

APS 2014-2015 Schedule of recommended fees and item numbers for psychological services

1 July 2014 to 30 June 2015

CED VICE DECEDITION		SERVICE TIME (mins; non-billable work associated with service not included ²)						
SERVICE DESCRIPTION		1-15	16-30	31-45	46-60	61-75	76-90	91-120²
Initial consultation	Item number*	IO1	IO2	IO3	104	IO5	106	107
	Recommended fee**	n/a	\$129	\$179	\$235	\$289	\$341	\$442
Subsequent consultation	Item number	SO1³	SO2	SO3	504	SO5	SO6	SO7
	Recommended fee	\$65	\$129	\$179	\$235	\$289	\$341	\$442
Psychological assessment⁴	Item number	PA1	PA2	PA3	PA4	PA5	PA6	PA7
	Recommended fee	n/a	\$129	\$179	\$235	\$289	\$341	\$442
Clinical psychological assessment ⁵	Item number	CA1	CA2	CA3	CA4	CA5	CA6	CA7
	Recommended fee	n/a	\$129	\$179	\$235	\$289	\$341	\$442
Neuropsychological assessment ⁶	Item number	NA1	NA2	NA3	NA4	NA5	NA6	NA7
	Recommended fee		\$129	\$179	\$235	\$289	\$341	\$442
Report preparation ⁷	Item number	RO1	RO2	RO3	RO4	RO5	RO6	RO7
	Recommended fee	n/a	\$129	\$179	\$235	\$289	\$341	\$442
Case conference ⁸	Item number	CO1	CO2	CO3	CO4	CO5	CO6	CO7
	Recommended fee	\$65	\$129	\$179	\$235	\$289	\$341	\$442
Telephone consultation	Item number	PO1	PO2	PO3	PO4	PO5	PO6	PO7
	Recommended fee	\$65	\$129	\$179	\$235	\$289	\$341	\$442
Travel time	Item number	TO1	TO2	TO3	TO4	TO5	TO6	TO7
	Recommended fee	\$47	\$78	\$116	\$155	\$194	\$233	\$271
Family or other group (per client, 2 clients)	Item number	F21	F22	F23	F24	F25	F26	F27
	Recommended fee	n/a	\$65	\$89	\$118	\$145	\$170	\$221
Family or other group (per client, 3 to 4 clients)	Item number	F31	F32	F33	F34	F35	F36	F37
	Recommended fee	n/a	\$43	\$60	\$78	\$96	\$114	\$147
Family or other group (per client, 5 or more clients)	Item number	F51	F52	F53	F54	F55	F56	F57
	Recommended fee	n/a	\$26	\$36	\$47	\$58	\$68	\$88
Attendance ⁹ at court or legal briefings ¹³	Item number	LO1 ¹⁰	LO2	LO3 ¹¹	LO4	LO5	LO6	LO7 ¹²
	Recommended fee	n/a	\$235	\$268	\$353	\$434	\$511	\$663

For explanations of the notated numbers 1 to 13, please see footnotes on next page. In general on this schedule, where no fee is listed (as with many '1' codes) it is assumed that the relevant '2' item number applies or a time-based proportion of the '2' recommended fee.

Disclaimer: These fees are recommended only. Members are able to vary these fees at their discretion.

^{*} These item numbers are not to be confused with the Medicare Benefits Schedule (MBS) item numbers

^{**} Recommended fees do not include GST (where applicable)



Notes and guidelines on the application of the APS 2014-2015 SCHEDULE OF RECOMMENDED FEES AND ITEM NUMBERS FOR PSYCHOLOGICAL SERVICES

Please ensure that clients are aware of the details of consulting fees prior to commencing the professional relationship.

Guidelines for preparation of accounts***

The account should show:

- A. Psychologist's Provider Number(s): (where relevant)
- Name(s) of person(s) seen:

Date of service:

Service description:

Item number:

In order to avoid confusion, it is advisable not to show any further detailed description of the service provided, as the item number indicates this.****

C. APS recommended fee

(according to item number): \$......

D. Agreed payable fee (as negotiated with the client and if different from the recommended fee): \$....

Cancellation fees

Fees for cancellation of appointments made for psychological services can be justified if no replacement service is billed for the lost time. The policy for charging of cancellation fees should be discussed with the client or the service requester. Written information detailing the policy on cancellations should be available for clients and referring agencies (e.g., on a printed information sheet or detailed on appointment cards).

