

GIS Practice Information (January 2015)

Please read carefully

CONSULTATIONS: We are Consultant Physicians – specialists working mostly in the area of digestive or liver disease. Most consultations result in the ordering of pathology tests, x-rays and/or diagnostic tests including endoscopy. Initial consultations take 30 to 40 minutes; review consultations are generally 15 to 20 minutes. More complex problems will require over 45 minutes initially. Management of chronic disease generally requires a full review every 12 months – a longer appointment.

REFERRALS: A referral is required for a Medicare rebate. They cannot be issued after the consultation. Unless specified referrals from a GP last for up to 12 months or one episode of illness whereas referrals from a specialist are valid for a maximum of 3 months. If you are attending for a new problem, you will also need a new referral.

QUESTIONS: During your consultation be sure that you understand the reason for recommended tests or treatment. If you don't, please note the question for your next visit. If you wish others to know about your illness we suggest you bring them with you as privacy laws prevent us discussing your condition without your permission.

PRESCRIPTIONS: In general, prescriptions will not be provided without an appointment.

TELEPHONE CALLS: Unfortunately you will not be able to speak with a doctor directly as this will interrupt other patients' consultations. Most replies are made via the secretaries. If you wish to discuss your symptoms, management plan or results an appointment should be made.

COSTS: Consultant Physicians fees reflect our longer consultation times and the complexity of the problems being managed. The Commonwealth Government sets a list of Schedule Fees and Medicare only rebates 85% of the fees for consultations whilst you are under the Medicare Safety Net threshold. Private health insurance only covers in-hospital expenses and does not apply to consultation. An account fee applies when payment is not received on the day of consultation. The Australian Medical Association (AMA) schedule fees are included below for comparison. Fees are reviewed every year.

	Fee	Medicare Rebate	Gap	AMA schedule
Initial	\$240.00	\$128.30	\$111.70	\$310.00
Review	\$120.00	\$64.20	\$55.80	\$142.00
Complex initial	\$340.00	\$224.35	\$115.65	\$535.00
Complex review	\$170.00	\$112.30	\$57.70	\$270.00
Account fee	Additional \$10 if not paying on the same day as the consultation			

Pathology and radiological tests (x-rays, ultrasounds etc.) outside hospital operate in a similar way. Most private radiologists and pathologists charge above the schedule fee; they may bulk bill pensioners.

Our fees for private hospital visits and endoscopic procedures are generally billed directly to your hospital insurer. Some insurers do not have direct billing arrangements for pathology or radiology in private hospitals. If you are not insured and elect to have a procedure in a private hospital a cost estimate will be given to you beforehand.

URGENT CONTACT: During office hours you should contact our rooms, unless you have been told otherwise. After hours, in the first instance contact your local doctor, or go to a hospital Emergency Department (such as at the Austin). When we are away we provide cover within the group or ensure there is a locum specialist available.