



# HealthPoint

Item codes and Health Fund  
claim responses

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Health Fund Contacts

Health Fund Information	Member Services	Provider
ACA	1300 368 390	1300 368 390
ahm	134 246	134 246
Australian Unity	(03) 9697 0435	(03) 9697 0435
BUPA	131 243	1800 060 239
CBHS Friendly Society	1300 654 123	1300 654 123
Credicare	133 282	133 282
Defence Health	1800 335 425	1800 335 425
GMF	1300 653 099	1300 653 099
GMHBA, Frank, FIT, RACT, Budget Direct	1300 136 652	(03) 5224 8658
HBF	133 423	133 423
HCF	131 334	(02) 9290 0163
health.com.au	1300 199 802	1300 199 802
HIF	1300 134 060	1300 134 060
Latrobe Health Services	1300 362 144	1300 362 144
Medibank Private	132 331	1300 654 887
Navy Health	1300 306 289	1300 306 289
NIB	13 14 63	131 463
Onemedifund	1800 804 950	1800 804 950
Peoplecare	1800 808 690	(02) 4224 4333
Police Health	1800 603 603	1800 603 603
Queensland Country Health	1800 813 415	(07) 4750 3200
RT Health	1300 886 123	1300 886 123
Teachers Federation Health	1300 728 188	1300 728 188
Teachers Union Health	1300 360 701	1300 360 701
Westfund	1300 552 132	1300 552 132

## Appendix A: Health Fund Responses

The health funds provide a response for each claim and each item of a claim. Any response except “00” means the claim or item has been rejected by the Health Fund.

Likewise, the health funds provide a response to rejections and cancellations made by the patient. Any response except “00” means the cancellation or rejection has not been processed, and the claim will stand.

Look up the response code in the tables in the following sections. Note: Not all health funds use all of the responses listed in this table.

### Claim Responses

For each claim you submit with HealthPoint, the health fund sends a response, which HealthPoint displays and prints on the claim receipt.

All responses except “00 - APPROVED” mean the claim has been rejected or revised.

In general, if the health fund rejects the claim, the patient should settle their account in the usual manner and make a regular paper based claim with their health fund.

If the response is not in the following table, please contact the relevant health fund for an explanation.

<b>00 APPROVED</b>	<b>The health fund has approved this claim.</b>
<b>01 PROVIDER NOT APPROVED</b>	The health fund does not recognize this provider for these services.  Can indicate an issue with the initial registration process for this provider or a claim outside modality (e.g. Remedial Massage may not be able to make claims using Myotherapy codes).  Please call Tyro Customer Support 1300 966 639
<b>03 INVALID PROVIDER NO</b>	The provider number supplied is not valid.  Please call CSC HealthClaims Help Desk 1300 301 692
<b>04 PLEASE RETAIN CARD</b>	The health fund has asked you to retain the patient’s card, if possible. Call the relevant health fund for information on what to do next.
<b>10 REFER CLAIM TO FUND</b>	The health fund has requested that this claim be referred to them for manual assessment. Call the relevant health fund for information on what to do next.
<b>12 TRANSACTION DECLINED</b>	The health fund has not approved the transaction. It has not given a specific reason. Call the relevant health fund for information on what to do next.
<b>14 CARD NO IS NOT VALID</b>	The health fund does not recognise the card you swiped.  Discard the claim, re-enter the claim, and re-submit it. If you get this message again, advise the patient to contact their

		fund and arrange for a new card.
<b>19</b>	<b>NO ITEMS ENTERED</b>	No service items were entered for this claim.  Review service items entered for this claim and resubmit. If error continues, please report to Tyro Customer Support 1300 966 639
<b>21</b>	<b>CONTACT HELP DESK</b>	The system has taken no action for this claim. Please contact the Tyro Customer Support. 1300 966 639
<b>30</b>	<b>SYSTEM DATA ERROR</b>	Please report it to Tyro Customer Support 1300 966 639
<b>32</b>	<b>COMPLETED PARTIALLY</b>	Only part of the claim has been processed.  The action required will depend on which part of the claim has been processed. Please contact the health fund on what to do next.
<b>40</b>	<b>MEMBERSHIP NOT COVERED</b>	The patient's fund membership does not cover the services provided. Advise the patient to check their membership cover with the health fund.
<b>42</b>	<b>MEMBERSHIP CEASED/SUSP</b>	The patient's fund membership has either ceased or been suspended. Advise the patient to check with their health fund.
<b>51</b>	<b>MEMBERSHIP UNFINANCIAL</b>	The patient's health fund membership has not been paid. Advise the patient to check with their health fund.
<b>54</b>	<b>CARD HAS EXPIRED</b>	The patient's health fund card has expired.  You must have a valid card to claim via HealthPoint. Advise the patient to contact their fund and arrange for a new card.
<b>56</b>	<b>INVALID MEMBERSHIP NO</b>	The health fund does not recognise the card you swiped.  Discard the claim, re-enter the claim, and re-submit it. If you get this message again, advise the patient to contact their fund and arrange for a new card.
<b>57</b>	<b>NO ANCILLARY COVER</b>	The patient does not have ancillary cover. Advise the patient to check their membership cover with the health fund.
<b>58</b>	<b>TRANS NOT PERMITTED</b>	The system cannot process this transaction. Please contact Tyro Customer Support 1300 966 639
<b>60</b>	<b>PROVIDER NOT KNOWN</b>	The health fund does not recognise this provider.  Normally indicates an issue with the initial provider registration process. Please call Tyro Customer Support 1300 966 639
<b>61</b>	<b>BENEFIT LIMIT EXCEEDED</b>	The patient's benefit limit has been exceeded for the period specified in their policy. Please advise the patient to check their cover and the relevant limits with the health fund.
<b>69</b>	<b>NO BENEFIT PAYABLE</b>	No benefit is payable on this claim. Advise the patient to

	check their membership cover with the health fund.
<b>91 SYSTEM BUSY-TRY AGAIN</b>	<p>The system cannot process your claim at the moment.</p> <p>Wait a few seconds and resubmit. If issue continues, please call Tyro Customer Support 1300 966 639</p>
<b>92 SYSTEM UNAVAILABLE</b>	<p>The system is temporarily unavailable.</p> <p>Please call Tyro Customer Support who will investigate and advise 1300 966 639</p>
<b>93 SYSTEM PROBLEM</b>	<p>The system is experiencing a problem.</p> <p>Please call Tyro Customer Support, who will investigate and advise 1300 966 639</p>
<b>94 DUPLICATE TRANSACTION</b>	<p>The system is reporting that this claim has been submitted more than once.</p> <p>Please review claim details. If this is not a duplicate claim, please call Tyro Customer Support 1300 966 639</p>
<b>PP HEALTH FUND SPECIFIC CUSTOM CODE – alpha numeric code</b>	<p>Custom code specific to health fund. For alpha numeric response, a health fund custom description may also have been supplied as a part of the claim response.</p> <p>Can indicate an issue with initial provider registration or system error at health fund end.</p> <p>Please call Tyro Customer Support, who will investigate and advise 1300 966 639</p>

## Item Responses

Each claim is made up of one or more service items. When the claim is submitted, the health fund sends a response for each individual item (in addition to the response for the claim as a whole). HealthPoint prints these responses next to the item on the claim receipt.

