33080 | \$3,975 |
| 33100 | \$4,345 |
| 33103 | \$6,095 |
| 33109 | \$7,385 |
| 33112 | \$6,380 |
| 33115 | \$4,325 |
| 33116 | \$4,325 |
| 33118 | \$4,805 |
| 33119 | \$4,805 |
| 33121 | \$5,285 |
| 33124 | \$3,655 |
| 33127 | \$4,810 |
| 33130 | \$4,180 |
| 33133 | \$3,130 |
| 33136 | \$7,920 |
| 33139 | \$4,810 |
| 33142 | \$4,495 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 33145 | \$7,685 |
| 33148 | \$9,570 |
| 33151 | \$9,100 |
| 33154 | \$6,740 |
| 33157 | \$7,525 |
| 33160 | \$7,920 |
| 33163 | \$6,350 |
| 33166 | \$6,350 |
| 33169 | \$4,960 |
| 33172 | \$3,860 |
| 33175 | \$3,585 |
| 33178 | \$4,555 |
| 33181 | \$5,570 |
| 33500 | \$3,085 |
| 33506 | \$3,825 |
| 33509 | \$4,140 |
| 33512 | \$4,600 |
| 33515 | \$5,060 |
| 33518 | \$3,825 |
| 33521 | \$4,140 |
| 33524 | \$4,915 |
| 33527 | \$5,700 |
| 33530 | \$4,915 |
| 33533 | \$5,545 |
| 33536 | \$4,080 |
| 33539 | \$2,915 |
| 33542 | \$4,175 |
| 33545 | \$840 |
| 33548 | \$1,685 |
| 33551 | \$835 |
| 33554 | \$795 |
| 33800 | \$3,560 |
| 33803 | \$3,385 |
| 33806 | \$2,460 |
| 33810 | \$1,725 |
| 33811 | \$5,165 |
| 33812 | \$2,815 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 33815 | \$2,425 |
| 33818 | \$2,830 |
| 33821 | \$3,235 |
| 33824 | \$3,085 |
| 33827 | \$3,385 |
| 33830 | \$4,150 |
| 33833 | \$4,025 |
| 33836 | \$4,810 |
| 33839 | \$5,595 |
| 33842 | \$2,770 |
| 33845 | \$1,940 |
| 33848 | \$1,940 |
| 34100 | \$2,145 |
| 34103 | \$1,265 |
| 34106 | \$880 |
| 34109 | \$945 |
| 34112 | \$2,595 |
| 34115 | \$2,910 |
| 34118 | \$4,180 |
| 34121 | \$3,350 |
| 34124 | \$3,665 |
| 34127 | \$4,810 |
| 34130 | \$1,510 |
| 34133 | \$1,685 |
| 34136 | \$2,700 |
| 34139 | \$2,700 |
| 34142 | \$3,085 |
| 34145 | \$2,420 |
| 34148 | \$4,345 |
| 34151 | \$5,915 |
| 34154 | \$7,095 |
| 34157 | \$3,600 |
| 34160 | \$6,740 |
| 34163 | \$8,625 |
| 34166 | \$8,625 |
| 34169 | \$4,815 |
| 34172 | \$3,920 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 34175 | \$3,600 |
| 34500 | \$945 |
| 34503 | \$1,245 |
| 34506 | \$630 |
| 34509 | \$2,945 |
| 34512 | \$3,260 |
| 34515 | \$2,315 |
| 34518 | \$3,885 |
| 34521 | \$2,300 |
| 34524 | \$1,260 |
| 34527 | \$1,605 |
| 34528 | \$800 |
| 34530 | \$595 |
| 34533 | \$3,740 |
| 34538 | \$830 |
| 34539 | \$590 |
| 34800 | \$2,460 |
| 34803 | \$5,440 |
| 34806 | \$2,915 |
| 34809 | \$2,915 |
| 34812 | \$3,545 |
| 34815 | \$2,915 |
| 34818 | \$3,235 |
| 34821 | \$4,385 |
| 34824 | \$1,510 |
| 34827 | \$1,825 |
| 34830 | \$2,145 |
| 34833 | \$2,770 |
| 35000 | \$2,145 |
| 35003 | \$2,770 |
| 35006 | \$3,250 |
| 35009 | \$2,700 |
| 35012 | \$2,100 |
| 35100 | \$1,030 |
| 35103 | \$655 |
| 35200 | \$550 |
| 35202 | \$2,615 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 35300 | \$1,545 |
| 35303 | \$1,980 |
| 35306 | \$1,990 |
| 35307 | \$3,525 |
| 35309 | \$2,280 |
| 35312 | \$2,590 |
| 35315 | \$2,590 |
| 35317 | \$1,075 |
| 35319 | \$1,930 |
| 35320 | \$2,590 |
| 35321 | \$2,430 |
| 35324 | \$915 |
| 35327 | \$1,190 |
| 35330 | \$2,315 |
| 35331 | \$1,765 |
| 35360 | \$2,470 |
| 35361 | \$2,115 |
| 35362 | \$1,765 |
| 35363 | \$1,415 |
| 35401 | \$1,959 |
| 35404 | \$1,070 |
| 35406 | \$2,510 |
| 35408 | \$1,750 |
| 35410 | \$2,520 |
| 35412 | \$8,845 |
| 35414 | \$12,635 |
| 35500 | \$225 |
| 35502 | \$225 |
| 35507 | \$525 |
| 35508 | \$785 |
| 35509 | \$245 |
| 35513 | \$630 |
| 35517 | \$415 |
| 35518 | \$775 |
| 35520 | \$162 |
| 35523 | \$162 |
| 35527 | \$415 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 35530 | \$745 |
| 35536 | \$1,050 |
| 35539 | \$825 |
| 35542 | \$975 |
| 35545 | \$490 |
| 35548 | \$2,525 |
| 35551 | \$2,455 |
| 35552 | \$3,675 |
| 35554 | \$122 |
| 35557 | \$610 |
| 35560 | \$2,225 |
| 35561 | \$4,185 |
| 35562 | \$3,435 |
| 35564 | \$1,575 |
| 35565 | \$2,050 |
| 35566 | \$1,125 |
| 35568 | \$1,860 |
| 35569 | \$475 |
| 35570 | \$1,650 |
| 35571 | \$1,650 |
| 35572 | \$390 |
| 35573 | \$2,475 |
| 35577 | \$2,010 |
| 35578 | \$2,010 |
| 35581 | \$1,650 |
| 35582 | \$2,475 |
| 35585 | \$4,390 |
| 35595 | \$3,040 |
| 35596 | \$1,935 |
| 35597 | \$4,390 |
| 35599 | \$2,110 |
| 35602 | \$1,880 |
| 35605 | \$1,040 |
| 35608 | \$176 |
| 35611 | \$176 |
| 35612 | \$1,540 |
| 35613 | \$1,230 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 35614 | \$225 |
| 35615 | \$162 |
| 35616 | \$1,380 |
| 35618 | \$665 |
| 35620 | \$170 |
| 35622 | \$1,875 |
| 35623 | \$2,405 |
| 35626 | \$250 |
| 35627 | \$340 |
| 35630 | \$560 |
| 35633 | \$690 |
| 35634 | \$2,255 |
| 35635 | \$1,210 |
| 35636 | \$1,380 |
| 35637 | \$1,225 |
| 35638 | \$2,250 |
| 35640 | \$565 |
| 35641 | \$4,525 |
| 35643 | \$660 |
| 35644 | \$625 |
| 35645 | \$975 |
| 35646 | \$620 |
| 35647 | \$620 |
| 35648 | \$975 |
| 35649 | \$1,355 |
| 35653 | \$2,000 |
| 35657 | \$2,000 |
| 35658 | \$1,235 |
| 35661 | \$2,685 |
| 35664 | \$4,435 |
| 35667 | \$3,750 |
| 35670 | \$3,275 |
| 35680 | \$1,625 |
| 35684 | \$1,015 |
| 35688 | \$1,125 |
| 35691 | \$515 |
| 35694 | \$1,785 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 35697 | \$2,665 | 36546 | \$1,835 | 36652 | \$1,720 |
| 35700 | \$2,020 | 36549 | \$2,205 | 36654 | \$2,210 |
| 35703 | \$190 | 36552 | \$1,960 | 36656 | \$2,825 |
| 35706 | \$188 | 36558 | \$1,715 | 36663 | \$1,765 |
| 35709 | \$120 | 36561 | \$445 | 36664 | \$1,585 |
| 35710 | \$1,410 | 36564 | \$2,455 | 36665 | \$335 |
| 35713 | \$1,285 | 36567 | \$2,700 | 36666 | \$890 |
| 35717 | \$1,555 | 36570 | \$3,435 | 36667 | \$420 |
| 35720 | \$1,690 | 36573 | \$2,455 | 36668 | \$415 |
| 35723 | \$1,340 | 36576 | \$3,065 | 36800 | \$74 |
| 35726 | \$1,340 | 36579 | \$1,960 | 36803 | \$1,225 |
| 35729 | \$660 | 36585 | \$1,960 | 36806 | \$1,715 |
| 35730 | \$660 | 36588 | \$2,455 | 36809 | \$2,205 |
| 35750 | \$2,385 | 36591 | \$2,945 | 36811 | \$855 |
| 35753 | \$2,640 | 36594 | \$2,455 | 36812 | \$440 |
| 35754 | \$3,280 | 36597 | \$2,455 | 36815 | \$625 |
| 35756 | \$2,385 | 36600 | \$2,945 | 36818 | \$730 |
| 35759 | \$1,670 | 36603 | \$3,435 | 36821 | \$860 |
| 36502 | \$1,900 | 36604 | \$715 | 36822 | \$1,225 |
| 36503 | \$3,680 | 36606 | \$6,130 | 36823 | \$1,405 |
| 36504 | \$770 | 36607 | \$2,080 | 36824 | \$565 |
| 36505 | \$600 | 36608 | \$805 | 36827 | \$615 |
| 36506 | \$2,455 | 36609 | \$1,960 | 36830 | \$540 |
| 36507 | \$1,015 | 36610 | \$4,830 | 36833 | \$735 |
| 36508 | \$2,000 | 36611 | \$7,530 | 36836 | \$615 |
| 36509 | \$2,085 | 36612 | \$1,715 | 36840 | \$860 |
| 36516 | \$2,455 | 36615 | \$1,960 | 36842 | \$860 |
| 36519 | \$3,435 | 36618 | \$1,715 | 36845 | \$1,840 |
| 36522 | \$2,945 | 36621 | \$1,225 | 36848 | \$615 |
| 36525 | \$4,170 | 36624 | \$1,470 | 36851 | \$615 |
| 36528 | \$3,435 | 36627 | \$1,840 | 36854 | \$1,225 |
| 36529 | \$4,225 | 36633 | \$1,960 | 36860 | \$440 |
| 36531 | \$3,065 | 36636 | \$1,055 | 36863 | \$1,225 |
| 36532 | \$4,405 | 36639 | \$2,205 | 37000 | \$1,960 |
| 36533 | \$5,205 | 36645 | \$2,820 | 37004 | \$1,715 |
| 36537 | \$1,840 | 36649 | \$715 | 37008 | \$1,105 |
| 36543 | \$3,435 | 36650 | \$450 | 37011 | \$245 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 37014 | \$2,820 | 37217 | \$370 |
| 37015 | \$3,385 | 37218 | \$370 |
| 37016 | \$5,320 | 37219 | \$890 |
| 37018 | \$7,980 | 37220 | \$2,810 |
| 37019 | \$5,345 | 37221 | \$1,225 |
| 37020 | \$1,960 | 37223 | \$530 |
| 37021 | \$8,015 | 37224 | \$860 |
| 37023 | \$1,105 | 37226 | \$806 |
| 37026 | \$1,105 | 37227 | \$2,810 |
| 37029 | \$2,455 | 37230 | \$3,065 |
| 37038 | \$1,840 | 37233 | \$1,470 |
| 37039 | \$1,890 | 37245 | \$3,515 |
| 37040 | \$2,415 | 37300 | \$122 |
| 37041 | \$122 | 37303 | \$196 |
| 37042 | \$2,415 | 37306 | \$1,715 |
| 37043 | \$1,790 | 37309 | \$2,455 |
| 37044 | \$1,840 | 37318 | \$735 |
| 37045 | \$3,785 | 37321 | \$245 |
| 37046 | \$2,065 | 37324 | \$615 |
| 37047 | \$4,415 | 37327 | \$860 |
| 37048 | \$2,455 | 37330 | \$1,715 |
| 37050 | \$1,960 | 37333 | \$1,470 |
| 37053 | \$2,210 | 37336 | \$1,960 |
| 37200 | \$2,700 | 37338 | \$2,415 |
| 37201 | \$2,185 | 37339 | \$640 |
| 37202 | \$1,095 | 37340 | \$2,415 |
| 37203 | \$3,065 | 37341 | \$2,415 |
| 37206 | \$1,470 | 37342 | \$2,205 |
| 37207 | \$3,065 | 37343 | \$3,685 |
| 37208 | \$1,470 | 37344 | \$2,415 |
| 37209 | \$3,435 | 37345 | \$1,840 |
| 37210 | \$4,220 | 37348 | \$1,840 |
| 37211 | \$5,125 | 37351 | \$735 |
| 37213 | \$6,330 | 37354 | \$860 |
| 37214 | \$7,690 | 37369 | \$490 |
| 37215 | \$1,105 | 37372 | \$2,455 |
| 37216 | \$595 | 37375 | \$3,065 |

