

# NSW Workers Compensation fee benchmarking

Summary report

State Insurance Regulatory Authority  
29 September 2020

**Limitations and use of the report:** : Consistent with our Statement of Work dated 19 June 2020 in accordance with the Contract Agreement SIRA//6358/2016 between EY and SIRA dated 20 April 2017, our report has been completed solely for the benefit of the State Insurance Regulatory Authority (SIRA) and EY has not been engaged to act, and has not acted, as advisor to any other party. Accordingly, EY makes no representations as to the appropriateness, accuracy or completeness of the report for any other party's purposes. Our work has been limited in time and scope and in completing the benchmarking analysis we have relied on information provided by SIRA and publicly available information, the reliance and limitations of our report are set out in Section 5.



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# Executive Summary

The State Insurance Regulatory Authority (SIRA) has commissioned Ernst & Young (EY) to undertake a benchmarking review of a selection of fee orders for the NSW workers compensation (NSW WC) scheme. This analysis forms part of SIRA’s broader healthcare review and represents an early step in SIRA’s journey towards its vision for value-based healthcare.

This analysis has considered the fee orders in place as at 1 July 2020 for:

- ▶ Surgeon
- ▶ Orthopaedic Surgeon
- ▶ Physiotherapy, Chiropractic and Osteopathy
- ▶ Accredited Exercise Physiology
- ▶ Psychology and Counselling
- ▶ Private hospital

The analysis has compared the maximum fees stated within the fee orders, and guidelines for use of the fee orders (e.g. limits to services and conditions of operating). The comparisons are reliant on the information provided in, and interpretation of, the published fee orders. The scheme benchmarking is limited in scope to personal injury schemes and other specified funders of healthcare. It is not a representative comparison of NSW WC position within the broader healthcare market. This report does not constitute advice on possible changes to the level or structure of the SIRA gazetted fee orders or the fee orders of any other benchmark.

## Key findings

The following four key findings have been identified as a result of the fee benchmarking exercise.

**1. Fee levels:** The NSW WC maximum fees are predominantly above or in-line with comparator schemes and funders.

Service group	Description and key examples
Surgeon and Orthopaedic Surgeon	<ul style="list-style-type: none"> <li>▶ NSW WC specify a 50% loading above the AMA fees, as a result the NSW WC maximum fee is notably higher than any of the comparator fees.</li> <li>▶ Step-downs in the maximum fee payable apply when multiple procedures occur. For non-orthopaedic procedures, NSW WC specifies a smaller reduction in the maximum fee than other comparators.</li> <li>▶ NSW WC maximum fees for consultations are also higher than other funders.</li> </ul>
Allied Health	<ul style="list-style-type: none"> <li>▶ The physiotherapy, chiropractic and osteopathy fee orders for NSW WC specify fees predominantly above the comparators. The closest comparators for the most commonly used physiotherapy consultation (i.e. standard in-rooms for one injury area) were between 3% and 32% lower than the maximum fee for NSW WC<sup>1</sup>. Larger differences in maximum fee levels are observed for other consultation types.</li> </ul>
Private Hospitals	<ul style="list-style-type: none"> <li>▶ Funding arrangements with private hospitals are commercially sensitive in nature, consequently limited comparisons of private hospital fees were possible within the time and scope of this benchmarking analysis. SIRA is planning to undertake further analysis of private hospital fees and dynamics using Private Hospital Data Bureau data provided by the Commonwealth Department of Health.</li> </ul>

<sup>1</sup> Two comparators had higher fees for consultations: NDIS (for consultations greater than 25 minutes) and IHPA NEP. IHPA NEP may reflect a higher level of complexity due to the setting in public hospital clinics.

**2. Fee structure:** There are areas where the NSW WC fee structure differs to comparator schemes and funders, particularly in fee granularity, time versus session-based fees and reference rates (AMA or MBS) used for surgeons and orthopaedic surgeons.

Service group	Description and key examples
Surgeon and Orthopaedic Surgeon	<ul style="list-style-type: none"> <li>▶ Where NSW WC uses AMA codes and billing rules (with some modifications), many other schemes use the MBS codes and billing rules (with minor modifications). There are differences between the item codes and rules of service provision under AMA List versus MBS.</li> </ul>
Allied Health	<ul style="list-style-type: none"> <li>▶ NSW WC has a greater level of granularity of consultation types and loadings in the fee order design, which is observed to contribute to greater differences in maximum fee levels.</li> <li>▶ NSW WC is the only scheme compared that includes physiotherapy, chiropractic and osteopathy in a single fee order with the same session rates applying across the three disciplines.</li> <li>▶ NSW WC specifies a time-based fee for exercise physiology consistent with most comparators. However, NSW WC scheme experience suggests the majority of consultations are charged at the maximum specified time of one hour. The Transport Accident Commission and the Medicare Benefits Schedule have session-based fees and WorkSafe Victoria has recently moved away from time-based fees to a flat session-based per consultation structure fees (as at 1 September 2020). It is noted that, under the new session-based fee order, WorkSafe Victoria indicates that a standard consultation in their scheme is approximately 30 minutes.</li> <li>▶ For psychology and counselling, NSW WC defines a session-based fee rather than a time-based fee. All but one other comparator considered define a time-based fee, with some comparators also specifying a maximum session length.</li> </ul>
Private Hospitals	<ul style="list-style-type: none"> <li>▶ The mechanism for funding private hospital stays varies between schemes. Some comparators act as price takers while others have individually negotiated arrangements in place for some or all hospitals.</li> <li>▶ NSW WC and ReturnToWorkSA are the only schemes compared that have a single fee schedule for all private hospitals. However, ReturnToWorkSA sets rates for overnight stays using activity-based funding.</li> </ul>

**3. Conditions of operating and access:** In general, conditions of operating and access to treatment are similar across comparator schemes and funders, with variations in registration requirements, training requirements and pre-approval limits.

Service group	Description and key examples
Surgeon and Orthopaedic Surgeon	<ul style="list-style-type: none"> <li>▶ While SIRA approves a selection of allied health providers to operate within the scheme, there is no current requirement for SIRA to approve surgeons or orthopaedic surgeons. In contrast, a number of other schemes require medical practitioners to be registered with the scheme.</li> <li>▶ Some schemes explicitly exclude items where there is limited evidence that the treatment is effective and/or safe.</li> <li>▶ A variety of approaches are used regarding the approval of surgical procedures. Some schemes do not require pre-approval, others require pre-approval under all circumstances, others allow for an initial period after the accident during which approval is not required. NSW WC has an initial period of 48 hours after an injury, where no pre-approval is required.</li> </ul>
Allied Health	<ul style="list-style-type: none"> <li>▶ NSW WC is the only comparator that requires all allied health providers to undertake a scheme specific training program. However, the training is a one-off requirement, costing \$300 and must be paid for by the provider.</li> <li>▶ Across comparators, the number of allied health sessions that can be provided without pre-approval or submission of a treatment plan varies.</li> <li>▶ For NSW WC, medical practitioner referral is required for access to psychology services, consistent with most comparators.</li> </ul>
Private Hospitals	<ul style="list-style-type: none"> <li>▶ All schemes consulted allow access to private hospitals. Conditions of operating and access have not been assessed.</li> </ul>

**4. Fee indexation process:** There are some differences in how NSW WC and comparator schemes and funders have historically approached the fee indexation process.

Service group	Description and key examples
Surgeon and Orthopaedic Surgeon	<ul style="list-style-type: none"> <li>▶ In referencing the AMA rates, with relevant loadings, the NSW WC has an implicit dependence on AMA indexation processes, where some other funders set their own rates.</li> </ul>
Allied Health	<ul style="list-style-type: none"> <li>▶ NSW WC has historically applied annual indexation to allied health fee orders. While this is consistent with some benchmarks, there are others, such as ReturnToWorkSA and the National Disability Insurance Agency, where they regularly use market price benchmarks, rather than continual indexation.</li> </ul>
Private Hospitals	<ul style="list-style-type: none"> <li>▶ Historically, the NSW WC scheme has indexed private hospital fees with reference to Consumer Price Index or Wage Price Index, in some years providing a negotiated margin beyond the referenced inflation index. Given the commercially sensitive nature of the individual contracts in place for many comparators, it is not clear what the standard practice is for fee indexation.</li> </ul>

Please refer to Section 5 for reliances and limitations of this report.

