



Checklist before choosing a specialist

✓ DO SOME RESEARCH

- Doctors set their own fees. This means fees can vary for the same type and quality of care. Fees can depend on who you see and where they are located.
- Your most important source of information when choosing a specialist is your referring doctor. You can also inform yourself about costs.
- Visit health.gov.au/medical-costs-finder to find out possible costs.

✓ EXPLORE YOUR OPTIONS BEFORE REFERRAL

- If the cost of specialist treatment concerns you, talk to your GP about your options before you get a referral.
- You can ask for a referral to more than one suitable specialist. This helps you compare costs before deciding on the best specialist for your needs.
- You can also ask about public hospital clinics and treatment options if cost is an issue.

✓ ASK ABOUT COST

- It's okay to talk about fees upfront.
- You can ask questions about fees over the phone before making a specialist appointment and get more details during your consultation.
- This can help you plan for fees you might have to pay.

Medical Costs Finder tool

The Australian Government has launched a new tool to help you understand the range of costs for common medical specialist treatments within different locations.

Visit health.gov.au/medical-costs-finder to use the tool.

Helpful information

The website also provides information to help you:

- consider value or quality, for example ask about training, experience and previous results
- seek cost estimates specific to you before treatment (Informed Financial Consent).

Find more information at health.gov.au/medical-costs-finder.

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A guide to out of pocket medical costs

**HELPING YOU PLAN FOR THE
COST OF MEDICAL TREATMENT.**

*Higher fees do not necessarily
mean higher quality care.*

Australia has a world class healthcare system. Many treatments are subsidised or fully paid by the Australian Government through Medicare.

Many people also take out private health insurance, which can reduce waiting times and allow you to choose your treating doctor. However, people sometimes experience unexpected or significant out of pocket medical costs. This can be worrying.

Learn about out of pocket costs and how to avoid unexpected bills.

What are out of pocket medical costs?

An out of pocket medical cost is the amount you have to pay for a medical treatment or appointment.

Out of pocket costs are normal in many situations. It is the amount not covered by Medicare or any private health insurance. This also can be called a 'patient payment' or 'gap payment'.

Who contributes to the costs?

Public patient in a public hospital – There are no out of pocket costs for treatments. They are all paid by Commonwealth and State Governments¹.

Hospital treatment for insured private patients – Patients pay the difference between the doctors' fees and payments by Medicare and any health insurance.

Out of hospital treatment² – Patients pay the difference between the doctors' fees and any Medicare payment.



What costs might you pay?

Many medical costs are covered by Medicare or your health insurer. However you may have to pay for private health care providers or hospital charges. For example:

HOSPITAL TREATMENT AS A PRIVATE PATIENT³

- **Health care provider fees** – for treatment or assessment – for example, surgeon, anaesthetist, assistant surgeon, other specialist, diagnostic tests and imaging.
- **Hospital charges** – e.g. accommodation, operating theatre, prostheses (devices like plates, screws), medicines, dressings, physio and other therapies.

OUT OF HOSPITAL

Fees for treatment – e.g. GP or specialist appointment, outpatient radiology or other tests, cancer radiation or chemotherapy, physio or other therapy, medicines.

Checklist after referral – for private patients

✓ ASK YOUR SPECIALIST (OR ADMINISTRATION STAFF)

- Can they give you a written estimate of costs?
- Will you have to pay any out of pocket costs?
- Is the treatment covered by Medicare? How much does Medicare pay?
- Hospital treatment: do they have a 'gap agreement' with your private health insurer, and will it reduce what you pay?
- Will there be other doctors' costs (e.g. anaesthetist, assistant, tests)? If so, talk to them about their costs too.
- How and when will they charge you (e.g. upfront and you recover from Medicare/insurer, or they bill Medicare/Insurer directly)?
- What are the likely relevant Medical Benefits Scheme (MBS) item numbers or procedure names? The new Medical Costs Finder tool may show the range of doctors' costs for the treatment: health.gov.au/medical-costs-finder

✓ ASK YOUR PRIVATE HEALTH INSURER ABOUT HOSPITAL ADMISSIONS

- Does your policy cover the likely treatment? Are there waiting periods?
- How much will they pay? This can vary between insurers, changing how much you pay. Do you have to pay an excess or co-payment?
- For your treatment, what hospitals and doctors do they have agreements with? Does this affect the amount you will pay?

✓ ASK YOUR HOSPITAL

- What are the costs? Are there any extra costs not covered even if you have private health insurance (e.g. medicines, wound dressings, TV, newspaper and post-op outpatient clinics)?

1. For people eligible for Medicare. Learn more at humanservices.gov.au

2. Health insurers cannot cover out of hospital treatment for Medicare services.

3. Private health insurers may help reduce or eliminate your costs – benefits can vary between insurers.