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## SPECIAL SUPPLEMENT

### WORKERS COMPENSATION (PUBLIC HOSPITAL RATES) ORDER 2012

under the

Workers Compensation Act 1987

I, JULIE NEWMAN, Acting Chief Executive Officer of the WorkCover Authority of New South Wales, pursuant to section 62 (1) of the Workers Compensation Act 1987, and with the concurrence of the Minister for Health under section 62 (8), make the following Order.

Dated this 29th day of June 2012.

JULIE NEWMAN,  
Acting Chief Executive Officer,  
WorkCover Authority

#### 1. Name of Order

This Order is the Workers Compensation (Public Hospital Rates) Order 2012.

#### 2. Commencement

This Order commences on the date that it is published in the *NSW Government Gazette*.

#### 3. Application of Order

- (1) This Order applies to the hospital treatment of a worker at a public hospital, being treatment or service of a type referred to in clauses 5 to 10 and provided on or after the date of commencement of this Order, whether the treatment relates to an injury that is received before, on or after that date.
- (2) This order does not apply to hospital treatment (excluding Visiting Medical Officer and Salaried Medical Officer services) provided to a worker whose injury has been sustained as a result of a motor vehicle accident in New South Wales. Fees for Visiting Medical Officer and Salaried Medical Officer services are contained in the relevant WorkCover medical services fees order.
- (3) Any previous Order of WorkCover in force under section 62 of the Act continues to apply except to the extent that it is inconsistent with this Order.
- (4) Any order of the Director-General of the Department of Health relating to the classification of hospitals made for the purposes of clause 5 of this Order or any previous Order under section 62 of the Act has effect, subject to any amendment of it made by any subsequent order of the Director-General of the Department of Health.
- (5) Any order relating to the classification of hospitals made for the purposes of clause 5 of this Order may provide that a hospital is not a public hospital of a particular type in respect of treatment provided to a specified class of patient.

#### 4. Definitions

- (1) In this Order:

**classification** refers to a classification of hospital, category of patient or otherwise (or any combination of them), appearing in Column 1 of the Tables to clauses 5 and 6 of this Order.

**the Act** means the Workers Compensation Act 1987.

**WorkCover** means the WorkCover Authority of New South Wales.

- (2) A reference to treatment or services in this Order is (consistent with the definition of “hospital treatment” in section 59 of the Act) a reference to treatment or services provided at a public hospital or at any rehabilitation centre conducted by such a hospital.

##### 5. Fees for hospital patient services generally

- (1) The amount for which an employer is liable under the Act for hospital treatment of a worker, being treatment provided to a worker within a classification specified in Column 1 of the Table to this clause is:
- in the case of inpatient services, for each day (or part of a day) that the worker is a patient of the hospital, or
  - in the case of outpatient services, for each occasion of service,
- the corresponding amount specified in Column 2 of that Table.

- (2) This clause does not apply to hospital treatment of a type referred to in clauses 6 to 10 of this Order.

- (3) In this clause and the Table to this clause:

**critical care**, in relation to a patient, has the same meaning as it has in the “NSW Department of Health – Department of Health Reporting System (DOHRS)” issued by the Department of Health in June 2000 or in any subsequent revision of that document issued by that Department.

**metropolitan (non-referral) hospital** means a public hospital classified as a metropolitan (non-referral) hospital in an order published in the *NSW Government Gazette* by the Director-General of the Department of Health.

**metropolitan (referral) hospital** means a public hospital classified as a metropolitan (referral) hospital in an order published in the *NSW Government Gazette* by the Director-General of the Department of Health.

**non-metropolitan hospital** means a public hospital classified as a non-metropolitan hospital in an order published in the *NSW Government Gazette* by the Director-General of the Department of Health.

**other public hospital** means a public hospital other than a metropolitan (non-referral) hospital, a metropolitan (referral) hospital, a non-metropolitan hospital or a psychiatric hospital.

**outpatient** means a patient who does not undergo a formal admission process.

**psychiatric hospital** means a public hospital classified as a psychiatric hospital in an order published in the *NSW Government Gazette* by the Director-General of the Department of Health.