# 1. Introduction and Approach

## 1.1 Background and scope

The State Insurance Regulatory Authority (SIRA) has observed increasing trends in healthcare expenditure within the NSW workers compensation (NSW WC) scheme. In light of this, SIRA has commenced a review of the healthcare expenditure within the personal injury schemes it regulates ('the healthcare review').

SIRA has commissioned Ernst & Young (EY) to assess a subset of the gazetted fee orders for NSW WC through a benchmarking exercise, with the aim to promote the viability of the insurance and compensation schemes established under the NSW WC legislation.

This analysis has considered the fee orders in place as at 1 July 2020 for:

- ▶ Surgeon
- ▶ Orthopaedic Surgeon
- ▶ Physiotherapy, Chiropractic and Osteopathy
- ▶ Accredited Exercise Physiology
- ▶ Psychology and Counselling
- ▶ Private hospital

See Appendix A for the complete list of NSW WC fee orders.

The analysis has compared the fees stated within the orders, and guidelines for use of the orders (e.g. limits to services and conditions of operating). This report does not constitute advice on possible changes to the level or structure of the SIRA gazetted fee orders or the fee orders of any other benchmark.

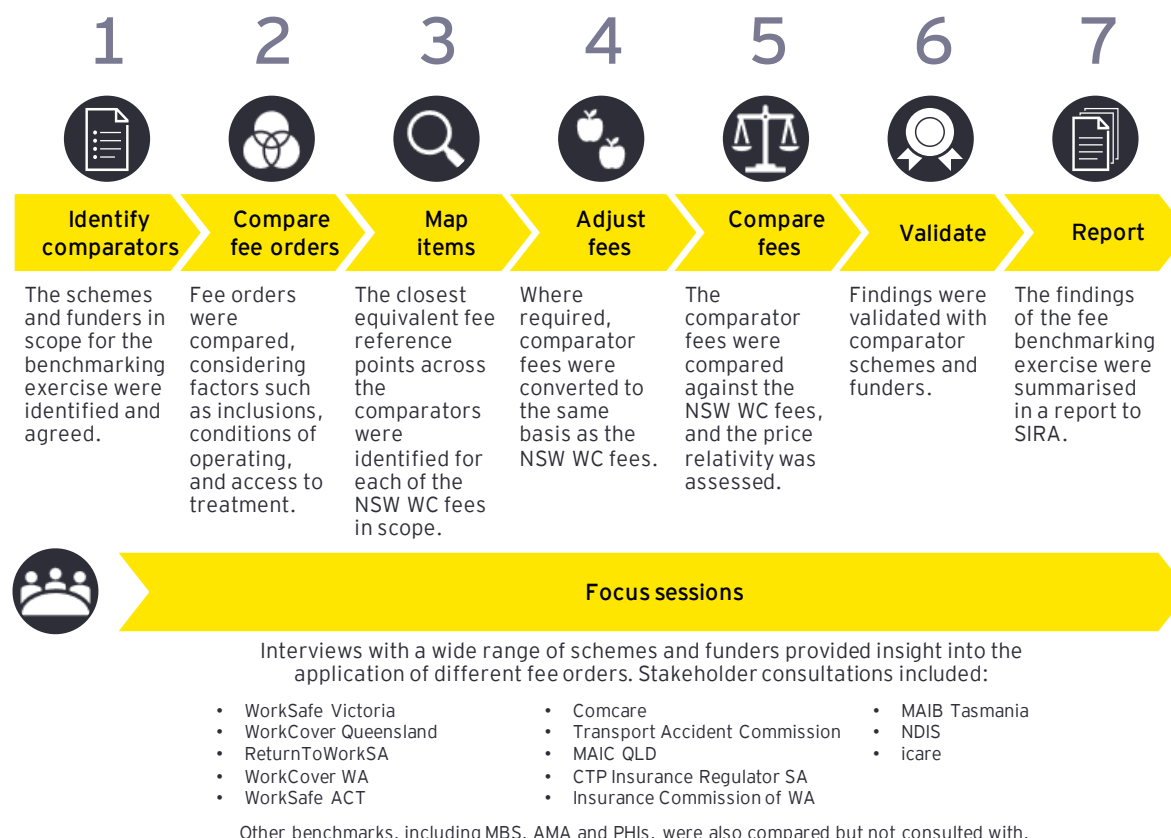
## 1.2 Approach

The fee benchmarking exercise involved establishing a basis for comparison for in scope items<sup>2</sup> within the NSW WC fee orders and benchmarking these against the published fee orders for comparator schemes and funders of healthcare. The approach taken is detailed in Figure 1 on the following page.

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<sup>2</sup> See Appendix A

Figure 1: Fee benchmarking methodology



The following dimensions have been considered:

- ▶ **Conditions of operating** - the requirements of providers to be eligible to deliver treatment or services, such as registration with a regulator or approval by the scheme,
- ▶ **Access to treatment** - the requirements for an individual service or claim to be reimbursed by the scheme, such as a referral from a medical practitioner or pre-approval from the scheme or funder,
- ▶ **Inclusions within the orders** - the scope of the specific items included in the various fee orders, including any conditions relating to these items, and
- ▶ **Level of fees** - relative cost after adjusting so comparisons are made on as like-for-like basis as possible. Some assumptions were made within this process. SIRA was consulted with in forming these assumptions.

## 1.3 Benchmarks

The funders of healthcare and other bodies considered in this fee benchmarking exercise are listed in Table 1 below. The fee orders used in the benchmarking for each funder or body are detailed in Appendix B<sup>3</sup>. The fee orders considered were those in force at 1 July 2020<sup>4</sup>. Refer to the relevant websites to view the most up to date fee orders.

Table 1: Funders of healthcare included in this fee benchmarking exercise

	Benchmark <sup>5</sup>	Fee Benchmarking			Focus sessions
		Allied Health	Private Hospital	Surgeon	
Workers Compensation	icare	N/A	N/A	N/A	✓
	WorkSafe Victoria (WS VIC)	✓	✓	✓	✓
	WorkCover Queensland (WC QLD)	✓	No fee order	✓	✓
	ReturnToWorkSA (RTWSA)	✓	✓ <sup>6</sup>	✓	✓
	WorkCover WA (WC WA)	✓	No fee order	✓	✓
	NT WorkSafe		No fee order		✗
	WorkSafe ACT		No fee order		✓
	Worksafe Tasmania		No fee order		✗
	Comcare	✓ <sup>7</sup>	No fee order	✓	✓
Compulsory Third Party	NSW CTP	No fee orders	No fee order	✓	N/A
	Transport Accident Commission (TAC) Victoria	✓	✓	✓	✓
	Motor Accident Insurance Commission Queensland		No fee order		✓
	CTP Insurance Regulator SA		Reference ReturnToWorkSA		✓
	Insurance Commission of WA		Reference WorkCover WA		✓
	National Insurance Office (NT)		No fee order		✗
	CTP Regulator ACT		No fee order		✗
	Motor Accident Insurance Board Tasmania (MAIB)	Fee orders not published	No fee order	✓	✓
Other	National Disability Insurance Scheme (NDIS) <sup>8</sup>	✓	N/A	N/A	✓
	Medicare Benefits Schedule (MBS)	✓	N/A	✓	✗
	Australian Medical Association (AMA)	N/A	N/A	✓	✗
	Independent Hospital Pricing Authority (IHPA)	✓	N/A	N/A	✗
	National Efficient Price (NEP)				
	Private Health Insurers (PHIs)	✓	✓ <sup>6</sup>	✓ <sup>6</sup>	✗
	Australian Psychological Society (APA)	✓	N/A	N/A	✗

It is noted that South Australia's CTP Insurance Regulator, and the Insurance Commission of WA reference the workers compensation fee orders in their respective jurisdiction. Hence, this benchmarking exercise has implicitly considered the fee orders of these CTP schemes.

