



Northern Territory of Australia

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Northern Territory of Australia

Medical Services Act 1982

Revocation of Determination and Determination of Fees and Charges for Medical Services

I, Natasha Kate Fyles, Minister for Health:

- (a) under section 6(3) of the *Medical Services Act 1982* and with reference to section 43 of the *Interpretation Act 1978*, revoke the determination of fees and charges for medical services dated 26 June 2020 and published in *Gazette* No. S37 of 2020 on 1 July 2020; and
- (b) under section 6(3) of the *Medical Services Act 1982* and with reference to section 6(4)(b) of the Act, determine the fees and charges specified in the Schedule, Part A, for the medical services specified opposite the fees or charges in the Schedule, Part A; and
- (c) under section 6(3) of the Act, determine the fees and charges specified in the Schedule, Part B, for the medical services specified opposite the fees or charges in the Schedule, Part B; and

- (d) under section 6(4)(a)(i) of the Act, determine that no fee or charge is payable for a medical service specified in the Schedule, Part B, by a type of patient specified in the Schedule, Part C.

N. K. Fyles
Minister for Health

Dated 23 June 2021

Schedule

Part A

In this Schedule:

compensable patient means a person who receives medical services provided under the Act and is:

- (a) entitled to claim damages under Motor Vehicle Third Party Insurance other than eligible persons under the *Motor Accidents (Compensation) Act 1979*; or
- (b) entitled to claim damages under worker's compensation; or
- (c) has an entitlement to claim under public liability or common law damages.

ineligible patient means a person who receives medical services provided under the Act and is not an eligible person under the *Health Insurance Act 1973* (Cth).

MBS means the Medicare Benefits Schedule published from time to time by the Commonwealth Department of Health.

private patient means a person who receives medical services provided under the Act by, or at the request of, a private dentist or private medical practitioner.

professional fees means fees for services provided by a medical officer that qualify for a Medicare benefit.

| Medical Services - Hospital | Fees |
|---|---|
| Emergency Care – Compensable, Australian Defence Force Personnel Patient, and Ineligible Patient | Per service based on triage category |
| Resuscitation | \$2,290 |
| Emergency | \$1,315 |
| Urgent | \$950 |
| Semi Urgent | \$580 |
| Non Urgent | \$395 |
| Diagnostics | 120% of the MBS |
| Admitted Accommodation – Compensable Patient and Australian Defence Force Personnel Patient | Per Day |
| Intensive Care Unit, Special Care Nursery, Coronary Care Unit | \$7,170 |
| Overnight | \$2,870 |
| Same Day | \$2,760 |
| Hospital in the Home | \$1,265 |
| Professional fees | 120% of MBS |
| Diagnostics | 120% of MBS |
| Admitted Accommodation – Ineligible Patient | Per Day |
| Intensive Care Unit, Special Care Nursery, Coronary Care Unit | \$6,215 |
| Overnight | \$2,485 |
| Same Day | \$1,865 |
| Hospital in the Home | \$1,265 |

| | |
|---|--|
| Professional fees | 120% of MBS |
| Diagnostics | 120% of MBS |
| Admitted Accommodation – Public Patient | Per Day |
| Respite Care (Gove Hospital Only) | The maximum amount determined by the Minister under section 52G-3 of <i>the Aged Care Act 1997 (Cth)</i> for residential care, as amended from time to time, is adopted for respite care at Gove Hospital. |
| Nursing Home Type Patient (Patient contribution rate) | The rates set out in rule 8A of the <i>Private Health Insurance (Complying Product) Rules 2015 (Cth)</i> as amended from time to time are adopted for public Nursing-Home Type Patients. |
| Admitted Accommodation – Private Patient | |
| The rates set out in Schedule 2, Schedule 3 and Schedule 4 of the <i>Private Health Insurance (Benefit Requirements) Rules 2011 (Cth)</i> as amended from time to time are adopted for private patients. | |
| Admitted Private Patient | Per service |
| Professional fees | 100% of MBS |
| Diagnostics | 100% of MBS |
| Outpatients – Compensable, Australian Defence Force Personnel Patient and Ineligible Patient | Per Service |
| Attendance by Medical Practitioner | \$545 |
| Attendance by a Dietitian, Masseur, Naturopath, Social Worker, Speech Pathologist, Audiologist or Audiometrist, Aboriginal and Torres Strait Islander Health Practitioner, Chinese Medicine Practitioner, Chiropractor, Occupational Therapist, Optometrist, Osteopath, Physiotherapist, Podiatrist, Psychologists or Nurse | \$340 |
| Hyperbaric unit | \$2,645 |
| Minor Operations | \$1,000 |
| Chemotherapy | \$1,360 |
| Telehealth – Attendance by Medical Practitioner | \$560 |
| Telehealth – Attendance by Allied Health or Nurse | \$240 |
| Allied Health or Nurse (education only) | \$80 |
| Diagnostics | 120% of MBS |
| Prosthetics and Orthotics – Ineligible Patient | |
| Manufacture of prosthetic/orthotic | \$185 per hour + componentry costs + \$100 per prosthetic/orthotic |