Unless otherwise indicated, all responses except "00 - APPROVED" mean the item has been rejected.

If the response is not in the following table, please contact the relevant health fund for an explanation.

<b>00</b>	<b>APPROVED</b>	<b>The health fund has approved this item.</b>
<b>01</b>	<b>BENEFIT NOT PAYABLE</b>	According to the rules for this health fund, no benefit is payable on this item.
<b>02</b>	<b>RESTRICTED ITEM</b>	The rebate for this item is restricted by the patient's policy, and consequently no benefit is payable for this item.
<b>03</b>	<b>RESTRICTED ITEM</b>	The rebate for this item is restricted by the patient's policy, and consequently only a reduced benefit is payable for this item
<b>04</b>	<b>PREVIOUSLY PAID</b>	A benefit has already been paid for this item. Advise the patient to check their cover with the health fund.
<b>05</b>	<b>BENEFIT LIMIT REACHED</b>	The patient's benefit limit for this item has been exceeded for the period specified in their policy, so no benefit has been paid. Advise the patient to check their cover and the relevant limits with the health fund.
<b>06</b>	<b>BENEFIT LIMIT REACHED</b>	The patient's benefit limit for this item has been exceeded for the period specified in their policy, so a reduced benefit has been paid. Advise the patient to check their cover and the relevant limits with the health fund.
<b>07</b>	<b>WITHIN WAITING PERIOD</b>	The patient does not qualify for this item because they have not completed the waiting period specified in their policy. Advise the patient to check their cover and the relevant waiting periods with the health fund.
<b>08</b>	<b>PREREQ SRVCE REQUIRED</b>	A pre-requisite service is required before benefits are payable on this item. Advise the patient to check with the health fund as to what is required to qualify for benefits on this particular item.
<b>09</b>	<b>PRE-EXISTING CONDITION</b>	No benefit is payable as this item applies to a pre-existing condition. Advise the patient to check with their health fund as to what benefit restrictions apply for treatment of their ailment
<b>10</b>	<b>ITEM NO. IS NOT VALID</b>	The health fund does not recognise this item number. You may not have an up-to-date list of the current items. If this is the case, please call Tyro Customer Support 1300 966 639
<b>11</b>	<b>ITEM NO. CEASED USE</b>	This item number is no longer in use as of the date the service was performed.

		You may not have an up-to-date list of the current items. If this is the case, please call Tyro Customer Support 1300 966 639
12	<b>ITEM NOT FOR PROVIDER</b>	<p>The health fund will not pay benefits for this item when performed by this practitioner.</p> <p>Check with the health fund as to the status of the practitioner and what services the health fund will accept when performed by them.</p>
13	<b>ITEM NO. NOT APPROVED</b>	<p>The health fund does not approve this item - no benefits have been paid.</p> <p>Please review the claim item number is correct. If it is, please call Tyro Customer Support 1300 966 639</p>
14	<b>ITEM MAX USE EXCEEDED</b>	The health fund imposes a limit on the number of times this item may be used within a particular period, and this limit has been exceeded for this patient. Advise the patient to check with their health fund as to any restrictions it imposes on this item.
15	<b>SERVICE FEE MISSING</b>	<p>The health fund will not approve payment for this item unless you supply the service fee charged for this item.</p> <p>Please review a service fee has been included with this claim and resubmit.</p>
16	<b>SERVICE DATE NOT VALID</b>	<p>The service date / time supplied for this item is in the future.</p> <p>Please review the date and time on this claim.</p>
17	<b>SERVICE DATE TOO OLD</b>	<p>The date of service for this item is too far in the past. Some health funds also do not allow claims post the day of service.</p> <p>Please advise the patient to make a manual claim to their health fund.</p>
18	<b>BODY PART IS REQUIRED</b>	<p>The health fund will not approve payment for this item unless you identify the body part to which the item applies.</p> <p>Please review this claim to include the body part service code.</p>
19	<b>PATIENT NOT COVERED</b>	The patient was not covered for this type of service as at the date the service was performed. Advise the patient to check their cover with their health fund.
20	<b>NO DEPENDENT STATUS</b>	The patient is no longer covered as their dependent status on the policy holder ceased as at the date the service was performed. Please advise the patient to check their cover with their health fund.
21	<b>INVALID PATIENT NO</b>	The patient reference number for the patient to whom this service was provided is not correct. Check the patient number on the health fund card. For some fund cards, the first patient on the card is number 0. Review the claim accordingly and re-submit.



<b>22</b>	<b>MEMBERSHP NOT COVERED</b>	The patient's fund membership does not cover the services provided as at the date the service was performed. Advise the patient to check their cover with their health fund.
<b>23</b>	<b>MEMBERSHP CEASED/SUSP</b>	The patient's fund membership has either ceased or been suspended as at the date the service was performed. Please advise the patient to check with their health fund.
<b>24</b>	<b>MEMBERSHP UNFINANCIAL</b>	The patient's health fund membership has not been paid as at the date the service was performed. Please advise the patient to check with their health fund.
<b>25</b>	<b>NO ANCILLARY COVER</b>	The patient did not have ancillary cover as at the date the service was performed. Please advise the patient to check their cover with their health fund.
<b>26</b>	<b>ITEM NOT COVERED</b>	The patient was not covered for this particular item as at the date the service was performed. Please advise the patient to check their cover with their health fund.
<b>27</b>	<b>POSSIBLE DUPLICATE</b>	Review claim. If not a duplicate, please call Tyro Customer Support 1300 966 639.
<b>28</b>	<b>EXCESS APPLIED</b>	No benefit has been paid for this item because an excess applies. Please advise the patient to check with their health fund.
<b>29</b>	<b>EXCESS APPLIED</b>	A reduced benefit has been paid because an excess applies. Please advise the patient to check with their health fund.
<b>30</b>	<b>QUOTATION REQUIRED</b>	No benefit has been paid because a quotation must be supplied to the health fund prior to this item being claimed. Please advise the patient to check with their health fund.
<b>31</b>	<b>QUOTATION REQUIRED</b>	A reduced benefit has been paid because a quotation should be supplied to the health fund prior to this item being claimed. Please advise the patient to check with their health fund.
<b>32</b>	<b>EXCEEDS QUOTATION</b>	No benefit has been paid because the fee for this item exceeds the quotation given. Please advise the patient to check with their health fund.
<b>33</b>	<b>EXCEEDS QUOTATION</b>	A reduced benefit has been paid because the fee for this item exceeds the quotation given. Please advise the patient to check with their health fund.
<b>34</b>	<b>AGE RESTICTION</b>	No benefit has been paid because the health fund applies an age restriction to this item. Please advise the patient to check with their health fund.
<b>35</b>	<b>AGE RESTRICTION</b>	A reduced benefit has been paid because the health fund applies an age restriction to this item. Please advise the patient to check with their health fund.
<b>36</b>	<b>GENDER RESTRICTION</b>	No benefit has been paid because the fund applies a gender restriction to this item. Please advise the patient to check with their health fund.
<b>37</b>	<b>GENDER RESTRICTION</b>	A reduced benefit has been paid because the fund applies a gender restriction to this item. Please advise the patient to