## 1.4 Considerations in fee benchmarking

SIRA gazettes the maximum fee for certain healthcare services provided within the NSW WC scheme. Consistent with the scheme legislation, the gazetted maximum fees specified in SIRA's fee

<sup>3</sup> For simplicity, fee orders are referred throughout this report. It is noted that some benchmarks use alternative terminology such as fee schedules or price guides.

<sup>4</sup> WorkSafe Victoria introduced a new fee order for Exercise Physiology, effective 1 September 2020. This fee order has also been included within the review.

<sup>5</sup> The benchmarks used include a range of schemes (including privately and publicly underwritten schemes), funders of healthcare and industry and peak bodies.

<sup>6</sup> Where available

<sup>7</sup> Where different to NSW WC

<sup>8</sup> It is noted that the National Disability Insurance Agency is the legal entity that governs the NDIS. For simplicity, the NDIS is referred to throughout this report.



orders are the maximum amount payable for those services reimbursed by the scheme. As shown in Table 2, in some other schemes, it is possible for providers to charge above the fee order. That is, there may be a gap or co-payments. This means that the fee specified in the fee order may not reflect the actual fee received by the provider.

In practice, the extent to which gap/co-payments are utilised varies, with feedback indicating that most schemes believe there is limited use of gap payments. For example, some schemes, such as WorkCover Queensland and WorkCover WA, do not encourage or promote providers charging above the scheduled fee. No adjustments were made to rates when comparing to the NSW WC scheme, where no gap/co-payments are possible. However, the schemes where gap/co-payments payments are possible are noted throughout the report. It is also noted that some schemes have a process whereby providers can apply to charge rates above those stated in the fee order (funded by the scheme), or there may be certain circumstances where it is reasonable for a higher fee to be charged. For simplicity, in this report, the fee included in the fee order is referred to as the maximum fee.

Table 2: Comparison of co-payments by funder/body

Gap/co-payments payments possible	Gap/co-payments payments not possible
<ul style="list-style-type: none"> <li>▶ WorkSafe Victoria</li> <li>▶ WorkCover Queensland</li> <li>▶ WorkCover WA</li> <li>▶ Comcare</li> <li>▶ TAC</li> <li>▶ MBS</li> <li>▶ AMA</li> <li>▶ PHIs</li> </ul>	<ul style="list-style-type: none"> <li>▶ NSW WC</li> <li>▶ ReturnToWorkSA</li> <li>▶ MAIB</li> <li>▶ NDIS</li> <li>▶ IHPA NEP</li> </ul>

Other considerations in the fee benchmarking include:

- ▶ No adjustments have been made for differences in the required reporting following a consultation as the fee payable for reporting is not clear between schemes.
- ▶ The National Disability Insurance Agency (NDIA) advises fees on a per hour basis, where the price caps for therapy services are primarily based on market prices and at the 75th percentile of the observed private billing distribution<sup>9</sup>. Specific rates are also payable for different states or reflecting the remoteness of the location. The applicable NSW or non-remote rates have been used for comparison.
- ▶ All rates shown are net of Goods and Service Tax.

<sup>9</sup> NDIA, Review of Therapy Pricing Arrangements, March 2019. See: <https://www.ndis.gov.au/providers/price-guides-and-pricing/pricing-review-therapy-services>.

## 2. Surgeon/Orthopaedic Surgeon

Surgery services accounted for 20.4% of NSW WC healthcare expenditure<sup>10</sup> in 2019, including fees for surgeons, orthopaedic surgeons, medical practitioners and anaesthetists<sup>11</sup>. The surgeon fee orders are limited to services provided by surgeons and orthopaedic surgeons only. NSW WC is unique in allowing a 50% loading on top of the referenced AMA rates where, for items investigated, comparator schemes are between the MBS and AMA rates. Step-downs in the maximum fee payable apply when multiple procedures occur. For non-orthopaedic procedures, NSW WC specifies a smaller reduction in the maximum fee than other comparators.

### 2.1 Fee level and structure

The NSW WC fee order sets the maximum fee payable to orthopaedic and non-orthopaedic surgeons for the primary procedure at 1.5x AMA rates. Figure 2 compares the specified fees for common procedures in NSW WC. These procedures account for 41% of the NSW WC procedure expenditure in 2019.

Figure 2: Price relative to NSW WC for common procedures

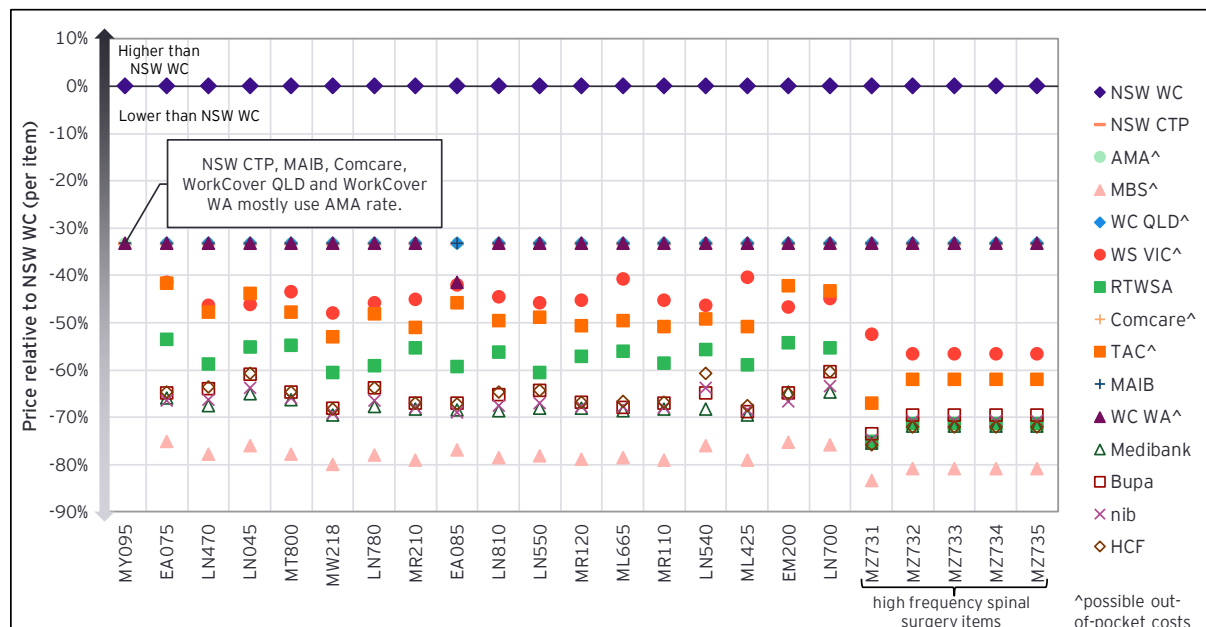


Figure 2 shows that, for these procedures, the 1.5x loading on AMA has contributed to all other comparators being at least 33% lower than the maximum NSW WC fee. The MBS is the lowest observed fee compared while the AMA (and NSW CTP, MAIB, Comcare and WorkCover QLD that align to the AMA) is the highest observed rate, outside of NSW WC. The PHI comparators (i.e. Medibank, Bupa, nib and HCF) represent the no-gap schemes offered by these insurers. These rates are above the MBS but significantly lower than the AMA.

<sup>10</sup> Healthcare is limited to services relating to ambulance, allied health, medical and investigation, diagnostics and therapeutic procedures, surgery, hospital services (both public and private) and domestic, personal and nursing care. This does not include expenditure on services including (but not limited to) dental, hearing aids, modifications to the home or vehicle, pharmaceutical and rehabilitation.

<sup>11</sup> Procedures 62%; anaesthesia 30%; and assistance at operations 8%.

Likewise, Figure 3 below shows that the NSW WC fees for consultations are higher than other funders. The maximum fee for other funders for an initial consultation are between 19% and 74% lower than the NSW WC maximum fee<sup>12</sup>. For subsequent consultations, the other funders' fees are between 38% and 81% lower than the maximum NSW WC fee<sup>13</sup>. Only one other scheme specifies a rate for an initial extended consultation, at over 60% lower than the NSW WC maximum fee. However, it is noted that similar services may be provided under other MBS items.