* See Appendix A for derived fee descriptions


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| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 37381 | \$1,960 |
| 37384 | \$3,065 |
| 37387 | \$860 |
| 37388 | \$245 |
| 37390 | \$2,455 |
| 37393 | \$615 |
| 37396 | \$1,960 |
| 37402 | \$1,225 |
| 37405 | \$2,455 |
| 37408 | \$1,225 |
| 37411 | \$2,455 |
| 37415 | \$124 |
| 37417 | \$1,470 |
| 37418 | \$1,965 |
| 37423 | \$2,455 |
| 37426 | \$2,575 |
| 37429 | \$860 |
| 37432 | \$2,455 |
| 37435 | \$245 |
| 37438 | \$735 |
| 37601 | \$735 |
| 37604 | \$730 |
| 37605 | \$1,150 |
| 37606 | \$1,705 |
| 37607 | \$3,680 |
| 37610 | \$5,510 |
| 37613 | \$735 |
| 37616 | \$1,840 |
| 37619 | \$735 |
| 37623 | \$615 |
| 37800 | \$1,380 |
| 37803 | \$1,380 |
| 37812 | \$1,470 |
| 37815 | \$245 |
| 37818 | \$1,310 |
| 37821 | \$2,205 |
| 37824 | \$3,070 |


| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 37827 | \$1,425 |
| 37830 | \$1,840 |
| 37833 | \$880 |
| 37836 | \$1,840 |
| 37839 | \$2,085 |
| 37842 | \$4,050 |
| 37845 | \$1,840 |
| 37848 | \$3,315 |
| 37851 | \$2,455 |
| 37854 | \$980 |
| 38200 | \$1,050 |
| 38203 | \$1,315 |
| 38206 | \$1,590 |
| 38209 | \$1,790 |
| 38212 | \$2,815 |
| 38213 | \$1,790 |
| 38241 | \$1,135 |
| 38244 | \$2,935 |
| 38247 | \$4,510 |
| 38248 | \$2,935 |
| 38249 | \$4,510 |
| 38251 | \$2,935 |
| 38252 | \$4,510 |
| 38254 | \$1,050 |
| 38256 | \$620 |
| 38270 | \$2,275 |
| 38272 | \$2,275 |
| 38273 | \$2,275 |
| 38274 | \$1,025 |
| 38275 | \$745 |
| 38276 | \$2,275 |
| 38285 | \$285 |
| 38286 | \$260 |
| 38287 | \$5,575 |
| 38288 | \$360 |
| 38290 | \$7,100 |
| 38293 | \$7,620 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 38307 | \$5,605 |
| 38308 | \$6,415 |
| 38309 | \$3,785 |
| 38310 | \$7,230 |
| 38311 | \$5,605 |
| 38313 | \$6,415 |
| 38314 | \$7,230 |
| 38316 | \$4,730 |
| 38317 | \$6,015 |
| 38319 | \$6,830 |
| 38320 | \$4,730 |
| 38322 | \$6,015 |
| 38323 | \$6,830 |
| 38350 | \$1,485 |
| 38353 | \$590 |
| 38356 | \$1,950 |
| 38358 | \$5,135 |
| 38359 | \$395 |
| 38362 | \$1,025 |
| 38365 | \$765 |
| 38368 | \$4,480 |
| 38415 | \$1,145 |
| 38416 | \$1,665 |
| 38417 | \$1,665 |
| 38418 | \$2,550 |
| 38419 | \$465 |
| 38420 | \$625 |
| 38421 | \$4,075 |
| 38422 | \$905 |
| 38423 | \$685 |
| 38424 | \$2,550 |
| 38425 | \$1,625 |
| 38426 | \$1,105 |
| 38427 | \$3,350 |
| 38428 | \$707 |
| 38430 | \$1,750 |
| 38436 | \$685 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 38438 | \$4,075 | 38511 | \$1,595 |
| 38440 | \$3,050 | 38512 | \$5,580 |
| 38441 | \$4,825 | 38513 | \$2,660 |
| 38446 | \$3,145 | 38515 | \$7,105 |
| 38447 | \$4,215 | 38516 | \$7,210 |
| 38448 | \$1,010 | 38517 | \$8,780 |
| 38449 | \$5,895 | 38518 | \$7,625 |
| 38450 | \$2,430 | 38519 | \$3,170 |
| 38452 | \$1,525 | 38550 | \$6,180 |
| 38453 | \$4,575 | 38553 | \$7,770 |
| 38455 | \$6,405 | 38554 | \$11,270 |
| 38456 | \$4,215 | 38555 | \$8,885 |
| 38457 | \$3,945 | 38556 | \$8,430 |
| 38458 | \$2,090 | 38557 | \$10,255 |
| 38460 | \$755 | 38558 | \$13,525 |
| 38461 | \$4,109 | 38568 | \$5,060 |
| 38462 | \$900 | 38571 | \$5,825 |
| 38463 | \$4,109 | 38572 | \$5,285 |
| 38464 | \$975 | 38600 | \$4,075 |
| 38466 | \$2,635 | 38603 | \$2,550 |
| 38467 | \$2,955 | 38609 | \$1,280 |
| 38468 | \$4,060 | 38612 | \$1,435 |
| 38469 | \$4,725 | 38615 | \$4,075 |
| 38471 | \$2,795 | 38618 | \$5,075 |
| 38472 | \$765 | 38621 | \$2,025 |
| 38474 | \$5,820 | 38624 | \$2,280 |
| 38477 | \$5,980 | 38627 | \$1,820 |
| 38484 | \$6,090 | 38637 | \$1,475 |
| 38485 | \$2,440 | 38643 | \$4,040 |
| 38487 | \$5,135 | 38653 | \$5,430 |
| 38490 | \$1,655 | 38656 | \$2,550 |
| 38493 | \$5,395 | 38670 | \$5,075 |
| 38499 | \$6,090 | 38673 | \$5,715 |
| 38502 | \$6,320 | 38677 | \$5,345 |
| 38508 | \$5,310 | 38680 | \$6,340 |
| 38509 | \$6,350 | 38700 | \$2,840 |
| 38510 | \$1,660 | 38703 | \$5,140 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 38706 | \$4,840 | 39125 | \$980 | 39503 | \$3,145 |
| 38709 | \$5,725 | 39126 | \$1,190 | 39604 | \$5,870 |
| 38715 | \$4,535 | 39127 | \$1,965 | 39610 | \$3,400 |
| 38718 | \$5,760 | 39128 | \$2,175 | 39612 | \$3,915 |
| 38721 | \$3,975 | 39130 | \$2,010 | 39615 | \$6,275 |
| 38724 | \$5,825 | 39131 | \$420 | 39638 | \$14,010 |
| 38727 | \$3,980 | 39133 | \$520 | 39639 | \$11,190 |
| 38730 | \$5,675 | 39134 | \$1,120 | 39641 | \$14,780 |
| 38733 | \$3,975 | 39135 | \$520 | 39651 | \$17,025 |
| 38736 | \$5,675 | 39136 | \$525 | 39654 | \$14,010 |
| 38739 | \$5,235 | 39137 | \$1,995 | 39656 | \$11,190 |
| 38742 | \$5,115 | 39138 | \$2,010 | 39700 | \$6,005 |
| 38745 | \$5,675 | 39139 | \$3,555 | 39703 | \$4,765 |
| 38748 | \$5,675 | 39140 | \$975 | 39710 | \$7,970 |
| 38751 | \$5,675 | 39300 | \$1,045 | 39712 | \$9,270 |
| 38754 | \$7,105 | 39303 | \$1,435 | 39715 | \$8,890 |
| 38757 | \$5,675 | 39306 | \$2,220 | 39718 | \$5,350 |
| 38760 | \$5,675 | 39307 | \$2,720 | 39720 | \$8,485 |
| 38764 | \$5,675 | 39309 | \$2,360 | 39801 | \$17,025 |
| 38766 | \$5,675 | 39312 | \$1,300 | 39803 | \$17,025 |
| 38800 | \$114 | 39315 | \$3,400 | 39815 | \$6,015 |
| 38803 | \$205 | 39318 | \$2,085 | 39818 | \$7,970 |
| 38806 | \$395 | 39319 | \$1,435 | 39821 | \$9,015 |
| 38809 | \$455 | 39321 | \$1,570 | 39900 | \$4,760 |
| 38812 | \$600 | 39323 | \$895 | 39903 | \$7,185 |
| 39000 | \$216 | 39324 | \$920 | 39906 | \$2,615 |
| 39007 | \$520 | 39327 | \$1,570 | 40004 | \$5,220 |
| 39013 | \$325 | 39328 | \$1,570 | 40012 | \$5,615 |
| 39015 | \$1,125 | 39329 | \$1,175 | 40018 | \$520 |
| 39018 | \$2,620 | 39330 | \$920 | 40104 | \$2,825 |
| 39100 | \$785 | 39331 | \$1,385 | 40106 | \$7,125 |
| 39109 | \$4,700 | 39332 | \$1,385 | 40109 | \$6,145 |
| 39113 | \$6,930 | 39333 | \$1,300 | 40112 | \$7,310 |
| 39115 | \$245 | 39336 | \$920 | 40119 | \$3,145 |
| 39118 | \$960 | 39339 | \$1,385 | 40600 | \$3,145 |
| 39121 | \$2,360 | 39342 | \$1,805 | 40700 | \$7,715 |
| 39124 | \$4,835 | 39345 | \$920 | 40701 | \$1,305 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 40702 | \$610 |
| 40703 | \$7,970 |
| 40704 | \$2,580 |
| 40705 | \$2,315 |
| 40706 | \$8,485 |
| 40707 | \$725 |
| 40708 | \$1,305 |
| 40709 | \$4,760 |
| 40712 | \$8,485 |
| 40801 | \$5,740 |
| 40803 | \$3,915 |
| 40850 | \$7,410 |
| 40851 | \$12,965 |
| 40852 | \$1,115 |
| 40854 | \$1,720 |
| 40856 | \$835 |
| 40858 | \$1,720 |
| 40860 | \$6,620 |
| 40862 | \$620 |
| 40905 | \$1,960 |
| 41500 | \$205 |
| 41501 | \$495 |
| 41503 | \$625 |
| 41506 | \$415 |
| 41509 | \$425 |
| 41512 | \$1,550 |
| 41515 | \$1,010 |
| 41518 | \$2,470 |
| 41521 | \$2,600 |
| 41524 | \$750 |
| 41527 | \$1,510 |
| 41530 | \$2,495 |
| 41533 | \$3,010 |
| 41536 | \$3,370 |
| 41539 | \$2,760 |
| 41542 | \$3,025 |
| 41545 | \$1,445 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 41548 | \$1,710 |
| 41551 | \$4,190 |
| 41554 | \$4,940 |
| 41557 | \$2,760 |
| 41560 | \$3,025 |
| 41563 | \$3,810 |
| 41564 | \$5,095 |
| 41566 | \$2,865 |
| 41569 | \$3,025 |
| 41572 | \$2,760 |
| 41575 | \$6,240 |
| 41576 | \$9,365 |
| 41578 | \$6,240 |
| 41579 | \$4,685 |
| 41581 | \$7,185 |
| 41584 | \$4,930 |
| 41587 | \$6,715 |
| 41590 | \$3,025 |
| 41593 | \$3,990 |
| 41596 | \$4,460 |
| 41599 | \$4,460 |
| 41603 | \$1,620 |
| 41604 | \$605 |
| 41608 | \$2,760 |
| 41611 | \$1,840 |
| 41614 | \$2,640 |
| 41615 | \$2,875 |
| 41617 | \$4,985 |
| 41618 | \$4,985 |
| 41620 | \$2,105 |
| 41623 | \$3,025 |
| 41626 | \$405 |
| 41629 | \$1,315 |
| 41632 | \$625 |
| 41635 | \$3,010 |
| 41638 | \$3,755 |
| 41641 | \$124 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 41644 | \$375 |
| 41647 | \$280 |
| 41650 | \$280 |
| 41653 | \$210 |
| 41656 | \$350 |
| 41659 | \$205 |
| 41662 | \$210 |
| 41668 | \$625 |
| 41671 | \$1,250 |
| 41672 | \$1,605 |
| 41674 | \$345 |
| 41677 | \$265 |
| 41683 | \$310 |
| 41686 | \$210 |
| 41689 | \$340 |
| 41692 | \$465 |
| 41698 | \$84 |
| 41701 | \$265 |
| 41704 | \$76 |
| 41707 | \$1,105 |
| 41710 | \$1,380 |
| 41713 | \$1,710 |
| 41716 | \$725 |
| 41719 | \$310 |
| 41722 | \$1,550 |
| 41725 | \$1,180 |
| 41728 | \$2,360 |
| 41729 | \$1,500 |
| 41731 | \$2,235 |
| 41734 | \$2,955 |
| 41737 | \$1,185 |
| 41740 | \$158 |
| 41743 | \$975 |
| 41746 | \$2,235 |
| 41749 | \$1,630 |
| 41752 | \$775 |
| 41755 | \$116 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 41764 | \$325 |
| 41767 | \$1,925 |
| 41770 | \$1,840 |
| 41773 | \$1,510 |
| 41776 | \$1,550 |
| 41779 | \$1,840 |
| 41782 | \$2,505 |
| 41785 | \$3,105 |
| 41786 | \$2,040 |
| 41787 | \$1,500 |
| 41793 | \$975 |
| 41797 | \$415 |
| 41801 | \$415 |
| 41804 | \$230 |
| 41807 | \$184 |
| 41810 | \$92 |
| 41813 | \$920 |
| 41816 | \$495 |
| 41822 | \$565 |
| 41825 | \$920 |
| 41828 | \$144 |
| 41831 | \$985 |
| 41832 | \$605 |
| 41834 | \$3,680 |
| 41837 | \$3,250 |
| 41840 | \$4,000 |
| 41843 | \$3,680 |
| 41855 | \$830 |
| 41858 | \$1,300 |
| 41861 | \$1,590 |
| 41864 | \$1,105 |
| 41867 | \$1,615 |
| 41868 | \$1,035 |
| 41870 | \$1,170 |
| 41873 | \$1,550 |
| 41876 | \$1,550 |
| 41879 | \$2,505 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 41880 | \$685 |
| 41881 | \$1,090 |
| 41884 | \$245 |
| 41885 | \$780 |
| 41886 | \$465 |
| 41907 | \$320 |
| 41910 | \$1,030 |
| 42503 | \$300 |
| 42504 | \$1,680 |
| 42505 | \$1,680 |
| 42506 | \$1,380 |
| 42509 | \$1,710 |
| 42510 | \$1,905 |
| 42512 | \$1,380 |
| 42515 | \$1,510 |
| 42518 | \$975 |
| 42521 | \$3,120 |
| 42524 | \$605 |
| 42527 | \$1,210 |
| 42530 | \$1,710 |
| 42533 | \$1,025 |
| 42536 | \$2,430 |
| 42539 | \$3,475 |
| 42542 | \$1,445 |
| 42543 | \$2,535 |
| 42545 | \$3,245 |
| 42548 | \$2,915 |
| 42551 | \$1,840 |
| 42554 | \$2,170 |
| 42557 | \$3,025 |
| 42563 | \$1,575 |
| 42569 | \$3,025 |
| 42572 | \$290 |
| 42573 | \$615 |
| 42574 | \$1,310 |
| 42575 | \$245 |
| 42581 | \$300 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 42584 | \$790 |
| 42587 | \$132 |
| 42588 | \$132 |
| 42590 | \$975 |
| 42593 | \$605 |
| 42596 | \$1,445 |
| 42599 | \$1,560 |
| 42602 | \$1,840 |
| 42605 | \$1,315 |
| 42608 | \$785 |
| 42610 | \$260 |
| 42611 | \$420 |
| 42614 | \$138 |
| 42615 | \$196 |
| 42617 | \$315 |
| 42620 | \$220 |
| 42622 | \$225 |
| 42623 | \$2,525 |
| 42626 | \$2,875 |
| 42629 | \$2,665 |
| 42632 | \$290 |
| 42635 | \$1,685 |
| 42638 | \$1,090 |
| 42641 | \$1,165 |
| 42644 | \$210 |
| 42647 | \$605 |
| 42650 | \$210 |
| 42651 | \$460 |
| 42652 | \$2,375 |
| 42653 | \$3,615 |
| 42656 | \$4,005 |
| 42662 | \$2,075 |
| 42665 | \$1,560 |
| 42667 | \$400 |
| 42668 | \$210 |
| 42672 | \$2,170 |
| 42673 | \$1,180 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 42676 | \$325 |
| 42677 | \$152 |
| 42680 | \$785 |
| 42683 | \$320 |
| 42686 | \$725 |
| 42689 | \$300 |
| 42692 | \$790 |
| 42695 | \$1,205 |
| 42698 | \$3,330 |
| 42701 | \$1,840 |
| 42702 | \$4,250 |
| 42703 | \$1,380 |
| 42704 | \$1,115 |
| 42705 | \$2,614 |
| 42707 | \$1,940 |
| 42710 | \$2,175 |
| 42713 | \$910 |
| 42716 | \$3,350 |
| 42719 | \$1,510 |
| 42725 | \$3,615 |
| 42731 | \$4,090 |
| 42734 | \$905 |
| 42738 | \$910 |
| 42739 | \$910 |
| 42740 | \$910 |
| 42741 | \$910 |
| 42743 | \$1,840 |
| 42744 | \$825 |
| 42746 | \$2,695 |
| 42749 | \$3,340 |
| 42752 | \$3,740 |
| 42755 | \$465 |
| 42758 | \$1,970 |
| 42761 | \$1,510 |
| 42764 | \$1,315 |
| 42767 | \$3,025 |
| 42770 | \$830 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 42773 | \$2,170 |
| 42776 | \$3,285 |
| 42779 | \$3,290 |
| 42782 | \$1,090 |
| 42785 | \$860 |
| 42788 | \$860 |
| 42791 | \$860 |
| 42794 | \$160 |
| 42801 | \$2,880 |
| 42802 | \$1,440 |
| 42805 | \$1,605 |
| 42806 | \$860 |
| 42807 | \$995 |
| 42808 | \$995 |
| 42809 | \$1,180 |
| 42810 | \$1,550 |
| 42811 | \$1,235 |
| 42812 | \$485 |
| 42815 | \$1,570 |
| 42818 | \$1,445 |
| 42821 | \$245 |
| 42824 | \$184 |
| 42833 | \$1,710 |
| 42836 | \$2,015 |
| 42839 | \$1,970 |
| 42842 | \$2,410 |
| 42845 | \$505 |
| 42848 | \$1,970 |
| 42851 | \$1,970 |
| 42854 | \$985 |
| 42857 | \$1,090 |
| 42860 | \$2,335 |
| 42863 | \$2,210 |
| 42866 | \$1,965 |
| 42869 | \$1,375 |
| 42872 | \$665 |
| 43021 | \$1,830 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 43022 | \$2,005 |
| 43023 | \$500 |
| 43521 | \$1,195 |
| 43527 | \$920 |
| 43530 | \$920 |
| 43533 | \$1,550 |
| 43801 | \$2,510 |
| 43804 | \$2,675 |
| 43807 | \$2,915 |
| 43810 | \$3,400 |
| 43813 | \$3,400 |
| 43816 | \$3,160 |
| 43819 | \$2,550 |
| 43822 | \$2,550 |
| 43825 | \$2,915 |
| 43828 | \$3,220 |
| 43831 | \$2,510 |
| 43834 | \$2,915 |
| 43837 | \$3,645 |
| 43840 | \$3,160 |
| 43843 | \$4,860 |
| 43846 | \$5,225 |
| 43849 | \$1,335 |
| 43852 | \$4,250 |
| 43855 | \$4,495 |
| 43858 | \$1,580 |
| 43861 | \$4,375 |
| 43864 | \$3,280 |
| 43867 | \$1,820 |
| 43870 | \$2,550 |
| 43873 | \$3,400 |
| 43876 | \$2,915 |
| 43879 | \$3,400 |
| 43882 | \$4,375 |
| 43900 | \$2,880 |
| 43903 | \$4,800 |
| 43906 | \$4,200 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 43909 | \$4,200 |
| 43912 | \$3,965 |
| 43915 | \$3,000 |
| 43930 | \$1,285 |
| 43933 | \$1,360 |
| 43936 | \$2,535 |
| 43939 | \$1,930 |
| 43942 | \$605 |
| 43945 | \$2,535 |
| 43948 | \$360 |
| 43951 | \$2,270 |
| 43954 | \$2,775 |
| 43957 | \$3,020 |
| 43960 | \$1,060 |
| 43963 | \$4,225 |
| 43966 | \$4,830 |
| 43969 | \$6,640 |
| 43972 | \$4,830 |
| 43975 | \$5,675 |
| 43978 | \$4,830 |
| 43981 | \$1,330 |
| 43984 | \$3,380 |
| 43987 | \$3,745 |
| 43990 | \$4,590 |
| 43993 | \$4,950 |
| 43996 | \$5,555 |
| 43999 | \$695 |
| 44102 | \$670 |
| 44105 | \$118 |
| 44130 | \$1,205 |
| 44133 | \$960 |
| 44136 | \$440 |
| 44325 | \$790 |
| 44328 | \$920 |
| 44331 | \$1,550 |
| 44334 | \$3,090 |
| 44338 | \$420 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 44342 | \$630 | 45202 | \$1,250 |
| 44346 | \$840 | 45203 | \$1,270 |
| 44350 | \$1,050 | 45206 | \$1,205 |
| 44354 | \$1,260 | 45207 | \$1,200 |
| 44358 | \$630 | 45209 | \$1,615 |
| 44359 | \$860 | 45212 | \$800 |
| 44361 | \$1,135 | 45215 | \$3,505 |
| 44364 | \$790 | 45218 | \$1,570 |
| 44367 | \$1,355 | 45221 | \$875 |
| 44370 | \$1,905 | 45224 | \$395 |
| 44373 | \$3,875 | 45227 | \$1,540 |
| 44376 | * derived | 45230 | \$845 |
| 45000 | \$1,700 | 45233 | \$1,695 |
| 45003 | \$1,885 | 45236 | \$1,285 |
| 45006 | \$3,255 | 45239 | \$785 |
| 45009 | \$1,030 | 45240 | \$790 |
| 45012 | \$1,740 | 45400 | \$635 |
| 45015 | \$945 | 45403 | \$1,270 |
| 45018 | \$1,615 | 45406 | \$1,415 |
| 45019 | \$1,205 | 45409 | \$2,065 |
| 45021 | \$485 | 45412 | \$3,155 |
| 45024 | \$1,210 | 45415 | \$3,785 |
| 45025 | \$485 | 45418 | \$4,475 |
| 45026 | \$1,085 | 45439 | \$845 |
| 45027 | \$375 | 45442 | \$1,810 |
| 45030 | \$365 | 45445 | \$1,770 |
| 45033 | \$755 | 45448 | \$1,180 |
| 45035 | \$2,120 | 45451 | \$1,420 |
| 45036 | \$3,540 | 45460 | \$4,305 |
| 45039 | \$755 | 45461 | \$3,070 |
| 45042 | \$965 | 45462 | \$2,215 |
| 45045 | \$965 | 45464 | \$6,570 |
| 45048 | \$2,340 | 45465 | \$4,680 |
| 45051 | \$1,440 | 45466 | \$3,375 |
| 45054 | \$655 | 45468 | \$6,570 |
| 45200 | \$845 | 45469 | \$4,375 |
| 45201 | \$1,250 | 45471 | \$8,255 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 45472 | \$6,230 |
| 45474 | \$9,940 |
| 45475 | \$7,500 |
| 45477 | \$12,105 |
| 45478 | \$9,130 |
| 45480 | \$13,860 |
| 45481 | \$10,455 |
| 45483 | \$15,790 |
| 45484 | \$11,915 |
| 45485 | \$2,615 |
| 45486 | \$1,890 |
| 45487 | \$1,240 |
| 45488 | \$1,720 |
| 45489 | \$2,580 |
| 45490 | \$3,440 |
| 45491 | \$5,160 |
| 45492 | \$6,195 |
| 45493 | \$1,240 |
| 45494 | \$8,175 |
| 45496 | \$1,240 |
| 45497 | \$970 |
| 45498 | \$780 |
| 45499 | \$580 |
| 45500 | \$3,190 |
| 45501 | \$5,120 |
| 45502 | \$5,125 |
| 45503 | \$5,410 |
| 45504 | \$5,120 |
| 45505 | \$5,120 |
| 45506 | \$635 |
| 45512 | \$860 |
| 45515 | \$590 |
| 45518 | \$710 |
| 45519 | \$1,340 |
| 45520 | \$2,820 |
| 45522 | \$1,975 |
| 45524 | \$2,055 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 45527 | \$2,060 |
| 45528 | \$3,090 |
| 45530 | \$3,040 |
| 45533 | \$3,445 |
| 45536 | \$1,270 |
| 45539 | \$2,960 |
| 45542 | \$1,695 |
| 45545 | \$1,975 |
| 45546 | \$625 |
| 45548 | \$875 |
| 45551 | \$1,390 |
| 45553 | \$1,845 |
| 45554 | \$2,195 |
| 45556 | \$2,395 |
| 45558 | \$3,595 |
| 45560 | \$1,420 |
| 45561 | \$5,245 |
| 45562 | \$3,430 |
| 45563 | \$3,430 |
| 45564 | \$7,960 |
| 45565 | \$5,970 |
| 45566 | \$2,960 |
| 45568 | \$1,390 |
| 45569 | \$1,835 |
| 45570 | \$2,425 |
| 45572 | \$920 |
| 45575 | \$2,190 |
| 45578 | \$2,555 |
| 45581 | \$875 |
| 45584 | \$1,980 |
| 45587 | \$2,390 |
| 45588 | \$3,575 |
| 45590 | \$1,300 |
| 45593 | \$1,525 |
| 45596 | \$2,510 |
| 45597 | \$3,405 |
| 45599 | \$1,980 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 45602 | \$2,050 |
| 45605 | \$1,695 |
| 45608 | \$2,265 |
| 45611 | \$1,615 |
| 45614 | \$1,630 |
| 45617 | \$635 |
| 45620 | \$875 |
| 45623 | \$2,340 |
| 45624 | \$2,830 |
| 45625 | \$790 |
| 45626 | \$875 |
| 45627 | \$875 |
| 45629 | \$1,420 |
| 45632 | \$1,555 |
| 45635 | \$1,845 |
| 45641 | \$3,265 |
| 45644 | \$3,825 |
| 45645 | \$645 |
| 45646 | \$2,590 |
| 45647 | \$3,825 |
| 45650 | \$425 |
| 45652 | \$955 |
| 45653 | \$955 |
| 45656 | \$2,055 |
| 45658 | \$1,465 |
| 45659 | \$1,465 |
| 45660 | \$8,390 |
| 45661 | \$3,730 |
| 45662 | \$2,130 |
| 45665 | \$1,000 |
| 45668 | \$995 |
| 45669 | \$995 |
| 45671 | \$2,915 |
| 45674 | \$875 |
| 45675 | \$1,390 |
| 45676 | \$1,655 |
| 45677 | \$1,740 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 45680 | \$1,985 | 45785 | \$4,535 |
| 45683 | \$2,340 | 45788 | \$4,475 |
| 45686 | \$2,600 | 45791 | \$2,435 |
| 45689 | \$765 | 45794 | \$1,580 |
| 45692 | \$725 | 45797 | \$590 |
| 45695 | \$1,375 | 45799 | \$92 |
| 45698 | \$1,345 | 45801 | \$395 |
| 45701 | \$3,085 | 45803 | \$1,015 |
| 45704 | \$880 | 45805 | \$540 |
| 45707 | \$2,115 | 45807 | \$770 |
| 45710 | \$1,270 | 45809 | \$1,160 |
| 45713 | \$1,600 | 45811 | \$1,565 |
| 45714 | \$2,250 | 45813 | \$1,830 |
| 45716 | \$2,265 | 45815 | \$1,022 |
| 45720 | \$2,630 | 45817 | \$1,195 |
| 45723 | \$3,195 | 45819 | \$1,685 |
| 45726 | \$3,355 | 45821 | \$1,250 |
| 45729 | \$4,055 | 45823 | \$340 |
| 45731 | \$3,795 | 45825 | \$1,055 |
| 45732 | \$4,630 | 45827 | \$1,010 |
| 45735 | \$4,385 | 45829 | \$770 |
| 45738 | \$5,315 | 45831 | \$1,010 |
| 45741 | \$4,805 | 45833 | \$1,265 |
| 45744 | \$5,845 | 45835 | \$1,570 |
| 45747 | \$5,260 | 45837 | \$1,830 |
| 45752 | \$6,350 | 45839 | \$1,830 |
| 45753 | \$6,295 | 45841 | \$1,475 |
| 45754 | \$7,545 | 45843 | \$905 |
| 45755 | \$1,220 | 45845 | \$1,580 |
| 45758 | \$2,145 | 45847 | \$535 |
| 45761 | \$2,025 | 45849 | \$1,810 |
| 45767 | \$6,845 | 45851 | \$445 |
| 45770 | \$5,215 | 45853 | \$2,556 |
| 45773 | \$4,760 | 45855 | \$1,275 |
| 45776 | \$4,760 | 45857 | \$2,040 |
| 45779 | \$3,505 | 45859 | \$1,060 |
| 45782 | \$2,675 | 45861 | \$2,720 |

