



Private hospital fee schedule and guidelines

Effective date: 01 July 2022

Contents

How to use this schedule	3
Same-day services in a stand-alone day surgery facility	4
Accommodation.....	4
Theatre fee bands.....	4
Psychiatric hospital services	5
Emergency admission of workers to a psychiatric facility.....	5
Inpatient services	5
Drug and alcohol programs - inpatient.....	5
Same-day services	5
Rehabilitation hospital services	6
Rehabilitation orthopaedic program for inpatients.....	6
Rehabilitation trauma program for inpatients	6
Other hospital services	7
Inpatient pain assessment/management	7
Outpatient service – pain pumps	7
Prostheses	7
Interpretations	8
Inpatient services – Diagnosis Related Groups version 7	11
General information	37
Account and invoicing standards	37
GST	38
Changes to provider details	38
Where payment is outstanding.....	38
Useful contacts	39
Claims agents	39
ReturnToWorkSA EnABLE Unit.....	39
Self-insured employers	39

How to use this schedule

This schedule contains information on services and fees that apply to private hospitals that provide services to South Australian workers who are managed under the Return to Work scheme.

This publication is based on the schedule published by the Minister for Industrial Relations in the *South Australian Government Gazette*. Gazetted fees are the maximum fees chargeable, excluding GST. Where applicable, GST can be applied over and above the gazetted fee.

All services and fees in this schedule are effective 01 July 2022.

Invoicing and service provision is actively monitored to ensure services are billed in accordance with this fee schedule and that services are reasonable for the work injury and payable under the *Return to Work Act 2014*, (the Act).

This schedule contains the following:

1. Stand-alone day surgery facility services
2. Psychiatric services
3. Rehabilitation services
4. Other hospital services
5. Interpretations
6. In-patient services - Diagnosis related groups (DRGs)
7. General information (including invoicing standards and useful contacts)

For copies of this document visit our website at www.rtwsa.com.

The gazetted version can be downloaded from the South Australian Government Gazette website at www.governmentgazette.sa.gov.au

If you have any questions, please contact ReturnToWorkSA on 13 18 55.

Same-day services in a stand-alone day surgery facility

Stand-alone day surgery facilities will be paid using the same-day services tables.

Accommodation

Item no.	Service description	Max fee (ex GST)
PR410	Band 1: including gastrointestinal endoscopy, some minor surgical and non-surgical procedures not normally requiring anaesthetic.	\$443.00
PR420	Band 2: including procedures other than Band 1 performed under local anaesthetic with no sedation. Theatre time less than 1 hour.	\$527.30
PR430	Band 3: including procedures other than Band 1 performed under a general or regional anaesthesia or intravenous sedation. Theatre time less than 1 hour.	\$615.90
PR440	Band 4: including procedures other than Band 1 performed under general or regional anaesthesia or intravenous sedation. Theatre time 1 hour or more.	\$653.00

Theatre fee bands

Item no.	Service description	Max fee (ex GST)
PRT1A	1A	\$254.30
PRT01	1	\$508.80
PRT02	2	\$649.30
PRT03	3	\$902.80
PRT04	4	\$1305.90
PRT05	5	\$1675.90
PRT06	6	\$2206.80
PRT07	7	\$3019.00
PRT08	8	\$3222.20
PRT9A	9A	\$3747.60
PRT09	9	\$4298.50
PRT10	10	\$5627.10
PRT11	11	\$7985.10
PRT12	12	\$8573.60
PRT13	13	\$8107.30
PRT50	Dental minor	\$480.90
PRT55	Dental major	\$867.50

Services in this section will be determined in accordance with the *Group Accommodation and Theatre Banding Schedule* produced by the Commonwealth Department of Veterans' Affairs, current at time of service.

Where more than one service is provided in a single theatre session, the theatre charge is –

- a) the service with the highest theatre charge plus
- b) 50% of the service with the next highest theatre charge plus
- c) 30% of each of the other services provided.

Psychiatric hospital services

Emergency admission of workers to a psychiatric facility

The claims manager must approve admission of a worker to a hospital when a medical practitioner believes that a worker is at risk of harming themselves or others.

Where the psychiatric facility cannot obtain approval from the claims manager (e.g. the incident occurs after business hours) the facility must admit the person immediately. If this occurs the admitting psychiatric facility is required to advise the claims manager of the admission within two business days.

Private rooms are allocated on the basis of clinical need and the cost of such rooms is included in the charges set out below. Where a worker requests a private room, ReturnToWorkSA will not be responsible for or accept any additional fee or surcharge.

Inpatient services

Item no.	Service description	Max fee (ex GST)
PR800	Length of stay 1 or more days but not more than 14 days	\$850.50 per day
PR803	15 or more days	\$654.50 per day
PR822	Electro-convulsive therapy (ECT)	\$364.00 per day
PR850	Private room allocated on the basis of clinical need	Extra \$21.20 per day

Drug and alcohol programs - inpatient

Item no.	Service description	Max fee (ex GST)
PR990	Length of stay 1 or more days but not more than 10 days	\$964.20 per day
PR991	11 or more days	\$705.70 per day

Note: This program provides specialised treatment and care for patients with alcohol or drug dependencies (including analgesics/narcotics/opiates and Benzodiazepine). The program is managed by a multi-disciplinary team including a medical director and consultant psychiatrists. Where required, the program involves a medically controlled, safe withdrawal of drugs or alcohol.

Same-day services

Item no.	Service description	Max fee (ex GST)
PRO81	Group session	\$116.00
PRO82	ECT day program	\$604.50
PRO83	Half-day program	\$309.50
PRO84	Day program	\$489.80
PRO95	Outreach	\$279.60

Note: A day program is usually available to provide ongoing support and care to patients after discharge from treatment as inpatients. It is managed by a multi-disciplinary team of health-care professionals, and is tailored to the individual needs of the patient. It can include specialised therapy modules including cognitive behavioural therapy, relaxation, assertiveness skills and anxiety management.

Outreach is treatment or care provided by the hospital to a non-admitted patient at a location outside the hospital premises (being treatment or care provided as a direct substitute for treatment or care that would normally be provided on the hospital premises).

Please note, for billing purposes, the 'O' in item numbers for same-day services is an alphabetical letter not the number zero.

Rehabilitation hospital services

Private rooms are allocated on the basis of clinical need and the cost of such rooms is included in the charges set out below. Where a patient requests a private room, ReturnToWorkSA will not be responsible for or accept any additional fee or surcharge.

Rehabilitation orthopaedic program for inpatients

Item no.	Service description	Max fee (ex GST)
PR600	Length of stay 1 or more days but not more than 16 days	\$886.50 per day
PR605	17 or more days	\$743.30 per day

Note: Orthopaedic programs involve referral and assessment by the rehabilitation coordinator of the program. They are defined programs with intense service provision. Rapid improvement is expected and there are specific outcome goals. The program includes physiotherapy, aquatic therapy, occupational therapy, case conferences and discharge planning.

Rehabilitation trauma program for inpatients

Item no.	Service description	Max fee (ex GST)
PR610	Length of stay 1 or more days but not more than 20 days	\$1057.10 per day
PR615	21 or more days	\$954.30 per day

Note: Trauma programs involve referral and assessment by the rehabilitation coordinator of the program. They are defined programs with intense service provision. Rapid improvement is expected and there are specific outcome goals. The program includes physiotherapy, aquatic therapy, occupational therapy, speech therapy, case conferences and discharge planning.

Other hospital services

Inpatient pain assessment/management

Private rooms are allocated on the basis of clinical need and the cost of such rooms is included in the charges set out below. Where a patient requests a private room, ReturnToWorkSA will not be responsible for or accept any *additional fee or surcharge*.

Item no.	Service description	Max fee (ex GST)
PR700	Length of stay 1 or more days but not more than 7 days	\$777.90 per day
PR705	8 or more days but not more than 14 days	\$730.90 per day
PR710	15 or more days	\$475.10 per day

Outpatient service – pain pumps

Item no.	Service description	Max fee (ex GST)
PR720	Implanted infusion pump, refilling of reservoir, with a therapeutic agent or agents, for infusion to the subarachnoid or epidural space, with or without re-programming of a programmable pump, for the management of chronic intractable pain for a non-admitted patient.	\$270.00

Prostheses

Item no.	Service description	Max fee (ex GST)
CUR04	Prostheses will be paid in accordance with the Prostheses List produced by the Department of Health and Ageing.	DF

Interpretations

Acute patient means an admitted patient to an acute care facility -

- (a) where a patient stays for the first 35 days of continuous hospitalisation, or
- (b) where a patient who has been in continuous hospital care for more than 35 days where an Acute Care Certificate (Form 918 from the Commonwealth Department of Health and Aged Care), or an equivalent form devised by the hospital, has been completed and signed by a medical practitioner indicating the patient is to remain as an acute care patient for a specified period.

Admission means the formal administrative process of a private hospital or day surgery facility by which the hospital or facility commences the provision of treatment, care, accommodation and other services to a patient.

Admitted in relation to a patient in a private hospital or day surgery facility, means that the patient has undergone the formal admission process of the hospital or facility and has not been discharged.

AR-DRG means Australian Refined Diagnosis Related Group and is referred to as DRG in this schedule.

AR-DRG reference numbers, descriptions and abbreviations. For the purposes of this Schedule -

- (a) AR-DRG reference numbers or descriptions are as set out in the *Manual* and
- (b) Terms and abbreviations used in AR-DRG descriptions have the meanings given by the *Manual*.

Criteria for admission

For the purposes of this schedule, a patient qualifies for admission to a private hospital or day surgery facility if he or she satisfies one of the following criteria:

- (a) The patient is to receive Day Only Band 1, 2, 3 and 4 services (excluding uncertified Type C professional attention procedures) as specified in the *Day Only Procedures Manual*.
- (b) The patient is to receive a Type C professional attention procedure as specified in the *Day Only Procedures Manual* and there is an accompanying certification by a medical practitioner that an admission is necessary on the grounds of the medical condition of the patient or other special circumstances relating to the patient.
- (c) The patient, following a clinical decision, is expected to require overnight treatment for a minimum of one night.
- (d) The patient is to receive a Type B professional attention procedure as specified in the *Day Only Procedures Manual* and there is an accompanying certification by a medical practitioner that an overnight admission is necessary on the grounds of the medical condition of the patient or other special circumstances relating to the patient.

Day means a calendar day.

Day Only Procedures Manual means the *Day Only Procedures Manual* published by the Commonwealth Department of Health and Aged Care, as in force at time of service.

Day surgery facility means a facility (other than a private hospital or facility of a private hospital) designed for the provision of medical, surgical or related treatment or care on a same day basis that is declared by ReturnToWorkSA by notice in the Gazette to be a day surgery facility for the purposes of this schedule.

Discharge means the formal administrative process of a private hospital or day surgery facility by which the hospital or facility ceases the provision of treatment, care, accommodation and other services to a patient.

Discharged in relation to a person who has been a patient in a private hospital or day surgery facility, means that the person has undergone the formal discharge process of the hospital or facility.

Episodes of care, for the purposes of this schedule, includes (where applicable) the cost of the following:

- (a) accommodation
- (b) intensive care unit
- (c) theatre
- (d) common use theatre items
- (e) pharmaceutical items directly related to the condition being treated

- (f) television
- (g) newspapers
- (h) local telephone calls
- (i) all hotel services (e.g. meals etc.)
- (j) consumable items.

Episodes of care, for the purposes of this schedule, do not include the following costs:

- (a) the cost of prostheses
- (b) the cost of substituted high cost single use items not commonly used in Australian clinical practice for delivery of the service where the substitution for the usual item can be demonstrated to have been necessary for the treatment of the patient
- (c) the cost of allied health treatment (such as physiotherapy, dietetics, podiatry, psychology, social work, speech pathology etc.)
- (d) the cost of pharmaceutical items provided on discharge of a patient
- (e) the cost of pharmaceutical items required for a patient for maintenance of an unrelated condition
- (f) the cost of splints and braces required for the discharge of a patient
- (g) transfer costs
- (h) boarder fees.

Inlier patient means an admitted patient whose length of stay in a private hospital for a service identified, *Inpatient services – Diagnosis Related Groups* falls within the range of the upper trim point days and the lower trim point days (inclusive) specified in *Inpatient services - Diagnosis Related Groups* corresponding to that service.