| | |
|--|---|
| Prosthetics and Orthotics – Compensable, Australian Defence Force Personnel Patient | |
| Manufacture of prosthetic/orthotic | \$185 per hour + componentry costs + \$100 per prosthetic/orthotic |
| Seating Equipment and Technical (SEAT) service - Compensable, Australian Defence Force Personnel Patient and Ineligible Patient | Per hour |
| Modifications to prescribed wheelchairs as well as fabrication of customized seating systems and pressure cushions | \$100 |
| Rehabilitation Services – Compensable, Australian Defence Force Personnel Patient and Ineligible Patient | Per service |
| Aboriginal Health Practitioner | \$340 |
| Occupational Therapy | \$340 |
| Speech Pathology | \$340 |
| Social Work | \$340 |
| Physiotherapy | \$340 |
| Classes (including hydrotherapy) | \$55 |
| Checklists / Education | \$55 |
| Renal Services – Compensable, Australian Defence Force Personnel Patient and Ineligible Patient | Per service |
| Dialysis | \$800 |
| Medical Services – Other health centre (Applied to <u>Compensable, Australian Defence Force Personnel Patient</u> and <u>Ineligible Patients</u>) | Fees |
| Primary Health Care | |
| Standard General Practitioner Consultation | 250% of MBS |
| Long General Practitioner Consultation | 250% of MBS |
| Other Medical Consultation/Treatment (where AMA** rate exists) | 250% of MBS |
| Health Assessment for Employment (All patients regardless of Medicare status) | \$420 per service GST inclusive |
| Medical Assessment for Employment | \$145 per service GST inclusive |
| Hearing Screening for Employment | \$95 per service GST inclusive |
| Respiratory Screening for Employment | \$95 per service GST inclusive |
| Drug Screening for Employment | \$95 per service GST inclusive |
| Aboriginal Health Practitioner Consultation/Service | \$120 per hour (pro-rata in 15 minute blocks) |
| Nurse attendance in Clinic – Non Emergency | \$120 per hour (pro-rata in 15 minute blocks) |
| Emergency Service Presentations | Per hour |
| Medical Officer's Attendance | \$730 |
| Nurse Attendance | \$440 |

| Medi-Hotel Fees (Royal Darwin Hospital Only) | Fees |
|---|-------------------------|
| Accommodation (Shared Room) | Per Bed, Per Day |
| Transitional Care Program clients | \$60 |
| TIO Motor Vehicle Accident clients | \$130 |
| Ineligible and other compensable patients | \$130 |
| WA Patient Assisted Travel Scheme patient | \$60 |
| WA Patient Assisted Travel Scheme escort | \$60 |
| Unapproved Escort (Social Admissions) | \$35 |

| Medical Transport (Applied to <u>Compensable, Australian Defence Force Personnel Patient and Ineligible Patients</u>) | Fees |
|--|--|
| Aeromedical Transport (dedicated aeromedical service) | Per aero-nautical mile from the place of dispatch and return to the dispatch location |
| Single Payer per Trip | \$49 |
| Multiple Patient Multiple Payer per Trip (per payer, per nautical mile) | \$31 |
| Ground based Ambulance Services – Provided by Central Australian and Top End Health Services | From the place of accident to hospital, urban health centre of other health centre |
| 0-24 km | \$420 |
| 25-49 km | \$475 |
| 50-99 km | \$630 |
| 100-149 km | \$740 |
| 150-199 km | \$840 |
| 200+ km | \$950 |
| Transport from hospital, urban health centre or other health centre to aerodrome | \$265 |
| Medical Records (Applied to all patient categories) | Fees |
| Patient Requests | |
| Copy of Discharge summary | No Charge |
| Copies of Medical Records (per page) | \$0.31 |
| Search Fee | \$41.00 |
| Replacement Medical Certificate | \$41.00 |
| Medical/Allied Health Report (maximum 2 pages) | \$340.00 |
| Medical/Allied Health Report (additional pages, per page) | \$175.00 |
| Medical images to CD - 1 Study | \$13.00 |
| Medical images to CD - 2 Studies | \$23.00 |
| Medical images to CD - more than 2 Studies | \$33.00 |

| Third Party Requests | |
|---|----------|
| Copies of Medical Records (per page) | \$1.00 |
| Search Fee | \$43.00 |
| Medical Report (maximum 2 pages) | \$380.00 |
| Medical Report (additional pages, per page) | \$190.00 |
| Medical images to CD - 1 Study | \$24.00 |
| Medical images to CD - 2 Studies | \$32.00 |
| Medical images to CD - more than 2 Studies | \$42.00 |