The following is a general guideline only. In the instance of a 46-60 minute service, the recommended cancellation fees are:

• 0–24 hours notice: Full fee • 24-48 hours notice: 50% of fee • 48 hours—7 days notice: 25% of fee

- Medicare Australia has its own requirements and procedures for accounts which you should be familiar with if providing services under the Medicare Benefits Schedule (MBS). These are set out on the APS website.
- Some health funds are requesting inclusion of diagnostic information on accounts. You should only include this information where there has been an explicit arrangement between the health fund and client. If this is part of their contractual arrangement, you may be obliged to include such details. Otherwise, it may contravene confidentiality requirements. If these items parallel Medicare Australia rebatable items but the client chooses to claim against their health fund, inclusion of the words "not being claimed under Medicare" may assist client claims.

Footnotes

- These fees are calculated on the assumption of 66% productivity one hour of billable time will involve an additional average of half an hour of associated non-billable professional time (e.g., referral source letters, phone calls, test scoring etc.). This productivity ratio is assumed to decrease slightly for items of less than 46 minutes and increase slightly for items over 60 minutes.
- The fee rate for services estimated to be of more than 2 hours in duration should be negotiated with the client or referral source. In this case, the appropriate item number prefix should be followed by an 'X'
- tase, the appropriate term further prenx should be followed by an to indicate extended service, e.g., NAX or ROX.

 This item is only used for brief client contact related to ongoing management/treatment (e.g., brief client consultation, ward round etc.). Note that this item is not considered appropriate for writing letters to referral sources, phone calls, etc. which are considered non-billable items (refer to footnote 1).
- Time spent on face-to-face client interview or testing of intellectual, personality, interests or other capacities or traits for the purpose of educational, vocational or other assessment or guidance.

 Time spent on face-to-face interview or testing by an appropriately
- unalified psychologist for purpose of assessment or diagnosis of psychologist only to provide services that are within the limits of the psychologist only to provide services that are within the limits of the psychologist's area of training and competence.

 Time spent on face-to-face interview or testing by an appropriately qualified psychologist for purpose of assessment of brain functioning. Note that it is the ethical responsibility of the psychologist only to provide services that are within the limits of the psychologist's area of
- provide services that are within the limits of the psychologist's area of training and competence.
- A report is a psychological service that is directly requested by the referring agency or client. Thus reports prepared for clients are usually done so on the basis of explicit written consent from the client or legal guardian. A report is a structured presentation typically including such components as relevant psychosocial history, history of presenting issues, present condition, test results, opinion and intervention recommendations. Professional letters to medical or other referral agencies concerning treatment needs of the client are not considered to constitute reports (refer to footnote 1). For clients requesting reports, it is the responsibility of the psychologist to clarify

the procedures and costs involved prior to report preparation. For extended reports, it is the responsibility of the psychologist to negotiate fee arrangements with the referring agency prior to preparation of the report. This would normally be a pro-rating of the hourly rate. Note that report preparation time is inclusive of relevant file and document review.

General guidelines for report length and item numbers:

RO2 = 1 page* brief supplementary reports e.g., request for elaboration on a previously submitted report

RO3 = 1-2 pages short report

RO4 = 2-3 pages short report RO5 = 3-4 pages standard report

RO6 = 4-5 pages standard report

RO7 = 5-6 pages extended

* A4 single-spaced, typed, full page, excluding spaced preamble or other non-text material

(This guideline is not to be interpreted rigidly and report length and charging arrangements may vary according to the specific requirements of the requesting agency).

- A Case Conference is a consultation between professionals and others who are directly involved in the provision of services to the same client.
- Attendance includes waiting time and provision of testimony.
- 10. The recommended rate for attendance at Court for any time less than one hour is \$235.
- Times for these services are based on 1.5 x APS recommended fee, to take into account the additional complexity, intensity and disruption of this service.
- 12. For prolonged attendance items of more than two hours, each additional and consecutive hour after the initial two hours may be charged at the rate of \$352.50 per hour (1.5 x APS recommended fee) or by negotiation.
- Travel time to/from Court or briefings as per Travel items TO1-TO6. Travel times of more than two hours are by arrangement. Motor vehicle travel in excess of 2 hours may incur the additional cost of 74 cents/per km travelled. Air travel to be business class fare and insurance; accommodation at minimum of 4-star hotel and breakfast.

These guidelines were prepared by the APS Professional Practice Advisory Group. The Advisory Group welcomes feedback on the Schedule. Submissions and comments may be forwarded to the APS National Office.