Inpatient in relation to a private hospital means an admitted patient who, following a clinical decision, requires or is expected to require overnight treatment for a minimum of one night.

Length of stay (LOS), in relation to an admitted patient in a private hospital, means the number of days between the day of admission of the patient to the hospital and the day of discharge of the patient from the hospital –

- (a) counting the day of admission as one day, and
- (b) excluding the day of discharge (unless it is also the day of admission).

Long-stay outlier patient means an admitted patient whose length of stay in a private hospital for a service identified in *Inpatient services – Diagnosis Related Groups*, is greater than the upper trim point specified in column 4 of the table corresponding to that service.

Long-stay outlier fee calculation

The upper trim point is set as the average LOS x 2. The outlier payments will commence the next day after the upper trim point.

Fee for long-stay outlier patients is calculated as follows:

Maximum fee = (schedule fee) + (rate per day x (LOS – upper trim point))

Manual means the *Australian Refined Diagnosis Related Groups, Version 7.0 (as amended)*, produced by the Commonwealth Department of Health and Aged Care.

Same day in relation to a service, means a service that is provided on a single calendar day.

Same day patients means an admitted patient to a registered stand-alone day surgery facility only.

Fees for same day patients in a registered day facility are calculated as follows:

Maximum fee = Theatre fee plus same day accommodation fee as per this Schedule.

Short-stay outlier patient means an admitted patient whose length of stay in a private hospital for a service identified in *Inpatient services – Diagnosis Related Groups* for which the lower trim point days specified in column 5 of the table corresponding to that service, is less than that lower trim point but greater than zero.

Short-stay outlier fee calculation

The lower trim point is set as the average LOS divided by 3.

The accommodation payment will be paid at the per day rate for each occupied bed per day when the LOS is less than the lower trim point. ICU fees are included in the per day accommodation rate.

Fee for short-stay outlier patients is calculated as follows:

Maximum fee = Rate per day x LOS

Transfers

Where the patient is transferred from the private hospital to another hospital, the maximum charge for the service provided by the transferring hospital is 80% of the maximum charge. The receiving hospital subject to admission criteria will be paid as a new episode of care.

Transitional arrangements – where treatment commenced before 01 July 2022 and continues beyond that date, the discharge date is used for billing purposes.

Inpatient services – Diagnosis Related Groups version 7

Private rooms are allocated on the basis of clinical need and the cost of such rooms is included in the charges set out below. Where a patient requests a private room, ReturnToWorkSA will not be responsible for or accept any additional fee or surcharge.

Registered hospitals will be paid on a DRG basis – *please refer to Interpretation section.*

Item no	Description	Max fee (ex GST)	Lower trim point days	Upper trim point days	Max per day rate (ex GST)
801A	OR Procedures Unrelated to Principal Diagnosis, Major Complexity	\$21,882.00	7	35	\$977.10
801B	OR Procedures Unrelated to Principal Diagnosis, Intermediate Complexity	\$10,084.20	3	17	\$1,080.70
801C	OR Procedures Unrelated to Principal Diagnosis, Minor Complexity	\$4,065.30	0	5	\$1,321.30
960Z	Ungroupable	\$195.30	0	5	\$73.80
961Z	Unacceptable Principal Diagnosis	\$972.00	0	4	\$451.70
A06A	Tracheostomy and/or Ventilation >=96hours, Major Complexity	\$151,920.50	18	35	\$1,400.00
A06B	Tracheostomy and/or Ventilation >=96hours, Intermediate Complexity	\$74,393.40	10	35	\$1,400.00
A06C	Tracheostomy and/or Ventilation >=96hours, Minor Complexity	\$49,167.40	7	35	\$1,400.00
A08A	Autologous Bone Marrow Transplant, Major Complexity	\$26,497.90	7	35	\$1,214.50
A08B	Autologous Bone Marrow Transplant, Minor Complexity	\$15,932.40	4	27	\$1,125.30
A11A	Insertion of Implantable Spinal Infusion Device, Major Complexity	\$28,359.80	8	35	\$1,106.60
A11B	Insertion of Implantable Spinal Infusion Device, Minor Complexity	\$5,937.90	2	11	\$1,031.80
A12Z	Insertion of Neurostimulator Device	\$5,695.60	0	5	\$1,400.00
B01A	Ventricular Shunt Revision, Major Complexity	\$12,018.70	3	18	\$1,304.70
B01B	Ventricular Shunt Revision, Minor Complexity	\$7,772.00	2	9	\$1,400.00
B02A	Cranial Procedures, Major Complexity	\$44,486.40	7	35	\$1,400.00
B02B	Cranial Procedures, Intermediate Complexity	\$28,096.20	6	34	\$1,400.00
B02C	Cranial Procedures, Minor Complexity	\$16,091.40	2	14	\$1,400.00
B03A	Spinal Procedures, Major Complexity	\$15,379.70	3	17	\$1,400.00
B03B	Spinal Procedures, Intermediate Complexity	\$8,098.50	1	7	\$1,400.00
B04A	Extracranial Vascular Procedures, Major Complexity	\$19,005.40	4	25	\$1,400.00
B04B	Extracranial Vascular Procedures, Intermediate Complexity	\$9,696.90	1	8	\$1,400.00
B05Z	Carpal Tunnel Release	\$1,488.50	0	4	\$970.80
B06A	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Major Comp	\$12,765.60	4	21	\$1,112.40

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B06B	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Interm Comp	\$3,775.00	0	4	\$1,400.00
B06C	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Minor Comp	\$1,868.30	1	1	
B07A	Cranial or Peripheral Nerve and Other Nervous System Procedures, Major Comp	\$13,300.20	4	24	\$1,044.30
B07B	Cranial or Peripheral Nerve and Other Nervous System Procedures, Minor Comp	\$3,119.90	0	4	\$1,398.30
B40Z	Plasmapheresis W Neurological Disease, Sameday	\$561.20	1	1	
B41Z	Telemetric EEG Monitoring	\$2,774.20	1	7	\$840.50
B42A	Nervous System Disorders W Ventilator Support, Major Complexity	\$27,915.90	7	35	\$1,400.00
B60A	Acute Paraplegia and Quadriplegia W or W/O OR Procedures, Major Complexity	\$31,434.90	10	35	\$1,012.90
B60B	Acute Paraplegia and Quadriplegia W or W/O OR Procedures, Minor Complexity	\$4,282.90	2	11	\$760.70
B61A	Spinal Cord Conditions W or W/O OR Procedures, Major Complexity	\$13,188.10	4	26	\$966.50
B61B	Spinal Cord Conditions W or W/O OR Procedures, Minor Complexity	\$4,389.60	1	7	\$965.30
B63Z	Dementia and Other Chronic Disturbances of Cerebral Function	\$6,842.70	3	19	\$751.20
B64A	Delirium, Major Complexity	\$11,934.40	5	30	\$809.00
B64B	Delirium, Minor Complexity	\$5,579.30	2	14	\$807.60
B65A	Cerebral Palsy, Major Complexity	\$2,970.50	2	11	\$560.40
B65B	Cerebral Palsy, Minor Complexity	\$436.40	1	1	
B66A	Nervous System Neoplasms, Major Complexity	\$11,883.20	6	34	\$710.30
B66B	Nervous System Neoplasms, Minor Complexity	\$9,480.30	4	24	\$815.90
B66C	Nervous System Neoplasms W/O Radiotherapy W/O Catastrophic or Severe CC	\$3,660.90	2	11	\$697.70
B67A	Degenerative Nervous System Disorders, Major Complexity	\$12,762.40	5	33	\$786.20
B67B	Degenerative Nervous System Disorders, Intermediate Complexity	\$6,920.60	3	18	\$781.70
B67C	Degenerative Nervous System Disorders, Minor Complexity	\$375.60	1	1	
B68A	Multiple Sclerosis and Cerebellar Ataxia, Major Complexity	\$6,378.50	3	16	\$812.80
B68B	Multiple Sclerosis and Cerebellar Ataxia, Minor Complexity	\$730.90	0	4	\$558.60
B69A	TIA and Precerebral Occlusion, Major Complexity	\$6,432.90	2	15	\$857.70
B69B	TIA and Precerebral Occlusion, Minor Complexity	\$2,526.70	0	6	\$851.40

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B70A	Stroke and Other Cerebrovascular Disorders, Major Complexity	\$14,264.70	6	35	\$809.30
B70B	Stroke and Other Cerebrovascular Disorders, Intermediate Complexity	\$4,992.50	2	13	\$791.00
B70C	Stroke and Other Cerebrovascular Disorders, Minor Complexity	\$2,310.10	1	7	\$734.70
B70D	Stroke and Other Cerebrovascular Disorders, Transferred <5 Days	\$2,155.30	0	5	\$975.10
B71A	Cranial and Peripheral Nerve Disorders, Major Complexity	\$9,110.00	4	23	\$814.60
B71B	Cranial and Peripheral Nerve Disorders, Minor Complexity	\$4,881.50	2	12	\$828.70
B71C	Cranial and Peripheral Nerve Disorders, Sameday	\$547.40	1	1	
B72A	Nervous System Infection Except Viral Meningitis, Major Complexity	\$14,597.60	6	35	\$824.70
B72B	Nervous System Infection Except Viral Meningitis, Minor Complexity	\$2,376.20	0	6	\$811.50
B73Z	Viral Meningitis	\$4,381.10	2	10	\$886.70
B74A	Nontraumatic Stupor and Coma, Major Complexity	\$6,281.40	3	18	\$723.40
B74B	Nontraumatic Stupor and Coma, Minor Complexity	\$2,033.70	0	5	\$914.70
B75Z	Febrile Convulsions	\$1,195.00	0	4	\$996.30
B76A	Seizures, Major Complexity	\$7,378.30	3	19	\$798.30
B76B	Seizures, Minor Complexity	\$3,621.40	1	8	\$947.90
B76C	Seizures, Sameday	\$560.20	1	1	
B77Z	Headache	\$2,709.10	1	6	\$823.20
B78A	Intracranial Injuries, Major Complexity	\$15,488.60	5	31	\$1,003.60
B78B	Intracranial Injuries, Minor Complexity	\$4,656.40	2	11	\$876.70
B78C	Intracranial Injuries, Transferred <5 Days	\$2,549.10	0	4	\$1,274.50
B79A	Skull Fractures, Major Complexity	\$11,873.60	4	25	\$948.30
B79B	Skull Fractures, Minor Complexity	\$3,929.80	2	9	\$867.20
B80A	Other Head Injuries, Major Complexity	\$8,952.10	4	23	\$802.00
B80B	Other Head Injuries, Minor Complexity	\$2,787.00	1	7	\$841.00
B81A	Other Disorders of the Nervous System, Major Complexity	\$8,336.50	4	22	\$768.80
B81B	Other Disorders of the Nervous System, Minor Complexity	\$1,879.00	0	6	\$665.10
B82B	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Intermediate Complexity	\$27,139.10	9	35	\$944.10
B82C	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Minor Complexity	\$4,191.20	2	10	\$776.10
C01Z	Procedures for Penetrating Eye Injury	\$2,651.50	0	4	\$1,400.00
C02Z	Enucleations and Orbital Procedures	\$3,941.50	0	4	\$1,400.00
C03Z	Retinal Procedures	\$1,409.50	0	4	\$915.30
C04Z	Major Corneal, Scleral and Conjunctival Procedures	\$2,916.10	0	4	\$1,400.00
C05Z	Dacryocystorhinostomy	\$2,497.80	0	4	\$1,335.30

