

Billing of Tests Non-Refundable by Medicare

As a public pathology laboratory, ACT Pathology bills according to the Medicare Benefits Schedule (MBS) of fees so that patients who have a Medicare card do not pay a gap.

Not all tests have a Medicare Item Number and therefore do not attract a Medicare benefit, or can only be claimed under certain clinical conditions. In these situations, the full cost of this testing must be covered by the patient, and therefore you may receive an invoice for the testing.

When a non-refundable test is ordered in conjunction with tests covered by Medicare, ACT Pathology is unable to split the invoice and bill directly to Medicare those tests that are covered by Medicare. You will be responsible for submitting a claim to Medicare and forwarding the refund along with payment for the non-refundable test to ACT Pathology. Where non-refundable tests are performed by a referral laboratory a separate invoice may be received.

Our staff will do their utmost to provide you with an accurate indication of the cost of the non-refundable testing; however this is not always possible depending on the nature of the testing.

TEST/s: **APPROX COST: \$**

If you agree to accept responsibility for payment of these tests and therefore wish to proceed with the testing, please complete the form below for ACT Pathology records.

Patient Name: **DOB:**

Address:

I hereby agree to accept responsibility for full payment of tests or services that do not attract a Medicare rebate, as requested by my medical practitioner.

Name Relationship to patient (if not patient)

Signature Contact Number Date

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Refuses the Charge

Collector's signature & date

Please advise the staff if you would like a copy of this document.

For further information please contact: Ms Julie Hegarty

Customer Service Manager

6244 2932