* See Appendix A for derived fee descriptions


# WorkCover 

QUEENSLAND

| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 45863 | \$3,015 | 46330 | \$1,160 | 46420 | \$700 |
| 45865 | \$905 | 46333 | \$1,890 | 46423 | \$1,120 |
| 45867 | \$995 | 46335 | \$1,550 | 46426 | \$1,130 |
| 45869 | \$3,705 | 46336 | \$880 | 46432 | \$1,785 |
| 45871 | \$4,175 | 46339 | \$1,550 | 46434 | \$1,585 |
| 45873 | \$4,690 | 46340 | \$1,315 | 46438 | \$455 |
| 45875 | \$1,510 | 46341 | \$820 | 46441 | \$1,120 |
| 45877 | \$1,510 | 46342 | \$1,550 | 46442 | \$940 |
| 45879 | \$995 | 46345 | \$1,890 | 46444 | \$1,620 |
| 45882 | \$108 | 46348 | \$840 | 46450 | \$700 |
| 45885 | \$1,070 | 46351 | \$1,260 | 46453 | \$1,260 |
| 45888 | \$795 | 46354 | \$1,685 | 46456 | \$335 |
| 45891 | \$1,885 | 46357 | \$2,105 | 46464 | \$755 |
| 45894 | \$635 | 46360 | \$2,525 | 46465 | \$750 |
| 45897 | \$3,525 | 46363 | \$705 | 46468 | \$1,300 |
| 45900 | \$755 | 46364 | \$1,550 | 46471 | \$1,890 |
| 45939 | \$1,070 | 46365 | \$880 | 46474 | \$2,445 |
| 45945 | \$300 | 46367 | \$1,350 | 46477 | \$2,995 |
| 45975 | \$415 | 46370 | \$430 | 46480 | \$1,255 |
| 45978 | \$505 | 46372 | \$1,425 | 46483 | \$995 |
| 45981 | \$275 | 46375 | \$1,695 | 46486 | \$750 |
| 45984 | \$1,975 | 46378 | \$2,250 | 46489 | \$885 |
| 45987 | \$1,975 | 46379 | \$2,840 | 46492 | \$1,210 |
| 45990 | \$2,700 | 46380 | \$3,580 | 46493 | \$945 |
| 45993 | \$2,700 | 46381 | \$995 | 46495 | \$675 |
| 45996 | \$765 | 46384 | \$995 | 46498 | \$735 |
| 46300 | \$1,345 | 46387 | \$2,050 | 46500 | \$880 |
| 46303 | \$1,725 | 46390 | \$2,765 | 46501 | \$1,100 |
| 46308 | \$1,780 | 46393 | \$3,195 | 46502 | \$1,320 |
| 46309 | \$1,760 | 46394 | \$3,970 | 46503 | \$1,265 |
| 46312 | \$2,185 | 46395 | \$4,950 | 46504 | \$3,675 |
| 46315 | \$2,915 | 46399 | \$1,730 | 46507 | \$5,020 |
| 46318 | \$3,645 | 46401 | \$2,050 | 46510 | \$1,175 |
| 46321 | \$4,375 | 46408 | \$2,315 | 46513 | \$190 |
| 46322 | \$2,640 | 46411 | \$1,400 | 46519 | \$475 |
| 46324 | \$3,110 | 46414 | \$1,760 | 46522 | \$1,410 |
| 46325 | \$3,110 | 46417 | \$1,685 | 46525 | \$190 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 46528 | \$565 | 47357 | \$1,210 |
| 46531 | \$285 | 47361 | \$425 |
| 46534 | \$790 | 47362 | \$635 |
| 47000 | \$152 | 47364 | \$900 |
| 47003 | \$180 | 47367 | \$720 |
| 47007 | \$1,135 | 47370 | \$1,300 |
| 47009 | \$360 | 47373 | \$930 |
| 47012 | \$720 | 47381 | \$820 |
| 47015 | \$180 | 47384 | \$1,095 |
| 47018 | \$425 | 47385 | \$930 |
| 47021 | \$565 | 47386 | \$1,515 |
| 47024 | \$420 | 47387 | \$875 |
| 47027 | \$2,085 | 47390 | \$1,305 |
| 47030 | \$425 | 47393 | \$1,745 |
| 47033 | \$2,085 | 47396 | \$605 |
| 47042 | \$240 | 47399 | \$1,210 |
| 47045 | \$900 | 47402 | \$905 |
| 47047 | \$695 | 47405 | \$605 |
| 47049 | \$1,242 | 47408 | \$1,210 |
| 47052 | \$1,211 | 47411 | \$365 |
| 47053 | \$1,615 | 47414 | \$725 |
| 47054 | \$695 | 47417 | \$850 |
| 47057 | \$270 | 47420 | \$1,655 |
| 47060 | \$365 | 47423 | \$695 |
| 47063 | \$545 | 47426 | \$1,050 |
| 47066 | \$725 | 47429 | \$1,395 |
| 47069 | \$152 | 47432 | \$1,745 |
| 47301 | \$280 | 47435 | \$1,325 |
| 47304 | \$315 | 47438 | \$2,120 |
| 47307 | \$640 | 47441 | \$2,630 |
| 47310 | \$1,055 | 47444 | \$725 |
| 47313 | \$1,025 | 47447 | \$1,095 |
| 47316 | \$2,035 | 47450 | \$1,445 |
| 47319 | \$2,090 | 47451 | \$1,750 |
| 47348 | \$300 | 47453 | \$845 |
| 47351 | \$755 | 47456 | \$1,255 |
| 47354 | \$540 | 47459 | \$1,700 |