Part B
Dental Fee Schedule

| Description of Service | Service Provider | |
|--|------------------|-------------|
| | Specialist Fee | Dentist Fee |
| Diagnostic Services | | |
| Comprehensive oral examination | \$78.44 | \$67.23 |
| Periodic oral examination | \$65.15 | \$55.85 |
| Oral examination–limited | \$40.92 | \$35.08 |
| Consultation (less than 30 mins) | \$94.57 | \$81.06 |
| Consultation-extended (30 mins or more) | \$154.75 | \$132.64 |
| Consultation by referral (less than 30 mins) | \$224.87 | \$131.18 |
| Consultation by referral–extended (30 mins or more) | \$306.44 | \$262.66 |
| Comprehensive clinical report (not elsewhere included) | \$70.13 | \$60.11 |
| Letter of referral | \$16.55 | \$14.19 |
| Radiological Examination, Analysis and Interpretation | | |
| Intraoral periapical or bitewing radiograph–per exposure | \$55.13 | \$47.26 |
| Intraoral radiograph-occlusal, maxillary or mandibular–per exposure | \$91.73 | \$78.62 |
| Extra oral radiograph-maxillary, mandibular–per exposure | \$104.51 | \$89.58 |
| Lateral, antero-posterior, postero-anterior or submento-vertex radiograph of skull–per exposure | \$196.17 | \$168.14 |
| Radiograph of temporomandibular joint–per exposure | \$150.70 | \$129.17 |
| Cephalometric radiograph-lateral, antero-posterior, postero-anterior or submento-vertex–per exposure | \$221.39 | \$189.76 |
| Panoramic radiograph–per exposure | \$140.39 | \$120.34 |
| Hand-wrist radiograph–per exposure | \$131.37 | \$112.60 |
| Computed tomography of the skull or parts thereof | \$221.53 | \$189.89 |
| Other Diagnostic Services | | |
| Bacteriological examination | \$58.55 | \$50.18 |
| Culture examination and identification | \$58.55 | \$50.18 |
| Antibiotic sensitivity test | \$102.61 | \$87.95 |
| Collection of specimen for pathological examination | \$55.35 | \$47.44 |
| Saliva screening test | \$60.32 | \$51.70 |
| Bacteriological screening test | \$110.91 | \$95.06 |
| Biopsy of tissue | \$184.59 | \$157.23 |
| Histopathological examination of tissue | \$90.17 | \$77.29 |

