

Medical, allied health, private and public hospital fees

Introduction

ReturnToWorkSA is seeking to gazette fees for medical, allied health, private and public hospital fees for 2022-23, effective 1 July 2022.

The *Return to Work Act 2014* (the Act) requires ReturnToWorkSA to consult with stakeholders prior to a fee schedule being published. This paper describes the proposed changes and fee calculation methodology and forms part of the formal consultation process. We invite your feedback throughout the formal consultation period, which will be for 7-weeks commencing Monday 31 January 2022.

ReturnToWorkSA will consider all feedback received before finalizing fees for 2022-23.

Please provide your feedback to providers@rtwsa.com by close of business Friday 18 March 2022.

Fee calculation methodology

The *Return to Work Act 2014* requires ReturnToWorkSA to set fees based on the average charge to private patients for the relevant service. The amount fixed for the service must not exceed the amount recommended by the relevant professional association.

ReturnToWorkSA obtains data from Medicare Australia and the Private Hospital Data Bureau (PHDB) to calculate the average private charge for the relevant service, except for public hospitals and other non-gazetted services (such as remedial massage and aquatic & gymnasium facilities). Fees are then adjusted relative to this benchmark.

Medical Practitioner attendance fees

ReturnToWorkSA has agreed to increase General Practitioner attendance fees to the published Australian Medical Association (AMA) rates, up to but not exceeding an annual 5% increase.

In 2020-21, ReturnToWorkSA agreed to increase Specialist medical practitioner attendance fees within the Medical 1A Fee schedule to align with AMA recommended rates over a two-year period. The second year of this adjustment is FY2022-23.

The following table illustrates the change in Average Private Charge (APC), ReturnToWorkSA's fees compared to the average private charge and Medicare fees, and the proposed changes to ReturnToWorkSA medical fees for 2022-23:

	APC change for 2021-22	RTWSA vs APC for 2021-22	RTWSA vs Medicare scheduled fee for 2021-22	Proposed RTWSA change
Medical practitioner attendance fees (Schedule 1A)	N/A	44.5% higher than APC (51.1% higher than SA APC)	104.5% higher than MBS	5.5% weighted average comprising of: <ul style="list-style-type: none"> • 2.5% GP attendances • 11.5% Specialist attendances (consistent with AMA published rate)
All other medical fees (excl. Schedule 1A attendance fees)	1.9% weighted average	25.2% higher than APC (34.5% higher than SA APC)	82.8% higher than MBS	1.9% weighted average

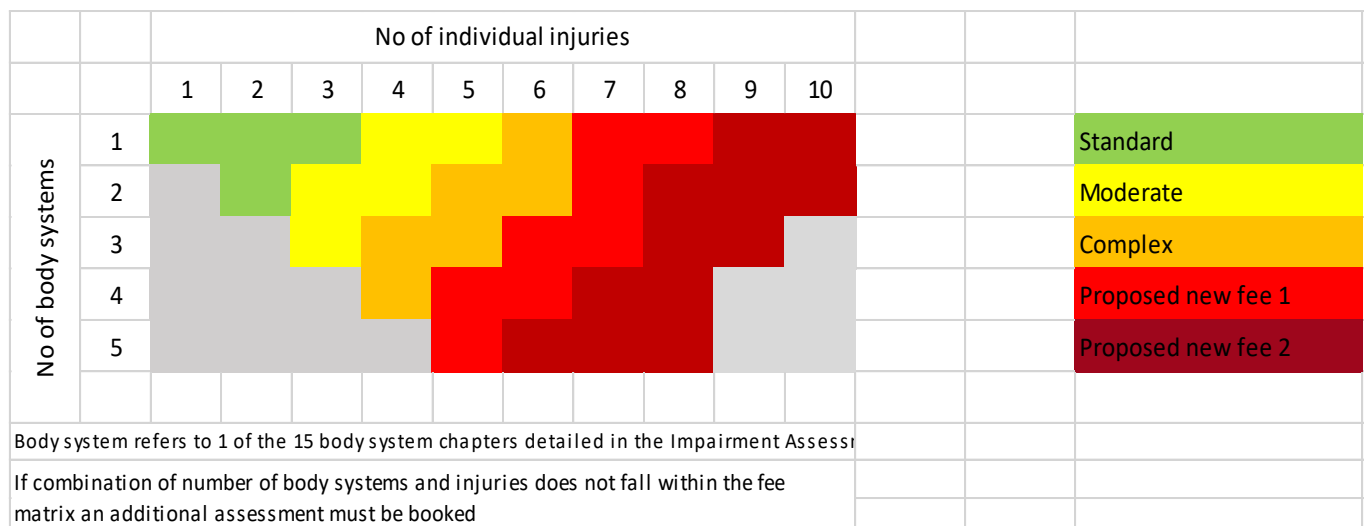
In addition ReturnToWorkSA will review the Medical 1B and Independent Medical Examiner fee schedules and policies to ensure terminology is clear and accurate.