* See Appendix A for derived fee descriptions


# WorkCover 

QUEENSLAND

| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 47462 | \$365 | 47573 | \$2,190 | 47780 | \$1,815 |
| 47465 | \$1,655 | 47579 | \$515 | 47783 | \$1,815 |
| 47466 | \$360 | 47582 | \$1,375 | 47786 | \$2,305 |
| 47467 | \$725 | 47585 | \$1,420 | 47789 | \$2,305 |
| 47468 | \$1,395 | 47588 | \$4,230 | 47900 | \$575 |
| 47471 | \$138 | 47591 | \$5,140 | 47903 | \$800 |
| 47474 | \$605 | 47592 | \$1,055 | 47904 | \$192 |
| 47477 | \$755 | 47593 | \$2,580 | 47906 | \$385 |
| 47480 | \$1,510 | 47595 | \$520 | 47915 | \$580 |
| 47483 | \$1,815 | 47597 | \$1,050 | 47916 | \$290 |
| 47486 | \$3,025 | 47600 | \$1,815 | 47918 | \$800 |
| 47489 | \$4,535 | 47603 | \$2,285 | 47921 | \$385 |
| 47491 | \$4,985 | 47612 | \$1,305 | 47924 | \$128 |
| 47495 | \$1,510 | 47615 | \$1,515 | 47927 | \$480 |
| 47498 | \$2,260 | 47618 | \$1,885 | 47929 | \$1,290 |
| 47501 | \$3,025 | 47621 | \$1,305 | 47953 | \$1,480 |
| 47511 | \$4,535 | 47624 | \$1,815 | 47954 | \$1,285 |
| 47514 | \$2,640 | 47630 | \$1,095 | 47955 | \$1,975 |
| 47516 | \$1,390 | 47637 | \$625 | 47956 | \$2,990 |
| 47519 | \$2,780 | 47639 | \$725 | 47960 | \$445 |
| 47528 | \$2,420 | 47648 | \$955 | 47964 | \$735 |
| 47531 | \$3,085 | 47657 | \$1,515 | 47967 | \$1,480 |
| 47534 | \$3,475 | 47663 | \$450 | 47975 | \$1,250 |
| 47537 | \$1,390 | 47666 | \$755 | 47978 | \$760 |
| 47540 | \$695 | 47672 | \$365 | 47981 | \$510 |
| 47543 | \$725 | 47678 | \$540 | 47982 | \$1,220 |
| 47546 | \$1,095 | 47735 | \$730 | 47983 | \$2,780 |
| 47549 | \$1,735 | 47738 | \$1,090 | 47984 | \$2,780 |
| 47552 | \$1,210 | 47741 | \$1,490 | 48245 | \$1,015 |
| 47555 | \$1,815 | 47753 | \$1,305 | 48248 | \$1,570 |
| 47558 | \$3,240 | 47756 | \$1,305 | 48251 | \$1,290 |
| 47559 | \$2,465 | 47762 | \$765 | 48254 | \$2,930 |
| 47561 | \$875 | 47765 | \$1,255 | 48257 | \$1,290 |
| 47565 | \$2,285 | 47768 | \$1,535 | 48400 | \$1,060 |
| 47566 | \$2,910 | 47771 | \$1,770 | 48403 | \$1,660 |
| 47568 | \$1,305 | 47774 | \$1,395 | 48406 | \$1,060 |
| 47570 | \$1,745 | 47777 | \$1,395 | 48409 | \$1,660 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 48412 | \$2,025 | 49100 | \$1,060 |
| 48415 | \$2,570 | 49104 | \$1,715 |
| 48419 | \$2,025 | 49105 | \$2,515 |
| 48420 | \$2,570 | 49106 | \$3,025 |
| 48421 | \$2,980 | 49109 | \$2,265 |
| 48422 | \$2,930 | 49112 | \$2,265 |
| 48423 | \$2,420 | 49115 | \$3,625 |
| 48424 | \$2,420 | 49116 | \$4,780 |
| 48426 | \$2,930 | 49117 | \$5,740 |
| 48427 | \$2,930 | 49118 | \$875 |
| 48430 | \$880 | 49121 | \$1,965 |
| 48433 | \$3,460 | 49124 | \$1,066 |
| 48435 | \$1,815 | 49200 | \$2,630 |
| 48507 | \$1,185 | 49203 | \$2,510 |
| 48509 | \$1,060 | 49206 | \$1,815 |
| 48512 | \$2,870 | 49209 | \$2,420 |
| 48900 | \$905 | 49210 | \$3,190 |
| 48903 | \$1,815 | 49212 | \$755 |
| 48906 | \$1,815 | 49213 | \$2,820 |
| 48909 | \$2,420 | 49215 | \$2,085 |
| 48915 | \$2,420 | 49218 | \$875 |
| 48918 | \$4,835 | 49219 | \$875 |
| 48921 | \$4,985 | 49220 | \$1,955 |
| 48924 | \$5,745 | 49221 | \$1,965 |
| 48927 | \$1,180 | 49224 | \$2,265 |
| 48939 | \$3,475 | 49227 | \$2,265 |
| 48942 | \$4,535 | 49230 | \$3,110 |
| 48945 | \$875 | 49233 | \$1,255 |
| 48948 | \$1,965 | 49236 | \$1,875 |
| 48951 | \$2,870 | 49239 | \$935 |
| 48954 | \$3,025 | 49300 | \$1,660 |
| 48958 | \$3,475 | 49303 | \$1,755 |
| 48960 | \$3,025 | 49306 | \$3,475 |
| 48972 | \$1,480 | 49309 | \$2,420 |
| 48980 | \$2,570 | 49315 | \$2,720 |
| 48983 | \$1,885 | 49318 | \$4,230 |
| 48986 | \$2,570 | 49319 | \$7,395 |

* See Appendix A for derived fee descriptions


# WorkCover 

QUEENSLAND

| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 49321 | \$5,140 | 49544 | \$4,925 | 49761 | \$1,660 | 49798 | \$3,185 | 50206 | \$1,965 |
| 49360 | \$1,105 | 49548 | \$3,070 | 49762 | \$1,845 | 49800 | \$425 | 50209 | \$2,420 |
| 49363 | \$1,330 | 49551 | \$4,290 | 49763 | \$2,025 | 49803 | \$545 | 50212 | \$4,385 |
| 49366 | \$1,965 | 49554 | \$6,045 | 49764 | \$2,210 | 49806 | \$425 | 50215 | \$5,745 |
| 49372 | \$2,960 | 49564 | \$2,980 | 49765 | \$2,390 | 49809 | \$695 | 50218 | \$7,465 |
| 49374 | \$5,500 | 49565 | \$4,275 | 49766 | \$2,575 | 49812 | \$1,390 | 50221 | \$6,650 |
| 49376 | \$6,770 | 49569 | \$2,425 | 49767 | \$2,755 | 49814 | \$3,185 | 50224 | \$7,860 |
| 49378 | \$5,925 | 49570 | \$875 | 49768 | \$2,940 | 49815 | \$4,400 | 50233 | \$6,045 |
| 49380 | \$7,195 | 49572 | \$2,390 | 49769 | \$3,345 | 49818 | \$875 | 50236 | \$4,535 |
| 49382 | \$9,310 | 49574 | \$2,390 | 49770 | \$4,860 | 49821 | \$1,390 | 50239 | \$3,025 |
| 49384 | \$11,000 | 49576 | \$2,390 | 49771 | \$1,066 | 49824 | \$2,435 | 50242 | \$2,720 |
| 49386 | \$7,615 | 49578 | \$2,390 | 49772 | \$941 | 49827 | \$1,510 | 50245 | \$8,155 |
| 49388 | \$8,885 | 49580 | \$2,390 | 49773 | \$1,305 | 49830 | \$2,645 | 50300 | \$3,505 |
| 49390 | \$10,580 | 49582 | \$2,820 | 49774 | \$920 | 49833 | \$1,660 | 50303 | \$4,790 |
| 49392 | \$14,810 | 49584 | \$2,820 | 49775 | \$1,245 | 49836 | \$2,870 | 50306 | \$7,475 |
| 49394 | \$12,695 | 49586 | \$2,820 | 49776 | \$3,775 | 49837 | \$2,100 | 50309 | \$925 |
| 49396 | \$8,465 | 49590 | \$1,066 | 49777 | \$2,235 | 49838 | \$3,615 | 50310 | \$100 |
| 49398 | \$6,345 | 49703 | \$1,965 | 49778 | \$3,350 | 49839 | \$1,660 | 50312 | \$2,735 |
| 49500 | \$1,210 | 49706 | \$1,060 | 49779 | \$3,910 | 49845 | \$2,080 | 50321 | \$2,815 |
| 49503 | \$1,575 | 49709 | \$2,265 | 49780 | \$4,470 | 49851 | \$1,390 | 50324 | \$4,180 |
| 49506 | \$2,385 | 49712 | \$3,025 | 49781 | \$3,350 | 49854 | \$1,210 | 50330 | \$695 |
| 49509 | \$2,420 | 49715 | \$4,230 | 49782 | \$1,815 | 49857 | \$1,120 | 50333 | \$1,870 |
| 49512 | \$4,230 | 49716 | \$4,780 | 49783 | \$2,455 | 49860 | \$1,055 | 50335 | \$1,870 |
| 49515 | \$2,720 | 49717 | \$5,740 | 49784 | \$2,805 | 49866 | \$965 | 50336 | \$2,795 |
| 49516 | \$6,795 | 49718 | \$1,210 | 49785 | \$3,155 | 49878 | \$182 | 50339 | \$1,805 |
| 49517 | \$3,880 | 49724 | \$2,115 | 49786 | \$3,510 | 49881 | \$631 | 50345 | \$1,050 |
| 49518 | \$4,230 | 49727 | \$905 | 49787 | \$3,860 | 49884 | \$1,066 | 50348 | \$695 |
| 49519 | \$7,395 | 49728 | \$1,720 | 49788 | \$4,210 | 49887 | \$852 | 50351 | \$4,845 |
| 49521 | \$5,140 | 49730 | \$1,955 | 49789 | \$3,590 | 49890 | \$1,439 | 50352 | \$182 |
| 49524 | \$6,045 | 49732 | \$1,955 | 49790 | \$3,115 | 50107 | \$1,510 | 50354 | \$3,970 |
| 49525 | \$5,140 | 49734 | \$1,060 | 49791 | \$1,415 | 50112 | \$1,150 | 50357 | \$1,700 |
| 49527 | \$5,040 | 49736 | \$1,995 | 49792 | \$1,590 | 50115 | \$450 | 50360 | \$1,975 |
| 49530 | \$6,345 | 49738 | \$1,510 | 49793 | \$1,860 | 50118 | \$2,515 | 50369 | \$1,975 |
| 49533 | \$8,235 | 49740 | \$4,051 | 49794 | \$2,125 | 50130 | \$995 | 50372 | \$3,465 |
| 49534 | \$2,340 | 49742 | \$4,910 | 49795 | \$2,390 | 50200 | \$605 | 50375 | \$1,510 |
| 49536 | \$3,025 | 49744 | \$7,365 | 49796 | \$2,655 | 50201 | \$1,535 | 50378 | \$2,645 |
| 49542 | \$4,230 | 49760 | \$1,145 | 49797 | \$2,920 | 50203 | \$1,330 | 50381 | \$1,975 |

* See Appendix A for derived fee descriptions


# WorkCover 

QUEENSLAND

| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 50384 | \$3,465 | 50560 | \$1,740 | 51031 | \$3,025 |
| 50390 | \$695 | 50564 | \$2,320 | 51032 | \$3,625 |
| 50393 | \$2,560 | 50568 | \$2,030 | 51033 | \$4,235 |
| 50394 | \$8,415 | 50572 | \$2,705 | 51034 | \$4,535 |
| 50395 | \$2,960 | 50576 | \$2,220 | 51035 | \$4,835 |
| 50396 | \$1,405 | 50580 | \$2,320 | 51036 | \$5,140 |
| 50399 | \$2,795 | 50584 | \$2,220 | 51041 | \$3,475 |
| 50411 | \$3,970 | 50588 | \$2,900 | 51042 | \$4,865 |
| 50414 | \$5,355 | 50592 | \$3,085 | 51043 | \$6,090 |
| 50417 | \$3,970 | 50596 | \$965 | 51044 | \$6,605 |
| 50420 | \$3,275 | 50600 | \$1,605 | 51045 | \$6,955 |
| 50423 | \$3,025 | 50604 | \$6,815 | 51051 | \$7,800 |
| 50426 | \$1,405 | 50608 | \$12,655 | 51052 | \$9,490 |
| 50428 | \$2,820 | 50612 | \$18,005 | 51053 | \$10,795 |
| 50450 | \$3,735 | 50616 | \$2,290 | 51054 | \$5,760 |
| 50451 | \$3,735 | 50620 | \$12,655 | 51055 | \$8,635 |
| 50455 | \$4,225 | 50624 | \$12,655 | 51056 | \$10,075 |
| 50456 | \$4,225 | 50628 | \$15,635 | 51057 | \$6,650 |
| 50460 | \$6,310 | 50632 | \$13,145 | 51058 | \$7,485 |
| 50461 | \$6,310 | 50636 | \$14,605 | 51059 | \$9,145 |
| 50465 | \$8,890 | 50640 | \$8,075 | 51061 | \$8,680 |
| 50466 | \$8,890 | 50644 | \$7,790 | 51062 | \$11,275 |
| 50470 | \$11,275 | 50654 | \$1,820 | 51063 | \$13,665 |
| 50471 | \$11,275 | 50950 | \$2,385 | 51064 | \$15,785 |
| 50475 | \$13,010 | 50952 | \$2,385 | 51065 | \$17,040 |
| 50476 | \$13,010 | 51011 | \$6,155 | 51066 | \$17,755 |
| 50508 | \$1,450 | 51012 | \$7,120 | 51071 | \$6,925 |
| 50512 | \$1,930 | 51013 | \$8,900 | 51072 | \$7,205 |
| 50524 | \$1,570 | 51014 | \$10,680 | 51073 | \$9,145 |
| 50528 | \$2,415 | 51015 | \$12,460 | 51102 | \$3,350 |
| 50532 | \$2,100 | 51020 | \$2,025 | 51103 | \$6,850 |
| 50536 | \$2,800 | 51021 | \$3,685 | 51110 | \$2,420 |
| 50540 | \$1,930 | 51022 | \$4,590 | 51111 | \$1,030 |
| 50544 | \$965 | 51023 | \$5,465 | 51112 | \$695 |
| 50548 | \$1,930 | 51024 | \$6,560 | 51113 | \$770 |
| 50552 | \$1,665 | 51025 | \$7,342 | 51114 | \$1,360 |
| 50556 | \$2,220 | 51026 | \$8,230 | 51115 | \$1,360 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 51120 | \$755 | 52030 | \$240 |
| 51130 | \$5,920 | 52033 | \$540 |
| 51131 | \$5,920 | 52034 | \$108 |
| 51140 | \$1,420 | 52035 | \$1,390 |
| 51141 | \$2,630 | 52036 | \$395 |
| 51145 | \$940 | 52039 | \$1,015 |
| 51150 | \$1,140 | 52042 | \$540 |
| 51160 | \$3,255 | 52045 | \$770 |
| 51165 | \$4,105 | 52048 | \$1,160 |
| 51170 | \$7,200 | 52051 | \$1,565 |
| 51171 | \$3,025 | 52054 | \$1,830 |
| 51300 | \$260 | 52055 | \$67 |
| 51303 | * derived | 52056 | \$67 |
| 51309 | * derived | 52057 | \$435 |
| 51312 | * derived | 52058 | \$700 |
| 51315 | \$781 | 52059 | \$785 |
| 51318 | \$516 | 52060 | \$440 |
| 51700 | \$188 | 52061 | \$650 |
| 51703 | \$100 | 52062 | \$870 |
| 51800 | \$260 | 52063 | \$940 |
| 51803 | * derived | 52064 | \$575 |
| 51900 | \$940 | 52066 | \$1,015 |
| 51902 | \$198 | 52069 | \$575 |
| 51904 | \$1,195 | 52072 | \$174 |
| 51906 | \$1,790 | 52073 | \$440 |
| 52000 | \$215 | 52075 | \$435 |
| 52003 | \$320 | 52078 | \$870 |
| 52006 | \$320 | 52081 | \$134 |
| 52009 | \$550 | 52084 | \$340 |
| 52010 | \$745 | 52087 | \$575 |
| 52012 | \$64 | 52090 | \$955 |
| 52015 | \$290 | 52092 | \$1,195 |
| 52018 | \$805 | 52094 | \$1,574 |
| 52021 | \$92 | 52095 | \$1,250 |
| 52024 | \$200 | 52096 | \$385 |
| 52025 | \$550 | 52097 | \$530 |
| 52027 | \$510 | 52098 | \$400 |

