

# POAC CLAIMING SCHEDULE

<b>Consultations and Procedures</b>	
<b>Initial GP Consultation (15 mins)</b>	Patient pays initial consult
<b>GP Consultation</b> <ul style="list-style-type: none"> <li>- Charged at the normal practice <b>casual</b> patient rate.</li> <li>- Claim should be clearly supported with detailed clinical notes</li> <li>- GMS should not be claimed</li> </ul>	<b>Normal practice GP consult fee</b> Based on normal casual rate or A&M fee
<b>GP Telephone Follow Up Consultation</b>	<b>\$15</b>
<b>GP Consultation – St John Transport or Hospital Supported Discharge pathways</b> <ul style="list-style-type: none"> <li>- Refer St John Transport Pathway or as requested by POAC coordinator under the hospital supported discharge service</li> <li>- POAC will fund the normal practice price that would have normally been charged to the patient.</li> </ul>	<b>Normal practice GP consult fee</b> This is based on what the patient would normally pay e.g funded/enrolled rate or normal A&M fee
<b>ACC Surcharge</b> <ul style="list-style-type: none"> <li>- Surcharges will be covered by POAC for patients brought in by ambulance under St John Transport Pathway, or under a hospital early supported discharge referral for patients living in ADHB or CMDHB</li> </ul>	Normal ACC surcharge
<b>GP Home Visit</b> <ul style="list-style-type: none"> <li>- Home visit can be claimed for acutely unwell patients under POAC.</li> <li>- Routine home visits are not funded. Initial home assessment is payable by patient.</li> </ul>	<b>Normal practice GP consult fee</b> Casual rate (Mileage @ <b>\$0.62/km</b> )
<b>Nurse Surgery or Home Visit</b>	<b>\$1/minute</b>
<b>Combined Nurse Consult/Surgery Observation Time</b> <ul style="list-style-type: none"> <li>- Max 3 hours observation claimable (phone POAC for pre-approval where likely to exceed this)</li> </ul>	<b>\$1/minute</b>
<b>ECG</b> <ul style="list-style-type: none"> <li>- For acute events only. Refer Chest Pain pathway. Document history and clearly identify need for acute ECG. For suspected acute coronary syndrome (ACS) ECG must be accompanied by troponin testing for POAC funding</li> <li>- Price inclusive of nurse time.</li> <li>- POAC <b>does not</b> fund routine ECGs.</li> </ul>	<b>\$45</b> Fixed fee - includes nurse time
<b>Administration Fee</b> A single administration fee is claimable when submitting final outcome	<b>\$15.50</b>
<b>Consumables</b> <ul style="list-style-type: none"> <li>- Charge for direct consumables used. Details to be annotated in clinical notes.</li> <li>- MPSO funded drugs not claimable from POAC.</li> </ul>	Normal consumable cost
<b>Catheterisation</b> <ul style="list-style-type: none"> <li>- Patient pays initial consult</li> </ul>	<b>\$65</b>

<ul style="list-style-type: none"> <li>- Includes consumables</li> <li>- 1x review next day funded at normal practice casual rate</li> </ul>	
<h2 style="color: #00AEEF;">Abscess Management (Fixed Fee Schedule)</h2>	
<p><b>Incision and Drainage (fixed fee)</b></p> <ul style="list-style-type: none"> <li>- Moderately severe abscess requiring local anaesthetic</li> <li>- Includes GP/nurse time and consumables</li> <li>- Simple boil/abscess management is standard primary care work and not POAC funded</li> <li>- IV antibiotics should not normally be given for abscess – discuss with Infectious Disease or Surgical consultant if IV antibiotics are being considered</li> </ul>	<p><b>\$100</b></p> <p>Inclusive of GP/nurse/consumables</p>
<p><b>Wound Management</b></p> <ul style="list-style-type: none"> <li>- Following incision and drainage of abscess up to 2x visits will be funded for wound management</li> <li>- Ongoing wound care will be payable by patient or refer under District Nursing service</li> </ul>	<p><b>\$20-\$40</b></p> <p>Annotate size, complexity and location of wound</p>
<p><b>GP Review</b></p> <ul style="list-style-type: none"> <li>- Up to 2x funded visits post Incision and Drainage</li> </ul>	<p><b>Normal practice GP consult fee</b> Based on normal casual rate or A&amp;M fee</p>
<h2 style="color: #00AEEF;">IV Fluids for Dehydration (Fixed Fee Schedule)</h2>	
<p><b>IV Fluids</b></p> <ul style="list-style-type: none"> <li>- For <b>moderate dehydration only</b> - refer Adult Dehydration Guideline.</li> <li>- Price includes GP/nurse/observation time</li> <li>- Saline is available under MPSO</li> </ul>	<p>1 Litre <b>\$145</b></p> <p>2 Litres <b>\$205</b></p>
<h2 style="color: #00AEEF;">Cellulitis Management (Fixed Fee Schedule)</h2>	
<p><b>The following is funded by POAC where the regional Adult Cellulitis pathway has been followed.</b></p>	
<p><b>IV Cephazolin</b></p> <ul style="list-style-type: none"> <li>- IV 2gm daily for up to 3 doses</li> <li>- Adults only</li> <li>- For Abscess – refer to Abscess Management. IV therapy will only be funded for an Abscess where endorsed by Infectious Disease (ID) consultant. Abscess should be managed with I&amp;D.</li> <li>- Funding of more than 3 doses must be endorsed by ID consultant. The name of consultant should be documented in clinical notes.</li> <li>- Price inclusive of GP/Nurse time and consumables</li> <li>- Cephazolin is <b>PHARMAC funded</b> and can be sourced from pharmacy on prescription or from your normal medical supplies company</li> <li>- IV Cephazolin is <b>not</b> funded by POAC for any other condition.</li> <li>- If known injury/trauma (insect bite, stings, infected tattoo, post op infection, scratch etc) – submit claim under ACC.</li> </ul>	<p><b>\$110</b> per dose</p> <p>Includes GP/nurse/consumables</p> <p>Up to maximum of three doses.</p> <p>Additional management requires Infectious Disease endorsement.</p>
<p><b>GP After Hours Fee</b></p> <ul style="list-style-type: none"> <li>- Charged in addition to IV therapy fees. For other management, costs would be included in the normal GP after hours consult fee claimed.</li> </ul>	<p><b>\$20</b></p> <p>Fixed fee</p>