| Description of Service | Service Provider | |
|--|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Other Diagnostic Services – continued | | |
| Cytological investigation | \$150.23 | \$128.76 |
| Blood Sample | \$76.09 | \$65.22 |
| Haematological examination | \$76.09 | \$65.22 |
| Diagnostic model–per model | \$90.02 | \$77.16 |
| Photographic records–intraoral | \$48.46 | \$41.53 |
| Photographic records–extra oral | \$48.46 | \$41.53 |
| Diagnostic wax-up | \$355.61 | \$203.22 |
| Cephalometric analysis–excluding radiographs | \$96.77 | \$82.95 |
| Tooth-jaw size prediction analysis | \$157.52 | \$135.02 |
| Tomographic analysis | \$58.55 | \$50.18 |
| Electromyography analysis | \$172.69 | \$148.03 |
| Dental Prophylaxis | | |
| Removal of plaque and/or stain | \$80.14 | \$68.70 |
| Recontouring and polish of pre-existing restoration(s)–per appointment | \$30.34 | \$26.00 |
| Removal of calculus–first appointment | \$133.65 | \$114.55 |
| Removal of calculus–subsequent appointment | \$86.97 | \$74.54 |
| Enamel micro-abrasion–per tooth | \$52.02 | \$44.59 |
| Bleaching, internal–per tooth | \$285.91 | \$245.06 |
| Bleaching, external–per tooth | \$281.43 | \$241.22 |
| Bleaching, home application–per arch | \$69.30 | \$59.40 |
| Remineralising Agents | | |
| Topical application of remineralising and/or cariostatic agents–one treatment | \$51.51 | \$44.15 |
| Topical remineralisation and/or cariostatic agents, home application–per tooth | \$40.29 | \$34.53 |
| Concentrated remineralising and/or cariostatic agent, application–single tooth | \$40.29 | \$34.53 |
| Other Preventative Services | | |
| Dietary analysis and advice | \$54.21 | \$46.47 |
| Oral hygiene instruction | \$73.68 | \$63.15 |
| Provision of a mouthguard–indirect | \$223.95 | \$191.96 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Other Preventative Services – continued | | |
| Bi-maxillary mouthguard–indirect | \$217.13 | \$186.11 |
| Fissure and/or tooth surface sealing–per tooth | \$68.63 | \$58.83 |
| Desensitising procedure–per appointment | \$40.29 | \$34.53 |
| Odontoplasty–per tooth | \$75.67 | \$64.86 |
| Periodontics | | |
| Treatment of acute periodontal infection–per appointment | \$103.88 | \$89.04 |
| Clinical periodontal analysis and recording | \$210.09 | \$67.60 |
| Periodontal debridement–per tooth | \$53.57 | \$33.31 |
| Non-surgical treatment of peri-implant disease–per implant | \$53.57 | \$33.31 |
| Gingivectomy–per tooth or implant | \$145.11 | \$93.52 |
| Periodontal flap surgery–per tooth | \$272.44 | \$175.57 |
| Gingival graft–per tooth or implant | \$78.23 | \$67.05 |
| Guided tissue regeneration-membrane implant | \$788.73 | \$676.05 |
| Guided tissue regeneration-membrane removal | \$405.77 | \$347.80 |
| Periodontal flap surgery for crown lengthening–per tooth | \$833.77 | \$482.88 |
| Root resection–per root | \$403.28 | \$276.61 |
| Osseous surgery–per tooth or implant | \$409.70 | \$264.04 |
| Osseous graft–per tooth or implant | \$436.07 | \$281.04 |
| Osseous graft–block | \$761.02 | \$490.45 |
| Periodontal surgery involving one tooth | \$236.24 | \$101.40 |
| Maxillary sinus augmentation–Trans-alveolar technique–per sinus | \$1,174.17 | \$1,006.43 |
| Maxillary sinus augmentation–Lateral wall approach–per sinus | \$1,174.17 | \$1,006.43 |
| Active Non-surgical Periodontal Therapy–per quadrant | \$439.59 | \$188.42 |
| Supportive Periodontal Therapy–per appointment | \$410.10 | \$202.49 |
| Oral Surgery | | |
| Removal of a tooth or part(s) thereof | \$243.06 | \$167.72 |
| Sectional removal of tooth or part(s) thereof | \$332.73 | \$214.31 |
| Surgical Extractions | | |
| Surgical removal of a tooth or tooth fragment not requiring removal of bone or tooth division | \$422.18 | \$272.16 |
| Surgical removal of a tooth or tooth fragment requiring removal of bone | \$524.14 | \$310.83 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Surgical Extractions – continued | | |
| Surgical removal of a tooth or tooth fragment requiring both removal of bone and tooth division | \$648.97 | \$418.14 |
| Surgery for Protheses | | |
| Alveolectomy–per segment | \$249.31 | \$169.67 |
| Osteotomy–per jaw | \$662.33 | \$567.71 |
| Reduction of fibrous tuberosity | \$370.10 | \$238.55 |
| Reduction of flabby ridge–per segment | \$225.23 | \$135.14 |
| Removal of hyperplastic tissue | \$540.76 | \$216.32 |
| Repositioning of muscle attachment | \$608.54 | \$521.61 |
| Vestibuloplasty | \$645.21 | \$553.03 |
| Skin or mucosal graft | \$593.05 | \$508.33 |
| Treatment of Maxillo-Facial Injuries | | |
| Repair of skin and subcutaneous tissue or mucous membrane | \$317.10 | \$204.32 |
| Fracture of maxilla or mandible–not requiring fixation | \$277.52 | \$237.88 |
| Fracture of maxilla or mandible–with wiring of teeth or intra-oral fixation | \$874.77 | \$749.80 |
| Fracture of maxilla or mandible–with external fixation | \$874.77 | \$749.80 |
| Fracture of zygoma | \$1,163.02 | \$996.87 |
| Fracture requiring open reduction | \$939.78 | \$805.52 |
| Dislocations | | |
| Mandible–relocation following dislocation | \$88.46 | \$75.82 |
| Mandible–relocation requiring open operation | \$255.85 | \$219.30 |
| Osteotomies | | |
| Osteotomy–maxilla | \$2,080.77 | \$1,783.52 |
| Osteotomy–mandible | \$2,080.77 | \$1,783.52 |
| General Surgical–Oral Pathology | | |
| Removal of tumour, cyst or scar-cutaneous, subcutaneous or in mucous membrane | \$306.23 | \$262.48 |
| Removal of tumour, cyst or scar involving muscle, bone or other deep tissue | \$1,085.72 | \$930.61 |
| Surgery to salivary duct | \$955.91 | \$819.35 |
| Surgery to salivary gland | \$323.99 | \$277.70 |
| Removal or repair of soft tissue (not elsewhere defined) | \$402.00 | \$258.83 |
| Surgical removal of foreign body | \$227.15 | \$146.53 |

