

3 Accounts for patients without private health insurance

If you are a self-funded patient (ie. a patient without eligible private health insurance) you will receive an account for your pathology tests. You will still be able to claim 75% of the Medicare Benefits Schedule fee from Medicare and will be out-of-pocket for the balance, which will consist of 25% of the Medicare Benefits Schedule fee in addition to the remainder of the account, which will be capped at a maximum of \$80* out-of-pocket costs.

Possible Additional Charges

3.1 Tests sent to an alternative pathology provider

Please note, your doctor may elect to send some of your pathology to an alternative provider who will have their own billing policy. Any pathology performed by an alternative pathology provider is not covered under the Melbourne Pathology \$80* cap.

3.2 Tests that are not covered under the Medicare Benefits Schedule

Please refer to 1.2

Paying your Melbourne Pathology account

You can pay your account via BPay, Australia Post Billpay, credit card or cheque. The payment options will be listed on the back of your account. Unfortunately, patients cannot pay in person at this day procedure centre or at a Melbourne Pathology collection centre.

Claiming your rebates

When your account is paid, you can submit the receipt to Medicare and your private health insurer to claim any rebates.

How are these fees determined?

The fees for pathology tests are separate from the fees charged by the day procedure centre and other doctors who may treat you during your stay. Medicare sets a schedule of fees for individual procedures and tests, known as the Medicare Benefits Schedule. Medicare does not fully fund pathology for day procedure patients, and only rebates 75% of the Medicare Benefits Schedule fee.

The AMA also prescribes a set of fees for pathology tests per hospital stay. Melbourne Pathology fees are set at this AMA rate and are at a maximum of \$80* above the Medicare benefits schedule fee per day procedure admission. Visit our website for more information.

** Repatriation patients will be billed directly to Veterans Affairs.*

For further enquiries please contact our Accounts Department on 9287 7888.



Pathology during your day procedure



Pathology is a vital medical specialty that underpins the vast majority of treatment decisions by doctors. More than 70% of all medical diagnoses depend on pathology test results.

During your day procedure, you may have pathology tests performed to provide your treating doctor with a diagnosis or to help monitor your medical progress.

Melbourne Pathology is your doctor's and/or this day procedure's preferred pathology provider and most of your tests will be sent to our laboratory.

These tests may include samples taken by Melbourne Pathology collectors, but could also include tissue and other samples that may be collected during your operation without you even being aware.

Once you have had these tests, it is a pathologist – a medical specialist with years of training like other specialist doctors – who analyses your results, assisting your doctor in the diagnosis and treatment of your condition.

Will I receive an account?

Melbourne Pathology maintains a 'no gap' agreement with 35 private health funds (see next page). Members of these funds will incur no out-of-pocket fees for tests that are eligible for a Medicare rebate.

If your private health insurance fund does not have a 'no gap' agreement with Melbourne Pathology you may incur additional fees while you are a patient at this day procedure centre.

1 Patients with private health insurance funds that have a 'no gap' agreement with Melbourne Pathology

You will not incur any out-of-pocket expenses for tests that are eligible for the Medicare rebate if you have eligible cover with one of the following participating private health funds. Your account will be billed directly to your private health insurance fund for full payment.

- ACA Health Benefits Fund
- ahm Health insurance
- Australian Unity Health Limited
- BUPA Australia Pty Ltd
- CBHS Health Fund Limited
- CBHS Corporate Health Pty Ltd
- CUA Health Limited (CHF)
- Defence Health Ltd
- Emergency Services Health Pty Ltd
- Frank Health Insurance*
- GMF Health
- GMHBA
- HBF Health Limited
- Health Care Insurance Ltd
- health.com.au
- Health Insurance Fund of Australia
- Health Partners
- Hospital Contributors Fund of Australia (HCF)
- Medibank Private
- myOwn
- Navy Health Ltd
- Nurses & Midwives Health Pty Ltd
- onemedifund
- Peoplecare Health Insurance
- Phoenix Health Fund Limited
- Police Health Limited
- Queensland Country Health Fund Limited
- Reserve Bank Health Society Limited
- rt health fund
- St.LukesHealth
- Teachers Health Fund
- Teachers Union Health
- The Doctors' Health Fund Limited
- Transport Health
- Westfund

*Frank Health Insurance is a low budget health fund. Please check your level of cover if insured by this provider.

Please note, these agreements change from time to time, and a full list of these funds can be found on our website at www.mps.com.au

Possible Additional Charges

1.1 Tests sent to an alternative pathology provider

Please note, your doctor may elect to send some of your pathology to an alternative provider who will have their own billing policy.

1.2 Tests that are not covered under the Medicare Benefits Schedule

Any tests that are not covered under the Medicare Benefits Schedule will incur an additional fee that may not be covered by your private health insurance. These tests must be paid for in full, and are not eligible for a Medicare rebate. For more information about Medicare rebates, visit the Medicare Australia website www.medicareaustralia.gov.au. For further information please consult your private health insurer.

2 Patients with private health insurance funds that do not have a 'no gap' agreement with Melbourne Pathology

Should you belong to one of the small number of health funds not listed on the previous page, which have chosen not to enter into direct billing arrangements with Melbourne Pathology, you will receive an account from us. You will still be eligible for your Medicare rebate, and you can then present the paid account to your private health fund for a further rebate. You will still incur an out-of-pocket fee that will be capped to a maximum of \$80* per admission.

Possible Additional Charges

2.1 Tests sent to an alternative pathology provider

Please note, your doctor may elect to send some of your pathology to an alternative provider who will have their own billing policy. Any pathology performed by an alternative pathology provider is not covered under the Melbourne Pathology \$80* cap.

2.2 Tests that are not covered under the Medicare Benefits Schedule

Please refer to 1.2