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C10Z	Strabismus Procedures	\$1,837.40	0	4	\$1,048.10
C11Z	Eyelid Procedures	\$1,965.40	0	4	\$1,089.30
C12Z	Other Corneal, Scleral and Conjunctival Procedures	\$1,426.60	0	4	\$821.00
C13Z	Lacrimal Procedures	\$1,147.00	0	4	\$656.50
C14Z	Other Eye Procedures	\$1,298.50	0	4	\$713.00
C15Z	Glaucoma and Complex Cataract Procedures	\$2,187.40	0	4	\$1,133.30
C16Z	Lens Procedures	\$1,843.80	0	4	\$1,449.10
C60A	Acute and Major Eye Infections, Major Complexity	\$9,449.40	4	23	\$851.30
C60B	Acute and Major Eye Infections, Minor Complexity	\$5,581.50	2	13	\$884.10
C61A	Neurological and Vascular Disorders of the Eye, Major Complexity	\$4,614.80	2	11	\$866.50
C61B	Neurological and Vascular Disorders of the Eye, Minor Complexity	\$2,288.70	0	6	\$803.90
C62A	Hyphaema and Medically Managed Trauma to the Eye, Major Complexity	\$7,441.30	4	23	\$668.80
C62B	Hyphaema and Medically Managed Trauma to the Eye, Minor Complexity	\$3,574.50	1	8	\$867.60
C63A	Other Disorders of the Eye, Major Complexity	\$3,169.00	2	10	\$653.60
C63B	Other Disorders of the Eye, Intermediate Complexity	\$1,218.50	0	4	\$644.00
D01Z	Cochlear Implant	\$7,146.80	0	4	\$1,400.00
D02A	Head and Neck Procedures, Major Complexity	\$15,022.30	2	14	\$1,400.00
D02B	Head and Neck Procedures, Intermediate Complexity	\$6,970.70	0	6	\$1,400.00
D02C	Head and Neck Procedures, Minor Complexity	\$3,906.30	0	4	\$1,400.00
D03Z	Surgical Repair for Cleft Lip and Palate Disorders	\$4,497.40	0	4	\$1,400.00
D04Z	Maxillo Surgery	\$3,365.30	0	4	\$1,400.00
D05Z	Parotid Gland Procedures	\$5,765.00	0	4	\$1,400.00
D06Z	Sinus and Complex Middle Ear Procedures	\$3,134.80	0	4	\$1,400.00
D10Z	Nasal Procedures	\$2,624.80	0	4	\$1,728.30
D11Z	Tonsillectomy and Adenoidectomy	\$1,885.40	0	4	\$1,444.30
D12A	Other Ear, Nose, Mouth and Throat Procedures, Major Complexity	\$4,185.80	0	6	\$1,209.20
D12B	Other Ear, Nose, Mouth and Throat Procedures, Minor Complexity	\$2,155.30	0	4	\$1,213.10
D13Z	Myringotomy W Tube Insertion	\$1,231.30	0	4	\$855.40
D14A	Mouth and Salivary Gland Procedures, Major Complexity	\$2,911.80	0	5	\$1,074.50
D14B	Mouth and Salivary Gland Procedures, Minor Complexity	\$1,649.60	0	4	\$1,130.40
D15Z	Mastoid Procedures	\$4,678.80	0	4	\$1,400.00
D40Z	Dental Extractions and Restorations	\$1,182.20	0	4	\$1,023.50

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D60A	Ear, Nose, Mouth and Throat Malignancy, Major Complexity	\$13,034.50	5	31	\$832.40
D60B	Ear, Nose, Mouth and Throat Malignancy, Minor Complexity	\$4,870.90	2	11	\$865.00
D60C	Ear, Nose, Mouth and Throat Malignancy, Sameday	\$1,192.90	1	1	
D61A	Dysequilibrium, Major Complexity	\$5,289.10	2	14	\$770.30
D61B	Dysequilibrium, Minor Complexity	\$3,217.00	1	7	\$912.20
D61C	Dysequilibrium, Sameday	\$659.40	1	1	
D62A	Epistaxis, Major Complexity	\$2,864.90	1	7	\$864.20
D62B	Epistaxis, Minor Complexity	\$1,090.50	1	1	
D63A	Otitis Media and Upper Respiratory Infections, Major Complexity	\$6,042.40	3	16	\$791.60
D63B	Otitis Media and Upper Respiratory Infections, Minor Complexity	\$3,105.00	1	7	\$881.50
D63C	Otitis Media and Upper Respiratory Infections, Sameday	\$666.90	1	1	
D64Z	Laryngotracheitis and Epiglottitis	\$1,492.70	0	4	\$877.80
D65Z	Nasal Trauma and Deformity	\$2,103.10	0	5	\$748.90
D66A	Other Ear, Nose, Mouth and Throat Disorders, Major Complexity	\$4,978.60	2	13	\$786.50
D66B	Other Ear, Nose, Mouth and Throat Disorders, Minor Complexity	\$1,248.40	0	4	\$911.50
D66C	Other Ear, Nose, Mouth and Throat Disorders, Sameday	\$1,085.10	1	1	
D67A	Oral and Dental Disorders, Major Complexity	\$5,080.00	5	28	\$361.70
D67B	Oral and Dental Disorders, Minor Complexity	\$885.60	1	1	
E01A	Major Chest Procedures, Major Complexity	\$21,046.60	4	26	\$1,400.00
E01B	Major Chest Procedures, Intermediate Complexity	\$12,398.50	2	13	\$1,400.00
E02A	Other Respiratory System OR Procedures, Major Complexity	\$16,946.10	4	27	\$1,203.70
E02B	Other Respiratory System OR Procedures, Intermediate Complexity	\$6,876.80	1	8	\$1,400.00
E02C	Other Respiratory System OR Procedures, Minor Complexity	\$2,605.60	0	4	\$1,400.00
E40A	Respiratory System Disorders W Ventilator Support, Major Complexity	\$28,726.80	6	33	\$1,400.00
E41A	Respiratory System Disorders W Non-Invasive Ventilation, Major Complexity	\$18,968.10	5	32	\$1,180.00
E41B	Respiratory System Disorders W Non-Invasive Ventilation, Minor Complexity	\$12,928.80	3	20	\$1,288.60
E42A	Bronchoscopy, Major Complexity	\$14,483.50	6	34	\$849.80
E42B	Bronchoscopy, Minor Complexity	\$6,074.40	2	12	\$1,013.50
E42C	Bronchoscopy, Sameday	\$1,279.30	1	1	
E60B	Cystic Fibrosis, Minor Complexity	\$5,736.20	2	11	\$1,102.50
E61A	Pulmonary Embolism, Major Complexity	\$8,679.00	3	20	\$862.40

OFFICIAL

E61B	Pulmonary Embolism, Minor Complexity	\$4,533.70	2	10	\$953.50
E62A	Respiratory Infections and Inflammations, Major Complexity	\$10,433.10	4	25	\$843.10
E62B	Respiratory Infections and Inflammations, Minor Complexity	\$5,903.70	2	14	\$864.90
E62C	Respiratory Infections/Inflammations W/O CC	\$3,778.20	1	9	\$877.20
E63Z	Sleep Apnoea	\$700.00	0	4	\$696.00
E64A	Pulmonary Oedema and Respiratory Failure, Major Complexity	\$7,716.50	3	18	\$886.00
E64B	Pulmonary Oedema and Respiratory Failure, Minor Complexity	\$2,716.60	0	4	\$1,400.00
E65A	Chronic Obstructive Airways Disease, Major Complexity	\$9,807.90	4	24	\$808.50
E65B	Chronic Obstructive Airways Disease, Minor Complexity	\$5,019.20	2	12	\$830.50
E66A	Major Chest Trauma, Major Complexity	\$11,065.90	5	29	\$782.00
E66B	Major Chest Trauma, Minor Complexity	\$5,283.80	2	13	\$824.00
E66C	Major Chest Trauma W/O CC	\$3,707.80	2	9	\$823.60
E67A	Respiratory Signs and Symptoms, Major Complexity	\$4,896.50	2	11	\$849.30
E67B	Respiratory Signs and Symptoms, Minor Complexity	\$1,709.30	0	4	\$1,156.90
E68A	Pneumothorax, Major Complexity	\$6,764.80	3	17	\$822.30
E68B	Pneumothorax, Minor Complexity	\$2,740.10	1	6	\$896.40
E69A	Bronchitis and Asthma, Major Complexity	\$5,973.10	2	14	\$856.40
E69B	Bronchitis and Asthma, Minor Complexity	\$2,583.20	1	7	\$831.50
E70A	Whooping Cough and Acute Bronchiolitis, Major Complexity	\$6,424.40	2	11	\$1,259.70
E70B	Whooping Cough and Acute Bronchiolitis, Minor Complexity	\$2,714.40	0	5	\$1,233.00
E71A	Respiratory Neoplasms, Major Complexity	\$10,241.10	4	26	\$806.70
E71B	Respiratory Neoplasms, Minor Complexity	\$5,403.30	2	15	\$732.00
E71C	Respiratory Neoplasms, Sameday	\$689.30	1	1	
E72Z	Respiratory Problems Arising from Neonatal Period	\$1,861.90	0	4	\$1,400.00
E73A	Pleural Effusion, Major Complexity	\$9,144.20	3	21	\$861.10
E73B	Pleural Effusion, Intermediate Complexity	\$5,447.00	2	12	\$885.40
E73C	Pleural Effusion, Minor Complexity	\$2,655.80	0	6	\$902.20
E74A	Interstitial Lung Disease, Major Complexity	\$10,797.00	4	26	\$852.70
E74B	Interstitial Lung Disease, Minor Complexity	\$6,097.90	3	16	\$773.70
E74C	Interstitial Lung Disease W/O CC	\$2,582.10	1	7	\$728.30

OFFICIAL

E75A	Other Respiratory System Disorders, Major Complexity	\$6,346.50	3	16	\$830.60
E75B	Other Respiratory System Disorders, Minor Complexity	\$3,408.00	1	8	\$887.90
F01A	Implantation and Replacement of AICD, Total System, Major Complexity	\$22,125.30	3	21	\$1,400.00
F01B	Implantation and Replacement of AICD, Total System, Minor Complexity	\$10,082.10	0	5	\$1,400.00
F02Z	Other AICD Procedures	\$8,373.80	1	6	\$1,400.00
F03A	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation, Major Comp	\$46,387.80	6	35	\$1,400.00
F03B	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation, Minor Comp	\$26,947.10	3	16	\$1,400.00
F04A	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Major Comp	\$36,517.00	4	25	\$1,400.00
F04B	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Interm Comp	\$23,267.00	2	14	\$1,400.00
F05A	Coronary Bypass W Invasive Cardiac Investigation, Major Complexity	\$42,206.30	5	31	\$1,400.00
F05B	Coronary Bypass W Invasive Cardiac Investigation, Minor Complexity	\$32,116.70	4	23	\$1,400.00
F06A	Coronary Bypass W/O Invasive Cardiac Investigation, Major Complexity	\$32,381.30	4	24	\$1,400.00
F06B	Coronary Bypass W/O Invasive Cardiac Investigation, Minor Complexity	\$27,253.30	3	18	\$1,400.00
F07A	Other Cardiothoracic/Vascular Procedures W CPB Pump, Major Complexity	\$35,893.90	4	26	\$1,400.00
F07B	Other Cardiothoracic/Vascular Procedures W CPB Pump, Intermediate Complexity	\$27,633.20	3	18	\$1,400.00
F08A	Major Reconstructive Vascular Procedures W/O CPB Pump, Major Complexity	\$29,154.70	5	30	\$1,400.00
F08B	Major Reconstructive Vascular Procedures W/O CPB Pump, Intermediate Complexity	\$12,981.10	2	10	\$1,400.00
F09A	Other Cardiothoracic Procedures W/O CPB Pump, Major Complexity	\$23,814.40	4	24	\$1,400.00
F09B	Other Cardiothoracic Procedures W/O CPB Pump, Intermediate Complexity	\$10,227.20	1	7	\$1,400.00
F09C	Other Cardiothoracic Procedures W/O CPB Pump, Minor Complexity	\$11,294.20	0	4	\$1,400.00
F10A	Interventional Coronary Procedures, Admitted for AMI, Major Complexity	\$18,364.10	3	18	\$1,400.00
F10B	Interventional Coronary Procedures, Admitted for AMI, Minor Complexity	\$11,534.30	1	7	\$1,400.00
F11A	Amputation, Except Upper Limb and Toe, for Circulatory Disorders, Major Comp	\$34,317.90	11	35	\$1,014.40