| Description of Service | Service Provider | |
|---|------------------|-------------|
| | Specialist Fee | Dentist Fee |
| General Surgical – Oral Pathology – continued | | |
| Marsupialisation of cyst | \$585.95 | \$502.24 |
| Other Surgical Procedures | | |
| Surgical exposure of unerupted tooth–per tooth | \$518.17 | \$444.14 |
| Surgical exposure and attachment of device for orthodontic traction | \$587.73 | \$503.76 |
| Repositioning of displaced tooth/teeth–per tooth | \$379.26 | \$243.78 |
| Surgical repositioning of unerupted tooth–per tooth | \$587.73 | \$503.76 |
| Splinting of displaced tooth/teeth–per tooth | \$395.32 | \$251.52 |
| Replantation and splinting of a tooth–per tooth | \$764.36 | \$492.50 |
| Transplantation of tooth or tooth bud | \$877.40 | \$752.05 |
| Surgery to isolate and preserve neurovascular tissue | \$280.22 | \$240.19 |
| Frenectomy | \$350.56 | \$225.88 |
| Drainage of abscess | \$183.88 | \$123.75 |
| Surgery involving the maxillary antrum | \$1,174.17 | \$1,006.43 |
| Surgery for osteomyelitis | \$766.63 | \$657.11 |
| Repair of nerve trunk | \$1,539.16 | \$1,319.28 |
| Control of reactionary or secondary post-operative haemorrhage | \$66.78 | \$57.24 |
| Pulp and Root Canal Treatments | | |
| Direct pulp capping | \$68.92 | \$44.58 |
| Incomplete endodontic therapy (tooth not suitable for further treatment) | \$284.41 | \$152.49 |
| Pulpotomy | \$131.37 | \$97.14 |
| Complete chemo-mechanical preparation of root canal–one canal | \$590.85 | \$273.56 |
| Complete chemo-mechanical preparation of root canal–each additional canal | \$301.96 | \$130.33 |
| Other Surgical Procedures | | |
| Root canal obturation–one canal | \$590.85 | \$266.50 |
| Root canal obturation–each additional canal | \$301.96 | \$124.60 |
| Extirpation of pulp or debridement of root canal(s)–emergency or palliative | \$246.76 | \$176.18 |
| Resorbable root canal filling–primary tooth | \$284.41 | \$152.49 |
| Periradicular Surgery | | |
| Periapical curettage–per root | \$608.54 | \$386.35 |
| Apicectomy–per root | \$608.54 | \$386.35 |