* See Appendix A for derived fee descriptions


# WorkCover 

QUEENSLAND

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 52099 | \$128 |
| 52102 | \$480 |
| 52105 | \$875 |
| 52106 | \$340 |
| 52108 | \$1,000 |
| 52111 | \$995 |
| 52114 | \$1,695 |
| 52117 | \$2,050 |
| 52120 | \$2,217 |
| 52122 | \$2,265 |
| 52123 | \$1,980 |
| 52126 | \$2,510 |
| 52129 | \$3,405 |
| 52130 | \$1,395 |
| 52131 | \$1,930 |
| 52132 | \$685 |
| 52133 | \$245 |
| 52135 | \$420 |
| 52138 | \$1,105 |
| 52141 | \$1,070 |
| 52144 | \$795 |
| 52147 | \$1,030 |
| 52148 | \$2,065 |
| 52158 | \$3,205 |
| 52180 | \$605 |
| 52182 | \$1,330 |
| 52184 | \$1,965 |
| 52186 | \$2,420 |
| 52300 | \$845 |
| 52303 | \$1,270 |
| 52306 | \$1,885 |
| 52309 | \$635 |
| 52312 | \$845 |
| 52315 | \$1,420 |
| 52318 | \$445 |
| 52319 | \$740 |
| 52321 | \$1,440 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 52324 | \$1,615 |
| 52327 | \$800 |
| 52330 | \$2,250 |
| 52333 | \$2,115 |
| 52336 | \$1,270 |
| 52337 | \$3,525 |
| 52339 | \$1,600 |
| 52342 | \$2,630 |
| 52345 | \$3,195 |
| 52348 | \$3,355 |
| 52351 | \$4,055 |
| 52354 | \$3,795 |
| 52357 | \$4,630 |
| 52360 | \$4,385 |
| 52363 | \$5,315 |
| 52366 | \$4,805 |
| 52369 | \$5,845 |
| 52372 | \$5,260 |
| 52375 | \$6,350 |
| 52378 | \$2,025 |
| 52379 | \$3,825 |
| 52380 | \$6,295 |
| 52382 | \$7,545 |
| 52420 | \$755 |
| 52424 | \$1,615 |
| 52430 | \$3,190 |
| 52440 | \$1,740 |
| 52442 | \$1,985 |
| 52444 | \$2,340 |
| 52446 | \$2,600 |
| 52450 | \$725 |
| 52452 | \$1,375 |
| 52456 | \$3,085 |
| 52458 | \$880 |
| 52460 | \$2,095 |
| 52480 | \$2,055 |
| 52482 | \$1,390 |


| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 52484 | \$1,655 |
| 52600 | \$1,055 |
| 52603 | \$1,010 |
| 52606 | \$770 |
| 52609 | \$1,010 |
| 52612 | \$1,265 |
| 52615 | \$1,570 |
| 52618 | \$1,830 |
| 52621 | \$1,830 |
| 52624 | \$1,475 |
| 52626 | \$905 |
| 52627 | \$1,580 |
| 52630 | \$590 |
| 52633 | \$1,580 |
| 52636 | \$590 |
| 52800 | \$920 |
| 52803 | \$1,300 |
| 52806 | \$920 |
| 52809 | \$1,570 |
| 52812 | \$2,220 |
| 52815 | \$2,360 |
| 52818 | \$1,570 |
| 52821 | \$3,400 |
| 52824 | \$1,070 |
| 52826 | \$785 |
| 52828 | \$1,045 |
| 52830 | \$1,435 |
| 52832 | \$2,085 |
| 53000 | \$84 |
| 53003 | \$265 |
| 53004 | \$76 |
| 53006 | \$1,380 |
| 53009 | \$725 |
| 53012 | \$310 |
| 53015 | \$1,550 |
| 53016 | \$1,250 |
| 53017 | \$1,605 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 53019 | \$1,810 |
| 53052 | \$329 |
| 53054 | \$325 |
| 53056 | \$210 |
| 53058 | \$350 |
| 53060 | \$345 |
| 53062 | \$265 |
| 53064 | \$437 |
| 53068 | \$340 |
| 53070 | \$465 |
| 53200 | \$152 |
| 53203 | \$300 |
| 53206 | \$445 |
| 53209 | \$4,475 |
| 53212 | \$2,435 |
| 53215 | \$1,275 |
| 53218 | \$2,040 |
| 53220 | \$1,060 |
| 53221 | \$2,720 |
| 53224 | \$3,015 |
| 53225 | \$905 |
| 53226 | \$995 |
| 53227 | \$3,705 |
| 53230 | \$4,175 |
| 53233 | \$4,690 |
| 53236 | \$1,510 |
| 53239 | \$1,510 |
| 53242 | \$995 |
| 53400 | \$415 |
| 53403 | \$505 |
| 53406 | \$1,305 |
| 53409 | \$1,305 |
| 53410 | \$275 |
| 53411 | \$765 |
| 53412 | \$1,255 |
| 53413 | \$1,535 |
| 53414 | \$1,770 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 53415 | \$1,395 |
| 53416 | \$1,395 |
| 53418 | \$1,815 |
| 53419 | \$1,815 |
| 53422 | \$2,305 |
| 53423 | \$2,305 |
| 53424 | \$1,975 |
| 53425 | \$1,975 |
| 53427 | \$2,700 |
| 53429 | \$2,700 |
| 53439 | \$765 |
| 53453 | \$1,300 |
| 53455 | \$1,525 |
| 53458 | \$115 |
| 53459 | \$1,090 |
| 53460 | \$1,490 |
| 53700 | \$334 |
| 53702 | \$168 |
| 53704 | \$101 |
| 53706 | \$334 |
| 54006 | \$229 |
| 54007 | \$115 |
| 54011 | \$229 |
| 54012 | \$115 |
| 55028 | \$224 |
| 55029 | \$78 |
| 55030 | \$224 |
| 55031 | \$78 |
| 55032 | \$224 |
| 55033 | \$78 |
| 55036 | \$228 |
| 55037 | \$78 |
| 55038 | \$224 |
| 55039 | \$78 |
| 55048 | \$224 |
| 55049 | \$78 |
| 55054 | \$224 |

* See Appendix A for derived fee descriptions


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| ITEM <br> NO. | MEDICAL <br> FEE |
| :---: | :---: |
| 55065 | $\$ 201$ |
| 55066 | $\$ 447$ |
| 55068 | $\$ 72$ |
| 55070 | $\$ 201$ |
| 55071 | $\$ 425$ |
| 55073 | $\$ 70$ |
| 55076 | $\$ 224$ |
| 55079 | $\$ 78$ |
| 55084 | $\$ 201$ |
| 55085 | $\$ 70$ |
| 55118 | $\$ 564$ |
| 55126 | $\$ 473$ |
| 55127 | $\$ 473$ |
| 55128 | $\$ 473$ |
| 55129 | $\$ 473$ |
| 55130 | $\$ 348$ |
| 55132 | $\$ 473$ |
| 55133 | $\$ 425$ |
| 55134 | $\$ 473$ |
| 55135 | $\$ 724$ |
| 55137 | $\$ 473$ |
| 55141 | $\$ 842$ |
| 55143 | $\$ 842$ |
| 55145 | $\$ 976$ |
| 55146 | $\$ 976$ |
| 55238 | $\$ 347$ |
| 55244 | $\$ 347$ |
| 55246 | $\$ 347$ |
| 55248 | $\$ 347$ |
| 55252 | $\$ 347$ |
| 55274 | $\$ 347$ |
| 55276 | $\$ 347$ |
| 55278 | $\$ 347$ |
|  | $\$ 347$ |
| 53282 | $\$ 347$ |
|  | $\$ 347$ |


| ITEM <br> NO. | MEDICAL <br> FEE |
| :---: | :---: |
| 55294 | $\$ 347$ |
| 55296 | $\$ 227$ |
| 55600 | $\$ 224$ |
| 55603 | $\$ 224$ |
| 55700 | $\$ 123$ |
| 55703 | $\$ 72$ |
| 55704 | $\$ 143$ |
| 55705 | $\$ 72$ |
| 55706 | $\$ 205$ |
| 55707 | $\$ 143$ |
| 55708 | $\$ 72$ |
| 55709 | $\$ 78$ |
| 55712 | $\$ 236$ |
| 55715 | $\$ 82$ |
| 55718 | $\$ 205$ |
| 55721 | $\$ 236$ |
| 55723 | $\$ 78$ |
| 55725 | $\$ 82$ |
| 55729 | $\$ 56$ |
| 55736 | $\$ 260$ |
| 55739 | $\$ 117$ |
| 55759 | $\$ 307$ |
| 55762 | $\$ 123$ |
| 55764 | $\$ 328$ |
| 55766 | $\$ 133$ |
| 55768 | $\$ 307$ |
| 55770 | $\$ 123$ |
| 55772 | $\$ 328$ |
| 55774 | $\$ 133$ |
| 558542 | $\$ 224$ |
| 55814 | $\$ 78$ |
| 55844 | $\$ 179$ |
| 55846 | $\$ 78$ |
|  | $\$ 78$ |
| 5224 |  |
|  | $\$ 280$ |


| ITEM <br> NO. | MEDICAL <br> FEE |
| :---: | :---: |
| 55857 | $\$ 78$ |
| 55858 | $\$ 248$ |
| 55859 | $\$ 86$ |
| 55860 | $\$ 224$ |
| 55861 | $\$ 78$ |
| 55862 | $\$ 248$ |
| 55863 | $\$ 86$ |
| 55864 | $\$ 224$ |
| 55865 | $\$ 78$ |
| 55866 | $\$ 248$ |
| 55867 | $\$ 86$ |
| 55868 | $\$ 224$ |
| 55869 | $\$ 78$ |
| 55870 | $\$ 248$ |
| 55871 | $\$ 86$ |
| 55872 | $\$ 224$ |
| 55874 | $\$ 248$ |
| 55876 | $\$ 224$ |
| 55877 | $\$ 78$ |
| 55878 | $\$ 248$ |
| 55879 | $\$ 86$ |
| 55880 | $\$ 224$ |
| 55881 | $\$ 78$ |
| 55882 | $\$ 248$ |
| 55883 | $\$ 86$ |
| 55884 | $\$ 224$ |
| 55885 | $\$ 78$ |
| 55886 | $\$ 248$ |
| 55887 | $\$ 86$ |
| 55888 | $\$ 224$ |
| 55889 | $\$ 78$ |
| 55890 | $\$ 248$ |
| 55891 | $\$ 86$ |
| 55892 | $\$ 224$ |
| 55893 | $\$ 78$ |
| 5895 | $\$ 248$ |
|  | $\$ 86$ |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 56001 | \$400 | 56629 | \$451 |
| 56007 | \$512 | 56630 | \$685 |
| 56010 | \$516 | 56801 | \$956 |
| 56013 | \$512 | 56807 | \$1,147 |
| 56016 | \$594 | 57001 | \$956 |
| 56022 | \$461 | 57007 | \$1,163 |
| 56028 | \$690 | 57201 | \$318 |
| 56030 | \$461 | 57341 | \$963 |
| 56036 | \$690 | 57352 | \$1,045 |
| 56101 | \$471 | 57353 | \$1,045 |
| 56107 | \$696 | 57354 | \$1,045 |
| 56219 | \$668 | 57357 | \$1,045 |
| 56220 | \$492 | 57360 | \$1,434 |
| 56221 | \$492 | 57362 | \$232 |
| 56223 | \$492 | 57506 | \$61 |
| 56224 | \$720 | 57509 | \$81 |
| 56225 | \$720 | 57512 | \$83 |
| 56226 | \$720 | 57515 | \$111 |
| 56233 | \$492 | 57518 | \$67 |
| 56234 | \$720 | 57521 | \$89 |
| 56237 | \$492 | 57522 | \$67 |
| 56238 | \$720 | 57523 | \$89 |
| 56301 | \$604 | 57524 | \$101 |
| 56307 | \$819 | 57527 | \$135 |
| 56401 | \$512 | 57541 | \$151 |
| 56407 | \$737 | 57700 | \$83 |
| 56409 | \$512 | 57703 | \$111 |
| 56412 | \$737 | 57706 | \$67 |
| 56501 | \$789 | 57709 | \$89 |
| 56507 | \$984 | 57712 | \$97 |
| 56553 | \$1,065 | 57715 | \$125 |
| 56620 | \$451 | 57721 | \$203 |
| 56622 | \$451 | 57901 | \$132 |
| 56623 | \$685 | 57902 | \$132 |
| 56626 | \$685 | 57905 | \$132 |
| 56627 | \$451 | 57907 | \$97 |
| 56628 | \$685 | 57915 | \$97 |

