

Circular No: 36/93

Contact: Regional Office

Date: 2/8/93

Distribution: Public Hospitals
Health Insurance Funds

Subject: Public Hospital Prostheses Fees

This circular updates the advice provided in Circular No. 10/93.

Effective from 15 July 1993, a series of amendments have been made to the charges (and basic table benefits) for surgically implanted prostheses.

The amendments are:

- An extension of the number of institutions supplying human donor tissue items for which basic table benefits are payable (see Appendix A).
- Minor amendments to existing items include:
 - deletion of Steffee plates as these are VSP plates and therefore already listed.
 - amendment to the proviso dealing with breast implants, to allow for a silicone implant where Individual Patient Usage approval has been obtained on the recommendation by a registered medical practitioner that silicone gel filled implants are necessary for the patient e.g. for replacement of one silicone implant where the other breast is also a silicone implant.

It is stressed that the benefit payable for human donor tissue items is to cover the cost of preparation & handling. There is no charge for the actual donor tissue.

PROSTHESIS

FEE(\$)

- a) Delete on page 8 of the Schedule:
- | | | |
|--------|-------------------------|-------|
| P4.060 | Intraocular Lens: Other | **394 |
|--------|-------------------------|-------|
- b) and replacing on page 8 of the Schedule with:
- | | | |
|--------|--|-------|
| P4.060 | <u>Intraocular Lens</u> : Surface Modified | **394 |
| P4.062 | Other | **271 |
- c) Deleting on page 9 of the Schedule:
- | | | |
|--------|--------------------------|-------|
| P6.040 | *Elbow joint - homograft | 3 100 |
|--------|--------------------------|-------|
- d) and replacing on page 9 of the Schedule with:
- | | | |
|--------|-------------------|---------|
| P6.040 | *Elbow- homograft | **3 100 |
|--------|-------------------|---------|
- e) Adding on page 10 of the Schedule:
- | | | | |
|--------|-----------------------|-----------------------------|-------|
| P8.052 | * <u>Acetabulum</u> - | *homograft greater than 50% | **600 |
| P8.054 | | *homograft less than 50% | **375 |

- f) Adding on page 10 of the Schedule:
- | | | | |
|--------|---------------------------|-----------|-------|
| P8.172 | *Femoral ring 10mm-20mm - | homograft | **150 |
|--------|---------------------------|-----------|-------|
- g) Adding on page 10 of the Schedule:
- | | | | |
|--------|----------|------------------------------------|-------|
| P8.201 | *Femur - | homograft: cortical portions > 1/3 | **600 |
| P8.202 | | *distal half | **750 |
| P8.203 | | *proximal third | **600 |
| P8.204 | | *proximal half | **750 |
| P8.205 | | *trochanter half | **785 |
| P8.206 | | *trochanter half milled | **850 |
- h) Deleting from pages 10 of the Schedule:
- | | | | |
|--------|-----------------|------------|-------|
| P8.240 | Head - Femoral: | *homograft | 1 050 |
|--------|-----------------|------------|-------|
- i) and replacing on page 10 of the Schedule:
- | | | | |
|--------|------------------------|--------------------|---------|
| P8.240 | <u>Head</u> - Femoral: | *homograft - whole | **1 050 |
| P8.241 | | *milled entire | **850 |
| P8.242 | | *milled portion | **450 |
- j) Deleting from page 18 of the Schedule:
- | | | | |
|--------|-------------------------------|-----------|-------|
| P9.090 | *Patella tendon and patella - | homograft | 1 100 |
|--------|-------------------------------|-----------|-------|
- k) and replacing on page 18 of the Schedule:
- | | | | |
|--------|-------------------------------|-----------|---------|
| P9.090 | *Patella tendon and patella - | homograft | **1 300 |
|--------|-------------------------------|-----------|---------|
- l) Deleting from page 18 of the Schedule:
- | | | | |
|--------|----------|------------------------------|-------|
| P9.130 | *Tibia - | homograft: proximal - 7-15cm | 1 000 |
| P9.140 | | *16-25cm | 1 150 |
- m) and replacing on page 18 of the Schedule with:
- | | | | |
|--------|-------------------|---------------------------------|---------|
| P9.130 | *Tibia-homograft: | cortical portions 16cm-25cm | **600 |
| P9.131 | | *distal 50% | **600 |
| P9.132 | | *distal 20% | **375 |
| P9.133 | | *middle third segment | **1 100 |
| P9.134 | | *proximal - 7-15cm | **1 100 |
| P9.135 | | *16-25cm | **1 200 |
| P9.136 | | *50% | **600 |
| P9.137 | | *proximal with patella & tendon | **1 400 |
| P9.138 | | *proximal without patella | **1 100 |
| P9.139 | | *whole | *750 |
- n) Adding on page 18 of the Schedule:
- | | | | |
|--------|-------------------|-------------------------|-------|
| P9.162 | *Tibial plateau - | homograft: proximal 1/3 | **600 |
|--------|-------------------|-------------------------|-------|
- o) Adding on page 23 of the Schedule:
- | | | | |
|---------|------------|-------------------------------|---------|
| P11.211 | *humerus - | homograft: cortical block 6cm | **375 |
| P11.212 | | *distal 50% | **600 |
| P11.213 | | *entire | **2 000 |
| P11.214 | | *proximal 50% | **600 |