| Description of Service | Service Provider | |
|--|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Periradicular Surgery – continued | | |
| Exploratory periradicular surgery | \$237.09 | \$162.48 |
| Apical seal–per canal | \$788.73 | \$463.51 |
| Sealing of perforation | \$563.36 | \$243.30 |
| Surgical treatment and repair of an external root resorption-per tooth | \$551.92 | \$337.93 |
| Hemisection | \$524.14 | \$310.83 |
| Other Endodontic Services | | |
| Exploration and/or negotiation of a calcified canal–per canal, per appointment | \$210.09 | \$135.02 |
| Removal of root filling–per canal | \$210.09 | \$135.02 |
| Removal of cemented root canal post or post crown | \$196.88 | \$135.02 |
| Removal or bypassing fractured endodontic instrument | \$183.88 | \$112.60 |
| Additional appointment for irrigation and/or dressing of the root canal system–per tooth | \$210.09 | \$135.02 |
| Obturation of resorption defect or perforation (non-surgical) | \$210.09 | \$135.02 |
| Interim therapeutic root filling–per tooth | \$236.24 | \$180.08 |
| Direct Restorations | | |
| Metallic Restorations–Direct | | |
| Metallic restoration–one surface | \$155.32 | \$133.13 |
| Metallic restoration–two surfaces | \$190.41 | \$163.21 |
| Metallic restoration–three surfaces | \$227.29 | \$194.82 |
| Metallic restoration–four surfaces | \$259.05 | \$222.04 |
| Metallic restoration–five surfaces | \$295.78 | \$253.53 |
| Adhesive Restoration–Anterior Teeth - Direct | | |
| Adhesive restoration–one surface–anterior tooth | \$172.01 | \$147.44 |
| Adhesive restoration–two surfaces–anterior tooth | \$208.89 | \$179.05 |
| Adhesive restoration–three surfaces–anterior tooth | \$247.40 | \$212.05 |
| Adhesive restoration–four surfaces–anterior tooth | \$285.91 | \$245.06 |
| Adhesive restoration–five surfaces–anterior tooth | \$399.44 | \$288.00 |
| Adhesive restoration–veneer–anterior tooth–direct | \$399.44 | \$288.00 |
| Adhesive Restorations–Posterior Teeth–Direct | | |
| Adhesive restoration–one surface–posterior tooth | \$183.81 | \$157.55 |
| Adhesive restoration–two surfaces–posterior tooth | \$230.70 | \$197.74 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Adhesive Restorations—Posterior Teeth—Direct – continued | | |
| Adhesive restoration—three surfaces—posterior tooth | \$277.31 | \$237.69 |
| Adhesive restoration—four surfaces—posterior tooth | \$312.48 | \$267.84 |
| Adhesive restoration—five surfaces—posterior tooth | \$467.79 | \$309.37 |
| Adhesive restoration—veneer—posterior tooth—direct | \$399.44 | \$288.00 |
| Indirect Restorations | | |
| Metallic Restorations—Indirect | | |
| Metallic restoration—one surface | \$811.11 | \$695.23 |
| Metallic restoration—two surfaces | \$1,036.55 | \$888.47 |
| Metallic restoration—three surfaces | \$1,352.08 | \$1,158.93 |
| Metallic restoration—four surfaces | \$1,509.88 | \$1,294.19 |
| Metallic restoration—five surfaces | \$2,230.69 | \$1,448.57 |
| Tooth-Coloured Restorations—Indirect | | |
| Tooth-coloured restoration—one surface | \$1,352.08 | \$869.23 |
| Tooth-coloured restoration—two surfaces | \$1,532.34 | \$1,004.30 |
| Tooth-coloured restoration—three surfaces | \$1,937.82 | \$1,236.09 |
| Tooth-coloured restoration—four surfaces | \$2,095.48 | \$1,487.30 |
| Tooth-coloured restoration—five surfaces | \$2,230.69 | \$1,594.42 |
| Tooth-coloured restoration—veneer—indirect | \$1,352.08 | \$1,062.83 |
| Other Restorative Services | | |
| Provisional (intermediate/ temporary) restoration—per tooth | \$72.68 | \$62.30 |
| Metal band | \$61.25 | \$52.50 |
| Pin retention—per pin | \$41.85 | \$35.87 |
| Cusp capping—per cusp | \$45.12 | \$38.67 |
| Restoration of an incisal corner—per corner | \$45.12 | \$38.67 |
| Bonding of tooth fragment | \$183.88 | \$123.75 |
| Crown—metallic—with tooth preparation—preformed | \$518.17 | \$328.31 |
| Crown—metallic—minimal tooth preparation—preformed | \$227.29 | \$194.82 |
| Crown—tooth-coloured—preformed | \$518.17 | \$328.31 |
| Removal of indirect restoration | \$210.09 | \$123.75 |
| Recementing of indirect restoration | \$118.01 | \$101.15 |
| Post—direct | \$288.68 | \$191.35 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Crowns | | |
| Full crown–acrylic resin–indirect | \$1,830.96 | \$1,179.88 |
| Full crown–non-metallic–indirect | \$2,662.74 | \$1,715.98 |
| Full crown–veneered–indirect | \$2,938.20 | \$1,614.28 |
| Full crown–metallic–indirect | \$2,350.41 | \$1,512.63 |
| Core for crown including post–indirect | \$632.48 | \$408.40 |
| Preliminary restoration for crown–direct | \$262.67 | \$168.75 |
| Post and root cap–indirect | \$643.36 | \$427.76 |
| Provisional and Crown Bridge | | |
| Provisional crown–per tooth | \$227.15 | \$194.70 |
| Provisional bridge–per pontic | \$585.95 | \$386.35 |
| Provisional implant crown abutment–per abutment | \$278.30 | \$238.55 |
| Bridges | | |
| Bridge pontic–direct–per pontic | \$1,937.82 | \$1,236.09 |
| Bridge pontic–indirect–per pontic | \$1,937.82 | \$1,317.88 |
| Semi-fixed attachment | \$630.78 | \$297.37 |
| Precision or magnetic attachment | \$567.76 | \$378.43 |
| Retainer for bonded fixture–indirect–per tooth | \$788.73 | \$502.24 |
| Crown and Bridge Repair and Other Services | | |
| Recementing crown or veneer | \$174.93 | \$131.73 |
| Recementing bridge or splint–per abutment | \$199.72 | \$128.62 |
| Rebonding of bridge or splint where retreatment of bridge surface is required | \$186.51 | \$116.99 |
| Removal of crown | \$118.30 | \$78.74 |
| Removal of bridge or splint | \$275.67 | \$236.29 |
| Repair of crown, bridge or splint–indirect | \$277.52 | \$297.37 |
| Repair of crown, bridge or splint–direct | \$662.33 | \$378.43 |
| Procedures for Implant Prostheses | | |
| Full crown attached to osseointegrated implant–non-metallic–indirect | \$2,662.74 | \$1,715.98 |
| Full crown attached to osseointegrated implant–veneered–indirect | \$2,938.20 | \$1,943.81 |
| Full crown attached to osseointegrated implant–metallic–indirect | \$2,350.41 | \$1,514.70 |
| Prosthodontics | | |
| Complete maxillary denture | \$1,422.07 | \$1,218.91 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Prosthodontics – continued | | |
| Complete mandibular denture | \$1,422.07 | \$1,218.91 |
| Provisional complete maxillary denture | \$1,066.53 | \$914.17 |
| Provisional complete mandibular denture | \$1,066.53 | \$914.17 |
| Provisional complete maxillary and mandibular dentures | \$1,891.28 | \$1,621.10 |
| Metal palate or plate | \$611.81 | \$394.29 |
| Complete maxillary and mandibular dentures | \$2,521.71 | \$2,161.46 |
| Partial maxillary denture–resin base | \$650.60 | \$557.66 |
| Partial mandibular denture–resin base | \$650.60 | \$557.66 |
| Provisional partial maxillary denture | \$487.97 | \$418.26 |
| Provisional partial mandibular denture | \$487.97 | \$418.26 |
| Partial maxillary denture–cast metal framework | \$1,904.99 | \$1,632.85 |
| Partial mandibular denture–cast metal framework | \$1,904.99 | \$1,632.85 |
| Retainer–per tooth | \$65.65 | \$56.27 |
| Occlusal rest–per rest | \$31.90 | \$27.34 |
| Tooth/teeth (partial denture) | \$53.86 | \$46.16 |
| Overlays – per tooth (can only be claimed with items 727 or 728 from the Australian Schedule of Dental Services and Glossary Australian Dental Association Twelfth Edition Published by the Australian Dental Association 12–14 Chandos St, St Leonards, NSW 2065 Australia © Australian Dental Association, 2017) | \$65.65 | \$56.27 |
| Precision or magnetic denture attachment | \$394.26 | \$337.93 |
| Immediate tooth replacement–per tooth | \$13.57 | \$11.63 |
| Resilient lining | \$281.86 | \$241.59 |
| Wrought bar | \$262.67 | \$225.15 |
| Metal backing – per backing (can only be claimed with 716, 727, or 728 from the Australian Schedule of Dental Services and Glossary Australian Dental Association Twelfth Edition Published by the Australian Dental Association 12–14 Chandos St, St Leonards, NSW 2065 Australia © Australian Dental Association, 2017) | \$13.57 | \$11.63 |