Figure 3: Price relative to NSW WC for surgeon consultations

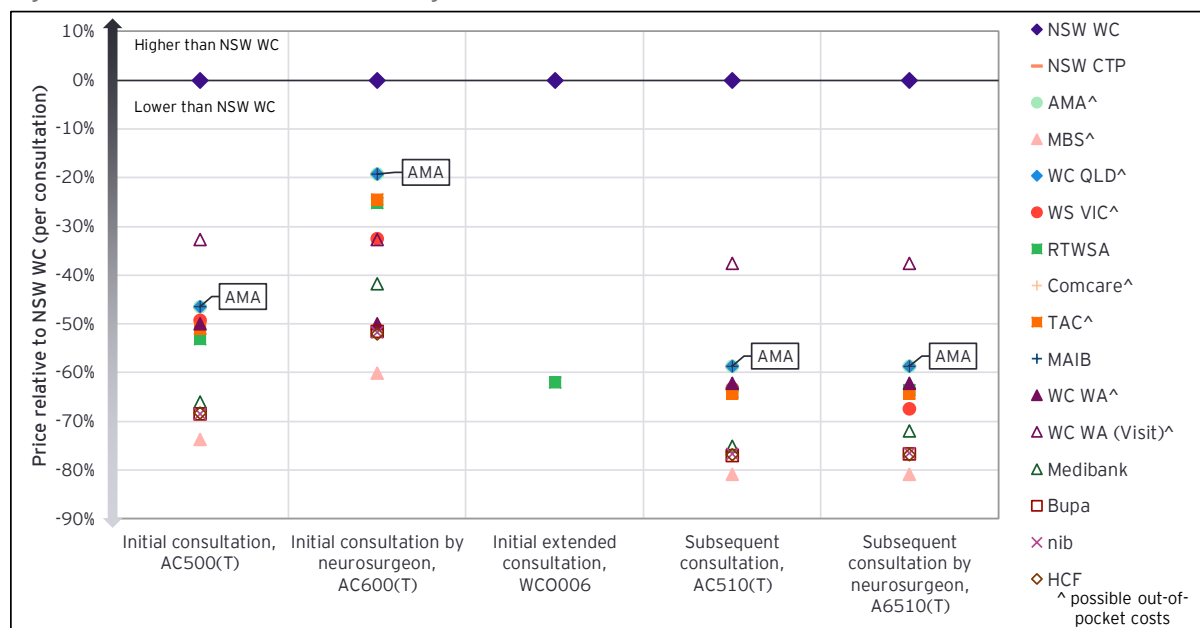


Table 3 compares selected features of the fee structure for surgeons and orthopaedic surgeons.

Table 3: Comparison of surgeon fee structure

Benchmark	Billing Rules	Rates specified	Multiple operations or injuries			Multiple operations or injuries (Orthopaedic)		
			1 <sup>st</sup> item	2 <sup>nd</sup> item	Subsequent item	1 <sup>st</sup> item	2 <sup>nd</sup> item	Subsequent item
NSW WC	AMA with modifications <sup>14</sup>	50% Loading on AMA	100%	75%	75%	100%	75%	75%
MBS	N/A	N/A	100%	50%	25%	100%	50%	25%
AMA	N/A	N/A	100% <sup>15</sup>	50% <sup>15</sup>	25% <sup>15</sup>	100% <sup>15</sup>	75% <sup>15,16</sup>	75% <sup>15,16</sup>
WorkSafe Victoria	MBS with modifications <sup>17</sup>	Set rates <sup>18</sup>	MBS rules			100% <sup>15</sup>	75% <sup>15,16</sup>	75% <sup>15,16</sup>
WorkCover Queensland	MBS with modifications <sup>19</sup>	Set rates align to AMA	100% <sup>15</sup>	50% <sup>15</sup>	25% <sup>15</sup>	100% <sup>15</sup>	75% <sup>15</sup>	75% <sup>15,16</sup>

<sup>12</sup> For initial neurosurgical consultations, the fees are between 19% and 60% lower.

<sup>13</sup> The same range applies for neurosurgical subsequent consultations.

<sup>14</sup> Modifications to multiple operation rule. Specific reference to MBS rules for spinal surgery.

<sup>15</sup> Counting of procedures applies separately to surgical and orthopaedic procedures performed on one occasion.

<sup>16</sup> For multiple dislocations or fractures requiring an operative or manipulative procedure, the fee for each dislocation or fracture shall be 100% of the fee. For fracture-dislocation same site at the same site, 50% of the fee for the lesser procedure should be applied.

<sup>17</sup> Modifications to the multiple operation rule.

<sup>18</sup> WorkSafe Victoria sets a loading above MBS, however this loading varies by item

<sup>19</sup> Modifications include multiple operation rule and assistance at operations.

Benchmark	Billing Rules	Rates specified	Multiple operations or injuries			Multiple operations or injuries (Orthopaedic)		
			1 <sup>st</sup> item	2 <sup>nd</sup> item	Subsequent item	1 <sup>st</sup> item	2 <sup>nd</sup> item	Subsequent item
NSW WC	AMA with modifications <sup>14</sup>	50% Loading on AMA	100%	75%	75%	100%	75%	75%
ReturnToWork SA	MBS with modifications <sup>20</sup>	Set rates	MBS rules			MBS rules		
WorkCover WA	By negotiation <sup>21</sup>	Some set rates Otherwise AMA	By negotiation <sup>21</sup>					
Comcare	AMA	AMA	AMA rules			AMA rules		
NSW CTP	AMA	AMA	AMA rules			AMA rules		
TAC	MBS	Set rates	MBS rules			100% <sup>15</sup>	75% <sup>15,16</sup>	75% <sup>15,16</sup>
MAIB	AMA	AMA	AMA rules			AMA rules		
PHI	MBS	Set rates, varying by insurer	MBS rules			MBS rules		

Table 3 shows that commonly, schemes apply either the AMA or MBS item codes and billing rules (with minor modifications) but set specific rates for individual items. There are some differences between the item codes and rules of service provision under AMA List versus MBS.

The NSW WC scheme is the only scheme that explicitly sets maximum fees at a fixed loading above the reference rate. In referencing the AMA rates, with relevant loadings, the NSW WC has an implicit dependence on AMA indexation processes, where other funders typically set their own rates and therefore have greater control of the change in rates between years.

Also shown in Table 3, the NSW WC scheme has a smaller step-down for multiple procedures by a non-orthopaedic surgeon than specified in the AMA rules. The AMA rules have a step down from 100% for the initial procedure to 75% of the base rate for subsequent procedures for orthopaedic surgeons, and 100%, 50% and 25% for initial, second and subsequent procedures for non-orthopaedic surgeons. The MBS rules use the 100%, 50%, 25% step-down for all types of surgeons.

NSW WC uses 100%, 75% step-down for all types of surgeons. The specified 50% loading applies on top of the AMA List fees and in conjunction with the step-down rules. This results in maximum fees for surgeons operating within the NSW WC that are up to 1.5 x AMA rate for the first procedure and 1.125 x AMA for all subsequent procedures while the next closest funder may reimburse 25% of the AMA rate.

As other funders generally use rates between the MBS and AMA as the starting rate and either AMA or MBS step down rules, the combination of NSW WC's higher starting rate and the lower step down for multiple procedures results in significant differences in the fee levels.

## 2.2 Conditions of operating and access

Table 4 below summarises the key findings from the comparison of the conditions of operating for surgeons. Generally, NSW WC was consistent with other schemes and funders however there were some key differences.

<sup>20</sup> Modifications include changes to billing codes and service descriptions.

<sup>21</sup> The AMA or MBS billing rules are not currently embedded within the scheme. Surgery fees can be negotiated between insurers and surgeons.