* See Appendix A for derived fee descriptions


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| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 57918 | \$97 |
| 57921 | \$97 |
| 57924 | \$97 |
| 57927 | \$102 |
| 57930 | \$67 |
| 57933 | \$160 |
| 57939 | \$132 |
| 57942 | \$102 |
| 57945 | \$89 |
| 57960 | \$97 |
| 57963 | \$97 |
| 57966 | \$97 |
| 57969 | \$97 |
| 58100 | \$138 |
| 58103 | \$113 |
| 58106 | \$158 |
| 58108 | \$225 |
| 58109 | \$96 |
| 58112 | \$199 |
| 58115 | \$225 |
| 58120 | \$225 |
| 58121 | \$225 |
| 58300 | \$82 |
| 58306 | \$183 |
| 58500 | \$72 |
| 58503 | \$97 |
| 58506 | \$125 |
| 58509 | \$81 |
| 58521 | \$89 |
| 58524 | \$116 |
| 58527 | \$142 |
| 58700 | \$94 |
| 58706 | \$323 |
| 58715 | \$310 |
| 58718 | \$258 |
| 58721 | \$283 |
| 58900 | \$73 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 58903 | \$98 |
| 58909 | \$184 |
| 58912 | \$226 |
| 58915 | \$162 |
| 58916 | \$284 |
| 58921 | \$277 |
| 58927 | \$157 |
| 58933 | \$421 |
| 58936 | \$401 |
| 58939 | \$285 |
| 59103 | \$44 |
| 59300 | \$183 |
| 59302 | \$414 |
| 59303 | \$111 |
| 59305 | \$234 |
| 59312 | \$178 |
| 59314 | \$108 |
| 59318 | \$96 |
| 59700 | \$198 |
| 59703 | \$156 |
| 59712 | \$233 |
| 59718 | \$276 |
| 59724 | \$464 |
| 59733 | \$221 |
| 59739 | \$151 |
| 59751 | \$285 |
| 59754 | \$449 |
| 59763 | \$274 |
| 59970 | \$345 |
| 60000 | \$1,155 |
| 60003 | \$1,694 |
| 60006 | \$2,409 |
| 60009 | \$2,819 |
| 60012 | \$1,155 |
| 60015 | \$1,694 |
| 60018 | \$2,409 |
| 60021 | \$2,819 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 60024 | \$1,155 |
| 60027 | \$1,694 |
| 60030 | \$2,409 |
| 60033 | \$2,819 |
| 60036 | \$1,155 |
| 60039 | \$1,694 |
| 60042 | \$2,409 |
| 60045 | \$2,819 |
| 60048 | \$1,155 |
| 60051 | \$1,694 |
| 60054 | \$2,409 |
| 60057 | \$2,819 |
| 60060 | \$1,155 |
| 60063 | \$1,694 |
| 60066 | \$2,409 |
| 60069 | \$2,819 |
| 60072 | \$99 |
| 60075 | \$197 |
| 60078 | \$295 |
| 60500 | \$89 |
| 60503 | \$61 |
| 60506 | \$131 |
| 60509 | \$203 |
| 60918 | \$97 |
| 60927 | \$78 |
| 61109 | \$530 |
| 61310 | \$735 |
| 61313 | \$607 |
| 61314 | \$840 |
| 61321 | \$658 |
| 61324 | \$1,306 |
| 61325 | \$658 |
| 61328 | \$455 |
| 61329 | \$1,964 |
| 61340 | \$506 |
| 61345 | \$1,964 |
| 61348 | \$887 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 61349 | \$1,964 |
| 61353 | \$773 |
| 61356 | \$786 |
| 61357 | \$1,306 |
| 61360 | \$807 |
| 61361 | \$923 |
| 61364 | \$994 |
| 61368 | \$446 |
| 61369 | \$4,032 |
| 61372 | \$446 |
| 61373 | \$979 |
| 61376 | \$287 |
| 61381 | \$1,149 |
| 61383 | \$1,250 |
| 61384 | \$1,375 |
| 61386 | \$665 |
| 61387 | \$862 |
| 61389 | \$741 |
| 61390 | \$820 |
| 61393 | \$1,211 |
| 61397 | \$494 |
| 61402 | \$1,210 |
| 61409 | \$1,747 |
| 61413 | \$452 |
| 61421 | \$960 |
| 61425 | \$1,201 |
| 61426 | \$1,110 |
| 61429 | \$1,086 |
| 61430 | \$1,319 |
| 61433 | \$994 |
| 61434 | \$1,231 |
| 61438 | \$1,346 |
| 61441 | \$979 |
| 61442 | \$1,505 |
| 61445 | \$574 |
| 61446 | \$667 |
| 61449 | \$912 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 61450 | \$795 |
| 61453 | \$1,029 |
| 61454 | \$696 |
| 61457 | \$941 |
| 61461 | \$1,056 |
| 61462 | \$258 |
| 61469 | \$696 |
| 61473 | \$351 |
| 61480 | \$774 |
| 61485 | \$1,998 |
| 61495 | \$446 |
| 61499 | \$506 |
| 61505 | \$200 |
| 61523 | \$1,906 |
| 61524 | \$1,906 |
| 61525 | \$1,906 |
| 61529 | \$1,906 |
| 61538 | \$1,802 |
| 61541 | \$1,906 |
| 61553 | \$1,998 |
| 61559 | \$1,836 |
| 61565 | \$1,906 |
| 61571 | \$1,906 |
| 61575 | \$1,906 |
| 61577 | \$1,906 |
| 61598 | \$1,906 |
| 61604 | \$1,906 |
| 61610 | \$1,906 |
| 61620 | \$1,906 |
| 61622 | \$1,906 |
| 61628 | \$1,906 |
| 61632 | \$1,906 |
| 61640 | \$1,998 |
| 61646 | \$1,998 |
| 61647 | \$1,906 |
| 61650 | \$1,757 |
| 63001 | \$404 |

* See Appendix A for derived fee descriptions


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| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE | ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 63004 | \$404 | 63228 | \$448 | 63467 | \$690 |
| 63007 | \$404 | 63231 | \$448 | 63470 | \$404 |
| 63010 | \$336 | 63234 | \$448 | 63473 | \$628 |
| 63040 | \$336 | 63237 | \$448 | 63476 | \$404 |
| 63043 | \$359 | 63240 | \$448 | 63482 | \$404 |
| 63046 | \$404 | 63243 | \$448 | 63487 | \$690 |
| 63049 | \$404 | 63271 | \$493 | 63489 | \$1,440 |
| 63052 | \$404 | 63274 | \$493 | 63491 | \$45 |
| 63055 | \$404 | 63277 | \$493 | 63494 | \$45 |
| 63058 | \$404 | 63280 | \$493 | 63496 | \$250 |
| 63061 | \$404 | 63301 | \$381 | 63497 | \$157 |
| 63064 | \$404 | 63304 | \$381 | 63498 | \$45 |
| 63067 | \$404 | 63307 | \$381 | 63499 | \$157 |
| 63070 | \$404 | 63322 | \$404 | 63501 | \$500 |
| 63073 | \$404 | 63325 | \$404 | 63502 | \$500 |
| 63101 | \$493 | 63328 | \$404 | 63507 | \$403 |
| 63111 | \$493 | 63331 | \$404 | 63510 | \$448 |
| 63114 | \$493 | 63334 | \$336 | 63513 | \$404 |
| 63125 | \$493 | 63337 | \$448 | 63516 | \$404 |
| 63128 | \$493 | 63340 | \$404 | 63519 | \$404 |
| 63131 | \$493 | 63361 | \$404 | 63522 | \$448 |
| 63151 | \$359 | 63385 | \$448 | 63531 | \$690 |
| 63154 | \$359 | 63388 | \$448 | 63533 | \$690 |
| 63161 | \$359 | 63391 | \$403 | 63541 | \$450 |
| 63164 | \$359 | 63395 | \$856 | 63543 | \$450 |
| 63167 | \$359 | 63397 | \$856 | 63545 | \$550 |
| 63170 | \$359 | 63401 | \$404 | 63546 | \$550 |
| 63173 | \$359 | 63404 | \$404 | 63547 | \$690 |
| 63176 | \$359 | 63416 | \$404 | 63551 | \$404 |
| 63179 | \$359 | 63425 | \$404 | 63554 | \$359 |
| 63182 | \$359 | 63428 | \$404 | 63557 | \$493 |
| 63185 | \$359 | 63440 | \$404 | 63560 | \$404 |
| 63201 | \$448 | 63443 | \$404 | 65060 | \$23 |
| 63204 | \$448 | 63446 | \$404 | 65066 | \$30 |
| 63219 | \$448 | 63454 | \$1,200 | 65070 | \$48 |
| 63222 | \$448 | 63461 | \$359 | 65072 | \$29 |
| 63225 | \$448 | 63464 | \$690 | 65075 | \$148 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 65078 | \$255 | 65176 | \$138 |
| 65079 | \$255 | 65177 | \$205 |
| 65081 | \$275 | 65178 | \$270 |
| 65082 | \$275 | 65179 | \$340 |
| 65084 | \$480 | 65180 | \$72 |
| 65087 | \$250 | 65181 | \$66 |
| 65090 | \$32 | 66500 | \$28 |
| 65093 | \$63 | 66503 | \$34 |
| 65096 | \$116 | 66506 | \$39 |
| 65099 | \$320 | 66509 | \$45 |
| 65102 | \$475 | 66512 | \$51 |
| 65105 | \$320 | 66517 | \$56 |
| 65108 | \$475 | 66518 | \$57 |
| 65109 | \$37 | 66519 | \$116 |
| 65110 | \$37 | 66536 | \$33 |
| 65111 | \$66 | 66539 | \$87 |
| 65114 | \$26 | 66542 | \$54 |
| 65117 | \$58 | 66560 | \$58 |
| 65120 | \$40 | 66563 | \$70 |
| 65123 | \$58 | 66566 | \$96 |
| 65126 | \$79 | 66569 | \$122 |
| 65129 | \$102 | 66572 | \$146 |
| 65137 | \$72 | 66575 | \$172 |
| 65142 | \$72 | 66578 | \$198 |
| 65144 | \$162 | 66581 | \$225 |
| 65147 | \$108 | 66584 | \$28 |
| 65150 | \$200 | 66587 | \$136 |
| 65153 | \$405 | 66590 | \$87 |
| 65156 | \$605 | 66593 | \$54 |
| 65157 | \$200 | 66596 | \$99 |
| 65158 | \$200 | 66605 | \$87 |
| 65159 | \$200 | 66606 | \$87 |
| 65162 | \$30 | 66607 | \$215 |
| 65165 | \$98 | 66610 | \$215 |
| 65166 | \$98 | 66623 | \$118 |
| 65171 | \$72 | 66626 | \$69 |
| 65175 | \$72 | 66629 | \$58 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 66632 | \$58 |
| 66635 | \$58 |
| 66638 | \$83 |
| 66639 | \$83 |
| 66641 | \$83 |
| 66642 | \$83 |
| 66644 | \$58 |
| 66647 | \$128 |
| 66650 | \$69 |
| 66651 | \$69 |
| 66652 | \$58 |
| 66653 | \$128 |
| 66655 | \$58 |
| 66656 | \$58 |
| 66659 | \$106 |
| 66660 | \$106 |
| 66662 | \$230 |
| 66663 | \$230 |
| 66665 | \$87 |
| 66666 | \$87 |
| 66667 | \$87 |
| 66671 | \$106 |
| 66674 | \$114 |
| 66677 | \$32 |
| 66680 | \$210 |
| 66683 | \$210 |
| 66686 | \$144 |
| 66695 | \$90 |
| 66696 | \$90 |
| 66697 | \$39 |
| 66698 | \$128 |
| 66701 | \$164 |
| 66704 | \$200 |
| 66707 | \$240 |
| 66711 | \$89 |
| 66712 | \$128 |
| 66714 | \$89 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 66715 | \$39 |
| 66716 | \$89 |
| 66719 | \$116 |
| 66722 | \$126 |
| 66723 | \$126 |
| 66724 | \$44 |
| 66725 | \$164 |
| 66728 | \$200 |
| 66731 | \$240 |
| 66734 | \$275 |
| 66743 | \$58 |
| 66749 | \$94 |
| 66750 | \$110 |
| 66751 | \$158 |
| 66752 | \$70 |
| 66755 | \$110 |
| 66756 | \$290 |
| 66757 | \$290 |
| 66758 | \$70 |
| 66761 | \$38 |
| 66764 | \$26 |
| 66767 | \$51 |
| 66770 | \$76 |
| 66773 | \$70 |
| 66776 | \$70 |
| 66779 | \$114 |
| 66780 | \$114 |
| 66782 | \$38 |
| 66783 | \$38 |
| 66785 | \$114 |
| 66788 | \$188 |
| 66789 | \$114 |
| 66790 | \$73 |
| 66791 | \$210 |
| 66792 | \$210 |
| 66800 | \$52 |
| 66803 | \$87 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 66804 | \$52 |
| 66805 | \$36 |
| 66806 | \$122 |
| 66812 | \$99 |
| 66815 | \$170 |
| 66816 | \$170 |
| 66817 | \$122 |
| 66819 | \$87 |
| 66820 | \$87 |
| 66821 | \$62 |
| 66822 | \$148 |
| 66825 | \$87 |
| 66826 | \$87 |
| 66827 | \$62 |
| 66828 | \$148 |
| 66830 | \$176 |
| 66831 | \$87 |
| 66832 | \$87 |
| 66833 | \$120 |
| 66834 | \$120 |
| 66835 | \$120 |
| 66836 | \$120 |
| 66837 | \$120 |
| 66838 | \$70 |
| 66839 | \$128 |
| 66840 | \$70 |
| 66841 | \$48 |
| 66900 | \$220 |
| 69300 | \$36 |
| 69303 | \$62 |
| 69306 | \$95 |
| 69309 | \$136 |
| 69312 | \$95 |
| 69316 | \$80 |
| 69317 | \$100 |
| 69318 | \$91 |
| 69319 | \$120 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 69321 | \$136 |
| 69324 | \$122 |
| 69325 | \$122 |
| 69327 | \$240 |
| 69328 | \$240 |
| 69330 | \$360 |
| 69331 | \$360 |
| 69333 | \$58 |
| 69336 | \$97 |
| 69339 | \$54 |
| 69345 | \$150 |
| 69354 | \$87 |
| 69357 | \$174 |
| 69360 | \$260 |
| 69363 | \$72 |
| 69378 | \$510 |
| 69379 | \$510 |
| 69380 | \$2,145 |
| 69381 | \$510 |
| 69382 | \$510 |
| 69383 | \$510 |
| 69384 | \$44 |
| 69387 | \$81 |
| 69390 | \$122 |
| 69393 | \$162 |
| 69396 | \$200 |
| 69400 | \$44 |
| 69401 | \$39 |
| 69405 | \$44 |
| 69408 | \$78 |
| 69411 | \$110 |
| 69413 | \$142 |
| 69445 | \$260 |
| 69451 | \$260 |
| 69471 | \$99 |
| 69472 | \$45 |
| 69474 | \$81 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 69475 | \$45 |
| 69478 | \$83 |
| 69479 | \$113 |
| 69480 | \$225 |
| 69481 | \$114 |
| 69482 | \$425 |
| 69483 | \$425 |
| 69484 | \$49 |
| 69488 | \$505 |
| 69489 | \$505 |
| 69491 | \$575 |
| 69492 | \$575 |
| 69494 | \$72 |
| 69495 | \$95 |
| 69496 | \$120 |
| 69497 | \$72 |
| 69498 | \$18 |
| 69499 | \$260 |
| 69500 | \$260 |
| 69501 | \$248 |
| 71057 | \$102 |
| 71058 | \$144 |
| 71059 | \$83 |
| 71060 | \$126 |
| 71062 | \$126 |
| 71064 | \$59 |
| 71066 | \$42 |
| 71068 | \$42 |
| 71069 | \$68 |
| 71071 | \$93 |
| 71072 | \$42 |
| 71073 | \$305 |
| 71074 | \$42 |
| 71075 | \$77 |
| 71076 | \$305 |
| 71077 | \$77 |
| 71079 | \$77 |

