

Dorevitch Pathology Billing Policy

Pathology billing is a process that is dependent on multiple factors. Some of these include:

- the type of test ordered
- where the test is ordered
- if the sample needs to be referred to another laboratory
- if the test is covered under the Medicare benefits schedule.

Tests that are not covered under the Medicare schedule that would require payment are referred to as non rebatable tests.

Dorevitch Pathology aim to limit these costs to the patient as much as possible, whilst ensuring the provision of a high quality comprehensive services.

Billing fees are covered under the following categories

Private Patient Billing

Patients may receive an invoice for their pathology tests once completed. After this invoice has been paid, the Medicare rebatable items can be claimed from Medicare. The maximum any patient will be charged out of pocket for a pathology episode (visit) is \$100 for all Medicare rebatable tests, regardless of the number of tests ordered on the referral, where the test is performed at Dorevitch Pathology or one of its partner pathology services. Private account charges for pathology tests are based on the Australian Medical Association schedules.

Patients will be liable for the full cost of all tests with no Medicare rebate. For a list of the most common Medicare tests that are not rebatable, refer to the link on the Dorevitch website. A number of pathology tests also have criteria associated with them, which are required to be met before the rebate is payable. For the full Medicare Benefits Schedule refer to www.mbs.gov.au.

Direct billing to Medicare

(Medicare Rebatable Items only)

Dorevitch Pathology will bill Medicare direct for pensioners, health care card holders, patients in aged care facilities and patients with special circumstances.

Third Party Billing

If patient tests relate to a Workcover, Transport Accident Commission or an insurance matter, the account will be sent directly to those organisations. Veterans' Affairs Gold Card holder accounts will be sent directly to the Department of Veterans' Affairs.

Tests referred to an alternate specialist provider

In the unlikely event that a pathology test is required to be referred elsewhere, this will not be covered by Dorevitch Pathology. That provider will have their own billing policy and the patient is fully responsible for any costs involved.

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