Table 4: Differences in conditions of operating and access - Surgeon

Referral	While SIRA approves a selection of allied health providers to operate within the scheme, there is no current requirement for SIRA to approve surgeons or orthopaedic surgeons. In contrast, a number of other schemes require medical practitioners to be registered with the scheme.
Pre-approval	<b>A variety of approaches are used regarding the approval of surgical procedures.</b> Some schemes do not require pre-approval, others require pre-approval under all circumstances, others allow for an initial period after the accident during which approval is not required. NSW WC has an initial period of 48 hours after an injury, where no pre-approval is required <sup>22</sup> .
Exclusions	<p><b>Some schemes explicitly exclude items where there is limited evidence that the treatment is effective and/or safe.</b> This has been done through reference to the MBS items, definitions and rules, use of clinical frameworks or through specifying items that are not applicable under the scheme.</p> <p>WorkSafe Victoria allows for certain evidence-based treatment not yet on the MBS to be approved for treatment subject to a robust clinical process.</p>

<sup>22</sup> Consultations occurring within three months of injury are also exempt from pre-approval.

### 3. Allied Health

The in scope physical allied health services accounted for approximately 14% of healthcare expenditure in 2019, with physiotherapy and exercise physiology making up the majority at 9.6% and 4.1%, respectively. The psychology and counselling allied health services accounted for approximately 3.8% of healthcare expenditure in 2019, with psychology being 3.7%.

Within the physiotherapy, chiropractic and osteopathy fee orders, the NSW WC maximum fees were found to generally be above comparators, with a higher level of granularity in the fees. The exercise physiology fees were found to generally be consistent with many comparators, including the use of time-based fees. However, Worksafe Victoria has recently shifted to session-based fees.

The NSW WC scheme is the only scheme compared that specifies a session-based fee for psychology and counselling services, resulting in higher fees for short consultations (less than approximately 45 minutes).

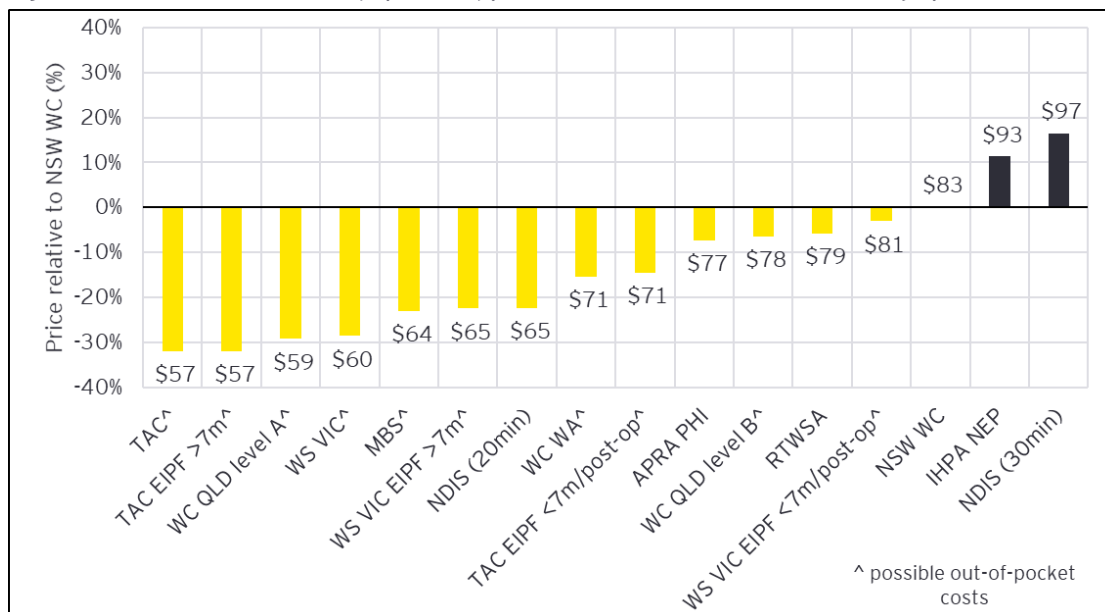
#### 3.1 Fee levels and structure

##### 3.1.1 Physiotherapy, Chiropractic and Osteopath

NSW WC is the only scheme compared that includes physiotherapy, chiropractic and osteopathy on a single fee order with the same session rates applying across the three disciplines. Comparators differentiate their fee orders for these areas of allied health - both in the items funded, and in the maximum fees offered for comparable items (for example, an initial consultation) across physiotherapy, chiropractic and osteopathy services. This section focuses predominately on physiotherapy services as it accounts for the vast majority of services provided within this schedule.

Figure 4 shows the price relative to NSW WC for a standard, in-room, physiotherapy consultation for one area. The one area consultation accounted for 6.3% of the NSW healthcare expenditure in 2019.

Figure 4: Price relative to NSW WC physiotherapy: Standard consultation, in rooms, one injury area



#### Notes

- ▶ As the NDIS uses an hourly rate, two comparison points (20 minutes and 30 minutes) have been shown.
- ▶ Under the TAC and WorkSafe Victoria Early Intervention Physiotherapy Framework (EIPF), participating providers receive a higher rate for treatment that occurs within the first seven months of treatment or after an operation. The rate for non-participating providers are also shown.
- ▶ WorkCover Queensland offers two rates. Level A relates to a selective review of treatment or exercise program. Level B is a standard treatment consultation of one area.
- ▶ The APRA PHI experience is the average fee charged per service through PHIs in the year to March 2020. It includes any out-of-pocket costs incurred by the patient. The average is across all services provided and reflects the mix of services provided in the PHI sector.
- ▶ IHPA NEP derived from the 2019-20 NEP and price weights. The NEP fee represents a price signal for the cost of hospital service delivery.

Figure 4 shows the closest comparators for the most common physiotherapy consultation (standard in-rooms for one injury area) were between 3% and 32% lower than the NSW WC maximum fee. Only NDIS consultations longer than 25 minutes and the price set by the IHPA NEP determination are higher than NSW WC. The IHPA NEP determination may reflect a higher level of complexity due to the case-mix expected in public hospital settings.

Larger differences are observed for other consultation types (not shown). This is driven by NSW WC specifying a greater level of granularity within the physiotherapy, chiropractic and osteopathy fee orders, which contributes to greater differences in fee levels where NSW WC allows for higher fees. Given NSW WC was found to have generally higher fees than comparators for single area, in-room consultations, the difference is even greater for two treatment area and/or out-of-rooms treatment, where NSW WC fee orders specify higher maximum fees and many comparators do not provide for any additional loadings.

Similar price differences were observed for chiropractic and osteopathy services. This was, in part, influenced by NSW WC setting a single fee that applies across the physiotherapy, chiropractic and osteopathy services.

For non-consultation items, NSW WC is generally aligned to other funders.

### 3.1.2 Accredited Exercise physiology

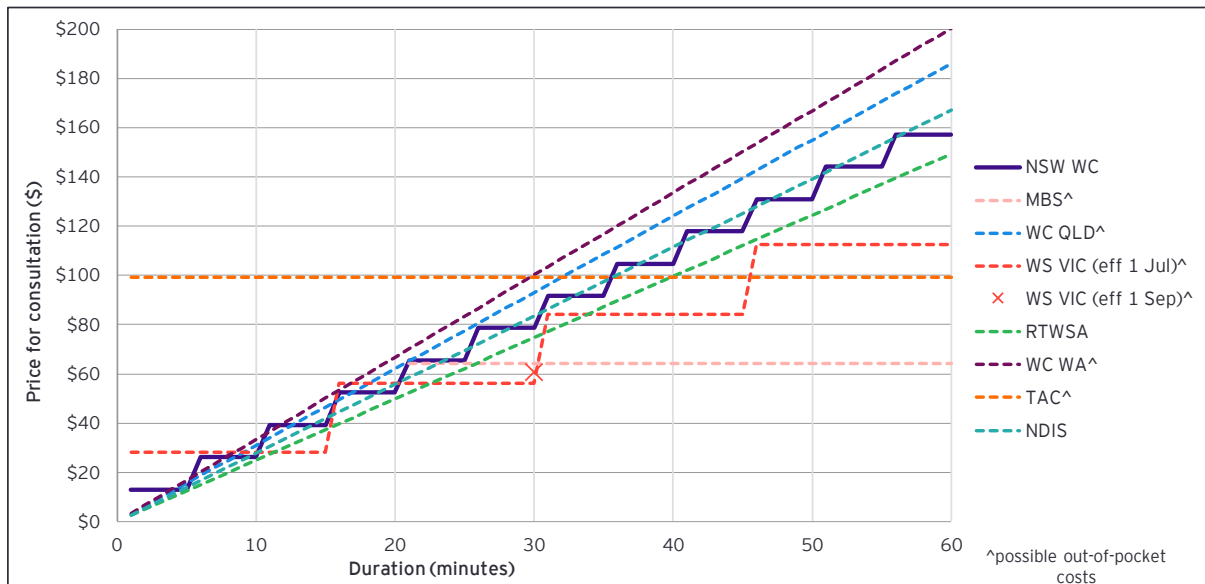
Accredited exercise physiology was found to be consistent with most comparators as at 1 July 2020, in defining time-based fees. However, it is noted that TAC and MBS have session-based fees and WorkSafe Victoria has recently moved away from time-based fees to session-based fees (as at 1 September 2020).