* See Appendix A for derived fee descriptions


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| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 71081 | \$116 |
| 71083 | \$58 |
| 71085 | \$83 |
| 71087 | \$108 |
| 71089 | \$83 |
| 71090 | \$83 |
| 71091 | \$150 |
| 71092 | \$67 |
| 71093 | \$220 |
| 71095 | \$116 |
| 71096 | \$116 |
| 71097 | \$73 |
| 71099 | \$76 |
| 71101 | \$50 |
| 71103 | \$148 |
| 71106 | \$32 |
| 71119 | \$50 |
| 71121 | \$59 |
| 71123 | \$69 |
| 71125 | \$79 |
| 71127 | \$505 |
| 71129 | \$620 |
| 71131 | \$740 |
| 71133 | \$30 |
| 71134 | \$300 |
| 71135 | \$595 |
| 71137 | \$86 |
| 71139 | \$295 |
| 71141 | \$565 |
| 71143 | \$740 |
| 71145 | \$1,210 |
| 71146 | \$305 |
| 71147 | \$116 |
| 71148 | \$116 |
| 71149 | \$310 |
| 71151 | \$340 |
| 71153 | \$98 |


| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | MEDICAL FEE |
| :---: | :---: |
| 71154 | \$98 |
| 71155 | \$134 |
| 71156 | \$37 |
| 71157 | \$172 |
| 71159 | \$210 |
| 71163 | \$71 |
| 71164 | \$116 |
| 71165 | \$99 |
| 71166 | \$136 |
| 71167 | \$172 |
| 71168 | \$210 |
| 71169 | \$99 |
| 71170 | \$37 |
| 71180 | \$99 |
| 71183 | \$134 |
| 71186 | \$172 |
| 71189 | \$45 |
| 71192 | \$81 |
| 71195 | \$114 |
| 71198 | \$116 |
| 71200 | \$102 |
| 71203 | \$116 |
| 72813 | \$230 |
| 72814 | \$200 |
| 72816 | \$245 |
| 72817 | \$275 |
| 72818 | \$305 |
| 72823 | \$275 |
| 72824 | \$400 |
| 72825 | \$510 |
| 72826 | \$550 |
| 72827 | \$590 |
| 72828 | \$630 |
| 72830 | \$770 |
| 72836 | \$1,185 |
| 72838 | \$1,330 |
| 72844 | \$87 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 72846 | \$170 |
| 72847 | \$250 |
| 72848 | \$210 |
| 72849 | \$295 |
| 72850 | \$340 |
| 72851 | \$1,515 |
| 72852 | \$2,020 |
| 72855 | \$520 |
| 72856 | \$695 |
| 72857 | \$815 |
| 72860 | \$245 |
| 73043 | \$57 |
| 73045 | \$130 |
| 73047 | \$260 |
| 73049 | \$188 |
| 73051 | \$475 |
| 73059 | \$122 |
| 73060 | \$162 |
| 73061 | \$144 |
| 73062 | \$245 |
| 73063 | \$270 |
| 73064 | \$200 |
| 73065 | \$240 |
| 73066 | \$610 |
| 73067 | \$355 |
| 73070 | \$112 |
| 73287 | \$1,025 |
| 73289 | \$930 |
| 73290 | \$1,025 |
| 73291 | \$600 |
| 73292 | \$1,530 |
| 73293 | \$600 |
| 73294 | \$600 |
| 73301 | \$3,195 |
| 73302 | \$1,065 |
| 73305 | \$575 |
| 73308 | \$99 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 73309 | \$99 | 73806 | \$29 |
| 73311 | \$99 | 73807 | \$20 |
| 73312 | \$99 | 73808 | \$25 |
| 73314 | \$625 | 73809 | \$7 |
| 73315 | \$625 | 73810 | \$20 |
| 73317 | \$99 | 73811 | \$32 |
| 73318 | \$99 | 73828 | \$16 |
| 73320 | \$110 | 73829 | \$10 |
| 73321 | \$110 | 73830 | \$14 |
| 73323 | \$110 | 73831 | \$18 |
| 73324 | \$110 | 73832 | \$10 |
| 73325 | \$200 | 73833 | \$23 |
| 73326 | \$620 | 73834 | \$16 |
| 73327 | \$140 | 73835 | \$19 |
| 73332 | \$860 | 73836 | \$5 |
| 73333 | \$1,600 | 73837 | \$16 |
| 73334 | \$905 | 73899 | \$50 |
| 73335 | \$1,250 | 73900 | \$7 |
| 73336 | \$520 | 73920 | \$7 |
| 73337 | \$894 | 73922 | \$23 |
| 73338 | \$816 | 73923 | \$7 |
| 73339 | \$1,065 | 73924 | \$42 |
| 73340 | \$530 | 73925 | \$7 |
| 73341 | \$900 | 73926 | \$23 |
| 73343 | \$1,327 | 73927 | \$7 |
| 73344 | \$900 | 73928 | \$50 |
| 73351 | \$894 | 73929 | \$7 |
| 73521 | \$28 | 73930 | \$50 |
| 73523 | \$120 | 73931 | \$7 |
| 73525 | \$81 | 73932 | \$31 |
| 73527 | \$29 | 73933 | \$7 |
| 73529 | \$82 | 73934 | \$50 |
| 73801 | \$20 | 73935 | \$7 |
| 73802 | \$13 | 73936 | \$29 |
| 73803 | \$18 | 73937 | \$7 |
| 73804 | \$23 | 73938 | \$29 |
| 73805 | \$13 | 73939 | \$7 |

* See Appendix A for derived fee descriptions


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| ITEM <br> NO. | MEDICAL FEE |
| :---: | :---: |
| 73940 | \$31 |
| 75001 | \$224 |
| 75004 | \$113 |
| 75006 | \$199 |
| 75009 | \$178 |
| 75012 | \$283 |
| 75015 | \$389 |
| 75018 | \$495 |
| 75021 | \$607 |
| 75023 | \$122 |
| 75024 | \$1,570 |
| 75027 | \$2,153 |
| 75030 | \$1,917 |
| 75033 | \$3,143 |
| 75034 | \$1,600 |
| 75036 | \$4,341 |
| 75037 | \$5,467 |
| 75039 | \$1,453 |
| 75042 | \$543 |
| 75045 | \$2,909 |
| 75048 | \$746 |
| 75049 | \$873 |
| 75050 | \$1,685 |
| 75051 | \$2,587 |
| 75150 | \$224 |
| 75153 | \$113 |
| 75156 | \$199 |
| 75200 | \$144 |
| 75203 | \$216 |
| 75206 | \$72 |
| 75400 | \$431 |
| 75403 | \$495 |
| 75406 | \$564 |
| 75409 | \$639 |
| 75412 | \$357 |
| 75415 | \$431 |
| 75600 | \$607 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 75603 | \$714 |
| 75606 | \$714 |
| 75609 | \$1,065 |
| 75612 | \$1,319 |
| 75615 | \$488 |
| 75618 | \$606 |
| 75621 | \$606 |
| 75800 | \$216 |
| 75803 | \$863 |
| 75806 | \$1,012 |
| 75809 | \$1,199 |
| 75812 | \$1,332 |
| 75815 | \$1,625 |
| 75818 | \$1,917 |
| 75821 | \$1,544 |
| 75824 | \$1,784 |
| 75827 | \$2,051 |
| 75830 | \$2,264 |
| 75833 | \$2,770 |
| 75836 | \$3,169 |
| 75839 | \$72 |
| 75842 | \$107 |
| 75845 | \$533 |
| 75848 | \$639 |
| 75851 | \$320 |
| 75854 | \$320 |
| 82200 | \$19 |
| 82205 | \$42 |
| 82210 | \$80 |
| 82215 | \$118 |
| 82220 | \$57 |
| 82221 | \$108 |
| 82222 | \$159 |
| 82223 | \$57 |
| 82224 | \$108 |
| 82225 | \$159 |
| 82300 | \$451 |


| ITEM NO. | MEDICAL FEE |
| :---: | :---: |
| 82306 | \$51 |
| 82309 | \$62 |
| 82312 | \$87 |
| 82315 | \$115 |
| 82318 | \$142 |
| 82324 | \$77 |
| 82327 | \$46 |
| 82332 | \$137 |
| 90001 | \$111 |
| 90002 | \$81 |
| 90005 | \$130 |
| 90020 | \$35 |
| 90035 | \$76 |
| 90043 | \$147 |
| 90051 | \$216 |
| 90092 | \$16 |
| 90093 | \$31 |
| 90095 | \$69 |
| 90096 | \$111 |
| 90183 | \$28 |
| 90188 | \$61 |
| 90282 | \$214 |
| 91790 | \$43 |
| 91792 | \$43 |
| 91794 | \$28 |
| 91800 | \$86 |
| 91801 | \$158 |
| 91802 | \$240 |
| 91803 | \$86 |
| 91804 | \$158 |
| 91805 | \$240 |
| 91806 | \$61 |
| 91807 | \$117 |
| 91808 | \$173 |
| 91818 | \$187 |
| 91819 | \$267 |
| 91820 | \$150 |


| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 91821 | \$214 | 92425 | \$309 |
| 91822 | \$188 | 92426 | \$154 |
| 91823 | \$100 | 92427 | \$88 |
| 91824 | \$355 | 92435 | \$810 |
| 91825 | \$164 | 92436 | \$540 |
| 91826 | \$88 | 92437 | \$440 |
| 91827 | \$98 | 92455 | \$122 |
| 91828 | \$196 | 92456 | \$158 |
| 91829 | \$295 | 92457 | \$235 |
| 91830 | \$445 | 92458 | \$295 |
| 91831 | \$490 | 92459 | \$395 |
| 91832 | \$188 | 92460 | \$200 |
| 91833 | \$100 | 92461 | \$89 |
| 91834 | \$355 | 92462 | \$177 |
| 91835 | \$164 | 92463 | \$272 |
| 91836 | \$88 | 92464 | \$376 |
| 91837 | \$98 | 92465 | \$436 |
| 91838 | \$196 | 92466 | \$533 |
| 91839 | \$295 | 92471 | \$309 |
| 91840 | \$445 | 92472 | \$154 |
| 91841 | \$490 | 92473 | \$88 |
| 91842 | \$187 | 92475 | \$810 |
| 91843 | \$267 | 92476 | \$540 |
| 91844 | \$150 | 92477 | \$440 |
| 91845 | \$214 | 92495 | \$122 |
| 91846 | \$175 | 92496 | \$158 |
| 91847 | \$88 | 92497 | \$235 |
| 91848 | \$175 | 92498 | \$295 |
| 91849 | \$88 | 92499 | \$395 |
| 91890 | \$41 | 92500 | \$200 |
| 91891 | \$89 | 92501 | \$89 |
| 91892 | \$25 | 92502 | \$177 |
| 91893 | \$48 | 92503 | \$272 |
| 92115 | \$170 | 92504 | \$376 |
| 92121 | \$136 | 92505 | \$436 |
| 92127 | \$170 | 92506 | \$533 |
| 92133 | \$136 | 92517 | \$40 |

* See Appendix A for derived fee descriptions

Q U E E N S L A N D

| ITEM NO. | MEDICAL FEE | ITEM NO. | MEDICAL FEE |
| :---: | :---: | :---: | :---: |
| 92518 | \$87 | 93646 | \$40 |
| 92519 | \$169 | 93647 | \$55 |
| 92520 | \$249 | 93653 | \$84 |
| 92525 | \$40 | 93654 | \$91 |
| 92526 | \$87 | 93655 | \$63 |
| 92527 | \$169 | 93656 | \$77 |
| 92528 | \$249 | 93715 | \$57 |
| 92610 | \$285 |  |  |
| 92611 | \$100 |  |  |
| 92612 | \$200 |  |  |
| 92613 | \$280 |  |  |
| 92614 | \$355 |  |  |
| 92615 | \$265 |  |  |
| 92616 | \$88 |  |  |
| 92617 | \$285 |  |  |
| 92618 | \$100 |  |  |
| 92619 | \$200 |  |  |
| 92620 | \$280 |  |  |
| 92621 | \$355 |  |  |
| 92625 | \$265 |  |  |
| 92626 | \$88 |  |  |
| 92701 | \$364 |  |  |
| 92702 | \$175 |  |  |
| 92712 | \$364 |  |  |
| 92713 | \$175 |  |  |
| 92746 | \$173 |  |  |
| 92747 | \$87 |  |  |
| 93624 | \$71 |  |  |
| 93625 | \$86 |  |  |
| 93626 | \$55 |  |  |
| 93627 | \$78 |  |  |
| 93634 | \$99 |  |  |
| 93635 | \$114 |  |  |
| 93636 | \$78 |  |  |
| 93637 | \$100 |  |  |
| 93644 | \$56 |  |  |
| 93645 | \$63 |  |  |

* See Appendix A for derived fee descriptions

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## Appendix A: derived fee descriptions

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | DESCRIPTION |
| :---: | :---: |
| 4 | Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management-an attendance on one or more patients at one place on one occasion-each patient. <br> *Derived fee: The fee for item 3, plus $\$ 27.40$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 3 plus $\$ 2.15$ per patient. |
| 24 | Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient. <br> *Derived fee: The fee for item 23 , plus $\$ 27.40$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 23 plus $\$ 2.15$ per patient. |

37 Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 36 , plus $\$ 27.40$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 36 plus $\$ 2.15$ per patient.

47 Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 44, plus $\$ 27.40$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 44 plus $\$ 2.15$ per patient.

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| ITEM NO. | DESCRIPTION |
| :---: | :---: |
| 58 | Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies), not more than 5 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). <br> *Derived fee: An amount equal to $\$ 8.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 8.50$ plus $\$ .70$ per patient. |
| 59 | Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: <br> (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). <br> *Derived fee: An amount equal to $\$ 16.00$, plus $\$ 17.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 16.00$ plus $\$ .70$ per patient. |
| 60 | Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). <br> *Derived fee: An amount equal to $\$ 35.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 35.50$ plus $\$ .70$ per patient. |

65 Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 45 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST).
*Derived fee: An amount equal to $\$ 57.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 57.50$ plus $\$ .70$ per patient.

99 Professional attendance on a patient by a specialist practising in the specialist's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 104 lasting more than 10 minutes; or (ii) provided with item 105; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: $50 \%$ of the fee for item 104 or 105 . Benefit: $85 \%$ of the derived fee.

Q U E E N S L A N D

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | DESCRIPTION |
| :---: | :---: |
| 112 | Professional attendance on a patient by a consultant physician practising in the consultant physician's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) <br> provided with item 110 lasting more than 10 minutes; or (ii) provided with item 116, 119, 132 or 133; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. <br> *Derived fee: $50 \%$ of the fee for the associated item. Benefit: $85 \%$ of derived fee. |
| 149 | Professional attendance on a patient by a consultant physician or specialist practising in the consultant physician's or specialist's specialty of geriatric medicine if: (a) the attendance is by video conference; and (b) item 141 or 143 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance- at least 15 kms by road from the physician or specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service: for which a direction made under subsection 19(2) of the Act applies. <br> *Derived fee: $50 \%$ of the fee for item 141 or 143 . Benefit: $85 \%$ of the derived fee. |
| 181 | Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies), not more than 5 minutes in duration an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area. <br> *Derived fee: The fee for item 179, plus $\$ 21.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 179 plus $\$ 1.70$ per patient. |
| 187 | Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area. <br> *Derived fee: The fee for item 185, plus $\$ 21.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 185 plus $\$ 1.70$ per patient. |
| 191 | Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area. <br> *Derived fee: The fee for item 189, plus $\$ 21.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 189 plus $\$ 1.70$ per patient. |

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| ITEM | DESCRIPTION |
| :--- | :--- |
| NO. |  | | Professional attendance by a general practitioner who is a qualified medical acupuncturist, on one or |
| :--- |
| more patients at a hospital, lasting less than 20 minutes and including any of the following that are |
| clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any |
| necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive |
| health care; for one or more health-related issues, with appropriate documentation, at which |
| acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or |
| through the skin by any means, including any consultation on the same occasion and another |
| attendance on the same day related to the condition for which the acupuncture is performed. |
|  |
|  |
|  |
|  |
| *Derived fee: The fee for item 193, plus $\$ 27.00$ divided by the number of patients seen, up to a maximum |
| of sor seven or more patients - the fee for item 193 plus $\$ 2.10$ per patient. |

206 Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 45 minutes in duration an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area.
*Derived fee: The fee for item 203, plus $\$ 21.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 203 plus $\$ 1.70$ per patient.

