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# Fee Schedule for



**Independent Medical Examinations**

**Medical Practitioners**

Effective as at 1 July 2016, WorkSafe Victoria (WorkSafe) can pay up to a maximum amount for the following categories of services by WorkSafe approved Independent Medical Examiners. Amounts shown are per service unless otherwise indicated.

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| **Item Service description Fee GST Total**  **number (incl GST)** |

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| --- | --- | --- | --- |
| **Psychiatrist** | | | |
| *PCT100 First Examination and Report*   * *Inclusive of conducting the examination, report writing, reading lime and any incidentals (such as postage, photography and faxing services)* * *Diagnostic tests (such as x-rays) carried out as a necessary part of the examination are not included in the first examination and report item code and will be reimbursed in accordance with WorkSafe policies, the*   *relevant Medicare Benefit Schedule item code and the WorkSafe’s Reimbursement Rates for Medical Practitioners.* | *$857.36* | *$85.74* | *$943.10* |
| *PCT150 Subsequent Examination and Report*  *– Applies where a WorkSafe Agent requests a report within 12 months of the first examination and report for the same claim* | *$514.41* | *$51.44* | *$565.85* |
| *Loadings additional to examination and report fee are subject to Work Safe Agent prior written approval only* | | | |
| *PCT200 Report reading* | *$47.11* | *$4.71* | *$51.82* |
| *– Flat rate for reading of all reports that accumulatively are greater than 20 pages* |  |  |  |
| *– This fee is payable once only per claim per WorkSafe Agent report request* |  |  |  |
| *PCT250 Urgent Examination and Report*  *– Urgent request by a WorkSafe Agent to complete initial or subsequent exam and provide the report to the Agent within two business days* | *$96.87* | *$9.69* | *$106.56* |
| *PCT300 Worksite visit* | *$839.52* | *$83.96* | *$923.48* |
| *– Request by a WorkSafe Agent to complete a worksite visit and provide a report to the Agent* |  |  |  |
| *– Inclusive of worksite visit, report writing, reading time and any incidentals* |  |  |  |
| *PCT350 Travel to and from assessment (at Agent’s request) per hour* | *$435.37* | *$43.54* | *$478.91* |
| *– Calculated in 15 minutes blocks* |  |  |  |
| *– Travel only paid when travelling to a location other than IMEs nominated practice location/s* |  |  |  |
| *– Travel for multiple assessments in the one location should be charged on a pro-rata basis for each claim* |  |  |  |
| *PCT400 Audiovisual Viewing* | *$217.71* | *$21.77* | *$239.48* |
| *– Flat rate for the viewing of all audiovisual material* |  |  |  |
| *– This fee is payable once only per claim per WorkSafe Agent report request* |  |  |  |
| *PCT450 Supplementary report*   * *Applies where a WorkSafe Agent provides information additional to that initially provided or to answer additional questions not initially asked and the IME has previously examined an injured worker in the past 12 months* * *An IME is not required to conduct a re-examination (or re-contact) the injured worker in order to provide the additional information.* | *$278.71* | *$27.87* | *$306.58* |
| *PCT500 Interim report* | *$58.15* | *$5.82* | *$63.97* |
| *– Request by a WorkSafe Agent to provide information prior to receiving the IME final written report* |  |  |  |
| *– The advice from the IME may be provided verbally (i.e. by telephone) or in writing (i.e. fax).* |  |  |  |
| *PCT550 Non-attendance on day of appointment*  *– Non-attendance fee is applicable where an IME appointment is cancelled by the WorkSafe Agent on the day of the appointment or where the injured worker does not attend* | *$290.34* | *$29.04* | *$319.38* |
| *IEO400 Assessment of Impairment as requested by Agent using AMA2Guide\*\** | *$159.59* | *$15.96* | *$175.55* |

\*\* This service is only paid when requested to be performed under special circumstances by the WorkSafe Agent or Self-insurer

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