NSW WC fee order currently specifies a maximum rate per five-minute interval with a one-hour maximum time. However, in 2019, approximately 83% of consultations were charged at this maximum rate<sup>23</sup>. It is noted that, under the new session-based fee order, WorkSafe Victoria indicates that a standard consultation in their scheme is approximately 30 minutes.

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<sup>23</sup> EY analysis

Figure 5: Price relative to NSW WC exercise physiology standard consultation



Notes

- ▶ TAC charges a flat rate for an hour consultation including an allowance for travel.
- ▶ WorkSafe Victoria moved from a time-based fee to a session-based fee effective 1 September 2020. The fee schedule provides an expected length of time for a standard consultation (approximately 30 minutes). Both fee structures are provided for ease of comparison.

Figure 5 shows the exercise physiology fees are in line with comparators, in particular aligning with NDIS. There was some variation observed in the rates, with NSW WC appearing to be in the middle of the comparators in their hourly rates, where time-based fees are applicable. Similar results are found for the initial consultation.

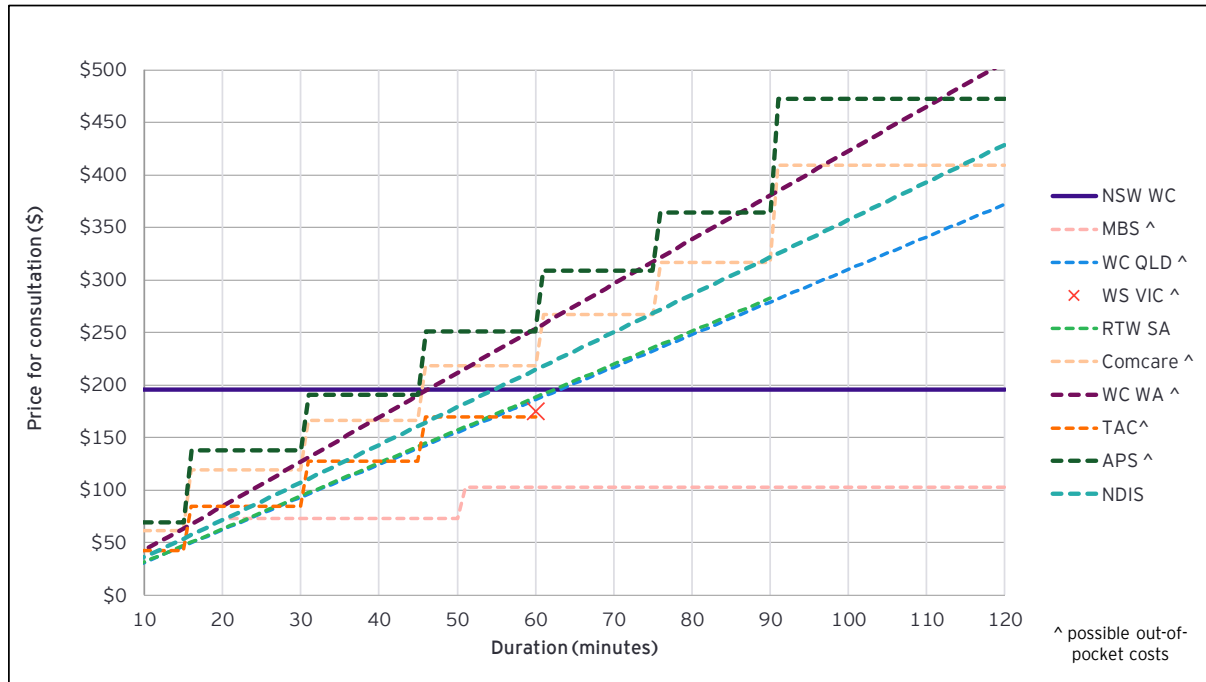
For non-consultation items, NSW WC is generally aligned to other funders.

### 3.2 Psychology and Counselling

NSW WC defines a maximum rate for psychology and counselling based on a session-based fee, rather than a time-based fee. All but one other comparator considered define a time-based fee, with some comparators also specifying a maximum session length.



Figure 6: Price relative to NSW WC psychology standard consultation



Notes

- ▶ WorkSafe Victoria has a maximum payment rate of \$174.19, with a maximum duration of one hour. Any consultation greater than one hour will require pre-approval.

As shown in Figure 6, the session-based fee for NSW WC means that the NSW WC fee for short sessions (less than approximately 45 minutes) is generally higher than comparators. The NSW WC fee is also higher than the maximum fees paid by the MBS regardless of the amount of time.

Additionally, WorkSafe Victoria and TAC limit psychological consultations to one hour. The rate for these schemes is always lower than the standard consultation fee for NSW WC.

Similar results are found for the initial consultation and for counselling consultation services. For non-consultation items, NSW WC is generally aligned or lower than other funders.

### 3.3 Conditions of operating and access

The comparison of the conditions of operating and access found that the NSW WC scheme was broadly consistent with other schemes. Key observations are identified in Table 5 below.

Table 5: Differences in conditions of operating and access - Allied health

Training	NSW WC is the only comparator that requires all allied health providers to undertake a scheme specific training program. However, this is a one-off requirement for initial approval, costing providers \$300. There are no ongoing training requirements currently in place. In Victoria, physiotherapy providers may elect to participate in WorkSafe Victoria and TAC EIPF. Providers receive a higher fee for participating in the EIPF program but are required to undertake additional training <sup>24</sup> . Note that the EIPF is only applicable to physiotherapy services.
Pre-approval and treatment management plans	Across comparators, the number of allied health sessions that can be provided without pre-approval varies. Specifically, for both physical and psychological allied health services, NSW WC requires approval after eight (for treatment beginning within three months of the injury) or

<sup>24</sup> The effectiveness of the EIPF program is yet to be evaluated.

	<p>three (for treatment beginning later) allied health consultations<sup>25</sup>. WorkCover Queensland requires approval after five consultations for physical allied health services<sup>26</sup> and the initial consultation for psychological services<sup>27</sup>.</p> <p>Many comparators require submission of a treatment notification or management plan after a specific number of sessions.</p>
Medical practitioner referral - psychology	<p>For NSW WC, medical practitioner referral is required for access to psychology services, consistent with most comparators. Medical practitioner referral is not required in the NSW WC scheme for physical services.</p>

### 3.4 Fee setting process

Table 6 outlines the historical fee setting process used for allied health services. NSW WC has historically applied annual indexation (with reference to Wage Price Index (WPI)) to the allied health fee orders. While the use of indexation is consistent with some jurisdictions, there are others, such as ReturnToWorkSA and the NDIA, where they regularly use market price benchmarks, rather than continual indexation.

