

Health Insurance (Section 3C Pathology Services – COVID-19) Determination 2020

I, DAVID WEISS, delegate of the Minister for Health, make the following Determination.

Dated 12 March 2020

David Weiss First Assistant Secretary Medical Benefits Division Health Financing Group Department of Health

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1. Name

This instrument is the *Health Insurance (Section 3C Pathology Services – COVID-19) Determination 2020*

2. Commencement

(1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

Commencement information		
Column 1	Column 2	Column 3
Provisions	Commencement	Date/Details
1. The whole of this instrument	13 March 2020	

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

(2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3. Cessation

Unless earlier revoked this instrument ceases on 30 September 2020.

4. Authority

This instrument is made under subsection 3C(1) of the Health Insurance Act 1973.

5. Definitions

(1) In this instrument:

Act means the Health Insurance Act 1973.

approved collection centre has the meaning given by subsection 23DA(1) of the Act.

bulk-billed: a pathology service is bulk-billed if:

- (a) a medicare benefit is payable to a person in relation to the service; and
- (b) under an agreement entered into under section 20A of the Act:

(i) the person assigns to the practitioner by whom, or on whose behalf, the service is provided, the person's right to the payment of the medicare benefit; and

(ii) the practitioner accepts the assignment in full payment of the practitioner's fee for the service provided.

relevant provisions means all provisions, of the Act and regulations made under the Act, and the *National Health Act 1953* and regulations made under the *National Health Act 1953*, relating to pathology services, professional services or items.

relevant service means a health service, as defined in subsection 3C(8) of the Act, that is specified in a Schedule.

pathology services table means the table prescribed under subsection 4A(1) of the Act.

Schedule means a Schedule to this instrument.

Note: The following terms are defined in subsection 3(1) of the Act:

- clinically relevant service;
- pathology services table;
- item;
- professional service.
- (2) Unless the contrary intention appears, a reference in this instrument to a provision of the Act or the *National Health Act 1953* or regulations made under the Act or under the *National Health Act 1953* as applied, adopted or incorporated in relation to specifying a matter is a reference to those provisions as in force from time to time and any other reference to provisions of an Act or regulations is a reference to those provisions as in force from time to time.

6. Treatment of relevant services

For subsection 3C(1) of the Act, a relevant service, provided in accordance with this instrument and as a clinically relevant service, is to be treated, for the relevant provisions, as if:

- (a) it were both a professional service and a pathology service; and
- (b) there were an item in the pathology services table that:
 - i. related to the service; and
 - ii. specified for the service a fee in relation to each State, being the fee specified in the Schedule in relation to the service.

7. Application of provisions of the pathology services table

(1) Clause 1.7 of the pathology services table shall have effect as if item 69485 of this Determination was specified in paragraph 1.7(2)(a) of the pathology services table.

Schedule 1 – relevant services

Group P3 -	- Microbiology	
Column 1	Column 2	Column 3
Item	Pathology service	Fee (\$)
69485	 Detection of a SARS-CoV-2 nucleic acid 1 or more tests if the service: (a) is bulk-billed; and (b) is in a single patient episode with a service described in 69494 or 69495 or 69496 that is rendered to test for other respiratory viruses. 	28.65