		check with their health fund.
<b>38</b>	<b>INVALID CHARGE</b>	No benefit has been paid because the health fund deems the charge for this item invalid. Please contact the health fund for an explanation
<b>39</b>	<b>NOTIONAL CHARGE</b>	No benefit has been paid. Please contact the health fund for an explanation.
<b>40</b>	<b>CONVERTED ITEM</b>	No benefit has been paid. Please contact the health fund for an explanation.
<b>41</b>	<b>REFER TO FUND</b>	No benefit has been paid. Please contact the health fund for an explanation.
<b>42</b>	<b>SYSTEM PROBLEM</b>	The system is experiencing a problem. Please call Tyro Customer Support 1300 966 639
<b>50</b>	<b>PROVIDER NOT KNOWN</b>	The health fund does not recognise this provider.  Normally indicates an issue with the initial provider registration process. Please call Tyro Customer Support 1300 966 639
<b>51</b>	<b>NOT ALLOWED FOR PROV.</b>	The health fund does not pay benefits when this service is performed by this provider. Please advise the patient to check with their health fund.

## Cancellation or Rejection (Void) Responses

When you attempt to cancel a claim, or when the patient rejects (voids) an assessment, the health fund sends a response, which HealthPoint displays and prints on the receipt.

If the response is not in the following table, please contact the relevant health fund for an explanation.

<b>00</b>	<b>APPROVED</b>	<b>The health fund has approved this cancellation.</b>
<b>21</b>	<b>CONTACT HELP DESK</b>	The system has taken no action. Please contact Tyro Customer Support 1300 966 639
<b>25</b>	<b>UNABLE TO FIND CLAIM</b>	The system cannot find the claim you are trying to cancel. Please contact Tyro Customer Support. 1300 966 639
<b>30</b>	<b>SYSTEM DATA ERROR</b>	Please call Tyro Customer Support 1300 966 639
<b>58</b>	<b>TRANS NOT PERMITTED</b>	This system does not permit this type of transaction. Please call Tyro Customer Support 1300 966 639
<b>76</b>	<b>NOT SAME DAY AS CLAIM</b>	The claim you are attempting to cancel was not created today. You cannot cancel this claim from the practice. Please advise this patient to contact their Health Fund to cancel.
<b>91</b>	<b>SYSTEM BUSY-TRY AGAIN</b>	The system cannot process your cancellation or rejection at the moment. Wait a few seconds and resubmit. Should this condition persist, please call Tyro Customer Support. 1300 966 639
<b>92</b>	<b>SYSTEM UNAVAILABLE</b>	The system is temporarily unavailable. Please call Tyro Customer Support 1300 966 639
<b>93</b>	<b>SYSTEM PROBLEM</b>	The system is experiencing a problem. Please call I Tyro Customer Support 1300 966 639
<b>94</b>	<b>DUPLICATE TRANSACTION</b>	The system is reporting that this transmission has been submitted more than once. Please review claim. If problem continues, please call Tyro Customer Support 1300 966 639

## Appendix B: Optometrist Item Codes

This list has been supplied by the Optometrists Association Australia.

For further information on these item codes please call the **Optometrists Association Australia** on **03 9663 6833**.

Spectacle Frame Design		
110	SPECTACL FRAMES	Spectacle Frames
120	REPL/REPAIR FRAMES	Replacement Part/Repair to Frame
Single Vision Spectacle Lens Items		
211	SV STOCK LENS 1	Single Vision Stock Lens (single)
212	SV STOCK LENS 2	Single Vision Stock Lens (pair)
221	SV SPEC WRK LENS 1	Single Vision Specially Worked Lens (single)
222	SV SPEC WRK LENS 2	Single Vision Specially Worked Lens (pair)
Bifocal Spectacle Lens Items		
311	BIFOCAL LENS 1	Bifocal Lens (Single)
312	BIFOCAL LE NS 2	Bifocal Lens (Pair)
Trifocal Spectacle Lens Items		
411	TRIFOCAL LENS 1	Trifocal Lens (single)
412	TRIFOCAL LENS 2	Trifocal Lens (pair)
Progressive Spectacle Lens Items		
511	PROGRESSIVE LENS 1	Progressive Lens (single)
512	PROGRESSIVE LENS 2	Progressive Lens (pair)
Spectacle Lens Add-On Items continued...		
611	HIGH INDEX MATL 1	High Index Material (single)
612	HIGH INDEX MATL 2	High Index Material (pair)
621	ASPHERIC DESGN 1	Aspheric design (single)
622	ASPHERIC DESGN 2	Aspheric design (pair)
631	LENS TINTING 1	Lens Tinting (single)
632	LENS TINTING 2	Lens Tinting (pair)
643	PHOTOCHROMATIC1	Photochromatic coating (single)
644	PHOTOCHROMATIC2	Photochromatic coating (pair)
651	HARD COATING 1	Hard Coating (single)
652	HARD COATING 2	Hard Coating (pair)
661	MULTICOATING 1	Multi/Anti-reflective Coating (single)
662	MULTICOATING 2	Multi/Anti-reflective Coating (pair)
671	UV COATING 1	UV Coating (single)
672	UV COATING 2	UV Coating (pair)
Low Vision Aid Items		
710	LOW VISION AIDS	Low Vision Aids
Contact Lens Items		
811	RGP SPHERIC 1	RGP contact lens (spherical) (single)
812	RGP SPHERIC 2	RGP contact lens (spherical) (pair)
821	RGP TORIC 1	RGP contact lens (toric) (single)
822	RGP TORIC 2	RGP contact lens (toric) (pair)
831	CONV SPHERIC 1	Conventional soft contact lens (spherical) (single)
832	CONV SPHERIC 2	Conventional soft contact lens (spherical) (pair)
841	CONV TORIC 1	Conventional soft contact lens (toric) (single)
842	CONV TORIC 2	Conventional soft contact lens (toric) (pair)