OFFICIAL

F11B	Amputation, Except Upper Limb and Toe, for Circulatory Disorders, Minor Comp	\$22,214.90	6	35	\$1,192.80
F12A	Implantation and Replacement of Pacemaker, Total System, Major Complexity	\$16,496.90	4	24	\$1,271.60
F12B	Implantation and Replacement of Pacemaker, Total System, Minor Complexity	\$7,629.10	0	6	\$1,400.00
F13A	Amputation, Upper Limb and Toe, for Circulatory Disorders, Major Complexity	\$19,248.70	6	35	\$973.60
F13B	Amputation, Upper Limb and Toe, for Circulatory Disorders, Minor Complexity	\$10,005.30	2	14	\$1,335.60
F14A	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Major Complexity	\$18,553.00	4	25	\$1,313.90
F14B	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Interm Comp	\$8,035.60	0	6	\$1,400.00
F14C	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Minor Complexity	\$6,253.70	0	4	\$1,400.00
F15A	Interventional Coronary Procs, Not Adm for AMI, W Stent Implant, Major Comp	\$13,681.10	1	8	\$1,400.00
F15B	Interventional Coronary Procs, Not Adm for AMI, W Stent Implant, Minor Comp	\$10,918.60	0	4	\$1,400.00
F16A	Interventional Coronary Procs, Not Adm for AMI, W/O Stent Implant, Major Comp	\$10,549.40	1	8	\$1,400.00
F16B	Interventional Coronary Procs, Not Adm for AMI, W/O Stent Implant, Minor Comp	\$8,556.30	0	4	\$1,400.00
F17Z	Insertion or Replacement of Pacemaker Generator	\$3,744.10	0	4	\$1,400.00
F18A	Other Pacemaker Procedures, Major Complexity	\$9,935.90	2	13	\$1,373.80
F18B	Other Pacemaker Procedures, Minor Complexity	\$4,710.80	0	4	\$1,400.00
F19A	Trans-Vascular Percutaneous Cardiac Intervention, Major Complexity	\$11,138.40	2	10	\$1,400.00
F19B	Trans-Vascular Percutaneous Cardiac Intervention, Minor Complexity	\$7,408.20	0	4	\$1,400.00
F20Z	Vein Ligation and Stripping	\$3,910.60	0	4	\$1,400.00
F21A	Other Circulatory System OR Procedures, Major Complexity	\$21,263.20	8	35	\$909.10
F21B	Other Circulatory System OR Procedures, Intermediate Complexity	\$6,984.60	2	11	\$1,087.60
F40A	Circulatory Disorders W Ventilator Support, Major Complexity	\$34,844.00	5	30	\$1,400.00
F40B	Circulatory Disorders W Ventilator Support, Minor Complexity	\$13,402.60	0	6	\$1,400.00

OFFICIAL

F41A	Circulatory Disorders, Adm for AMI W Invasive Cardiac Inves Proc, Major Comp	\$9,800.40	2	13	\$1,341.30
F41B	Circulatory Disorders, Adm for AMI W Invasive Cardiac Inves Proc, Minor Comp	\$5,855.70	0	6	\$1,400.00
F42A	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves Proc, Major Comp	\$9,064.20	2	13	\$1,183.30
F42B	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves Proc, Minor Comp	\$5,912.20	0	4	\$1,400.00
F42C	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves, Sameday	\$3,437.90	1	1	
F43Z	Circulatory Disorders W Non-Invasive Ventilation	\$19,185.70	5	31	\$1,223.30
F60A	Circulatory Dsrds, Adm for AMI W/O Invas Card Inves Proc	\$3,728.10	2	10	\$790.30
F60B	Circulatory Dsrds, Adm for AMI W/O Invas Card Inves Proc, Transf <5 Days	\$2,716.60	0	4	\$1,400.00
F61A	Infective Endocarditis, Major Complexity	\$20,681.70	9	35	\$771.60
F61B	Infective Endocarditis, Minor Complexity	\$6,116.00	3	16	\$776.60
F62A	Heart Failure and Shock, Major Complexity	\$11,634.60	4	27	\$873.00
F62B	Heart Failure and Shock, Minor Complexity	\$6,068.00	2	14	\$918.50
F62C	Heart Failure and Shock, Transferred <5 Days	\$3,665.10	0	5	\$1,400.00
F63A	Venous Thrombosis, Major Complexity	\$6,978.20	3	17	\$855.50
F63B	Venous Thrombosis, Minor Complexity	\$3,324.80	1	8	\$884.40
F64A	Skin Ulcers in Circulatory Disorders, Major Complexity	\$12,582.10	5	33	\$769.60
F64B	Skin Ulcers in Circulatory Disorders, Intermediate Complexity	\$6,562.10	3	17	\$793.10
F65A	Peripheral Vascular Disorders, Major Complexity	\$8,811.30	4	23	\$781.90
F65B	Peripheral Vascular Disorders, Minor Complexity	\$2,006.00	0	5	\$785.70
F66A	Coronary Atherosclerosis, Major Complexity	\$4,716.10	2	13	\$770.20
F66B	Coronary Atherosclerosis, Minor Complexity	\$832.30	0	4	\$515.90
F67A	Hypertension, Major Complexity	\$6,440.40	3	16	\$843.60
F67B	Hypertension, Minor Complexity	\$3,119.90	1	8	\$861.00
F68Z	Congenital Heart Disease	\$1,275.10	0	4	\$820.30
F69A	Valvular Disorders, Major Complexity	\$6,423.30	3	16	\$798.10
F69B	Valvular Disorders, Minor Complexity	\$1,635.70	0	5	\$743.10
F72A	Unstable Angina, Major Complexity	\$6,051.00	2	15	\$824.60
F72B	Unstable Angina, Minor Complexity	\$2,513.90	0	6	\$892.00
F73A	Syncope and Collapse, Major Complexity	\$7,790.20	3	19	\$832.80

OFFICIAL

F73B	Syncope and Collapse, Minor Complexity	\$3,681.20	1	9	\$884.10
F73C	Syncope and Collapse, Sameday	\$1,425.50	1	1	
F74A	Chest Pain, Major Complexity	\$3,148.70	1	8	\$824.80
F74B	Chest Pain, Minor Complexity	\$1,128.90	0	4	\$1,111.90
F75A	Other Circulatory Disorders, Major Complexity	\$10,865.30	4	24	\$899.00
F75B	Other Circulatory Disorders, Intermediate Complexity	\$4,944.50	2	10	\$974.40
F75C	Other Circulatory Disorders, Minor Complexity	\$2,147.90	0	5	\$916.50
F76A	Arrhythmia, Cardiac Arrest and Conduction Disorders, Major Complexity	\$7,367.60	3	17	\$904.90
F76B	Arrhythmia, Cardiac Arrest and Conduction Disorders, Minor Complexity	\$3,275.70	0	6	\$1,119.00
F76C	Arrhythmia, Cardiac Arrest and Conduction Disorders, Sameday	\$782.10	1	1	
G01A	Rectal Resection, Major Complexity	\$24,132.30	5	30	\$1,400.00
G01B	Rectal Resection, Intermediate Complexity	\$13,240.40	2	14	\$1,400.00
G02A	Major Small and Large Bowel Procedures, Major Complexity	\$22,357.90	5	29	\$1,400.00
G02B	Major Small and Large Bowel Procedures, Intermediate Complexity	\$9,077.00	2	10	\$1,400.00
G03A	Stomach, Oesophageal and Duodenal Procedures, Major Complexity	\$21,806.30	4	22	\$1,400.00
G03B	Stomach, Oesophageal and Duodenal Procedures, Intermediate Complexity	\$9,573.10	1	7	\$1,400.00
G03C	Stomach, Oesophageal and Duodenal Procedures, Minor Complexity	\$6,253.70	0	5	\$1,400.00
G04A	Peritoneal Adhesiolysis, Major Complexity	\$17,841.30	4	25	\$1,370.50
G04B	Peritoneal Adhesiolysis, Intermediate Complexity	\$8,974.50	1	8	\$1,400.00
G04C	Peritoneal Adhesiolysis, Minor Complexity	\$5,501.50	0	5	\$1,400.00
G05A	Minor Small and Large Bowel Procedures, Major Complexity	\$12,583.10	4	22	\$1,101.30
G05B	Minor Small and Large Bowel Procedures, Minor Complexity	\$8,612.80	2	12	\$1,340.10
G05C	Minor Small and Large Bowel Procedures W/O CC	\$5,964.50	1	8	\$1,324.80
G07A	Appendectomy, Major Complexity	\$5,640.20	1	7	\$1,400.00
G07B	Appendectomy, Minor Complexity	\$4,081.30	0	4	\$1,400.00
G10A	Hernia Procedures, Major Complexity	\$5,274.20	0	6	\$1,400.00
G10B	Hernia Procedures, Minor Complexity	\$3,057.00	0	4	\$1,400.00
G11Z	Anal and Stomal Procedures	\$2,022.00	0	4	\$1,125.70
G12A	Other Digestive System OR Procedures, Major Complexity	\$16,825.50	6	34	\$945.20
G12B	Other Digestive System OR Procedures, Intermediate Complexity	\$5,862.10	2	10	\$1,125.80

OFFICIAL

G12C	Other Digestive System OR Procedures, Minor Complexity	\$3,347.20	0	4	\$1,370.00
G46A	Complex Endoscopy, Major Complexity	\$13,410.10	5	31	\$863.70
G46B	Complex Endoscopy, Minor Complexity	\$3,677.90	0	6	\$1,190.60
G46C	Complex Endoscopy, Sameday	\$1,037.10	1	1	
G47A	Gastrosocopy, Major Complexity	\$11,507.60	5	29	\$794.00
G47B	Gastrosocopy, Intermediate Complexity	\$3,750.50	1	8	\$1,003.30
G47C	Gastrosocopy, Minor Complexity	\$704.20	1	1	
G48A	Colonoscopy, Major Complexity	\$7,813.60	3	17	\$904.90
G48B	Colonoscopy, Minor Complexity	\$2,528.80	0	5	\$1,128.60
G48C	Colonoscopy, Sameday	\$918.70	1	1	
G60A	Digestive Malignancy, Major Complexity	\$8,950.00	4	23	\$794.30
G60B	Digestive Malignancy, Minor Complexity	\$3,433.60	2	10	\$732.90
G61A	Gastrointestinal Haemorrhage, Major Complexity	\$6,728.50	3	18	\$777.60
G61B	Gastrointestinal Haemorrhage, Minor Complexity	\$2,662.20	1	7	\$849.90
G64A	Inflammatory Bowel Disease, Major Complexity	\$3,886.00	1	9	\$879.50
G64B	Inflammatory Bowel Disease, Minor Complexity	\$581.50	0	4	\$577.70
G65A	Gastrointestinal Obstruction, Major Complexity	\$7,416.70	3	19	\$810.80
G65B	Gastrointestinal Obstruction, Minor Complexity	\$3,332.20	1	8	\$896.60
G66A	Abdominal Pain and Mesenteric Adenitis, Major Complexity	\$2,800.90	1	7	\$839.70
G66B	Abdominal Pain and Mesenteric Adenitis, Minor Complexity	\$778.90	1	1	
G67A	Oesophagitis and Gastroenteritis, Major Complexity	\$6,253.70	2	15	\$878.30
G67B	Oesophagitis and Gastroenteritis, Minor Complexity	\$2,647.20	1	6	\$878.50
G70A	Other Digestive System Disorders, Major Complexity	\$7,195.80	3	18	\$830.80
G70B	Other Digestive System Disorders, Minor Complexity	\$3,116.70	1	8	\$858.50
G70C	Other Digestive System Disorders, Sameday	\$772.50	1	1	
H01A	Pancreas, Liver and Shunt Procedures, Major Complexity	\$28,326.70	5	30	\$1,400.00
H01B	Pancreas, Liver and Shunt Procedures, Intermediate Complexity	\$13,132.60	2	12	\$1,400.00
H02A	Major Biliary Tract Procedures, Major Complexity	\$19,216.70	5	29	\$1,230.50
H02B	Major Biliary Tract Procedures, Minor Complexity	\$8,125.20	1	9	\$1,400.00
H05A	Hepatobiliary Diagnostic Procedures, Major Complexity	\$12,893.60	3	19	\$1,262.70