<b>GP Review</b> <ul style="list-style-type: none"> <li>- A GP review will be funded post completion of IV therapy where required within 48 hours of final IV dose</li> </ul>	<b>Normal practice GP consult fee</b> Based on normal casual rate or A&M fee
<b>Wound Dressing</b> <ul style="list-style-type: none"> <li>- Dressings will be funded for non ACC Cellulitis cases for the duration of POAC episode only</li> <li>- Ongoing wound care should be referred to the District Nursing service or will be payable by patient</li> <li>- Maximum 1x further dressing will be funded following completion of IV therapy</li> </ul>	<b>\$10</b> simple <b>\$15</b> medium <b>\$20</b> large <b>\$35</b> complex/special  Annotate size, complexity of wound

## Pyelonephritis Management (Fixed Fee Schedule)

The following is funded by POAC where the POAC Pyelonephritis guideline has been followed.

<b>IV Gentamicin</b> <ul style="list-style-type: none"> <li>- Single dose only funded.</li> <li>- Administer over 30-120 mins diluted in 100-200ml NACI 0.9% or glucose 5% mac concentration 1mg/ml</li> <li>- Available unfunded on MPSO. Claimable fee includes cost of Gentamicin</li> <li>- A GP review will be funded if patient is deteriorating on oral antibiotics</li> <li>- A one of \$5 prescription fee may be claimed where financial hardship is a barrier to patient changing oral antibiotic (refer guideline)</li> </ul>	IV antibiotic only: <b>\$180</b> per dose (single dose only)  IV antibiotic with IV fluids (all-inclusive fee): <b>1 Litre \$200</b> <b>2 Litres \$260</b>
<b>IV Ceftriaxone</b> <ul style="list-style-type: none"> <li>- For management of Pyelonephritis only if patient presents after hours and Gentamicin unavailable - refer POAC guideline.</li> <li>- Single dose only funded</li> <li>- Ceftriaxone is NOT funded by POAC outside of the Pyelonephritis guideline.</li> <li>- IV fluids may be given if patient is moderately dehydrated (max 2L/24 hours)</li> </ul>	IV antibiotic only: <b>\$50</b> per dose (single dose only)  IV antibiotic with IV fluids (all-inclusive fee): <b>1 Litre \$185</b> <b>2 Litres \$245</b>
<b>GP After Hours Fee</b> <ul style="list-style-type: none"> <li>- Charged in addition to IV therapy fees. For other management, costs would be included in the normal GP after hours consult fee claimed.</li> </ul>	<b>\$20</b>
<b>GP Review</b> <ul style="list-style-type: none"> <li>- A GP review will be funded if patient is deteriorating on oral antibiotics</li> </ul>	<b>Normal practice GP consult fee</b> Based on normal casual rate or A&M fee

## Deep Vein Thrombosis (DVT) Management (Fixed Fee Schedule)

POAC will fund the following for investigation and subsequent management of DVT where the regional DVT clinical pathway has been followed.

<b>Administration of stat dose of Clexane (if delay in ultrasound)</b> Refer to DVT guideline for Clexane management	<b>\$50</b> for administering meds  Plus <b>\$0.50</b> per mg Clexane
<b>Post DVT ultrasound Review</b>	<b>Normal practice GP consult fee</b>

Confirmed Proximal DVT – admit directly to hospital	Based on normal casual rate or A&M fee  Telephone: <b>\$20</b>
<b>Clexane <u>post</u> ultrasound</b> <ul style="list-style-type: none"> <li>- <b>Special Authority funding application required for Clexane</b></li> <li>- <b>Includes administration of single dose of Clexane post ultrasound</b></li> <li>- <b>Either self-administration teaching OR daily practice administration of Clexane</b></li> <li>- <b>One off fee only</b></li> </ul>	<b>\$50</b> initial dose and self-administering teaching  <b>OR</b>  <b>\$50</b> one off fee which includes daily Clexane (if patient unable to self-administer)
<b>Other IV antibiotic therapy</b>	
<b>IV Amoxicillin</b> <ul style="list-style-type: none"> <li>- Funded only for treatment of Pneumonia for aged residential care patients where patient unable to tolerate oral antibiotics</li> <li>- 8-hourly for up to 48hours</li> <li>- Discussion with hospital Geriatrician required if concerns or considering further IV treatment.</li> </ul>	<b>\$110</b> per dose
<b>Other IV antibiotic therapy may be funded only where endorsed by hospital specialist.</b>	