

GENERAL PREAMBLE

OTHER PREMIUMS

INTENSIVE OR CORONARY CARE UNIT PREMIUM

C101 For each patient seen on a visit to ICU or CCU (subject to the exceptions set out below) add **9.10**

Payment rules:

C101 is *not eligible for payment* with Supportive Care or with Critical Care, Ventilatory Care, Comprehensive Care, Acquired Brain Injury Management or Neonatal Intensive Care where team fees are claimed.

[Commentary:

C101 is also payable alone when no other separate fee is payable for the service provided in the ICU or CCU (e.g. post-operative care by surgeon.)

AFTER HOURS PROCEDURE PREMIUMS

These premiums are payable only when the following criteria are met:

- a. the service provided is one of the following:

Non-elective Surgical Procedures (including fractures or dislocations), Obstetrical Deliveries, Clinical Procedures Associated with Diagnostic Radiological Examinations, Ground Ambulance Transfer (K101), Air Ambulance Transfer (K111), Transport of Donor Organs (K102), Return Trip (K112), or one of the following Major Invasive Procedures:

E111A	G060	G061	G062	G065	G066	G067	G068	G082	G083	G085	G090
G091	G092	G099	G117	G118	G119	G125	G176	G177	G178	G179	G211
G222	G224	G246	G248	G249	G260	G261	G262	G263	G268	G269	G275
G277	G279	G280	G282	G287	G288	G290	G294	G295	G297	G298	G303
G309	G322	G323	G324	G330	G331	G336	G347	G348	G349	G356	G376
G379	G380	G509	J001 to J068								

and;

- b. the procedure is either (a) non-elective; or (b) an elective procedure which, because of an intervening surgical emergency procedure(s) was delayed and commenced between:

Emergency Department Physician

E412	Evenings (17:00h – 24:00h) Monday to Friday or daytime and evenings on Saturdays, Sundays, Holidays - increase the procedural fee(s) by	20%
E413	Nights (00:00h – 07:00h) - increase the procedural fee(s) by	40%

Physician – other than an Emergency Department Physician

E409	Evenings (17:00h – 24:00h) Monday to Friday or daytime and evenings on Saturdays, Sundays, Holidays - increase the procedural fee(s) by	50%
E410	Nights (00:00h – 07:00h) - increase the procedural fee(s) by	75%

Payment rules:

1. E409/E410 is not payable for a procedure rendered by an Emergency Department Physician
2. E412/E413 is only payable for a procedure rendered by an Emergency Department Physician who at the time the service was rendered is required to submit claims using “H” prefix emergency services.

[Commentary:

See General Preamble GP34 for definitions and conditions for Emergency Department Physician.]