OFFICIAL

H05B	Hepatobiliary Diagnostic Procedures, Minor Complexity	\$3,695.00	0	5	\$1,329.80
H06A	Other Hepatobiliary and Pancreas OR Procedures, Major Complexity	\$15,403.20	4	27	\$1,056.80
H06B	Other Hepatobiliary and Pancreas OR Procedures, Intermediate Complexity	\$5,642.30	0	5	\$1,400.00
H07A	Open Cholecystectomy, Major Complexity	\$19,120.60	4	23	\$1,400.00
H07B	Open Cholecystectomy, Intermediate Complexity	\$8,376.00	1	9	\$1,400.00
H08A	Laparoscopic Cholecystectomy, Major Complexity	\$7,471.10	1	8	\$1,400.00
H08B	Laparoscopic Cholecystectomy, Minor Complexity	\$4,500.60	0	4	\$1,400.00
H40A	Endoscopic Procedures for Bleeding Oesophageal Varices, Major Complexity	\$5,840.80	2	10	\$1,120.50
H40B	Endoscopic Procedures for Bleeding Oesophageal Varices, Intermediate Complexity	\$4,556.10	1	9	\$1,067.50
H43A	ERCP Procedures, Major Complexity	\$9,974.30	3	19	\$981.80
H43B	ERCP Procedures, Intermediate Complexity	\$4,121.80	0	6	\$1,197.90
H43C	ERCP Procedures, Minor Complexity	\$2,378.30	1	1	
H60A	Cirrhosis and Alcoholic Hepatitis, Major Complexity	\$11,581.20	4	26	\$870.80
H60B	Cirrhosis and Alcoholic Hepatitis, Intermediate Complexity	\$6,196.10	3	16	\$789.50
H60C	Cirrhosis and Alcoholic Hepatitis, Minor Complexity	\$771.40	1	1	
H61A	Malignancy of Hepatobiliary System and Pancreas, Major Complexity	\$10,562.20	4	26	\$805.40
H61B	Malignancy of Hepatobiliary System and Pancreas, Minor Complexity	\$5,376.60	2	14	\$756.50
H61C	Malignancy of Hepatobiliary System and Pancreas, Sameday	\$918.70	1	1	
H62A	Disorders of Pancreas, Except Malignancy, Major Complexity	\$8,046.20	3	18	\$885.80
H62B	Disorders of Pancreas, Except Malignancy, Minor Complexity	\$2,631.20	0	6	\$867.70
H63A	Other Disorders of Liver, Major Complexity	\$10,328.60	4	27	\$765.30
H63B	Other Disorders of Liver, Intermediate Complexity	\$4,516.60	2	10	\$902.10
H63C	Other Disorders of Liver, Minor Complexity	\$805.60	1	1	
H64A	Disorders of the Biliary Tract, Major Complexity	\$7,124.40	3	18	\$801.60
H64B	Disorders of the Biliary Tract, Minor Complexity	\$2,779.50	1	7	\$855.20
H64C	Disorders of the Biliary Tract, Sameday	\$776.80	1	1	
I01A	Bilateral and Multiple Major Joint Procedures of Lower Limb, Major Complexity	\$24,746.90	5	33	\$1,326.30

OFFICIAL

I01B	Bilateral and Multiple Major Joint Procedures of Lower Limb, Minor Complexity	\$14,603.00	2	12	\$1,400.00
I02A	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Major Complexity	\$27,468.80	7	35	\$1,064.60
I02B	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Intermediate Comp	\$5,396.90	0	6	\$1,381.70
I03A	Hip Replacement, Major Complexity	\$18,374.80	4	24	\$1,400.00
I03B	Hip Replacement, Minor Complexity	\$11,224.80	2	9	\$1,400.00
I04A	Knee Replacement, Major Complexity	\$12,951.20	2	14	\$1,400.00
I04B	Knee Replacement, Minor Complexity	\$10,431.00	2	9	\$1,400.00
I05A	Other Joint Replacement, Major Complexity	\$12,530.80	3	16	\$1,400.00
I05B	Other Joint Replacement, Minor Complexity	\$7,967.30	1	7	\$1,400.00
I06Z	Spinal Fusion for Deformity	\$22,716.40	3	19	\$1,400.00
I07Z	Amputation	\$20,990.00	5	33	\$1,168.20
I08A	Other Hip and Femur Procedures, Major Complexity	\$20,579.20	6	35	\$1,076.10
I08B	Other Hip and Femur Procedures, Minor Complexity	\$7,167.00	1	9	\$1,400.00
I09A	Spinal Fusion, Major Complexity	\$26,651.50	5	30	\$1,400.00
I09B	Spinal Fusion, Intermediate Complexity	\$14,028.90	2	12	\$1,400.00
I10A	Other Back and Neck Procedures, Major Complexity	\$11,805.30	2	14	\$1,400.00
I10B	Other Back and Neck Procedures, Minor Complexity	\$7,364.40	0	6	\$1,400.00
I11Z	Limb Lengthening Procedures	\$9,842.00	2	12	\$1,400.00
I12A	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Major Complexity	\$21,599.30	7	35	\$932.50
I12B	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Intermediate Comp	\$9,749.20	3	18	\$990.60
I12C	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Minor Complexity	\$4,488.90	1	6	\$1,182.90
I13A	Humerus, Tibia, Fibula and Ankle Procedures, Major Complexity	\$9,366.10	2	15	\$1,148.40
I13B	Humerus, Tibia, Fibula and Ankle Procedures, Minor Complexity	\$4,441.90	0	5	\$1,400.00
I13C	Humerus, Tibia, Fibula and Ankle Procedures W/O CC, Age <17	\$3,782.50	0	4	\$1,400.00
I15Z	Cranio-Facial Surgery	\$12,195.80	2	13	\$1,400.00
I16Z	Other Shoulder Procedures	\$3,922.00	0	4	\$1,400.00
I17A	Maxillo-Facial Surgery, Major Complexity	\$10,012.70	2	10	\$1,400.00
I17B	Maxillo-Facial Surgery, Minor Complexity	\$4,184.80	0	4	\$1,400.00

OFFICIAL

I18Z	Other Knee Procedures	\$2,206.60	0	4	\$1,400.00
I19A	Other Elbow and Forearm Procedures, Major Complexity	\$6,291.00	2	10	\$1,148.90
I19B	Other Elbow and Forearm Procedures, Minor Complexity	\$3,401.60	0	4	\$1,400.00
I20Z	Other Foot Procedures	\$3,257.60	0	4	\$1,400.00
I21Z	Local Excision and Removal of Internal Fixation Devices of Hip and Femur	\$2,721.90	0	4	\$1,400.00
I23Z	Local Excision and Removal of Internal Fixation Devices, Except Hip and Femur	\$1,935.50	0	4	\$1,107.60
I24Z	Arthroscopy	\$2,560.80	0	4	\$1,304.20
I25A	Bone and Joint Diagnostic Procedures Including Biopsy, Major Complexity	\$8,045.20	3	19	\$849.20
I25B	Bone and Joint Diagnostic Procedures Including Biopsy, Minor Complexity	\$2,785.90	0	5	\$986.00
I27A	Soft Tissue Procedures, Major Complexity	\$9,898.60	3	18	\$1,020.10
I27B	Soft Tissue Procedures, Minor Complexity	\$3,607.50	0	4	\$1,400.00
I27C	Soft Tissue Procedures, Sameday	\$1,872.60	1	1	
I28A	Other Musculoskeletal Procedures, Major Complexity	\$10,726.60	3	19	\$1,037.40
I28B	Other Musculoskeletal Procedures, Intermediate Complexity	\$3,185.00	0	4	\$1,400.00
I29Z	Knee Reconstructions, and Revisions of Reconstructions	\$3,770.80	0	4	\$1,400.00
I30Z	Hand Procedures	\$2,139.30	0	4	\$1,141.70
I31A	Revision of Hip Replacement, Major Complexity	\$23,709.80	6	35	\$1,224.70
I31B	Revision of Hip Replacement, Intermediate Complexity	\$14,577.40	2	13	\$1,400.00
I32A	Revision of Knee Replacement, Major Complexity	\$18,965.90	5	30	\$1,112.90
I32B	Revision of Knee Replacement, Minor Complexity	\$11,652.70	2	11	\$1,400.00
I40Z	Infusions for Musculoskeletal Disorders, Sameday	\$987.00	1	1	
I60Z	Femoral Shaft Fractures	\$15,040.40	7	35	\$771.20
I61A	Distal Femoral Fractures, Major Complexity	\$18,573.30	8	35	\$736.60
I61B	Distal Femoral Fractures, Minor Complexity	\$12,652.50	6	34	\$757.10
I63A	Sprains, Strains and Dislocations of Hip, Pelvis and Thigh, Major Complexity	\$9,597.70	4	25	\$762.20
I63B	Sprains, Strains and Dislocations of Hip, Pelvis and Thigh, Minor Complexity	\$5,570.80	2	14	\$835.90
I64A	Osteomyelitis, Major Complexity	\$13,413.30	6	35	\$759.10
I64B	Osteomyelitis, Minor Complexity	\$8,488.00	4	24	\$719.70

OFFICIAL

I65A	Musculoskeletal Malignant Neoplasms, Major Complexity	\$11,791.40	5	30	\$793.80
I65B	Musculoskeletal Malignant Neoplasms, Minor Complexity	\$7,697.30	3	18	\$871.10
I66A	Inflammatory Musculoskeletal Disorders, Major Complexity	\$11,384.90	4	25	\$894.40
I66B	Inflammatory Musculoskeletal Disorders, Intermediate Complexity	\$5,448.10	2	14	\$807.80
I67A	Septic Arthritis, Major Complexity	\$12,464.70	6	34	\$740.80
I67B	Septic Arthritis, Minor Complexity	\$8,518.90	4	23	\$733.00
I68A	Non-surgical Spinal Disorders, Major Complexity	\$10,242.10	4	26	\$795.00
I68B	Non-surgical Spinal Disorders, Minor Complexity	\$5,834.40	2	14	\$836.30
I69A	Bone Diseases and Arthropathies, Major Complexity	\$10,112.00	4	26	\$783.00
I69B	Bone Diseases and Arthropathies, Minor Complexity	\$7,539.40	3	19	\$800.60
I71A	Other Musculotendinous Disorders, Major Complexity	\$8,935.10	4	23	\$780.20
I71B	Other Musculotendinous Disorders, Minor Complexity	\$4,812.20	2	12	\$808.10
I72A	Specific Musculotendinous Disorders, Major Complexity	\$11,724.20	5	33	\$726.70
I72B	Specific Musculotendinous Disorders, Minor Complexity	\$6,812.80	3	18	\$776.80
I73A	Aftercare of Musculoskeletal Implants or Prostheses, Major Complexity	\$13,606.40	6	35	\$717.70
I73B	Aftercare of Musculoskeletal Implants or Prostheses, Minor Complexity	\$6,984.60	3	18	\$765.60
I74A	Injuries to Forearm, Wrist, Hand and Foot, Major Complexity	\$11,977.10	5	32	\$752.70
I74B	Injuries to Forearm, Wrist, Hand and Foot, Minor Complexity	\$5,592.10	2	14	\$793.50
I75A	Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle, Major Complexity	\$13,827.30	6	35	\$754.20
I75B	Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle, Minor Complexity	\$8,181.80	3	21	\$791.40
I76A	Other Musculoskeletal Disorders, Major Complexity	\$13,146.50	5	33	\$805.00
I76B	Other Musculoskeletal Disorders, Intermediate Complexity	\$7,544.80	3	19	\$803.70
I77A	Fractures of Pelvis, Major Complexity	\$15,229.30	6	35	\$792.30
I77B	Fractures of Pelvis, Minor Complexity	\$10,116.20	4	26	\$802.80
I78A	Fractures of Neck of Femur, Major Complexity	\$15,660.40	7	35	\$721.40
I78B	Fractures of Neck of Femur, Minor Complexity	\$12,001.60	5	32	\$764.40
I79A	Pathological Fractures, Major Complexity	\$14,226.30	6	35	\$774.90
I79B	Pathological Fractures, Minor Complexity	\$9,693.70	4	25	\$786.80