260 Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus.
*Derived fee: The fee for item 259, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 259 plus $\$ 1.70$ per patient.

262 Professional attendance at a place other than consulting rooms of more than 25 minutes but not more than 45 minutes, in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus.
*Derived fee: The fee for item 261, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 261 plus $\$ 1.70$ per patient.

264 Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus.
*Derived fee: The fee for item 263, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 263 plus $\$ 1.70$ per patient.

Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care.
*Derived fee: The fee for item 265 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 265 plus $\$ 1.70$ per patient.
ITEM DESCRIPTION
NO.

269 Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care.
*Derived fee: The fee for item 268 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 268 plus $\$ 1.70$ per patient.

271 Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care.
*Derived fee: The fee for item 270, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 270 plus $\$ 1.70$ per patient.

285 Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes.
*Derived fee: The fee for item 283, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 283 plus $\$ 1.70$ per patient.

287 Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40 minutes.
*Derived fee: The fee for item 286 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 286 plus $\$ 1.70$ per patient.

Professional attendance on a patient by a consultant physician practising in the consultant physician's specialty of psychiatry if: (a) the attendance is by video conference; and (b) item 291, 293, 296, 300, $302,304,306,308,310,312,314,316,318,319,348,350$ or 352 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and $(B)$ at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies.
*Derived fee: $50 \%$ of the fee for item 291, 293,296, 300, 302, 304, 306, 308, 310, $312,314,316,318,319$, 348,350 or 352 .Benefit: $85 \%$ of derived fee.

Q U E E N S L A N D

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | DESCRIPTION |
| :---: | :---: |
| 389 | Professional attendance on a patient by a consultant occupational physician practising in the consultant occupational physician's specialty of occupational medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 385 lasting more than 10 minutes; or (ii) provided with item 386; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. <br> *Derived fee: $50 \%$ of the fee for item 385 or 386 . Benefit: $85 \%$ of the derived fee. |
| 414 | LEVEL A Professional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management. <br> *Derived fee: The fee for item 410, plus $\$ 26.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 410 plus $\$ 2.10$ per patient. |
| 415 | LEVEL B Professional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms, lasting less than 20 minutes, including any of the following that are clinically relevant: a)taking a patient history; b)performing a clinical examination; c)arranging any necessary investigation; d)implementing a management plan; e)providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation. *Derived fee: The fee for item 411, plus $\$ 26.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 411 plus $\$ 2.10$ per patient. |
| 416 | LEVEL C Professional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms lasting at least 20 minutes, including any of the following that are clinically relevant: a)taking a detailed patient history; b)performing a clinical examination; c)arranging any necessary investigation; d)implementing a management plan; e)providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation. <br> *Derived fee: The fee for item 412, plus $\$ 26.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 412 plus $\$ 2.10$ per patient. |
| 417 | LEVEL D Professional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms lasting at least 40 minutes, including any of the following that are clinically relevant: a)taking an extensive patient history; b)performing a clinical examination; c)arranging any necessary investigation; d)implementing a management plan; e)providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation. <br> *Derived fee: The fee for item 413, plus $\$ 26.90$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 413 plus $\$ 2.10$ per patient. |

Q U E E N S L A N D

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | DESCRIPTION |
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| 761 | Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting not more than 5 minutes an attendance on one or more patients on one occasion each patient. <br> *Derived fee: The fee for item 733, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 733 plus $\$ 1.70$ per patient. |
| 763 | Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes an attendance on one or more patients on one occasion each patient. <br> *Derived fee: The fee for item 737, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 737 plus $\$ 1.70$ per patient. |
| 766 | Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes, but not more than 45 minutes an attendance on one or more patients on one occasion each patient. <br> *Derived fee: The fee for item 741 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus $\$ 1.70$ per patient. |
| 769 | Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 45 minutes an attendance on one or more patients on one occasion each patient. <br> *Derived fee: The fee for item 745, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus $\$ 1.70$ per patient. |
| 788 | Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 25 minutes in duration but not more than 45 minutes by a medical practitioner an attendance on one or more patients at one residential aged care facility on one occasion each patient. <br> *Derived fee: The fee for item 741, plus $\$ 38.85$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus $\$ 2.70$ per patient. |
| 789 | Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 45 minutes in duration by a medical practitioner an attendance on one or more patients at one residential aged care facility on one occasion each patient. <br> *Derived fee: The fee for item 745 , plus $\$ 38.85$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus $\$ 2.70$ per patient. |

QUEENSLAND

| ITEM | DESCRIPTION |
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| NO. |  | | Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not |
| :--- |
| continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a |
| video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted |
| patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a |
| telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist |
| or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one |
| occasion each patient. |
| *Derived fee: The fee for item 812, plus $\$ 21.60$ divided by the number of patients seen, up to a maximum |
| of six patients. For seven or more patients - the fee for item 812 plus $\$ 1.70$ per patient. |

868 Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient.
*Derived fee: The fee for item 867 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 867 plus $\$ 1.70$ per patient.

876 Professional attendance not in consulting rooms of at least 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient.
*Derived fee: The fee for item 873 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 873 plus $\$ 1.70$ per patient.

891 Professional attendance not in consulting rooms of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient.
*Derived fee: The fee for item 885 , plus $\$ 21.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 885 plus $\$ 1.70$ per patient.

QUEENSLAND

| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | DESCRIPTION |
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| 2122 | Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient. <br> *Derived fee: The fee for item 2100 plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus $\$ 2.10$ per patient. |

2125 Professional attendance of at least 5 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 2100 plus $\$ 48.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus $\$ 3.45$ per patient.

2137 Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 2126 plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2126 plus $\$ 2.10$ per patient.

2138 Professional attendance of less than 20 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 2126 plus $\$ 48.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2126 plus $\$ 3.45$ per patient.

Professional attendance not in consulting rooms of at least 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 2143 plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2143 plus $\$ 2.10$ per patient.

| ITEM |
| :--- |
| NO. |
| 2179 | | PESCRIPTION |
| :--- |
| practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is |
| participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a |
| care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an |
| attendance on one or more patients at one place on one occasion-each patient. |
| *Derived fee: The fee for item 2143 plus $\$ 48.60$ divided by the number of patients seen, up to a maximum |
| of six patients. For seven or more patients - the fee for item 2143 plus $\$ 3.45$ per patient. |

2199 Professional attendance not in consulting rooms of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 2195 plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus $\$ 2.10$ per patient.

2220 Professional attendance of at least 40 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient.
*Derived fee: The fee for item 2195 plus $\$ 48.60$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus $\$ 3.45$ per patient.

2631 Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus.
*Derived fee: An amount equal to $\$ 16.00$, plus $\$ 17.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 16.00$ plus $\$ 0.70$ per patient

2633 Professional attendance at a place other than consulting rooms of more than 25 minutes but not more than 45 minutes, in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus.
*Derived fee: An amount equal to $\$ 35.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 35.50$ plus $\$ 0.70$ per patient

Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus. *Derived fee: An amount equal to $\$ 57.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 57.50$ plus $\$ 0.70$ per patient.

Q U E E N S L A N D

| ITEM | DESCRIPTION |
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| NO. |  | | Professional attendance at a place other than consulting rooms by a general practitioner, for providing |
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| focussed psychological strategies for assessed mental disorders by a general practitioner registered with |
| the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and |
| lasting at least 30 minutes, but less than 40 minutes. |
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| *Derived fee: The fee for item 2721, plus $\$ 27.00$ divided by the number of patients seen, up to a |
| maximum of six patients. For seven or more patients - the fee for item 2721 plus $\$ 2.10$ per patient. |

2820 Professional attendance on a patient by a specialist or consultant physician practising in the specialist's or consultant physician's specialty of pain medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 2801 lasting more than 10 minutes; or (ii) provided with item 2806 or 2814; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist or physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies.
*Derived fee: $50 \%$ of the fee for item 2801, 2806 or 2814. Benefit: 85\% of the derived fee

3015 Professional attendance on a patient by a specialist or consultant physician practising in the specialist's or consultant physician's specialty of palliative medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 3005 lasting more than 10 minutes; or (ii) provided with item 3010 or 3014; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist or physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: $50 \%$ of the fee for item 3005, 3010 or 3014. Benefit: $85 \%$ of the derived fee.

5003 Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management-an attendance on one or more patients on one occasion-each patient.
*Derived fee: The fee for item 5000, plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5000 plus $\$ 2.10$ per patient.

Q U E E N S L A N D

| ITEM NO. | DESCRIPTION |
| :---: | :---: |
| 5023 | Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient <br> *Derived fee: The fee for item 5020, plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5020 plus $\$ 2.10$ per patient. |
| 5043 | Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospita or a residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient. <br> *Derived fee: The fee for item 5040, plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5040 plus $\$ 2.10$ per patient. |
| 5063 | Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospita or a residential aged care facility or a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient. <br> *Derived fee: The fee for item 5060, plus $\$ 27.00$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5060 plus $\$ 2.10$ per patient. |
| 5220 | Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting not more than 5 minutes-an attendance on one or more patients on one occasion-each patient. <br> *Derived fee: An amount equal to $\$ 18.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 18.50$ plus $\$ .70$ per patient |
| 5223 | Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes-an attendance on one or more patients on one occasion-each patient. <br> *Derived fee: An amount equal to $\$ 26.00$, plus $\$ 17.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 26.00$ plus $\$ .70$ per patient. |

QUEENSLAND

| ITEM NO. | DESCRIPTION |
| :---: | :---: |
| 5227 | Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes, but not more than 45 minutes-an attendance on one or more patients on one occasion-each patient. <br> *Derived fee: An amount equal to $\$ 45.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 45.50$ plus $\$ .70$ per patient. |
| 5228 | Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 45 minutes-an attendance on one or more patients on one occasion-each patient. <br> *Derived fee: An amount equal to $\$ 67.50$, plus $\$ 15.50$ divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to $\$ 67.50$ plus $\$ .70$ per patient. |
| 6016 | Professional attendance on a patient by a specialist practising in the specialist's specialty of neurosurgery if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6007 lasting more than 10 minutes; or (ii) provided with item 6009, 6011, 6013 or 6015; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and $(B)$ at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. <br> *Derived fee: $50 \%$ of the fee for item 6007, $6009,6011,6013$ or 6015 . Benefit: $85 \%$ of the derived fee. |
| 6026 | Professional attendance on a patient by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6018 or 6019 and lasting more than 10 minutes; or (ii) provided with item 6023 or 6024; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 km by road from the addiction medicine specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies. <br> *Derived fee: $50 \%$ of the fee for item 6018, 6019,6023 , or 6024 Benefit: $85 \%$ of the derived fee. |
| 6060 | Professional attendance on a patient by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6051 or 6052 and lasting more than 10 minutes; or (ii) provided with item 6057 or 6058 ; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 km by road from the sexual health medicine specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies. <br> *Derived fee: $50 \%$ of the fee for item $6051,6052,6057$ or 6058 Benefit: $85 \%$ of the derived fee. |

Q U E E N S L A N D

| ITEM | DESCRIPTION |
| :--- | :--- |
| NO. |  | | Radiotherapy, superficial (including treatment with x-rays, radium rays or other radioactive substances), |
| :--- |
| not being a arvice to which another item in this Group applies - each attendance at which fractionated |
| treatment is given - 2 or more fields up to a maximum of 5 additional fields. |
| *Derived fee: The fee for item 15000 plus for each field in excess of 1, an amount of \$17.75 |

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| $\begin{aligned} & \text { ITEM } \\ & \text { NO. } \end{aligned}$ | DESCRIPTION |
| :---: | :---: |
| 25050 | Perfusion, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than $50 \%$ of the service time occurs between 8 pm to 8 am on any weekday, or on a Saturday, Sunday or public holiday (0 basic units). <br> *Derived fee: An additional amount of $50 \%$ of the fee for the perfusion service. That is: <br> (a) item 22060, plus <br> (b) an item range 23010-24136, plus <br> (c) where applicable, an item range 25000-25014, plus <br> (d) (d) where performed, any associated therapeutic or diagnostic service in the range 22002-22051 or 22065-22075. |
| 25200 | ASSISTANCE IN THE ADMINISTRATION OF ANAESTHESIA on a patient in imminent danger of death requiring continuous lifesaving emergency treatment, to the exclusion of all other patients ( 5 basic units). <br> *Derived fee: An amount of $\$ 103.00$ ( 5 basic units) plus an item in the range 23010-24136 plus, where applicable - an item in the range 25000-25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051. |
| 25205 | ASSISTANCE IN THE ADMINISTRATION OF ELECTIVE ANAESTHESIA where: <br> (i) the patient has complex airway problems; or <br> (ii) the patient is a neonate or a complex paediatric case; or <br> (iii) there is anticipated to be massive blood loss (greater than $50 \%$ of blood volume) during the procedure; or <br> (iv) the patient is critically ill, with multiple organ failure; or <br> (v) where the anaesthesia time exceeds 6 hours and the assistance is provided to the exclusion of all other patients ( 5 basic units). <br> *Derived fee: An amount of $\$ 103.00$ ( 5 basic units) plus an item in the range 23010-24136 plus, where applicable - an item in the range 25000-25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051. |
| 30001 | OPERATIVE PROCEDURE, not being a service to which any other item in this Group applies, being a service to which an item in this Group would have applied had the procedure not been discontinued on medical grounds. <br> *Derived fee: $50 \%$ of the fee which would have applied had the procedure not been discontinued. |
| 31340 | Muscle, bone or cartilage, excision of one or more of, if clinically indicated, and if: (a) the specimen excised is sent for histological confirmation; and (b)a malignant tumour of skin covered by item 31000, $31001,31002,31003,31004,31005,31356,31358,31359,31361,31363,31365,31367,31369$, $31371,31372,31373,31374,31375$ or 31376 is excised (Anaes.) <br> *Derived fee: $75 \%$ of the fee for excision of malignant tumour. |
| 44376 | Amputation stump, reamputation of, to provide adequate skin and muscle cover (Assist.). <br> *Derived fee: $75 \%$ of the original amputation fee. |
| 51303 | Assistance at any operation identified by the word "Assist." for which the fee exceeds $\$ 580.95$ or at a series of operations identified by the word "Assist." for which the aggregate fee exceeds \$580.95. *Derived fee: one fifth of the established fee for the operation or combination of operations. |

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## ITEM DESCRIPTION

NO.

51309 Assistance at a series or combination of operations that include (Assist.) and assistance at a birth involving Caesarean section.
*Derived fee: one fifth of the established fee for the operation or combination of operations (the fee for item 16520 being the Schedule fee for the Caesarean section component in the calculation of the established fee).

51312 Assistance at any interventional obstetric procedure covered by items 16606, 16609, 16612, 16615 and 16627.
*Derived fee: one fifth of the established fee for the procedure or combination of procedures.

51803 Assistance by an approved dental practitioner in the practice of oral and maxillofacial surgery at any operation specified in an item that includes '(Assist.)' for which the fee exceeds $\$ 580.95$ or at a series or combination of operations specified in items that include '(Assist)' if the aggregate fee exceeds \$580.95. *Derived fee: one fifth of the established fee for the operation or combination of operations.

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