**public hospital** means a public hospital within the meaning of section 59 of the Act.

Table – Fees for hospital patient services generally

<i>Column 1</i> Hospital classification	<i>Column 2</i> Amount (\$)
(1) Metropolitan (referral) hospital:	
(a) Critical care	2575 per day
(b) Other	1035 per day
(c) Outpatient occasion of service (excluding physiotherapy, psychology and exercise physiological services)	120 or the maximum amount payable under the relevant Workcover practitioner fees order
(2) Metropolitan (non-referral) hospital:	
(a) Critical care	1495 per day
(b) Other	780 per day
(c) Outpatient occasion of service (excluding physiotherapy, psychology and exercise physiology services)	90 or the maximum amount payable under the relevant Workcover practitioner fees order
(3) Non-metropolitan hospital:	
(a) Critical care	1495 per day
(b) Other	780 per day
(c) Outpatient occasion of service (excluding physiotherapy, psychology and exercise physiology services)	90 or the maximum amount payable under the relevant Workcover practitioner fees order
(4) Psychiatric hospital:	
(a) Inpatient	435 per day
(b) Outpatient occasion of service (excluding physiotherapy, psychology and exercise physiology services)	75 or the maximum amount payable under the relevant Workcover practitioner fees order
(5) Other public hospital:	
(a) Inpatient	245 per day
(b) Outpatient occasion of service (excluding physiotherapy, psychology and exercise physiology services)	75 or the maximum amount payable under the relevant Workcover practitioner fees order

## 6. Fees for brain injury rehabilitation services

- (1) The amount for which an employer is liable under the Act for hospital treatment of a worker, being brain injury rehabilitation services within a classification specified in Column 1 of the Table to this clause, is the corresponding amount specified in Column 2 of that Table.
- (2) This clause does not apply to hospital treatment of a type referred to in clause 5, 7, 8, 9 or 10 of this Order.
- (3) In this clause and the Table to this clause:

*Category A patient* means a patient being assessed for or receiving active rehabilitation.

*Category B patient* means a patient receiving personal and nursing support who is resident in a brain injury program unit.

*Category X patient* means a patient needing an extremely high level of support.

*metropolitan (non-referral) hospital* means a public hospital classified as a metropolitan (non-referral) hospital in an order published in the Gazette by the Director-General of the Department of Health.

*outpatient* means a patient who does not undergo a formal admission process.

Table – Fees for brain injury rehabilitation services

<i>Column 1</i> Item/Hospital classification	<i>Column 2</i> Amount (\$)
(1) Admitted patient services:	
(a) Category A patient	1090 per day
(b) Category B patient	695 per day
(c) Category X patient	1550 per day
(2) Metropolitan (non-referral) hospital:	
(a) Category A patient	775 per day
(b) Category B patient	385 per day
(3) Non-admitted patient services	75 per half hour
(4) Outpatient medical clinic appointments	
(a) Medical consultation – initial assessment	255
(b) Medical consultation – follow-up assessment	130
(5) Group activities	
(a) directly supervised by qualified allied health clinician	45 per half hour
(b) not directly supervised by qualified allied health clinician	35 per half hour

## 7. Fees for spinal injury rehabilitation services

- (1) Spinal injury rehabilitation rates apply exclusively to services provided at Royal Rehabilitation Centre Sydney.
- (2) The rate for inpatient spinal injury rehabilitation services is that which applies for hospital patients in the metropolitan non-referral classification, that is \$780 per day.
- (3) The rate for outpatient/outreach spinal injury rehabilitation services is that which applies for Brain Injury Program non-inpatient services/outreach rate, that is, \$75 per half hour or part thereof.

## 8. Fee amount payable for physiotherapy outpatient services

- (1) The amount for which an employer is liable under the Act for hospital treatment of a worker, being physiotherapy services provided to the worker as an outpatient is according to the relevant Workers Compensation (Physiotherapy Fees) Order (Schedule B) in effect at the time.

## 9. Fee amount payable for psychology outpatient services

- (1) The amount for which an employer is liable under the Act for hospital treatment of a worker, being psychology services provided to the worker as an outpatient is according to the relevant Workers Compensation (Psychology Fees) Order (Schedule A) in effect at the time.

## 10. Fee amount payable for exercise physiology outpatient services

- (1) The amount for which an employer is liable under the Act for hospital treatment of a worker, being exercise physiology services provided to the worker as an outpatient is according to the relevant Workers Compensation (Exercise Physiology Fees) Order (Schedule A) in effect at the time.

## 11. Charges for health records and medical reports

- (1) In this clause a health record means a document account, whether in hard or electronic form, of a workers health, illness and treatment during each visit or stay at a health service.
- (2) The charges for health records and medical reports are charged in accordance with the rates set out in NSW Health IB2011\_038 subject to the categorisations set out in NSW Health PD2006\_050 (except where rates are otherwise provided under specific legislation). Reports charging both of those rates or categorisations are amended or revised from time to time and can be found at the following internet sites:

[http://www.health.nsw.gov.au/policies/IB/2011/IB2011\\_038.html](http://www.health.nsw.gov.au/policies/IB/2011/IB2011_038.html)

[http://www.health.nsw.gov.au/policies/pd/2006/PD2006\\_050.html](http://www.health.nsw.gov.au/policies/pd/2006/PD2006_050.html)

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