OFFICIAL

I80Z	Femoral Fractures, Transferred to Acute Facility <2 Days	\$1,478.90	0	4	\$1,478.50
I81Z	Musculoskeletal Injuries, Sameday	\$277.40	1	1	
I82Z	Other Sameday Treatment for Musculoskeletal Disorders	\$382.00	1	1	
J01A	Microvas Tiss Transf for Skin, Subcut Tiss & Breast Dsrds, Major Complexity	\$24,374.50	4	22	\$1,400.00
J01B	Microvas Tiss Transf for Skin, Subcut Tiss & Breast Dsrds, Minor Complexity	\$18,205.20	2	14	\$1,400.00
J06A	Major Procedures for Breast Disorders, Major Complexity	\$4,948.70	0	5	\$1,400.00
J06B	Major Procedures for Breast Disorders, Minor Complexity	\$4,218.90	0	4	\$1,400.00
J07A	Minor Procedures for Breast Disorders, Major Complexity	\$2,572.50	0	4	\$1,363.90
J07B	Minor Procedures for Breast Disorders, Minor Complexity	\$1,980.40	0	4	\$1,155.90
J08A	Other Skin Grafts and Debridement Procedures, Major Complexity	\$8,848.60	3	16	\$1,050.20
J08B	Other Skin Grafts and Debridement Procedures, Intermediate Complexity	\$3,687.60	0	5	\$1,360.60
J08C	Other Skin Grafts and Debridement Procedures, Minor Complexity	\$2,110.50	1	1	
J09Z	Perianal and Pilonidal Procedures	\$2,266.30	0	4	\$911.80
J10Z	Plastic OR Procedures for Skin, Subcutaneous Tissue and Breast Disorders	\$2,585.30	0	4	\$1,201.50
J11Z	Other Skin, Subcutaneous Tissue and Breast Procedures	\$1,530.10	0	4	\$786.20
J12A	Lower Limb Procedures W Ulcer or Cellulitis, Major Complexity	\$22,793.30	8	35	\$933.40
J12B	Lower Limb Procedures W Ulcer or Cellulitis, Minor Complexity	\$10,965.60	3	20	\$991.60
J12C	Lower Limb Procs W Ulcer/Cellulitis W/O Cat CC W/O Skin Graft/Flap Repair	\$8,473.00	3	17	\$941.10
J13A	Lower Limb Procedures W/O Ulcer or Cellulitis, Major Complexity	\$10,019.10	3	20	\$941.20
J13B	Lower Limb Procedures W/O Ulcer or Cellulitis, Minor Complexity	\$3,619.30	0	5	\$1,095.50
J14Z	Major Breast Reconstructions	\$10,757.50	2	11	\$1,400.00
J60A	Skin Ulcers, Major Complexity	\$14,167.60	6	35	\$754.00
J60B	Skin Ulcers, Intermediate Complexity	\$9,291.40	4	23	\$810.00
J60C	Skin Ulcers, Minor Complexity	\$334.00	1	1	
J62A	Malignant Breast Disorders, Major Complexity	\$5,300.90	3	15	\$702.10
J62B	Malignant Breast Disorders, Minor Complexity	\$256.10	1	1	
J63A	Non-Malignant Breast Disorders, Major Complexity	\$3,501.90	1	7	\$941.60
J63B	Non-Malignant Breast Disorders, Minor Complexity	\$975.20	1	1	
J64A	Cellulitis, Major Complexity	\$9,524.00	4	23	\$837.00

OFFICIAL

J64B	Cellulitis, Minor Complexity	\$4,265.90	2	10	\$849.00
J65A	Trauma to Skin, Subcutaneous Tissue and Breast, Major Complexity	\$9,102.60	4	23	\$799.00
J65B	Trauma to Skin, Subcutaneous Tissue and Breast, Minor Complexity	\$4,834.60	2	11	\$866.30
J65C	Trauma to Skin, Subcutaneous Tissue and Breast, Sameday	\$709.60	1	1	
J67A	Minor Skin Disorders, Major Complexity	\$5,702.00	2	13	\$865.70
J67B	Minor Skin Disorders, Minor Complexity	\$865.30	1	1	
J68A	Major Skin Disorders, Major Complexity	\$9,485.60	4	23	\$842.50
J68B	Major Skin Disorders, Minor Complexity	\$4,583.80	1	9	\$1,035.90
J68C	Major Skin Disorders, Sameday	\$350.00	1	1	
J69A	Skin Malignancy, Major Complexity	\$11,531.10	5	30	\$788.80
J69B	Skin Malignancy, Intermediate Complexity	\$8,030.20	3	21	\$789.60
J69C	Skin Malignancy, Minor Complexity	\$414.00	1	1	
K01A	OR Procedures for Diabetic Complications, Major Complexity	\$31,030.50	10	35	\$991.50
K01B	OR Procedures for Diabetic Complications, Intermediate Complexity	\$15,002.00	4	23	\$1,199.50
K02A	Pituitary Procedures, Major Complexity	\$16,479.80	3	16	\$1,400.00
K02B	Pituitary Procedures, Minor Complexity	\$13,434.60	2	11	\$1,400.00
K03Z	Adrenal Procedures	\$9,834.50	1	8	\$1,400.00
K05A	Parathyroid Procedures, Major Complexity	\$8,214.80	1	8	\$1,400.00
K05B	Parathyroid Procedures, Minor Complexity	\$4,272.30	0	4	\$1,400.00
K06A	Thyroid Procedures, Major Complexity	\$7,300.40	0	6	\$1,400.00
K06B	Thyroid Procedures, Minor Complexity	\$4,822.80	0	4	\$1,400.00
K08Z	Thyroglossal Procedures	\$3,277.80	0	4	\$1,400.00
K09A	Other Endocrine, Nutritional and Metabolic OR Procedures, Major Complexity	\$18,952.10	5	33	\$1,018.60
K09B	Other Endocrine, Nutritional and Metabolic OR Procedures, Minor Complexity	\$10,327.50	2	14	\$1,303.70
K09C	Other Endocrine, Nutritional and Metabolic OR Procs W/O CC	\$7,761.40	1	8	\$1,400.00
K10A	Revisional and Open Bariatric Procedures, Major Complexity	\$8,173.20	1	7	\$1,400.00
K10B	Revisional and Open Bariatric Procedures, Minor Complexity	\$6,830.90	0	5	\$1,400.00
K11A	Major Laparoscopic Bariatric Procedures, Major Complexity	\$7,679.20	0	6	\$1,400.00
K11B	Major Laparoscopic Bariatric Procedures, Minor Complexity	\$6,757.30	0	5	\$1,400.00

OFFICIAL

K12Z	Other Bariatric Procedures	\$5,087.50	0	4	\$1,400.00
K13Z	Plastic OR Procedures for Endocrine, Nutritional and Metabolic Disorders	\$7,182.00	1	7	\$1,400.00
K40A	Endoscopic and Investigative Procedures for Metabolic Disorders, Major Comp	\$14,482.40	6	35	\$830.60
K40B	Endoscopic and Investigative Procedures for Metabolic Disorders, Minor Comp	\$3,421.90	1	7	\$1,042.90
K40C	Endoscopic and Investigative Procs for Metabolic Disorders, Sameday	\$971.00	1	1	
K60A	Diabetes, Major Complexity	\$10,763.90	4	25	\$870.70
K60B	Diabetes, Minor Complexity	\$5,010.60	2	12	\$846.80
K60C	Diabetes, Sameday	\$511.10	1	1	
K61Z	Severe Nutritional Disturbance	\$10,094.90	4	24	\$868.20
K62A	Miscellaneous Metabolic Disorders, Major Complexity	\$7,741.10	3	18	\$886.10
K62B	Miscellaneous Metabolic Disorders, Intermediate Complexity	\$3,777.20	1	9	\$915.00
K62C	Miscellaneous Metabolic Disorders, Minor Complexity	\$469.50	1	1	
K63A	Inborn Errors of Metabolism, Major Complexity	\$6,192.90	2	15	\$845.00
K63B	Inborn Errors of Metabolism, Minor Complexity	\$1,374.30	0	4	\$943.80
K64A	Endocrine Disorders, Major Complexity	\$9,177.30	4	22	\$857.00
K64B	Endocrine Disorders, Minor Complexity	\$3,759.00	1	9	\$890.50
K64C	Endocrine Disorders, Sameday	\$404.40	1	1	
L02A	Operative Insertion of Peritoneal Catheter for Dialysis, Major Complexity	\$7,606.60	1	8	\$1,400.00
L02B	Operative Insertion of Peritoneal Catheter for Dialysis, Minor Complexity	\$3,073.00	0	4	\$1,400.00
L03A	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Major Complexity	\$22,877.50	4	26	\$1,400.00
L03B	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Intermediate Comp	\$14,368.20	2	11	\$1,400.00
L03C	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Minor Complexity	\$9,360.80	1	8	\$1,400.00
L04A	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Major Complexity	\$17,434.80	5	29	\$1,150.80
L04B	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Intermediate Comp	\$4,685.20	0	4	\$1,400.00
L04C	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Minor Complexity	\$2,004.90	1	1	

OFFICIAL

L05A	Transurethral Prostatectomy for Urinary Disorder, Major Complexity	\$10,523.80	3	17	\$1,147.70
L05B	Transurethral Prostatectomy for Urinary Disorder, Minor Complexity	\$4,886.90	0	6	\$1,400.00
L06A	Minor Bladder Procedures, Major Complexity	\$9,200.70	3	16	\$1,069.40
L06B	Minor Bladder Procedures, Intermediate Complexity	\$3,076.20	0	4	\$1,394.70
L07A	Other Transurethral Procedures, Major Complexity	\$3,597.90	0	6	\$1,113.60
L07B	Other Transurethral Procedures, Minor Complexity	\$2,016.60	0	4	\$1,288.60
L08A	Urethral Procedures, Major Complexity	\$3,701.40	0	6	\$1,267.40
L08B	Urethral Procedures, Minor Complexity	\$2,132.90	0	4	\$1,303.60
L09A	Other Procedures for Kidney and Urinary Tract Disorders, Major Complexity	\$22,483.80	6	35	\$1,212.10
L09B	Other Procedures for Kidney and Urinary Tract Disorders, Intermediate Complexity	\$6,410.50	1	8	\$1,400.00
L09C	Other Procedures for Kidney and Urinary Tract Disorders, Minor Complexity	\$3,161.50	0	4	\$1,400.00
L40Z	Ureteroscopy	\$2,231.10	0	4	\$1,168.50
L41Z	Cystourethroscopy for Urinary Disorder, Sameday	\$949.60	1	1	
L42Z	ESW Lithotripsy	\$2,908.60	0	4	\$1,400.00
L60A	Kidney Failure, Major Complexity	\$12,957.60	4	27	\$969.10
L60B	Kidney Failure, Intermediate Complexity	\$6,811.70	2	15	\$927.70
L60C	Kidney Failure, Minor Complexity	\$3,797.50	1	9	\$871.20
L61Z	Haemodialysis	\$407.60	0	4	\$405.70
L62A	Kidney and Urinary Tract Neoplasms, Major Complexity	\$8,381.30	4	21	\$792.30
L62B	Kidney and Urinary Tract Neoplasms, Minor Complexity	\$2,169.20	0	6	\$730.30
L63A	Kidney and Urinary Tract Infections, Major Complexity	\$7,573.60	3	18	\$864.80
L63B	Kidney and Urinary Tract Infections, Minor Complexity	\$3,870.00	1	9	\$871.10
L64A	Urinary Stones and Obstruction, Major Complexity	\$5,110.90	2	11	\$845.30
L64B	Urinary Stones and Obstruction, Minor Complexity	\$2,162.80	0	4	\$1,061.90
L64C	Urinary Stones and Obstruction, Sameday	\$942.20	1	1	
L65A	Kidney and Urinary Tract Signs and Symptoms, Major Complexity	\$7,309.00	3	18	\$830.30
L65B	Kidney and Urinary Tract Signs and Symptoms, Minor Complexity	\$2,014.50	0	5	\$820.90
L66Z	Urethral Stricture	\$1,806.40	0	4	\$982.40