851	DISOSBL SPHERIC 1	Disposable contact lens supply (spherical) 3 months or less (single)
852	DISPOSBL SPHER 2	Disposable contact lens supply (spherical) 3 months or less (pair)
853	DISPOSBL TORIC 1	Disposable contact lens supply (Toric) 3 months or less (Single)
854	DISPOSBL TORIC 2	Disposable contact lens supply (Toric) 3 months or less (pair)
861	BIFOCAL CONTACT 1	Bifocal Contact Lens (single)
862	BIFOCAL CONTACT 2	Bifocal Contact Lens (pair)
871	OTHER CONTACT 1	Other Contact Lens (single)
872	OTHER CONTACT 2	Other Contact Lens (pair)
873	ORTHOK CONTACT 1	Orthokeratology Contact Lenses (single)
874	ORTHOK CONTACT 2	Orthokeratology Contact Lenses (pair)

## Appendix C: Physiotherapy Item Codes

For further information regarding the use of these codes, please contact your **Association**.

APA update 01/04/2015

Physiotherapy Practice		
500	ASSMENT COSULT	Assessment consultation
505	SUB CONSULT	Subsequent consultation
506	LONG CONS 2A	Long subsequent consultation (2 Areas)
Hospital		
520	ASSMENT CONS HOS	Assessment consultation
525	SUB CONS HOS	Subsequent Consultation
526	LONG CONS 2A	Long subsequent consultation (2 Areas)
Home		
530	ASSMENT CONS HOM	Assessment consultation
535	SUB CONSULT HOM	Subsequent Consultation
536	LONG HOM CONS 2A	Long subsequent consultation (2 Areas)
Other		
560	GROUP CONS	Group consultation
561	CLASS CONS	Class consultation
570	LYMPHOEDEMA	Lymphoedema
582	NEURO REHAB	Neurological rehabilitation
591	CUSTOM ORTHO/UL	Custom made orthosis (upper limb) consultation
592	CUSTOM ORTHO/UL	Custom made orthosis (lower limb) consultation
593	PELVIC FLR PHYS	Pelvic floor physiotherapy
595	ANTENATAL CLASS	Antenatal exercise class consultation
596	POSTNATAL CLASS	Postnatal exercise class consultation

## Appendix D: Chiropractic Item Codes

For further information regarding the use of these codes, please contact your **Association**.

Consultations		
1001	INITIAL CONSULT	Initial Consultation
1002	INIT CONS/TREATMT	Initial consultation and treatment
1003	INITIAL CON A/H	Initial consultation - after hours
1004	CONSULT RE-EXAM	Consultation re-examination and treatment
1005	STD CONSULT 15M	Standard consultation up to 15 mins
1006	LONG CONS 15-30M	Long consultation 15-30 mins
1007	STD CONSUL A/H	Standard consultation - after hours
1008	LONG CONS A/H	Long consultation - after hours
Radiology		
1100	1 EXTRA VIEW	One extra view
1101	2 EXTRA VIEWS	Two extra views
1102	3 EXTRA VIEWS	Three extra views
1103	4 EXTRA VIEWS	Four extra views
1104	CERV SP 2 VIEWS	Cervical spine-ap and lateral 2 views
1105	CERV SP 3-4 VIEWS	Cervical spine 3-4 views
1106	CERV SP 5-6 VIEWS	Cervical spine 5-6 views
1107	THORACIC SPINE	Thoracic spine-ap and lateral
1108	THORAC AP 2 LATS	Thoracic spine-ap and 2 laterals
1109	LUMBAR AP LAT 2 VW	Lumbar spine-ap and lateral 2 views
1110	LUMBOSACRAL 3-4 V	Lumbo-sacral spine 3-4 views
1111	LUMBOSACRAL 5-6 V	Lumbo-sacral spine 5-6 views
1112	FULL SPINE POST	Full spine (postural)
1113	SPINE X VIEWS	Full spine (multiple views)
1114	PELVIS POSTURAL	Pelvis-postural
1115	PELV SACRO-ILIAC	Pelvis and sacro-iliac joints 3 views
1116	SACRUM SACRO-ILIAC	Sacrum and sacro-iliac joints 3-4 views
1117	SACRUM/COCCYX 2 V	Sacrum and coccyx 2 views
1118	CLAVICLE 2 VIEWS	Clavicle 2 views
1119	SCAPULA 2 VIEWS	Scapula 2 views
1120	SHOULDER 2 VIEWS	Shoulder 2 views
1121	SHOULDER 4 VIEWS	Shoulder 4 views
1122	ACROMIOCLAVICULAR2	Acromioclavicular joints 2 views
1123	HUMERUS 2 VIEWS	Humerus 2 views
1124	HUMERUS 2 VW 1 JNT	Humerus 2 views of one joint
1125	ELBOW 2 VIEWS	Elbow 2 views
1126	ELBOW 4 VIEWS	Elbow 4 views
1127	RADIUS/ULNA 2 VW	Radius and ulna 2 views
1128	RADIUS/ULNA 2V 1J	Radius and ulna 2 views + 2 view 1 joint
1129	WRIST 2 VIEWS	Wrist 2 views
1130	WRIST 4 VIEWS	Wrist 4 views
1131	HAND/FINGERS 2 VW	Hand and fingers 2 views
1132	FINGERS 2 VIEWS	Fingers 2 views
1133	HIP 2 VIEWS	Hip 2 views
1134	HIP 3 V INCL PELVIS	Hip 3 views including pelvis