Permanent impairment services

The PIA fee schedule was established based on practice at the time the Return to Work Act 2014 was implemented and when assessments were conducted for a single injury date. It does not reflect the levels of complexity, number of injuries and claims currently assessed. An informal arrangement has been in place since 2018 that enables assessors to charge up to two scheduled assessment fees (any combination of standard, moderately complex or complex) to account for the additional complexities.

ReturnToWorkSA proposes to create two new fees to formalize the current informal multiple fee allowance whilst also adjusting and better defining assessment complexity within the existing fee item descriptions. This is summarized in the table and figure below.

Assessment type	Body systems/injuries		Fee	
	Current	Proposed	Current	Proposed
Standard	1	See fee matrix figure	\$1049.00	
Moderate	2 body systems or more than one injury to single body system		\$1311.40	
Complex	1 body system or multiple injuries involving more than one body system		\$1,661.00	
Proposed new fee 1				\$1900 - \$2622
Proposed new fee 2				\$2250 - \$2900



A minimum and maximum range for the proposed two new fees are provided and we seek your feedback on the appropriate fee. Your feedback is also sought on the matrix structure and adjusted assessment complexity.

Allied health fees

Allied health fees are set at the same hourly rate (excluding exercise physiology and audiology). The methodology for 2022-23 considers the change in average private charge across all of the allied health groups and compares this to the June 2021 annual Australian Bureau of Statistics Consumer Price Index – CPI (3.8%). As both figures are similar, it is proposed to increase allied health fees by the annual CPI amount (3.8%).

The following table illustrates the change in Average Private Charge (APC), ReturnToWorkSA's fees compared to the average private charge and the proposed changes to ReturnToWorkSA fees for 2022-23:

	APC change for 2021-22	RTWSA vs APC for 2021-22	RTWSA vs South Australian APC for 2021-22	Proposed RTWSA change
Physiotherapy	3.0%	16.9% higher	29.1% higher	3.8%
Psychology	4.3%	7.8% higher	4.3% higher	3.8%
Occupational Therapy	6.8%	17.5% higher	3.1% lower	3.8%
Chiropractic	2.0%	3.4% higher	9.5% higher	3.8%
Speech Pathology	-0.1%	15.3% lower	10.9% lower	3.8%
Osteopathy	2.7%	3.5% higher	20.3% higher	3.8%
Exercise Physiology	3.1%	11.3% higher	22.7% higher	3.8%
Audiology (consultation only)	2.4%	1.6% lower	9.6% higher	3.8%

We acknowledge that the current Speech Pathology fees are lower than the average private charge. We have sought to maintain parity of fees across allied health services, and speech pathology represents a very small proportion of allied health services within the Scheme.

ReturnToWorkSA will review all allied health fee schedule descriptors and policy to ensure terminology is clear and accurate. This will include expanding access to telehealth services within the audiology, exercise physiology, occupational therapy and physiotherapy fee schedules to all workers and not just those who have been impacted by COVID-19.

Private Hospital fees

The Private Hospital Data Bureau (PHDB) data shows a 5.0% change in the average private charge, after removing I16Z DRG (other shoulder procedures), which is not represented in the South Australian data. Therefore, a 5.0% increase is proposed for private hospital fees for 2022-23.

Public hospital fees

The ABS Medical and Hospital Services Index (Adelaide) shows a 8.7% change. Therefore, a 8.7% increase is proposed for public hospital fees for 2022-23.

Next steps

To enable fees to take effect from 1 July 2022, ReturnToWorkSA will:

- consider all feedback provided by stakeholders
- seek the approval of the ReturnToWorkSA Board and the Minister responsible for the Return to Work Scheme to publish medical, allied health, and public and private hospital fees in the South Australian Government Gazette to be effective 1 July 2022
- provide a written response to feedback received through the relevant association or union following approval to gazette fees (late May/early June).

Further information

If you have any questions, please contact Jodie Yorke, Program Lead, Provider Regulation and Support on (08) 8233 2204 or email providers@rtwsa.com.