Table 6: Comparison of fee setting process by funder/body

Benchmark	Historic annual fee setting process	
NSW WC	Indexation	Allied health indexed by WPI.
WorkSafe Victoria	Indexation	Allied health indexed by Melbourne consumer price index (CPI).
WorkCover Queensland	Indexation	Allied health indexed by Brisbane CPI <sup>28</sup> .
ReturnToWorkSA	Review	Annual review of average private rate using Medicare and publicly available data.
WorkCover WA	Indexation	Increased annually using the WorkCover WA Composite Index.
Comcare	NA	
TAC	Indexation	Hospital fees have historically been indexed by CPI.
MAIB	Indexation	Allied health increased annually by CPI and for chiropractic and psychology services reference peak body fee schedules.
NDIS	Review	Annual price review with more extensive analysis conducted every few years.
MBS	Indexation	Historically rates indexed however a freeze has been in place for some services in recent years <sup>29</sup> .
IHPA NEP	Review	Extensive annual processes to set NEP.
PHI	Unknown	Individually negotiated arrangements. Dependent on policy conditions.

It is noted that, within some schemes, the timing and index applied may vary by allied health service type.

<sup>25</sup> For general consultations. Specific services, such as telehealth or restricted consultations, may have different conditions and require referral and/or pre-approval. Other pre-approval limits apply for the resumption of treatment, changing providers and for some individual fee items, such as case conferences and incidental expenses.

<sup>26</sup> WorkCover Queensland requires this condition to be met for physiotherapy, chiropractic and osteopathy.

<sup>27</sup> The insurer will normally approve between four to six hours of treatment/therapy with no more than a maximum of two hours to be delivered on any one day.

<sup>28</sup> WorkCover Queensland, Allied health table of costs updated 2020, viewed 10 September 2020, <https://www.worksafe.qld.gov.au/news/2020/allied-health-table-of-costs-update-2020>.

<sup>29</sup> AMA, Medicare Benefits Schedule Indexation Freeze [https://ama.com.au/sites/default/files/documents/Handout%20for%20politicians\\_MBSIndexation%20Freeze.pdf](https://ama.com.au/sites/default/files/documents/Handout%20for%20politicians_MBSIndexation%20Freeze.pdf).

## 4. Private Hospital

Private hospital services contributed 17% of healthcare expenditure in 2019. Private hospital services include accommodation, theatre and prostheses fees.

NSW WC is unique among the comparator group in setting a fee-for-service based fee order that specifies maximum fees applicable to all private hospitals. Most other jurisdictions are either price takers (e.g. Comcare) or have individually negotiated arrangements in place for some or all hospitals (e.g. WorkCover Queensland). NSW WC and ReturnToWorkSA are the only schemes that have a single fee schedule for all private hospitals. However, ReturnToWorkSA sets rates for overnight stays using activity-based funding.

Initial benchmarking has been performed against the limited publicly available benchmarks. However, further analysis, including detailed analysis of the Private Hospital Data Bureau (PHDB) data, released to SIRA by the Department of Health, will be undertaken to provide further insights as SIRA considers the 2021 private hospital rates order.

Historically, the NSW WC scheme has indexed private hospital fees with reference to CPI/WPI, in some years providing a negotiated margin beyond the reference inflation index. Given the commercially sensitive nature of the individual contracts in place for many comparators, it is not clear what the standard practice is for fee indexation.

## 5. Reliances and Limitations

Ernst & Young (“EY”) was engaged on the instructions of SIRA (“the Client”) to conduct a benchmarking analysis of the workers compensation fees (“Project”), pursuant to the terms of our Statement of Work dated 19 June 2020 in accordance with the Contract Agreement SIRA//6358/2016 between EY and SIRA dated 20 April 2017.

The scope of the Project entailed a comparison of the similarities and differences in the level and structure of fee orders between the NSW workers compensation gazetted fees and those set by other personal injury schemes and other funders of healthcare. This report does not constitute advice on possible changes to the level or structure of the SIRA gazetted fee orders or the fee orders of any other benchmark.

The scheme benchmarking is limited in scope to personal injury schemes and other funders of healthcare. It is not a representative comparison of NSW WC position within the broader healthcare market.

Best efforts have been made to enable “like for like” comparisons. To enable this, some assumptions were made in consultation with SIRA.

Quantitative analysis of the historical healthcare expenditure is reliant on the claims and transaction data sets used by the scheme actuary, as at 31 March 2020. The analysis relies on the completeness and accuracy of the data provided.

Our Report is limited in time and scope, other more detailed reviews or investigations may identify additional issues or considerations that this Report has not. The results of our work are limited by the availability and quality of data.

The results of our work and procedures performed do not constitute an audit, a review or other form of assurance in accordance with any generally accepted auditing, review or other assurance standards, and accordingly we do not express any form of assurance.

In preparing this Report, EY has relied on publicly available fee orders from the SIRA and comparator websites. The comparison and conclusions are reliant on the information provided in, and interpretation of, the published orders. This interpretation may differ from the application of these orders in practice. EY has not conducted any audit, review or other form of verification of the information on the fee orders. EY has not performed any independent verification of the accuracy or completeness of this information. EY does not accept any responsibility or liability for independently verifying any information we have obtained, nor do we make any representation to the accuracy or completeness of information provided on these websites or by the management of SIRA.

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## Acknowledgements

EY acknowledges the participation of the following schemes, and the assistance provided, in the preparation and completion of this report:

- ▶ WorkSafe Victoria
- ▶ WorkCover Queensland, and the Office of Industrial Relations
- ▶ ReturnToWorkSA
- ▶ WorkCover WA
- ▶ WorkSafe ACT
- ▶ Comcare
- ▶ icare
- ▶ Transport Accident Commission
- ▶ Motor Accident Insurance Commission Queensland
- ▶ CTP Insurance Regulator SA
- ▶ Motor Accident Insurance Board Tasmania
- ▶ National Disability Insurance Agency

EY also acknowledges the Commonwealth Department of Health for their ongoing participation within the project, through the release of the PHDB data under a public interest certificate.

# Glossary

Table 7: Glossary

Abbreviation/Term	Explanation
AMA	Australian Medical Association
APS	Australia Psychological Society
CTP	Compulsory Third Party
CPI	Consumer Price Index
EIPF	Early Intervention Physiotherapy Framework
EY	Ernst and Young
GP	General practitioner
IHPA NEP	Independent Hospital Pricing Authority National Efficient Price
MAIB	Motor Accident Insurance Board (Tasmania)
MBS	Medicare Benefits Schedule
NDIA	National Disability Insurance Agency
NDIS	National Disability Insurance Scheme
NSW WC	New South Wales Workers Compensation
PHDB	Private Hospital Data Bureau
PHI(s)	Private Health Insurer(s)
RTWSA	ReturnToWorkSA
SIRA	State Insurance Regulatory Authority
TAC	Transport Accident Commission (Victoria)
WC	Workers compensation
WC WA	WorkCover WA
WC QLD	WorkCover Queensland
WPI	Wage Price Index
WS VIC	WorkSafe Victoria

## Appendix A In-scope fee orders

Table 8 documents the SIRA gazetted fees and rates orders at 1 July 2020. The orders which are in scope for this review are highlighted.

Table 8: NSW WC fee orders at 1 July 2020

2020 Fee order
Accredited Exercise Physiology
Ambulance <sup>30</sup>
Hearing Aid
Independent Consultant
Injury Management Consultant
Massage Therapy
Medical Examinations and Reports
Medical Practitioners
Orthopaedic Surgeon
Physiotherapy, Chiropractic and Osteopathy
Psychology and Counselling
Surgeon
Private Hospital
Public Hospital

<sup>30</sup> Workers Compensation (Ambulance Services Fees) Order 2020 commenced 11 September 2020.



## Appendix B List of orders and documentation

This section contains the relevant documents used in the benchmarking exercise for physiotherapy, chiropractic, osteopathy, exercise physiology, psychology, counselling and surgeon and orthopaedic surgeon. It contains the fee orders, schedules and price guides that were used in the process of benchmarking, as well as any additional documentation that relates to, or contains, specific billing rules and practices that were applied in the benchmarking comparison.