1135	FEMUR 2 VIEWS	Femur 2 views
1136	FEMUR 2 VIEWS 1 JNT	Femur 2 views + 2 views 1 joint
1137	KNEE 2 VIEWS	Knee-2 views
1138	KNEE 4 VIEWS	Knee-4 views
1139	TIBIA/FIBULA 2 VW	Tibia and fibula 2 views
1140	TIBIA/FIBULA 2 V 1 J	Tibia and fibula 2 view + 2 view 1 joint
1141	ANKLE 2 VIEWS	Ankle 2 views
1142	ANKLE 4 VIEWS	Ankle 4 views
1143	FOOT/TOES 2 VIEWS	Foot and toes 2 views
1144	TOES 2 VIEWS	Toes 2 views
1145	CHEST 2 VIEWS	Chest 2 views
1146	SKULL 3 VIEWS	Skull 3 views
1147	INTERPRET XRAYS	Interpretation of X-rays
1148	LAB PROCED - URINE	Laboratory procedures - urine
1149	SPECIAL SERVICE	Special services
1150	MEDICAL REPORT	Reports and narrative
1151	XRAY	X-ray
1152	VIEWS 1AREA	Functional views of one area
<b>Specialist Chiropractic Radiology</b>		
1201	FULL INTERPRET	Full interpretation
<b>Chiropractic Concessional Services</b>		
1303	STD CONS CS	Standard consultation and treatment
1304	LONG CONS CS	Long consultation and treatment
<b>Medico-Legal Examinations</b>		
1401	EXAMTN 30MIN	Examination up to 30 mins duration
1402	EXAMTN 30-45MIN	Examination 30-45 mins
1403	EXAMTN 45-60MIN	Examination 45-60 mins
1404	MED REPORT ORAL	Medico/legal reports (telephone/oral)
1405	MED REP COMPREHS	Medico/legal reports (comprehensive)
1406	MED REP TRANSCRIPT	Medico/legal reports - transcript
1407	CONSULTATIVE WORK	Consultative work
1408	WORKSITE ASSESSMT	Worksite assessment
<b>Chiropractic Care</b>		
1501	CHIRO CARE 15MIN	Chiropractic care up to 15 mins
1502	CHIRO CARE 30MIN	Chiropractic care 16-30 mins
1503	CHIRO CARE 30+MIN	Chiropractic care in excess of 30 mins
1504	CHIRO CARE A/H 15M	Chiropractic care up to 15 mins - after hours
1505	CHIRO CARE A/H 30M	Chiropractic care 16-30 mins - after hours
1506	CHIRO CARE A/H 30+	Chiropractic care in excess of 30 mins - after hours
<b>Reassessment</b>		
1601	REASSESS 15MIN	Reassessment up to 15 mins
1602	REASSESS 30MIN	Reassessment 16-30 mins
1603	REASSESS 30+MIN	Reassessment in excess of 30 mins
1604	REASSESS A/H 15M	Reassessment up to 15 mins - after hours
1605	REASSESS A/H 30M	Reassessment 16-30 mins - after hours
<b>Report Writing</b>		
1701	MEDREPT BRIEF	Substantive report
1702	MEDREPT COMPREHS	Long consultation and treatment
<b>Osteopathic Service</b>		
1801	CONSULT/TREATMT	Consultation/treatment and supportive therapy
1802	STD CONSULT	Consultation/treatment and additional supportive therapy
1803	LONG CONSULT	Consultation/treatment and extended supportive therapy



1804	INITIAL CONSULT	Initial consultation examination treatment
Supportive Therapy		
1901	SHORT MASSAGE	Up to 30 mins therapeutic massage
1902	LONG MASSAGE	Up to 60 mins therapeutic massage
1903	NUTRITIONL SUPPORT	Nutritional support
1904	ORTHOTIC APPLIANCS	Orthotic appliances

## Appendix E: Dental Item Codes

This list has been supplied by the Australian Dental Association. For more specific information

on any of the items listed, consult An Australian Glossary of Dental Terms published by the **Australian Dental Association Incorporated**, or phone the **Australian Dental Association** on **(02) 9906 4412**.

Item	Abbreviated Description	Full Description
051	BIOPSY OF TISSUE	Biopsy of tissue
*052	HISTOPATHOLGL EXAM	Histopathological examination of tissue
*053	CYTOLOGICAL EXAM	Cytological examination
*055	BLOOD SAMPLE	Blood sample
*056	HAEMATOLOGCL EXAM	Haematological examination
*061	PULP VITALITY TEST	Pulp vitality testing - per visit
071	DIAGNOSTIC CAST	Diagnostic cast
072	PHOTO RECORD INTRA	Photographic records - intraoral
073	PHOTO RECORD EXTRA	Photographic records - extraoral
081	CEPHALO ANALYSIS	Cephalometric analysis - excluding radiographs
082	TOOTH-JAW SIZE	Tooth-jaw size prediction analysis
086	ELECTROMYOGRAPHICs	Electromyographic analysis
111	REMOVAL OF PLAQUE	Removal of plaque
113	RECONTOURING	Recontouring existing restoration
114	REMLV CALC/PLAQ 1	Removal of supra and subgingival calculus and plaque – first visit
115	REMLV CALC/PLAQ 2	Removal of supra and subgingival calculus and plaque – subsequent visit
116	ENAMEL	Enamel micro - abrasion – per tooth
117	BLEACH	Bleaching, internal - per tooth
118	BLEACH	Bleaching, external - per tooth
119	SELF APPLY BLEACH	Bleaching, home application - per arch
121	TOPICAL FLUORIDE	Topical application of fluoride, one treatment
122	SELF APPLY FLUORIDE	Self-application of topical fluoride – supervised
*131	DIETARY ADVICE	Dietary advice where appropriate time is allocated
141	SEL ORAL HYGIENE	Oral hygiene instruction where appropriate time is allocated
151	MOUTHGUARD MODEL	Provision of a mouthguard requiring construction of a model
153	BIMAX MOUTHGUARD	Bimaxillary mouthguard constructed on models
161	FISSURE SEALING	Fissure sealing - per tooth
165	DESENSITISING	Application of desensitising agent - per visit
171	ODONTOPLASTY	Odontoplasty - per tooth
182	CONCENTRT FLUORIDE	Concentrated fluoride, prolonged application (wafer) technique - per tooth
213	ACUTE PERIODONTAL	Treatment of acute periodontal infection
221	PERIODNTL ANALYSIS	Clinical periodontal analysis and recording
222	ROOT PLANING	Root planning and subgingival curettage per segment of eight teeth or less
225	NON-SURGICAL PERIO	Non-surgical periodontal treatment where not otherwise specified - per visit
231	GINGIVECTOMY	Gingivectomy, per segment of eight teeth or less
232	PERIODNTL FLAP SUR	Periodontal flap surgery, per segment of eight teeth or less
233	OSSEOUS SURGERY	Osseous surgery, per segment of eight teeth or less
Items Continued..		
* 234	OSSEOUS GRAFT	Osseous graft
235	GINGIVAL GRAFT	Gingival graft