| Description of Service | Service Provider | |
|--|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Denture Maintenance and Adjustments | | |
| Adjustment of a denture | \$77.80 | \$66.69 |
| Relining—complete denture—processed | \$720.16 | \$425.39 |
| Relining - partial denture—processed | \$559.95 | \$362.66 |
| Remodelling—complete denture | \$1,004.46 | \$647.35 |
| Remodelling—partial denture | \$1,004.46 | \$647.35 |
| Relining—complete denture—direct | \$405.77 | \$231.79 |
| Relining—partial denture—direct | \$247.96 | \$193.05 |
| Cleaning and polishing of pre-existing denture | \$83.98 | \$54.08 |
| Denture base modification | \$251.74 | \$215.78 |
| Denture Repairs | | |
| Reattaching pre-existing tooth or clasp to denture | \$158.23 | \$48.60 |
| Replacing/adding clasp to denture—per clasp | \$224.52 | \$192.44 |
| Repairing broken base of a complete denture | \$158.23 | \$135.62 |
| Repairing broken base of a partial denture | \$158.23 | \$135.62 |
| Replacing/adding new tooth on denture—per tooth | \$224.52 | \$192.44 |
| Reattaching existing tooth on denture—per tooth | \$60.75 | \$23.93 |
| Adding tooth to partial denture to replace an extracted or decoronated tooth—per tooth | \$227.29 | \$194.82 |
| Repair or addition to metal casting | \$581.34 | \$0.00 |
| Other Prosthodontic | | |
| Tissue conditioning preparatory to impressions—per application | \$103.24 | \$88.49 |
| Splint—resin—indirect | \$675.90 | \$444.14 |
| Splint—metal—indirect | \$675.90 | \$444.14 |
| Obturator | \$871.56 | \$561.69 |
| Characterisation of denture base | \$33.61 | \$28.81 |
| Impression—dental appliance repair/modification | \$68.63 | \$58.83 |
| Identification | \$54.92 | \$47.08 |
| Surgical guide for an immediate denture | \$301.75 | \$258.64 |
| Removable Appliances | | |
| Passive removable appliance—per arch | \$591.57 | \$381.25 |
| Active removable appliance—per arch | \$736.30 | \$474.52 |
| Functional orthopaedic appliance—custom fabrication | \$2,353.59 | \$1,516.82 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| Denture Maintenance and Adjustments – continued | Specialist Fee | Dentist Fee |
| Fixed Appliances | | |
| Fixed palatal or lingual arch appliance | \$707.86 | \$606.74 |
| Partial banding for inter-maxillary elastics (cross elastics) | \$589.80 | \$505.54 |
| Maxillary expansion appliance | \$1,120.81 | \$960.70 |
| Passive fixed appliance | \$495.47 | \$424.70 |
| Minor tooth guidance–fixed | \$831.72 | \$712.91 |
| Extra Oral Appliances | | |
| Extra oral appliance | \$1,038.17 | \$889.86 |
| Attachments | | |
| Bonding of attachment for application of orthodontic force | \$109.75 | \$94.08 |
| Other Orthodontic Services | | |
| Orthodontic adjustment | \$126.48 | \$108.42 |
| Repair of removable appliance, resin base | \$94.37 | \$80.89 |
| Repair of removable appliance–clasp, spring tooth | \$94.37 | \$80.89 |
| Addition to remove appliance–clasp, spring or tooth | \$202.65 | \$173.70 |
| Relining- removable appliance–processed | \$286.42 | \$245.50 |
| General Services | | |
| Emergencies | | |
| Palliative care | \$135.64 | \$87.34 |
| After hours callout | \$136.85 | \$117.30 |
| Travel to provide services | \$99.55 | \$85.33 |
| Drug Therapy | | |
| Individually made tray–medicaments | \$236.25 | \$202.50 |
| Provision of medication/medicament | \$40.93 | \$35.08 |
| Anaesthesia, Sedation and Relaxation Therapy | | |
| Sedation- inhalation–per 30 minutes or part thereof | \$76.10 | \$65.23 |
| Relaxation therapy (does not involve the use of drugs) | \$76.10 | \$65.23 |
| Treatment under general anaesthesia/sedation | \$304.42 | \$260.94 |
| Occlusal Therapy | | |
| Minor occlusal adjustment–per appointment | \$111.80 | \$65.23 |
| Clinical occlusal analysis including muscle and joint palpation | \$183.88 | \$112.61 |
| Registration and mounting of casts for occlusal analysis | \$135.36 | \$96.53 |