Table 9: Surgeon and orthopaedic surgeon fee orders and relevant documentation

Surgeon and Orthopaedic Surgeon		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers Compensation (Surgeon Fees) Order 2020 No. 2</a> <a href="#">Workers Compensation (Orthopaedic Surgeon Fees) Order 2020 No 2.</a>	13 July 2020
WorkSafe Victoria	<a href="#">Medical service reimbursement rates 2020 (Excel)</a> <a href="#">Reimbursement of Medical Services</a> <a href="#">Fee order - Medical Practitioner Return to Work (RTW) Activities</a> <a href="#">Health Records Act</a>	13 July 2020
WorkCover Queensland	<a href="#">Medical Items Table of Costs</a> <a href="#">Specialist Supplementary Services Table of Costs</a>	13 July 2020
ReturnToWorkSA	<a href="#">Medical fee order Clinical services - 1A</a> <a href="#">Medical fee order Other services - 1B</a>	13 July 2020
WorkCover WA	<a href="#">Surgeons</a> <a href="#">Medical Procedures</a>	13 July 2020
TAC	<a href="#">Reimbursement Rates for Medical Services performed on or after 1 July 2020</a> <a href="#">Reimbursement Rates for Medical Service Information page</a> <a href="#">Health Records Act</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020
AMA	Requires subscription	-
MAIB	<a href="#">How to invoice MAIB</a>	13 July 2020
Medibank	<a href="#">Gap</a> <a href="#">Cover Rates - 1 August 2020</a>	13 July 2020
Bupa	<a href="#">Bupa Medical Gap Scheme Orders - NSW/ACT - August 2020</a>	13 July 2020
nib	<a href="#">nib MediGap Order</a>	13 July 2020
HCF	<a href="#">HCF Medcover no and known gap rates</a>	13 July 2020

Table 10: Physiotherapy fee orders and relevant documentation

Physiotherapy		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers compensation (Physiotherapy, Chiropractic and Osteopathy fees) Order 2020 No.3</a>	13 July 2020
WorkSafe Victoria	<a href="#">Fee order - Physiotherapy Services</a> <a href="#">Item codes for telehealth now available</a> <a href="#">Fee order - Early Intervention Physiotherapy Framework</a>	13 July 2020
WorkCover Queensland	<a href="#">Physiotherapy table of costs</a>	13 July 2020
ReturnToWorkSA	<a href="#">Physiotherapy fee order and policy</a>	13 July 2020
WorkCover WA	<a href="#">Physiotherapists</a> <a href="#">Exercise Based Programs (Physiotherapists)</a>	13 July 2020
Comcare	<a href="#">Rates for medical and allied health treatment</a> <a href="#">Telehealth rates and codes</a>	13 July 2020
TAC	<a href="#">Physiotherapy (private) fees</a> <a href="#">Early Intervention Physiotherapy Framework fees</a> <a href="#">Telehealth fees</a>	13 July 2020
NDIS	<a href="#">Price Guide 2020-21 Version 1.0.6</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020
IHPA NEP	<a href="#">2020-21 NWAU Calculators - Non-admitted patient</a>	13 July 2020

Physiotherapy		
Benchmark	Document	Date accessed
APRA PHI	<a href="#">Round 22 NHDC Report - Appendix Tables</a> <a href="#">Private health insurance benefit trends March 2020</a>	13 July 2020

Table 11: Chiropractic fee orders and relevant documentation

Chiropractic		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers compensation (Physiotherapy, Chiropractic and Osteopathy fees) Order 2020 No.3</a>	13 July 2020
WorkSafe Victoria	<a href="#">Fee order - Chiropractic Services</a> <a href="#">Item codes for telehealth now available</a>	13 July 2020
WorkCover Queensland	<a href="#">Chiropractic table of costs</a>	13 July 2020
ReturnToWorkSA	<a href="#">Chiropractic fee order and policy</a>	13 July 2020
WorkCover WA	<a href="#">Chiropractors</a>	13 July 2020
Comcare	<a href="#">Rates for medical and allied health treatment</a> <a href="#">Telehealth rates and codes</a>	13 July 2020
TAC	<a href="#">Chiropractic fees</a> <a href="#">Telehealth fees</a>	13 July 2020
NDIS	<a href="#">Price Guide 2020-21 Version 1.0.6</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020
APRA PHI	<a href="#">Private health insurance benefit trends March 2020</a>	13 July 2020

Table 12: Osteopathy fee orders and relevant documentation

Osteopathy		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers compensation (Physiotherapy, Chiropractic and Osteopathy fees) Order 2020 No.3</a>	13 July 2020
WorkSafe Victoria	<a href="#">Fee order - Osteopathy Services</a> <a href="#">Item codes for telehealth now available</a>	13 July 2020
WorkCover Queensland	<a href="#">Osteopathy table of costs</a>	13 July 2020
ReturnToWorkSA	<a href="#">Osteopathy fee order and policy</a>	13 July 2020
WorkCover WA	<a href="#">Osteopaths</a>	13 July 2020
Comcare	<a href="#">Rates for medical and allied health treatment</a> <a href="#">Telehealth rates and codes</a>	13 July 2020
TAC	<a href="#">Osteopathy fees</a> <a href="#">Telehealth fees</a>	13 July 2020
NDIS	<a href="#">Price Guide 2020-21 Version 1.0.6</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020
APRA PHI	<a href="#">Private health insurance benefit trends March 2020</a>	13 July 2020

Table 13: Exercise physiology fee orders and relevant documentation

Exercise Physiology		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers Compensation (Accredited Exercise Physiology Fees) Order 2020 No. 3</a>	13 July 2020
WorkSafe Victoria <sup>31</sup>	<a href="#">Fee order - Exercise Physiology Services</a> <a href="#">Item codes for telehealth now available</a>	13 July 2020
	<a href="#">Fee order - Exercise Physiology Services (1 September 2020)</a>	1 September 2020
WorkCover Queensland	<a href="#">Exercise physiology table of costs</a>	13 July 2020

<sup>31</sup> WorkSafe Victoria introduced a new fee order for Exercise Physiology, effective 1 September 2020. This fee order has been included within the review.

Exercise Physiology		
Benchmark	Document	Date accessed
ReturnToWorkSA	<a href="#">Exercise physiology fee order and policy</a>	13 July 2020
WorkCover WA	<a href="#">Exercise Based Programs (Exercise Physiologists)</a>	13 July 2020
TAC	<a href="#">Exercise physiology fees</a> <a href="#">Telehealth fees</a>	13 July 2020
NDIS	<a href="#">Price Guide 2020-21 Version 1.0.6</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020

Table 14: Psychology fee orders and relevant documentation

Psychology		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers compensation (Psychology and Counselling fees) Order 2020 No. 3</a>	13 July 2020
WorkSafe Victoria	<a href="#">Fee order – Psychology Services</a> <a href="#">Item codes for telehealth now available</a>	13 July 2020
WorkCover Queensland	<a href="#">Psychology table of costs</a>	13 July 2020
ReturnToWorkSA	<a href="#">Psychology fee order and policy</a>	13 July 2020
WorkCover WA	<a href="#">Clinical Psychologists</a>	13 July 2020
Comcare	<a href="#">Rates for medical and allied health treatment</a> <a href="#">Telehealth rates and codes</a>	13 July 2020
TAC	<a href="#">Psychology and neuropsychology fees</a> <a href="#">Telehealth fees</a>	13 July 2020
NDIS	<a href="#">Price Guide 2020-21 Version 1.0.6</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020
APS	<a href="#">APS National Order of Recommended Fees and item numbers for psychological services</a>	13 July 2020

Table 15: Counselling fee orders and relevant documentation

Counselling		
Benchmark	Document	Date accessed
NSW WC	<a href="#">Workers compensation (Psychology and Counselling fees) Order 2020 No. 3</a>	13 July 2020
WorkSafe Victoria	<a href="#">Fee order – Social Work and Accredited Mental Health Social Work Services</a> <a href="#">Item codes for telehealth now available</a>	13 July 2020
WorkCover Queensland	<a href="#">Rehabilitation Counsellor, Social Worker and Vocational Placement Provider table of costs</a>	13 July 2020
WorkCover WA	<a href="#">Counselling Psychologists</a>	13 July 2020
TAC	<a href="#">Social work fees</a> <a href="#">Telehealth fees</a>	13 July 2020
NDIS	<a href="#">Price Guide 2020-21 Version 1.0.6</a>	13 July 2020
MBS	<a href="#">Medicare Benefits Schedule Book Operating from 21 July 2020</a>	13 July 2020

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