OFFICIAL

L67A	Other Kidney and Urinary Tract Disorders, Major Complexity	\$7,360.20	3	16	\$899.00
L67B	Other Kidney and Urinary Tract Disorders, Intermediate Complexity	\$2,347.40	0	5	\$875.30
L67C	Other Kidney and Urinary Tract Disorders, Minor Complexity	\$527.10	1	1	
M01A	Major Male Pelvic Procedures, Major Complexity	\$11,508.70	1	9	\$1,400.00
M01B	Major Male Pelvic Procedures, Minor Complexity	\$9,443.00	0	5	\$1,400.00
M02A	Transurethral Prostatectomy for Reproductive System Disorder, Major Complexity	\$8,111.30	2	13	\$1,206.50
M02B	Transurethral Prostatectomy for Reproductive System Disorder, Minor Complexity	\$4,573.20	0	5	\$1,400.00
M03Z	Penis Procedures	\$2,729.40	0	4	\$1,400.00
M04Z	Testes Procedures	\$2,100.90	0	4	\$1,163.30
M05Z	Circumcision	\$1,292.10	0	4	\$884.70
M06A	Other Male Reproductive System OR Procedures, Major Complexity	\$5,290.20	1	8	\$1,143.30
M06B	Other Male Reproductive System OR Procedures, Minor Complexity	\$3,161.50	0	4	\$1,400.00
M40Z	Cystourethroscopy for Male Reproductive System Disorder, Sameday	\$969.90	1	1	
M60A	Male Reproductive System Malignancy, Major Complexity	\$7,697.30	3	20	\$794.40
M60B	Male Reproductive System Malignancy, Minor Complexity	\$1,181.20	0	4	\$719.30
M61A	Benign Prostatic Hypertrophy, Major Complexity	\$5,430.00	2	12	\$882.00
M61B	Benign Prostatic Hypertrophy, Minor Complexity	\$1,242.00	0	4	\$740.50
M62A	Male Reproductive System Inflammation, Major Complexity	\$5,624.20	2	14	\$802.30
M62B	Male Reproductive System Inflammation, Minor Complexity	\$2,735.80	0	6	\$899.20
M63Z	Male Sterilisation Procedures	\$1,101.10	0	4	\$872.10
M64Z	Other Male Reproductive System Disorders	\$1,122.50	0	4	\$753.20
N01A	Pelvic Evisceration and Radical Vulvectomy, Major Complexity	\$14,139.90	3	19	\$1,348.70
N01B	Pelvic Evisceration and Radical Vulvectomy, Minor Complexity	\$9,035.40	1	8	\$1,400.00
N04A	Hysterectomy for Non-Malignancy, Major Complexity	\$7,807.20	1	8	\$1,400.00
N04B	Hysterectomy for Non-Malignancy, Minor Complexity	\$6,245.20	0	6	\$1,400.00
N05A	Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy, Maj Comp	\$7,266.30	1	7	\$1,400.00

OFFICIAL

N05B	Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy, Min Comp	\$4,085.50	0	4	\$1,400.00
N06Z	Female Reproductive System Reconstructive Procedures	\$4,664.90	0	5	\$1,400.00
N07A	Other Uterus and Adnexa Procedures for Non-Malignancy, Major Complexity	\$3,545.60	0	4	\$1,400.00
N07B	Other Uterus and Adnexa Procedures for Non-Malignancy, Minor Complexity	\$1,795.80	1	1	
N08Z	Endoscopic and Laparoscopic Procedures, Female Reproductive System	\$2,710.20	0	4	\$1,400.00
N09Z	Other Vagina, Cervix and Vulva Procedures	\$1,440.50	0	4	\$868.00
N10Z	Diagnostic Curettage and Diagnostic Hysteroscopy	\$1,260.10	0	4	\$981.70
N11Z	Other Female Reproductive System OR Procedures	\$712.80	0	4	\$541.70
N12A	Uterus and Adnexa Procedures for Malignancy, Major Complexity	\$14,465.30	3	17	\$1,400.00
N12B	Uterus and Adnexa Procedures for Malignancy, Intermediate Complexity	\$7,198.00	0	6	\$1,400.00
N60A	Female Reproductive System Malignancy, Major Complexity	\$11,546.00	5	29	\$809.40
N60B	Female Reproductive System Malignancy, Minor Complexity	\$3,742.00	2	11	\$678.10
N61Z	Female Reproductive System Infections	\$2,788.10	1	7	\$790.90
N62Z	Menstrual and Other Female Reproductive System Disorders	\$1,149.20	0	4	\$702.10
O01A	Caesarean Delivery, Major Complexity	\$10,778.80	3	17	\$1,259.30
O01B	Caesarean Delivery, Intermediate Complexity	\$8,357.80	2	12	\$1,400.00
O01C	Caesarean Delivery, Minor Complexity	\$7,447.70	2	10	\$1,400.00
O02A	Vaginal Delivery W OR Procedures, Major Complexity	\$8,017.40	2	11	\$1,400.00
O02B	Vaginal Delivery W OR Procedures, Minor Complexity	\$6,669.80	1	9	\$1,400.00
O03A	Ectopic Pregnancy, Major Complexity	\$4,375.80	0	4	\$1,400.00
O03B	Ectopic Pregnancy, Minor Complexity	\$2,874.50	0	4	\$1,400.00
O04A	Postpartum and Post Abortion W OR Procedures, Major Complexity	\$7,226.80	2	15	\$891.40
O04B	Postpartum and Post Abortion W OR Procedures, Minor Complexity	\$2,951.30	0	5	\$1,219.20
O04C	Postpartum and Post Abortion W OR Procedures, Sameday	\$1,346.60	1	1	
O05Z	Abortion W OR Procedures	\$1,092.60	0	4	\$902.10
O60A	Vaginal Delivery, Major Complexity	\$6,357.20	2	11	\$1,169.10
O60B	Vaginal Delivery, Intermediate Complexity	\$5,576.10	1	9	\$1,258.90
O60C	Vaginal Delivery, Minor Complexity	\$5,295.50	1	8	\$1,382.70
O61Z	Postpartum and Post Abortion W/O OR Procedures	\$2,219.40	0	6	\$847.40

OFFICIAL

O63Z	Abortion W/O OR Procedures	\$931.50	0	4	\$751.40
O66A	Antenatal and Other Obstetric Admissions, Major Complexity	\$3,460.30	2	10	\$740.20
O66B	Antenatal and Other Obstetric Admissions, Minor Complexity	\$2,071.00	0	4	\$1,083.60
O66C	Antenatal and Other Obstetric Admissions, Sameday	\$332.90	1	1	
P03A	Neonate, AdmWt 1000-1499g W Significant OR Proc/Vent>=96hrs, Major Complexity	\$101,995.60	21	35	\$1,400.00
P03B	Neonate, AdmWt 1000-1499g W Significant OR Proc/Vent>=96hrs, Minor Complexity	\$62,774.80	10	35	\$1,400.00
P04B	Neonate, AdmWt 1500-1999g W Significant OR Proc/Vent>=96hrs, Minor Complexity	\$40,892.80	8	35	\$1,400.00
P06A	Neonate, AdmWt >=2500g W Significant OR Proc/Vent>=96hrs, Major Complexity	\$19,049.20	5	33	\$1,175.90
P06B	Neonate, AdmWt >=2500g W Significant OR Proc/Vent>=96hrs, Minor Complexity	\$8,618.20	3	16	\$1,087.40
P60A	Neonate W/O Sig OR/Vent>=96hrs, Died/Transfer Acute Facility <5 Days, MajC	\$1,580.20	0	4	\$1,053.30
P60B	Neonate W/O Sig OR/Vent>=96hrs, Died/Transfer Acute Facility <5 Days, MinC	\$342.50	1	1	
P63A	Neonate, AdmWt 1000-1249g W/O Significant OR Proc/Vent>=96hrs, Major Complexity	\$20,949.50	10	35	\$693.70
P63B	Neonate, AdmWt 1000-1249g W/O Significant OR Proc/Vent>=96hrs, Minor Complexity	\$17,487.10	5	33	\$1,069.80
P64A	Neonate, AdmWt 1250-1499g W/O Significant OR Proc/Vent>=96hrs, Major Complexity	\$27,981.00	12	35	\$794.90
P64B	Neonate, AdmWt 1250-1499g W/O Significant OR Proc/Vent>=96hrs, Minor Complexity	\$23,093.10	11	35	\$726.20
P65A	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Extreme Comp	\$26,437.10	8	35	\$1,106.10
P65B	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Major Complexity	\$19,233.70	8	35	\$757.20
P65C	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Intermediate Comp	\$18,564.70	8	35	\$767.10
P65D	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Minor Complexity	\$15,024.40	6	35	\$794.90
P66A	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Extreme Comp	\$14,510.10	5	28	\$1,036.40

OFFICIAL

P66B	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent \geq 96hrs, Major Complexity	\$12,869.10	5	32	\$814.10
P66C	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent \geq 96hrs, Intermediate Comp	\$9,268.00	4	25	\$753.30
P66D	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent \geq 96hrs, Minor Complexity	\$3,755.80	2	10	\$798.20
P67A	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, $<$ 37 Comp Wks Gest, Extr Comp	\$9,248.80	4	22	\$856.40
P67B	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, $<$ 37 Comp Wks Gest, Maj Comp	\$8,898.80	4	23	\$801.70
P67C	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, $<$ 37 Comp Wks Gest, Int Comp	\$6,391.30	3	18	\$710.20
P67D	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, $<$ 37 Comp Wks Gest, Min Comp	\$2,448.80	1	8	\$680.10
P68A	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, \geq 37 Comp Wks Gest, Ext Comp	\$8,687.50	2	14	\$1,315.70
P68B	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, \geq 37 Comp Wks Gest, Maj Comp	\$4,120.80	1	8	\$1,056.00
P68C	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, \geq 37 Comp Wks Gest, Int Comp	\$2,544.80	0	6	\$941.80
P68D	Neonate, AdmWt \geq 2500g W/O Sig OR Proc/Vent \geq 96hrs, \geq 37 Comp Wks Gest, Min Comp	\$927.20	1	6	\$304.20
Q01A	Splenectomy, Major Complexity	\$16,061.60	3	19	\$1,400.00
Q01B	Splenectomy, Minor Complexity	\$10,569.70	2	10	\$1,400.00
Q02A	Blood and Immune System Disorders W Other OR Procedures, Major Complexity	\$13,765.40	3	21	\$1,230.60
Q02B	Blood and Immune System Disorders W Other OR Procedures, Minor Complexity	\$2,851.00	0	4	\$1,217.70
Q60A	Reticuloendothelial and Immunity Disorders, Major Complexity	\$7,876.60	3	17	\$935.70
Q60B	Reticuloendothelial and Immunity Disorders, Minor Complexity	\$3,035.60	1	8	\$812.00
Q60C	Reticuloendothelial and Immunity Disorders, Sameday	\$552.70	1	1	
Q61A	Red Blood Cell Disorders, Major Complexity	\$6,848.00	3	16	\$851.40
Q61B	Red Blood Cell Disorders, Intermediate Complexity	\$2,594.90	0	6	\$857.60
Q61C	Red Blood Cell Disorders, Minor Complexity	\$697.80	1	1	
Q62A	Coagulation Disorders, Major Complexity	\$5,179.20	2	13	\$825.00

OFFICIAL

Q62B	Coagulation Disorders, Minor Complexity	\$697.80	1	1	
R01A	Lymphoma and Leukaemia W Major OR Procedures, Major Complexity	\$26,363.40	6	35	\$1,349.80
R01B	Lymphoma and Leukaemia W Major OR Procedures, Minor Complexity	\$8,076.10	1	9	\$1,400.00
R02A	Other Neoplastic Disorders W Major OR Procedures, Major Complexity	\$20,752.10	5	29	\$1,345.70
R02B	Other Neoplastic Disorders W Major OR Procedures, Intermediate Complexity	\$11,268.60	2	13	\$1,400.00
R02C	Other Neoplastic Disorders W Major OR Procedures, Minor Complexity	\$6,962.20	1	7	\$1,400.00
R03A	Lymphoma and Leukaemia W Other OR Procedures, Major Complexity	\$21,576.90	6	35	\$1,121.00
R03B	Lymphoma and Leukaemia W Other OR Procedures, Intermediate Complexity	\$5,017.00	1	7	\$1,286.20
R03C	Lymphoma and Leukaemia W Other OR Procedures, Minor Complexity	\$1,827.80	1	1	
R04A	Other Neoplastic Disorders W Other OR Procedures, Major Complexity	\$6,054.20	1	9	\$1,235.70
R04B	Other Neoplastic Disorders W Other OR Procedures, Minor Complexity	\$3,480.60	0	5	\$1,254.60
R60A	Acute Leukaemia, Major Complexity	\$21,979.10	7	35	\$977.70
R60B	Acute Leukaemia, Minor Complexity	\$6,708.20	3	16	\$863.30
R60C	Acute Leukaemia, Sameday	\$752.20	1	1	
R61A	Lymphoma and Non-Acute Leukaemia, Major Complexity	\$16,674.00	6	35	\$884.30
R61B	Lymphoma and Non-Acute Leukaemia, Minor Complexity	\$4,700.10	2	10	\$985.40
R61C	Lymphoma and Non-Acute Leukaemia, Sameday	\$549.50	1	1	
R62A	Other Neoplastic Disorders, Major Complexity	\$7,949.20	3	20	\$795.20
R62B	Other Neoplastic Disorders, Intermediate Complexity	\$1,912.10	0	6	\$650.70
R63Z	Chemotherapy	\$584.70	0	4	\$574.50
S65C	Human Immunodeficiency Virus, Minor Complexity	\$5,118.40	2	11	\$964.30
T01A	Infectious and Parasitic Diseases W OR Procedures, Major Complexity	\$26,601.40	7	35	\$1,232.10
T01B	Infectious and Parasitic Diseases W OR Procedures, Intermediate Complexity	\$10,880.20	3	18	\$1,085.50
T01C	Infectious and Parasitic Diseases W OR Procedures, Minor Complexity	\$6,308.10	2	10	\$1,104.50
T40Z	Infectious and Parasitic Diseases W Ventilator Support	\$26,512.80	6	35	\$1,400.00
T60A	Septicaemia, Major Complexity	\$12,499.90	4	27	\$943.80
T60B	Septicaemia, Intermediate Complexity	\$6,559.90	2	15	\$887.90
T61A	Postoperative and Post-Traumatic Infections, Major Complexity	\$8,147.60	3	21	\$771.60
T61B	Postoperative and Post-Traumatic Infections, Minor Complexity	\$3,951.10	2	10	\$837.90