236	TISSUE REGENERATN	Guided tissue regeneration - per tooth or implant
237	TISSUE REGENERATN	Guided tissue regeneration - membrane removal
238	PERIODNTL FLAP SUR	Periodontal flap surgery for crown lengthening - per tooth
241	ROOT RESECTION	Root resection - per root
245	PERIODNTL SURGERY	Periodontal surgery involving one tooth
281	COURSE NONSUR PERIO	Course of non-surgical periodontal treatment
282	CONTINUATION PERIO	Continuation of periodontal treatment of maintenance subsequent to item 281 Extractions
311	REM PERMENANT TOOTH	Removal of permanent tooth or part(s) thereof
314	REM SECTIONAL	Sectional removal of a tooth
321	REM ERUPTED TOOTH	Surgical removal of erupted tooth
322	REM UNERUPTED 1	Surgical removal of unerupted or partly erupted tooth, not requiring removal of bone OR TOOTH DIVISION
323	REM UNERUPTED 2	Surgical removal of unerupted or partly erupted tooth, requiring removal of bone or tooth division
324	REM UNERUPTED 3	Surgical removal of unerupted or partly erupted tooth, requiring both removal of bone and tooth division or of unerupted tooth completely covered by bone
325	SURGICAL REM TOOTH	Surgical removal of tooth fragment, involving soft tissue only
326	SURGICAL REM TOOTH	Surgical removal of tooth fragment, involving bone
331	ALVEOLECTOMY	Alveolectomy, per segment of eight teeth or less
332	OSTECTOMY	Ostectomy - per jaw
*337	RED FIBROUS TUBERO	Reduction of fibrous tuberosity
*338	RED FLABBY RIDGE	Reduction of flabby ridge, per separate segment
*341	REM FIBROUS HYPER	Removal of fibrous hyperplasia
*343	REPOS MUSCLE ATTCH	Repositioning of muscle attachment
*344	VESTIBULOPLASTY	Vestibuloplasty
*345	VESTIBLPLSTY SKIN	Vestibuloplasty with skin or mucosal graft
*351	REP/SUBCUT TISS	Repair of skin and subcutaneous tissue or mucous membrane
*352	FRAC MAX-NO SPLINT	Fracture of maxilla - not requiring splinting
*353	FRAC MAX-WIRING	Fracture of maxilla - with wiring of teeth or internal fixation
*354	FRAC MAX-EXTN FIX	Fracture of maxilla - with external fixation
*355	FRACTURE OF ZYGOMA	Fracture of zygoma
*359	FRAC OPEN REDUCTN	Fracture requiring open reduction
363	DISLOCATN OPEN OP	Dislocation requiring open operation
366	OSTEOTOMY MANDIBLE	Osteomy - mandible
*373	REM TUMOUR MUSC	Tumour, cyst or scar, removal of, involving muscle, bone
*375	SURG SALIVARY DUCT	Surgery to salivary ducts
*376	SURG SALIVARY GLND	Surgery to salivary gland
*377	REM/REP SOFT TSSUE	Removal or repair of soft tissue (not elsewhere defined)
*378	SURG REM FORGN BDY	Surgical removal of foreign body
*388	TRANSPLANT TOOTH	Transplantation of tooth or tooth bud
*389	TREATMENT OF CYST	Conservative treatment of a cyst including irrigation and insertion of a tube
391	FRENECTOMY	Frenectomy
392	DRAINAGE OF ABCESS	Incision and drainage of abscess or cyst
*393	SURG MAXIL ANTRUM	Surgery involving maxillary antrum
*394	OSTEOMYELITIS	Surgery for osteomyelitis
*395	SUTURE NERVE TRUNK	Suture of nerve trunk
Items Continued..		
*396	ORTHOPAEDIC SURGRY	Orthopaedic
*397	PLASTIC/RECON SURG	Plastic and reconstructive - not included elsewhere
398	MINOR SOFT TISSUE	Minor soft tissue surgery (specify)
399	INSERTION SUTURE	Insertion of suture where not an integral part of any other item Endodontic Services - Pulp Treatments
411	DIRECT PULP CAPPNG	Direct pulp capping

414	PULPOTOMY PERMNNT	Pulpotomy - permanent
415	ROOT CANAL PREP	Extirpation of pulp or debridement of root canal- one canal
416	ROOT CANAL ADDL	Extirpation of pulp or debridement of root canal- each additional canal
417	ROOT CANAL OBTURAT	Root canal obturation - one canal
418	OBTURATION ADDL	Root canal obturation - each additional canal
419	EXTIRPATION PULPRT	
*421	PULP/RC FILL DECI	
431	ENDO-PERIAP CURETT	Periapical curettage
432	ENDO-APICECTOMY/RT	Apicectomy one root (including where applicable periapical curettage)
434	ENDO RETROGRD FILL	Retrograde root filling one root (including where applicable periapical curettage)
436	ENDO SEAL PERFORAT	Sealing of perforation
*437	ENDO EXT ROOT RESO	Treatment of external root resorption and repair
438	HEMISECTION	Hemisectionc
445	EXPLORE CANAL	Exploration for a canal in a calcified root
451	REM ROOT FILLING	Removal of root filling, per canal
452	REM POST/POST CRWN	Removal of post or post crown
453	REM FRAC INSTRUMNT	Removal or bypassing fractured endodontic instrument
455	IRRIGATE/DRESS CNL	Additional visit for irrigation and/or dressing of the root canal system
*457	OBTURATE DFCT/PERF	Obturation of resorption defect or perforation (nonsurgical)
458	INTERIM ROOT FILL	Interim therapeutic root filling rative
511	AMALGAM 1 PERM	Amalgam restoration - one surface - permanent tooth
512	AMALGAM 2 PERM	Amalgam restoration - two surfaces - permanent tooth
513	AMALGAM 3+ PERM	Amalgam restoration - three or more surfaces – permanent tooth
529	ADH REST CERVICAL	Adhesive restoration of non-cariou cervical lesion (glass ionomer or composite resin)
531	COMP RESIN 1 POST	Composite resin restoration - one surface - posterior tooth
532	COMP RESIN 2 POST	Composite resin restoration - two surfaces – posterior tooth
533	COMP RESIN 3+ POST	Composite resin restoration - three or more surfaces - posterior tooth
537	COMP RESIN 1 ANT	Composite resin restoration one surface - anterior tooth
538	COMP RESIN 2 ANT	Composite resin restoration - two surfaces - anterior tooth
539	COMP RESIN 3+ ANT	Composite resin restoration - three or more surfaces - anterior tooth
*554	GOLD IN/ONLAY 1 IN	Gold inlay/onlay - one surface - indirect
555	GOLD IN/ONLAY 2 IN	Gold inlay/onlay - two surfaces - indirect
556	GOLD IN/ONLAY 3+IN	Gold inlay/onlay - three or more surfaces - indirect
*567	PORCELN IN/ONLAY 1	Porcelain or cast ceramic inlay/onlay - one surface
568	PORCELN IN/ONLAY 2	Porcelain or cast ceramic inlay/onlay - two surface
569	PORCELN IN/ONLAY 3+	Porcelain or cast ceramic inlay/onlay - three or more surfaces
572	TEMPORARY FILLING	Temporary restoration (where not an intrinsic part of another service)
573	TEMPORARY CROWN	Temporary crown (where not an intrinsic part of another service)
574	TEMP FILL MET BAND	Temporary restoration using metal band
575	PIN RETENTION	Pin retention - per unit pin
576	S/STEEL CROWN	Stainless steel crown
577	CUSP CAPPING	Cusp capping - per cusp
Items Continued..		
579	TEMPORARY BRIDGE	Temporary bridge
582	ENAMEL BONDED COMP	Enamel bonded composite resin facing (not covered by item 581, 537, 538 or 539)
583	PORCELAIN LAMINATE	Porcelain laminate veneer facing
595	REMOVAL INLAY/ONLAY	Removal of a currently cemented permanent inlay/onlay
596	RECEMENT INLAY/ONLAY	Reinserting a previously cemented inlay/onlay
597	POST CAST/WROUGHT	Post - cast, wrought or preformed
598	COMPLX CORONL AMAL	Complex coronal reconstruction in amalgam
599	COMPLX CORONL RESN	Complex coronal reconstruction in composite resin - direct

