

# HEALTHMAN NEUROLOGY COSTING GUIDE 2011

## COMPARATIVE TARIFFS



Code	Terminology	Average Duration Professional	2011 HMan Tariffs (VAT incl.)	HMan RCF	2011 GEMS Tariffs (VAT Incl.)	GEMS RCF	2011 Discovery Tariffs (VAT incl.)	DH RCF	DH Prem A In Hos	DH Prem A Out Hos	DH Prem B	DH Exec Plan	DH Classic Rate
									136%	161%	146%	300%	216%
		Units	R	R	R	R	R	R	R	R	R	R	R
<b>Consultations:</b>													
	<a href="#">See the Notes below for All Tariffs</a>												
0109	Hospital follow-up visit	15	455.90	30.395	216.50	14.436	152.90	10.193	207.94	246.17	223.23	458.70	330.26
0129	Prolonged first/follow-up consultation : 15 min	15	455.90	30.395	216.50	14.436	213.30	14.220	290.09	343.41	311.42	639.90	460.73
0130	Telephone consultation (all hours)	12	364.70	30.395	259.90	23.066	256.10	21.342	348.30	412.32	373.91	768.30	553.18
0132	Repeat Script	5	152.00	30.395	72.20	14.436	71.10	14.220	96.70	114.47	103.81	213.30	153.58
0133	Writing of special motivations	9	273.60	30.395	129.90	14.436	127.90	14.211	173.94	205.92	186.73	383.70	276.26
0145	Consultation : Away from doctor's room	6	182.40	30.395	86.60	14.436	85.40	14.233	116.14	137.49	124.68	256.20	184.46
0146	Unscheduled consultation: Emergency (cons.room)	8	243.20	30.395	115.50	14.436	113.70	14.213		183.06	166.00	341.10	
0147	Unscheduled consultation:Emergency(not cons.room)	14	425.50	30.395	202.10	14.436	199.10	14.221	270.78	320.55	290.69	597.30	430.06
0173	Hospital Consultation	15	455.90	30.395	375.30	25.020	370.60	24.707	504.02		541.08	1,111.80	800.50
0174	Hospital Consultation	30	911.80	30.395	375.30	12.510	370.60	12.353	504.02		541.08	1,111.80	800.50
0175	Hospital Consultation	45	1,367.80	30.395	375.30	8.340	370.60	8.236	504.02		541.08	1,111.80	800.50
0190	Consultation	15	455.90	30.395	375.30	25.020	389.30	25.953		626.77	568.38	1,167.90	
0191	Consultation	30	911.80	30.395	375.30	12.510	389.30	12.977		626.77	568.38	1,167.90	
0192	Consultation	45	1,367.80	30.395	375.30	8.340	389.30	8.651		626.77	568.38	1,167.90	
0199	Chronic Medicine Forms	21.43	651.40	30.395	309.40	14.436	304.70	14.218	414.39	490.57	444.86	914.10	658.15
<b>Procedures</b>													
0713	Electromyography	75	2,279.60	30.395	670.60	8.941	660.50	8.806	898.20	1,063.30	964.30	1,981.40	1,426.60
0730	Limb brain somatosensory studies (per limb)	49	1,489.30	30.395	438.10	8.941	431.50	8.806	586.80	694.70	630.00	1,294.50	932.00
0733	Motor nerve conduction studies (single nerve)	26	790.30	30.395	232.50	8.941	229.00	8.806	311.40	368.60	334.30	686.90	494.50
	Examinations of sensory nerve conduction by sweep averages (single nerve)	31	942.20	30.395	277.20	8.941	273.00	8.806	371.30	439.50	398.60	819.00	589.60
1205	Intensive care: Category 2 (ICU): First day	100	3,039.50	30.395	894.10	8.941	880.60	8.806	1,197.60	1,417.80	1,285.70	2,641.80	1,902.10
1206	Intensive care: Category 2 (ICU): Subsequent days, per day	50	1,519.70	30.395	447.00	8.941	440.30	8.806	598.80	708.90	642.80	1,320.90	951.00
1210	Intensive care: Category 3 (ICU): Cases with multiple organ failure or Category 2 patients which may require multidisciplinary intervention: Subsequent days (per involved practitioner)	50	1,519.70	30.395	447.00	8.941	440.30	8.806	598.80	708.90	642.80	1,320.90	951.00
2682	Visual evoked potentials (VEP): Bilateral	88	2,674.70	30.395	786.80	8.941	774.90	8.806	1,053.90	1,247.60	1,131.40	2,324.80	1,673.80
2692	Short latency brainstem evoked potentials (AEP) neurological examination, single decibel: Bilateral	88	2,674.70	30.395	786.80	8.941	774.90	8.806	1,053.90	1,247.60	1,131.40	2,324.80	1,673.80
2707	Full fee for complete neurological evoked potential evaluation including neurological AEP, bilateral VEP, and bilateral median and/or posterior tibial stimulation	220	6,686.80	30.395	1,966.90	8.941	1,937.30	8.806	2,634.80	3,119.10	2,828.50	5,812.00	4,184.60
2711	Electro-encephalography: Taking of record	36.1	1,097.20	30.395	322.80	8.941	317.90	8.806	432.30	511.80	464.10	953.70	686.70
2712	Electro-encephalography: Interpretation	24	729.50	30.395	214.60	8.941	211.30	8.806	287.40	340.30	308.60	634.00	456.50
2717	Electromyography: First	75	2,279.60	30.395	670.60	8.941	660.50	8.806	898.20	1,063.30	964.30	1,981.40	1,426.60
2800	Procedures for pain relief: Plexus nerve block	36	1,094.20	30.395	321.90	8.941	317.00	8.806	431.10	510.40	462.80	951.00	684.80
3284	Sensory nerve conduction studies	31	942.20	30.395	277.20	8.941	273.00	8.806	371.30	439.50	398.60	819.00	589.60
3285	Motor nerve conduction studies	26	790.30	30.395	232.50	8.941	229.00	8.806	311.40	368.60	334.30	686.90	494.50
5110*	Carotid ultrasound vascular study: B mode, pulsed and colour Doppler; bilateral study, internal, external and common carotid flow and anatomy	128	1,090.80	8.522	1,090.80	8.522	1,074.40	8.394	1,461.20	1,729.80	1,568.70	3,223.30	2,320.80
6010	Electroencephalogram monitoring: Monitoring for localisation of cerebral seizure focus using computerised sixteen or more channel EEG, which may include video recording (e.g. for pre-operative localisation): Each full 24 hour period	294.6	8,954.30	30.395	2,633.90	8.941	2,594.20	8.806	3,528.20	4,176.70	3,787.60	7,782.70	5,603.60

6011	Interpretation of item 6010: Electro-encephalogram monitoring: To be charged once only for each full 24 hour period of monitoring	128	3,890.50	30.395	1,149.80	8.983	1,132.50	8.848	1,540.20	1,823.30	1,653.50	3,397.50	2,446.20
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**Notes:**

1. The Healthman tariff for codes that relate to equipment have been retained at GEMS rate\*
2. Tariffs may differ due to rounding
3. Above codes are the most frequently used codes and is not all inclusive of all the codes
4. Increases from 2010 is as follow:
  - a. GEMS = 2010 Scheme Tariff +6.5%
  - b. HealthMan Tariff = 2010 Tariff +6.5%
  - c. Discovery Health = 2010 Tariff +4.9% (Note that this increase is for the DH Rate only)
5. Discovery Premier A Procedure Rates have NOT been split between In-Hospital & Out-Hospital. Use as appropriate.

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