OFFICIAL

T62A	Fever of Unknown Origin, Major Complexity	\$5,428.90	2	13	\$866.60
T62B	Fever of Unknown Origin, Minor Complexity	\$2,867.00	1	7	\$890.20
T63A	Viral Illnesses, Major Complexity	\$5,217.60	2	13	\$822.90
T63B	Viral Illnesses, Minor Complexity	\$2,710.20	0	6	\$1,002.10
T64A	Other Infectious and Parasitic Diseases, Major Complexity	\$12,318.50	5	29	\$830.80
T64B	Other Infectious and Parasitic Diseases, Intermediate Complexity	\$6,479.90	2	15	\$873.30
T64C	Other Infectious and Parasitic Diseases, Minor Complexity	\$2,619.50	1	7	\$794.10
U40Z	Mental Health Treatment W ECT, Sameday	\$436.40	1	1	
U60Z	Mental Health Treatment W/O ECT, Sameday	\$314.80	1	1	
U61A	Schizophrenia Disorders, Major Complexity	\$10,257.10	15	35	\$224.50
U61B	Schizophrenia Disorders, Minor Complexity	\$14,221.00	7	35	\$692.40
U62A	Paranoia and Acute Psychotic Disorders, Major Complexity	\$13,208.40	9	35	\$504.10
U62B	Paranoia and Acute Psychotic Disorders, Minor Complexity	\$12,143.50	6	35	\$688.40
U63A	Major Affective Disorders, Major Complexity	\$15,814.00	7	35	\$710.50
U63B	Major Affective Disorders, Minor Complexity	\$14,243.40	6	35	\$737.80
U64Z	Other Affective and Somatoform Disorders	\$13,738.70	6	35	\$781.10
U65Z	Anxiety Disorders	\$12,322.80	5	32	\$778.90
U66Z	Eating and Obsessive-Compulsive Disorders	\$21,799.90	9	35	\$786.10
U67Z	Personality Disorders and Acute Reactions	\$14,329.80	6	35	\$788.40
U68Z	Childhood Mental Disorders	\$13,878.50	6	35	\$783.50
V60A	Alcohol Intoxication and Withdrawal, Major Complexity	\$11,762.60	5	29	\$820.60
V60B	Alcohol Intoxication and Withdrawal, Minor Complexity	\$7,903.30	4	25	\$645.60
V61Z	Drug Intoxication and Withdrawal	\$10,358.40	5	29	\$714.20
V62Z	Alcohol Use and Dependence	\$12,308.90	5	32	\$773.90
V63Z	Opioid Use and Dependence	\$11,645.20	5	31	\$760.90
V64Z	Other Drug Use and Dependence	\$12,151.00	5	33	\$749.90
V65Z	Treatment for Alcohol Disorders, Sameday	\$310.50	1	1	
V66Z	Treatment for Drug Disorders, Sameday	\$289.20	1	1	
W02A	Hip, Femur and Lower Limb Procedures for Multiple Sig Trauma, Major Complexity	\$25,137.50	5	32	\$1,400.00

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W02B	Hip, Femur and Lower Limb Procedures for Multiple Sig Trauma, Minor Complexity	\$16,535.30	3	21	\$1,400.00
W04A	Multiple Significant Trauma W Other OR Procedures, Major Complexity	\$44,609.10	11	35	\$1,261.00
W60Z	Multiple Trauma, Died or Transferred to Acute Facility <5 Days	\$2,806.20	0	5	\$1,094.70
W61A	Multiple Significant Trauma W/O OR Procedures, Major Complexity	\$29,661.50	10	35	\$1,007.90
W61B	Multiple Significant Trauma W/O OR Procedures, Minor Complexity	\$2,661.10	1	7	\$760.20
X02A	Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand, Major Comp	\$5,347.80	0	4	\$1,360.70
X02B	Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand, Minor Comp	\$3,289.60	0	4	\$1,096.30
X04A	Other Procedures for Injuries to Lower Limb, Major Complexity	\$9,233.80	3	18	\$952.70
X04B	Other Procedures for Injuries to Lower Limb, Minor Complexity	\$3,442.10	0	4	\$1,400.00
X05A	Other Procedures for Injuries to Hand, Major Complexity	\$4,084.50	0	6	\$1,091.00
X05B	Other Procedures for Injuries to Hand, Minor Complexity	\$2,478.60	0	4	\$1,090.00
X06A	Other Procedures for Other Injuries, Major Complexity	\$9,296.80	2	14	\$1,192.60
X06B	Other Procedures for Other Injuries, Intermediate Complexity	\$3,441.10	0	4	\$1,336.70
X07A	Skin Grafts for Injuries Excluding Hand, Major Complexity	\$13,860.30	4	25	\$977.60
X07B	Skin Grafts for Injuries Excluding Hand, Intermediate Complexity	\$6,007.20	1	9	\$1,172.00
X60A	Injuries, Major Complexity	\$8,763.30	4	22	\$808.60
X60B	Injuries, Minor Complexity	\$3,255.40	1	8	\$786.50
X61Z	Allergic Reactions	\$1,884.30	0	4	\$928.80
X62A	Poisoning/Toxic Effects of Drugs and Other Substances, Major Complexity	\$6,892.80	3	16	\$900.70
X62B	Poisoning/Toxic Effects of Drugs and Other Substances, Minor Complexity	\$2,211.90	0	5	\$919.70
X63A	Sequelae of Treatment, Major Complexity	\$6,443.60	3	15	\$840.10
X63B	Sequelae of Treatment, Minor Complexity	\$2,383.70	0	6	\$800.50
X64A	Other Injuries, Poisonings and Toxic Effects, Major Complexity	\$6,901.40	3	17	\$808.60
X64B	Other Injuries, Poisonings and Toxic Effects, Minor Complexity	\$2,695.20	1	7	\$809.80
Y02C	Skin Grafts for Other Burns, Minor Complexity	\$4,626.50	0	5	\$1,400.00
Y03Z	Other OR Procedures for Other Burns	\$4,738.50	2	9	\$827.80
Y61Z	Severe Burns	\$5,903.70	3	16	\$756.90
Y62A	Other Burns, Major Complexity	\$10,211.20	5	28	\$750.40

OFFICIAL

Y62B	Other Burns, Minor Complexity	\$5,398.00	2	14	\$780.80
Y62C	Other Burns, Sameday	\$331.80	1	1	
Z01A	Other Contacts W Health Services W OR Procedures, Major Complexity	\$4,042.90	0	5	\$1,400.00
Z01B	Other Contacts W Health Services W OR Procedures, Minor Complexity	\$1,502.30	1	1	
Z40Z	Other Contacts W Health Services W Endoscopy, Sameday	\$815.20	1	1	
Z61A	Signs and Symptoms, Major Complexity	\$4,406.70	2	10	\$875.50
Z61B	Signs and Symptoms, Intermediate Complexity	\$519.60	1	1	
Z63A	Other Follow Up After Surgery or Medical Care, Major Complexity	\$8,955.30	5	30	\$596.40
Z63B	Other Follow Up After Surgery or Medical Care, Minor Complexity	\$2,997.20	2	10	\$596.00
Z64A	Other Factors Influencing Health Status, Major Complexity	\$2,909.70	1	8	\$665.30
Z64B	Other Factors Influencing Health Status, Minor Complexity	\$372.40	1	1	
Z65Z	Congenital Anomalies and Problems Arising from Neonatal Period	\$1,579.20	0	4	\$1,025.80
Z66Z	Sleep Disorders	\$1,437.20	0	4	\$952.30

General information

Account and invoicing standards

All amounts listed in this booklet are exclusive of GST. If applicable, ReturnToWorkSA will pay to the provider an amount on account of the provider's GST liability in addition to the GST exclusive fee. Suppliers should provide ReturnToWorkSA with a tax invoice where the amounts are subject to GST.

For all invoices, whether a tax invoice or not, the following information should be provided:

- hospital name and address, provider details – name, Medicare provider number (if applicable) and/or ReturnToWorkSA provider number (if known)
- invoice number and invoice date
- Australian Business Number (ABN)
- worker's surname and given name(s)
- claim number (if known)
- brief description of the injury to which the services relate
- employer name (if known)
- each service itemised separately in accordance with this fee schedule including:
 - date of service and commencement time
 - service item number and service description
 - charge for the service in accordance with this fee schedule
 - total charge for invoiced items plus any GST that may be applicable.
- bank account details for electronic funds transfer (EFT).

Invoices that do not meet these standards may be returned to the provider for amendment.

Invoices are to be submitted within four weeks of service. Invoices received more than six months after date of service may not be paid unless in exceptional circumstances.

ReturnToWorkSA or their claims agents are unable to pay on 'account rendered' or statement invoices. Payment will be made, where appropriate, on an original invoice or duplicate/copy of the original.

Payment for services, including reports, will not be made in advance.

GST

For all GST-related queries, please contact the Australian Taxation Office or your tax advisor.

Changes to provider details

For changes to provider details, such as ABN, change of address or electronic funds transfer details, please complete the [Provider registration form](#) available on our website. Once completed either email to prov.main@rtwsa.com or fax to ReturnToWorkSA on (08) 8238 5690. For any queries relating to this form, please contact ReturnToWorkSA on 13 18 55.

Where payment is outstanding

Please contact the claims agent, ReturnToWorkSA's EnABLE Unit or self-insured employer if the claim has been accepted and the payment is outstanding. If the claim has not been accepted, responsibility for payment of accounts rests with the worker.

Submitting an invoice

How can I submit an invoice?

Invoices sent via email is the preferred option in any of the following formats: Word, PDF and image files. Please email your invoice to the relevant address below:

EML: accounts@eml.rtwsa.com

Gallagher Bassett: invoices@gb.rtwsa.com

EnAble: EnAble@rtwsa.com

What are our payment terms?

The Return to Work scheme has 30 day payment terms, which is mandated and cannot be amended. Please do not send multiple copies of the original invoice if your payment terms are less than 30 days.

Useful contacts

Claims agents

All work injury claims (*that are not self-insured or a severe traumatic injury*) are managed by EML or Gallagher Bassett. To identify which claims agent is managing a worker's claim, refer to the 'Claims agent lookup' function on our website at www.rtwsa.com.

EML

Phone: (08) 8127 1100 or free call 1300 365 105
Fax: (08) 8127 1200
Postal address: GPO Box 2575, Adelaide SA 5001
Online: www.eml.com.au

Gallagher Bassett Services Pty Ltd

Phone: (08) 8177 8450 or free call 1800 664 079
Fax: (08) 8177 8451
Postal address: GPO Box 1772, Adelaide SA 5001
Online: www.gallagherbassett.com.au

ReturnToWorkSA EnABLE Unit

For claims relating to severe traumatic injuries, please contact this unit directly.

Phone: 13 18 55
Fax: (08) 8233 2051
Postal address: GPO Box 2668, Adelaide SA 5001

Self-insured employers

For matters relating to self-insured claims, please contact the employer directly.

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