613	PORCL JACKET CROWN	Porcelain jacket crown
615	PORCL FUSED GOLD	Porcelain fused to gold jacket crown
615	PORCL FUSED GOLD	Porcelain fused to gold jacket crown
618	CAST GOLD CROWN	Cast gold crown
620	3 QTR CAST GOLD	Three-quarter cast gold crown
625	CAST CORE - CROWN	Cast core for crown including post
627	AMLGM CORE - CROWN	Amalgam core for crown
629	CAST POST+ROOT CAP	Cast post and root cap
642	BRIDGE PER PONTIC	Bridge pontic - per pontic
643	BRIDGE PORC/GOLD	Bridge pontic - porcelain or porcelain fused to gold - per pontic
*644	STRESS BREAKER	Intra-coronal stress breaker
*645	INTRA-CORON ATTACH	Intra-coronal precision or magnetic attachment
*649	ABUTMENT/SPLINT	Enamel bonded bridge abutment or splint preparation per unit -
651	RECEMENTING CROWN	Recementing crown

## Appendix F: Occupational Therapist Item Codes

For further information regarding the use of these codes, please contact your **Association**.

Item	Abbreviated Description	Full Description
100	INITIAL CONSULT	Initial Individual Assessment/Treatment
200	CONSULT-TREATMT	Individual Assessment/Treatment - Subsequent to Initial
300	GROUP ASSESSMENT	Group Assessment/Treatment

If you include the condition code, the health fund may store the information in the member's file

INDICATOR PRIMARY CONDITION	
Indicator	Diagnostic Intervention
1	Cognition – Disorders of intellectual/cognitive skills which are acquired or developmental in origin. Note: Excludes issues relating to content of thought or ideation such as cognitive beliefs or delusions.
2	Behaviour Issues – Disorders where the focus is on misconduct, overt behaviours and a-typical responses whether of acquired, developmental or affective origin. Note: Difficult to ascribe at time because “behaviour” is common to all disorders, but this is where the behaviour issue is primary
3	Adjustment – Disorders where the focus is on the individual’s inability to manage life events or changed circumstances.
4	Head and Trunk Control – Motor, neuromuscular, perceptual and sensory FCTs that enable the FCTs of head control, sitting and rolling.
5	Upper Limb FCT – Neuromuscular, musculoskeletal and perceptual FCTs that enable the FCTs of the upper limb (including reaching, grasping, releasing and manipulation).
6	Lower Limb FCT – Neuromuscular, musculoskeletal and perceptual FCTs that enable the FCTs of the lower limb (including standing and gait).
7	Neuropathic Pain – Pain which is primarily neuropathic in origin. Note: Pain associated with other dysFCT is not included
8	Respiratory FCT – Issues relating to optimal ventilation and gas exchange and improved exercise capacity.
9	Cardiovascular FCT – Maintaining or enhancing exercise tolerance.

DIAGNOSTIC INTERVENTIONS	
Indicator	Diagnostic Intervention
0	Interventions involving assessment, education or skills training for personal care and other activities of daily/independent living.
1	Interventions involving psycho-behavioural, psychosocial, cognitive or perceptual assessment, skills training or education.
2	Interventions involving an assistive or adaptive device, aid or equipment.
3	Interventions involving skills training in relation to learning, knowledge and cognition.
4	Interventions involving skills training in movement and body system FCTs.
5	Therapies using electro-physical agents.
6	Therapeutic interventions on musculo-skeletal system.
7	Interventions involving case management and liaison with family or other professionals.
8	Interventions involving vocational or occupational rehabilitation.
9	Specialised assessment

## Appendix G: Podiatrist Item Codes

For further information regarding the use of these codes, please contact your **Association**.

General Podiatric Services		
Consultations – New Patient		
Item	Abbreviated Description	Full Description
001	INIT CONS BRIEF	Brief Service (20 minutes)
002	INIT CONS INTRMD	Intermediate Service (30 minutes)
004	INIT CONS COMP	Comprehensive Service (45 minutes)
Consultations – Established Patient		
010	BRIEF CONSULT	Brief Service (10 minutes)
012	INTRMD CONSULT	Intermediate Service (20 minutes)
014	COMP CONSULT	Comprehensive Service (30 minutes)
Podiatric Diagnostic Services		
Vascular Studies		
101	REG PLETHYSMOGRAPH	Plethysmography, regional
104	PERIPHERAL FLOW	Peripheral Flow Study(including Doppler)
Biomechanical Examination		
111	MUSCLE TESTING	Muscle Testing
114	MOTION STUDY	Range of motion study and measurements
115	GAIT ANLYSIS COMPT	Computerised gait analysis
116	GAIT ANLYSIS VIDEO	Treadmill and Video gait analysis
117	GAIT ANLYSIS VISUAL	Visual gait analysis
118	BIOMECH ASSESSMT	Biomechanical Assessment (includes 111, 114, 117)
Other		
163	RADIOL ASSESSMT	Radiological Interpretation and discussion
Physical Therapy		
121	HOT/COLD THERAPY	Hot / Cold Therapy
141	EXERCISE	Therapeutic exercises / Stretching
142	NEUROMSCLR REEDUC	Neuromuscular re-education
145	ELECTRO THERAPY	Electrophysical therapy
147	MANIP MOBILIS	Manipulation / Mobilisation
148	MASSAGE	Massage
361	STRAP-TAPE	Strapping / Taping
Orthomechanical Services and Procedures		
Impressions and Modules		
301	FOOT NEG CAST	Negative cast / impression of the foot
302	FOOT POS CAST	Positive cast / model of the foot
303	FOOT-LEG NEG CAST	Negative cast / impression of the foot and leg
305	FOOT-LEG POS CAST	Positive cast / model of the foot and leg
Prescription Orthoses		
201	ANKLE FOOT ORTHOSIS	Ankle-Foot Orthosis
211	ORTHODIGITAL TRACT	Orthodigital traction device
221	ORTHOTIC	Custom Kinetic Orthosis (FCTal Foot Orthosis)
227	HEEL STABILISER	Heel stabiliser, made to plaster model
261	CUSHION ORTHOSIS	Cushioning Orthosis
263	PRESSURE ORTHOSIS	Pressure Relief Orthosis
265	MOULDCST ORTHOSIS	Moulded Cast Orthosis
267	THERMOPLAST ORTH	Moulded Non-cast Orthosis