- p) Adding on page 25 of the Schedule:
- | | | | |
|---------|--------------------------|-----------|-------|
| P14.271 | Bone graft - *homograft- | for mulch | **375 |
|---------|--------------------------|-----------|-------|
- q) Deleting from page 29 of the Schedule:
- | | | | |
|----------|---------------|-----------------------|-----|
| P14.2020 | *Plug/Dowel - | homograft: cancellous | 350 |
| P14.2030 | | *tricortical | 380 |
- r) and replacing on page 25 of the Schedule with:
- | | | | |
|---------|--------------------|-----------------------|-------|
| P14.311 | *Bone Plug/Dowel - | homograft: cancellous | **350 |
| P14.312 | | *tricortical | **380 |
- s) Adding on page 26 of the Schedule:
- | | | | |
|---------|------------------|-------------------------------------|-------|
| P14.751 | <u>Ligament:</u> | *anterior cruciate unit - homograft | **850 |
|---------|------------------|-------------------------------------|-------|
- t) Delete from page 35 of the Schedule:
- | | | | |
|----------|-----------------------------|--|-------|
| P15.1670 | Steffee spinal plate (pair) | | 1 520 |
|----------|-----------------------------|--|-------|
- u) Deleting from page 45 of the Schedule:
- # PROSTHESES ITEMS WITH THIS SYMBOL #, WHERE SILICON GEL FILLING MATERIAL IS USED, ARE EXCLUDED FROM RECEIVING BASIC TABLE HEALTH INSURANCE BENEFITS.
- v) And replacing on page 45 of the Schedule with:
- # PROSTHESES ITEMS WITH THIS SYMBOL #, WHERE SILICON GEL FILLING MATERIAL IS USED, ARE EXCLUDED FROM RECEIVING BASIC TABLE HEALTH INSURANCE BENEFITS, EXCEPT WHERE A REGISTERED MEDICAL PRACTITIONER DETERMINES THAT SILICONE IMPLANTS ARE WARRANTED AND OBTAINS INDIVIDUAL PATIENT USAGE CONSENT FROM THERAPEUTIC GOODS ADMINISTRATION.
- w) Deleting on page 45 of the Schedule:
- | | | | |
|---------|--------------------|---------------------------|-------|
| P19.130 | Urological spiral: | Thermo-expandable (stent) | 1 200 |
|---------|--------------------|---------------------------|-------|
- x) and replacing on page 45 of the Schedule with:
- | | | | |
|---------|---------------------------|-------------------------|-------|
| P19.130 | <u>Urological spiral:</u> | Thermo-expandable stent | 1 200 |
| P19.131 | | Other | 660 |



S J DUCKETT
 Director
 Acute Health Services

APPENDIX A

INSTITUTIONS FOR WHICH A BENEFIT IS PAYABLE FOR HUMAN DONOR TISSUE

Where an item is annotated with * a benefit is payable only if the item is supplied by the following institutions:

Victoria

Donor Tissue Bank of Victoria

Queensland

The Prince Charles Hospital, Chermside,
QLD Bone Bank, Princess Alexander Hospital, Woolloongabba

Western Australia

Cardiac Bank of Perth, Royal Perth Hospital
Perth Bone Bank, QEII Hospital, Nedlands
Perth Bone and Tissue Bank Inc, Royal Perth Rehabilitation Hospital
Bone Bank, St John of God Hospital, Subiaco

Tasmania

St Helen's Bone Bank, St Helen's Private Hospital, Hobart

As costings for the collection, processing and allocation of human donor items varies between institutions, the benefit specified will not necessarily be the charge raised. As with all items on the schedule, if the cost is less than the specified benefit level, then 100% of the cost, up to the benefit level, is the maximum amount payable.

It should also be noted that benefits paid for human donor items are to recover the costs incurred by the institutions supplying the item. The charges are not to include margins for profit or other non related costs, nor are the charges for the actual item.