

# Understanding Surgery Fees

## Overview of Private Operation Fees

This section aims to provide you with some basic financial information about the health system. There is universal health cover in Australia from Medicare. This means that all Australian residents are covered by the public health system.

The private health system offers the advantage of choosing your surgeon with access to a better choice of elective surgery, as well as treatment of your condition in an appropriate timeframe. The disadvantage are the financial costs associated with the surgery. Most doctors' costs are paid for by Medicare and health insurance companies supplement a little to this. In fact most of your health insurance goes into paying for your hospital stay and not the doctor's costs. There are several costs when seeing a specialist surgeon:

1. **Initial Consult fee:** \$260 Adult and Paediatric Patients
2. **Subsequent Consult:** Adult \$150.00, Paediatric Hip \$220.00 and Paediatric \$200.00
3. **Cost of Surgery:** AMA fee schedule.

## Cost of Surgery

There are several costs to surgery. Most patients believe the bills they are paying are for the surgeons. In reality there are multiple providers who are sending out bills to the patients and the health insurance company:

1. **Surgeon's Fees:** Dr Maine bills at the recommended AMA fee. Patient are then able to claim through their private insurance.
2. **Anaesthetist's Fees:** (the specialist who provides the anaesthetic to the patient) Your anaesthetist will contact you prior to surgery and obtain informed financial consent.
3. **Assistants Fee** (this is the doctor who assists the surgeon) – Most assistants charge 20% of the surgical fees.
4. **Hospital Bed and Theatre Costs:** If you have private health insurance this is confined to your excess, however, certain orthopaedic procedures may be excluded from your policy and therefore need to be checked prior to booking in surgery.
5. **Pathology and Radiology:** These are blood tests and imaging taken during your inpatient stay that may also incur added costs.
6. **Implants and Prosthesis:** Most of these are covered by your insurance company, but once again it is important to check with them prior to the surgery

Most orthopaedic consultations and procedures are covered by Medicare item numbers.

## Surgeon's Fees

All orthopaedic surgeries are covered by Medicare item numbers. These numbers have an associated rebate. The government determines these rebates and the private health insurance companies supplement these rebates by up to 25%.

Unfortunately, these rebates have not changed much since 1983 and have not kept up with inflation, let alone the costs of running a quality practice and the increasing cost of indemnity insurance. The difference between the costs and the rebates has given rise to the GAP. Most surgeons will charge AMA (Australian Medical Association) rates for their services. This is almost three times the Medicare rebate and reflects the true discrepancy. We kindly request that full payment is made 48hours prior to your procedure being performed.

## Uninsured Patients

Uninsured patients will require a quote from the nominated Hospital, Equipment Company, Anaesthetist and Assistant. Once again the surgeon's fees are billed at the recommended AMA rate and a portion will be

covered by Medicare, therefore there will be an out of pocket expense to the patient.

### CONSULTING ROOMS

North West  
Specialist Centre  
Suite 7 137a Flockton Street  
Everton Park QLD 4053

P 07 3177 2779  
F 07 3188 7649  
E [reception@qldlrc.com.au](mailto:reception@qldlrc.com.au)  
W [qldlrc.com.au](http://qldlrc.com.au)