269	HEEL LIFT	Heel lift
271	SHOE PADDING	Interior shoe padding
341	PROTECTIVE DEVICE	Protective device
<b>Orthoses Modification Repairs</b>		
231	ORTHOTIC	Orthosis repair
233	ORTHOSIS MOD	Orthosis post-FCTal, forefoot or rearfoot
381	ORTHOSIS PLN	Orthosis cover - plain
383	ORTHOSIS SUP	Orthosis cover - with soft tissue supplement
385	ORTHOSIS POST	Orthosis Post, extrinsic - forefoot or rearfoot
<b>Prosthetic Devices</b>		
351	PROSTHESIS	Digital or partial foot prosthesis
<b>Splints</b>		
281	BROWNE SPLINT	Dennis Browne splint
281	BROWNE SPLINT	Dennis Browne splint
282	GANLEY SPLINT	Ganley splint
283	COUNTER ROTAT SYS	Counter Rotation system
284	SHOE CORRECT INFT	Correction shoe - infant foot deformity
311	SPLINT BELOW KNEE	Immobilisation splint; below knee
312	SPLINT ANKLE-FOOT	Immobilisation splint; ankle / foot
315	SPLINT ABOVE KNEE	Immobilisation splint; above knee
331	TRACTION DEVICE	Traction and Training devices
<b>Footwear</b>		
244	EXT FOOTWR MOD	Footwear modification - external
605	CUSTOM FOOTWEAR	Custom Footwear
618	NONCUSTOM FOOTWEAR	Depth Width Footwear, non-custom
<b>Podiatric Surgery</b>		
429	F-B REMOV SUBCT	Foreign body removal (subcutaneous)
440	AVULSION	Avulsion of toenail
445	EXCISION	Excision, benign lesion
541	LESION CAUTERY	Cautery of lesion or verrucae
546	NAIL PART	Partial nail root & matrix resection & sterilisation
547	NAIL RESECT TOTAL	Total nail root & matrix resection & sterilisation
561	INCISION ABCESS	Incision of soft tissue abscess (superficial)
<b>Other Procedures</b>		
401	SPECIMEN COLLECT	Laboratory Specimen Collection
404	EXT TELE CONSULT	Extended telephone consultation
405	AFTER HRS CONSULT	Consultation outside normal practice hours
411	MED-SURG SUPPLIES	Medical / surgical supplies (eg: dressings)
412	WRITTEN REPORT	Written podiatric report
414	POSTOP EQUIPMENT	Post-operative equipment
985	UNLISTED SERVICE	Unlisted podiatry service or procedure



## Appendix H: Psychologist Item Codes

For further information regarding the use of these codes, please contact your **Association**.

### TYPE OF INTERVENTION

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
100	INDIVIDUAL ASSESS	Individual Assessment
200	INDIVIDUAL TRMT	Individual Treatment/Management
300	COUPLE/FAMILY TRMT	Couple or Family Therapy
400	GROUP TREATMENT	Group Treatment

### PRIMARY CONDITION

INDICATOR	PRIMARY CONDITION
10	Cognition
20	Relationships
30	Behavioural Issues - Conduct
40	Behavioural Issues – Thought / Perception Disturbance
50	Adjustment
60	Affect
70	Other Psychosocial Factors not otherwise specified

## Appendix I: Dietitians Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
500	INDIVIDUAL INITIAL	Individual Initial consultation
600	INDIVIDUAL REVIEW	Review individual consultation
700	GROUP CONS	Group consultation
800	OUT OF ROOMS	Home/Out of rooms consultation

## Appendix J: Speech Pathologists Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
310	INITIAL TO 45 MINS	Initial Individual consultation/assessment up to 45 minutes
320	INITIAL 46 - 90 MINS	Initial individual consultation/assessment 46 - 90 minutes
330	INITIAL OVER 90 MINS	Initial individual consultation/assessment over 90 minutes
340	SUBS TO 45 MINS	Subsequent individual consultation/assessment/treatment up to 45 minutes
350	SUBS 46 TO 90 MINS	Subsequent individual consultation/assessment/treatment up to 46 - 90 minutes
360	SUBS OVER 90 MINS	Subsequent individual consultation/assessment/treatment over 90 minutes
370	GROUP TO 45	Group treatment up to 45 minutes
380	GROUP 46 - 90 MINS	Group treatment 46 - 90 minutes
390	GROUP OVER 90 MINS	Group treatment over 90 minutes

## Appendix K: Naturopaths Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
107	INITIAL CONS	Initial Consultation
207	STANDARD CONS	Standard consultation
307	MEDICAMENTS	Medicaments

## Appendix L: Acupuncturists Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
103	INITIAL CONS	Initial consultation
203	STANDARD CONS	Standard consultation
Chinese Herbal Medicine		
303	INITIAL CONS	Initial consultation
403	STANDARD CONS	Standard consultation
503	MEDICAMENTS	Medicaments

## Appendix M: Remedial Massage Therapist Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
105	INITIAL CONS	Initial consultation
205	STANDARD CONS	Standard consultation

## Appendix N: Osteopath Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
1801	CONSULT/TREATMT	Consultation/treatment and supportive therapy
1802	STD CONSULT	Consultation/treatment and additional supportive therapy
1803	LONG CONSULT	Consultation/treatment and extended supportive therapy
1804	INITIAL CONSULT	Initial consultation examination treatment

## Appendix O: Exercise Physiology Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
102	INITIAL SESSION	Once only per course of treatment >45 min
202	STANDARD CONS	Standard consultation - 30-60 min
302	EXTENDED CONS	Extended consultation - >60 min
402	STD CONSULT TRAVEL	Standard consultation requiring travel (i.e home visit)



## Appendix P: Myotherapy Item Codes

For further information regarding the use of these codes, please contact your **Association**.

ITEM	ABBREVIATED DESCRIPTION	FULL DESCRIPTION
105	INITIAL SESSION	Initial consultation
205	STANDARD CONS	Standard consultation