| Description of Service | Service Provider | |
|---|-------------------------|--------------------|
| | Specialist Fee | Dentist Fee |
| Occlusal Therapy – continued | | |
| Occlusal splint | \$1,329.49 | \$680.44 |
| Adjustment of pre-existing occlusal splint–per appointment | \$134.57 | \$96.53 |
| Occlusal adjustment following occlusal analysis–per appointment | \$202.85 | \$135.14 |
| Adjunctive physical therapy for temporomandibular joint and associated structures–per appointment | \$135.36 | \$96.53 |
| Repair/addition–occlusal splint | \$0.00 | \$366.99 |
| Miscellaneous | | |
| Splinting and stabilisation–direct–per tooth | \$183.88 | \$123.75 |
| Enamel stripping–per appointment | \$141.89 | \$121.62 |
| Single arch oral appliance for diagnosed snoring and obstructive snoring and sleep apnoea | \$1,203.99 | \$775.93 |
| Bi-maxillary oral appliance for diagnosed snoring and obstructive snoring and sleep apnoea | \$1,203.99 | \$775.93 |
| Repair/addition–snoring or sleep apnoea device | \$428.15 | \$366.99 |
| Post-operative care where not otherwise included | \$131.38 | \$90.08 |

Part C

| NT Eligibility for 'no fee' Public Dental and Oral Health Services | | |
|---|--------------------------|-------------------------|
| Eligibility Criteria* | Emergency Service | Routine Services |
| <p>Concessional</p> <p>Persons holding or listed as a dependent on any of the following Australian Government Cards:</p> <ol style="list-style-type: none"> 1) Health Care Card (issued by the Australian Department of Human Services); 2) Pensioner Concession Card (issued by the Australian Department of Human Services) 3) Commonwealth Seniors Health Card (issued by Australian Department of Human Services) 4) Gold or White Repatriation Health Cards (issued by the Department of Veterans' Affairs (DVA)) | ✓ | ✓ |
| <p>Children</p> <p>Children enrolled in school up to the age of 18 years old</p> | ✓ | ✓ |
| <p>Cleft Lip and Palate</p> <p>Cleft Lip and Palate Scheme recipients up to the age of 22 years old</p> | ✓ | ✓ |
| <p>Cancer</p> <p>Persons undergoing cancer therapies and requiring oral health support</p> | ✓ | ✓** |
| <p>Disability</p> <p>Persons with a disability whereby their conditions is affecting their oral health significantly</p> | ✓ | ✓** |
| <p>Department of the Attorney-General and Justice</p> <p>Persons in custody and detainees in an NT Government correctional facility or in youth detention</p> | ✓ | ✓ |
| <p>Homeless</p> <p>Homeless people, refugees and asylum seekers</p> | ✓ | ✓** |
| <p>Inpatients</p> <p>Hospital inpatients where a dental or oral health condition is impacting on the condition for which the patient has been admitted</p> | ✓ | ✓** |
| <p>Mental Health</p> <p>Persons with mental health conditions residing in residential care, hospital or community facilities</p> | ✓ | ✓** |
| <p>Residential Care</p> <p>Persons living in full-time residential facilities, such as nursing homes or homebound patients</p> | ✓ | ✓** |

Part C

**NT Eligibility for 'no fee' Public Dental and Oral Health Services
(continued)**

| Eligibility Criteria* | Emergency Service | Routine Services |
|---|--------------------------|-------------------------|
| Remote Persons who reside in remote communities with a distance greater than 100 kilometres from the nearest available private dental service | ✓ | ✗ |
| Renal and Cardiac Persons requiring renal and cardiac transplant surgery | ✓ | ✓** |
| Rheumatic Heart Disease Persons listed on the NT Rheumatic Heart Disease Register | ✓ | ✓ |
| Substance Misuse Persons actively enrolled in programs for substance misuse treatment | ✓ | ✓** |
| Palliative Care Persons in palliative care | ✓ | ✓ |
| Victims of Crime Persons who have experienced or are at risk of experiencing domestic, family and sexual violence | ✓ | ✓** |

*All patients are required to be Medicare Eligible, with the exception of refugees and asylum seekers

**Requires referral from the patient's medical practitioner