

Abdominal pain			
Patients with abdominal pain, who are haemodynamically stable and can be safely managed in the community			
IV Medication	\$87.00	Package of care	Cannot be claimed with any other invoice on the same day. Includes consult time and any consumables
Rehydration	\$158.00	Package of care	Cannot be claimed with any other invoice on the same day. Includes consult time and any consumables
GP/NP/CP Follow-up Consult	\$79.00	One only	Follow up consultation for management post ultrasound result
RN Follow-up consult	\$39.00		
Abdominal Ultrasound to support management and avoid acute admission			
Eligibility criteria broadened, can claim IV medication and rehydration, can no longer claim extended consult			
Asthma			
Patients with moderate asthma exacerbation that can be safely managed in the community			
Practice observations	\$1 /min	Maximum 2 hours	Practice observations can only be claimed at the time of the initial consult
GP/NP/CP Follow-up Consult	\$79.00	One only	Limited to one per episode of care within 3 days of the initial consult
RN Follow-up consult	\$39.00		
Can now claim follow up consult			
Cellulitis			
Adult >= 15 years with moderate cellulitis that can be safely managed in the community			
IV Cellulitis	\$87.00	Three only *	* extra IV antibiotic doses can be claimed if approved by secondary care - this must be documented
Oral Cellulitis (In person)	\$79.00	Three only *	
No change			
Cellulitis (ACC)			
Adult >= 15 years with moderate cellulitis (ACC funded) that can be safely managed in the community			
ACC - IV Cellulitis	\$47.00	Two only	Cannot be claimed for the first dose of IV antibiotics
ACC - Oral Cellulitis (In person)	\$39.00	Two only	Cannot be claimed for the first dose of oral antibiotics
Can now claim for ACC cellulitis			
Acute ECG			
The diagnosis is unclear, but the patient would otherwise be sent acutely to hospital for ECG. This funding does not cover the cost of a routine ECG			
ECG	\$63.00	Package of care	Includes consult time and any consumables
GP/NP/CP Follow-up Consult	\$79.00	One only	Follow up consultation for management post ECG
RN Follow-up consult	\$39.00		
Can now claim follow up consult			
COPD			
Patients with an acute or sub-acute COPD exacerbation that can be safely managed in the community			
GP/NP/CP Extended consult	\$79.00	Maximum 2	At the time of acute presentation to a maximum of 30 minutes
GP/NP/CP Follow-up Consult	\$79.00	One only	Follow up consultation for management post CXR result
RN Follow-up consult	\$39.00		
CXR to support management and avoid acute admission			
Pathway now COPD only not COPD/Pneumonia			
DVT			
Suspected DVT with a Wells Score of >= 2 or a positive D-dimer : Superficial venous thrombosis : Management of a pregnant women with a clinical suspicion of DVT must be discussed immediately with relevant hospital specialist (and documented)			
GP/NP/CP Follow-up Consult	\$79.00	One only	Follow up consultation following ultrasound
DVT Prophylactic Enoxaparin	\$79.00		Administration of enoxaparin where oral treatment is unsuitable
Ultrasound			
No change			
DVT (ACC)			
ACC related: Suspected DVT with a Wells Score of >= 2 or a positive D-dimer : Superficial venous thrombosis : Management of a pregnant women with a clinical suspicion of DVT must be discussed immediately with relevant hospital specialist (and documented)			
ACC GP/NP/CP Follow-up Consult	\$49.00	One only	Follow up consultation following ultrasound
ACC DVT Prophylactic Enoxaparin	\$39.00		Administration of enoxaparin where oral treatment is unsuitable
Ultrasound			
Can now claim for ACC DVT			
Dehydration			
Adults with moderate dehydration not responsive to oral fluids +/- antiemetic that can be safely managed in the community			
Children aged between 6 months and 15 years with moderate dehydration or at risk of getting severely dehydrated, that can be managed safely in the community			
Rehydration	\$158.00	Package of care	IV rehydration only in adults, oral rehydration only in children Cannot be claimed with any other invoice on the same day. Includes consult time and any consumables
No change			
Renal/Urological			
Patients with acute urological problems that can be managed safely in the community e.g.			
• Acute indwelling catheter insertion for patient in acute urinary retention in the absence of red flags i.e. acute trauma – straddle injury/fractured pelvis, perineal haematoma			
• Blocked catheter, which cannot be unblocked by flushing			
• Uncomplicated pyelonephritis			
• Renal colic with no red flags i.e. AAA, temperature >38, pyelonephritis, peritonitis, biliary colic, testicular torsion, ovarian torsion, ectopic pregnancy			
Acute catheter insertion	\$147.00	Package of care	Cannot be claimed with any other invoice on the same day. Includes consult time and any consumables
IV Medication	\$87.00	Package of care	Cannot be claimed with any other invoice on the same day. Includes consult time and any consumables
Rehydration	\$158.00	Package of care	IV rehydration only in adults, oral rehydration only in children Cannot be claimed with any other invoice on the same day. Includes consult time and any consumables
GP/NP/CP Follow-up Consult	\$79.00	One only	Follow up consultation for management post ultrasound result
RN Follow-up consult	\$39.00		
Renal ultrasound: to support management and avoid acute admission where CT is not available or appropriate			
Can claim rehydration, can no longer claim practice obs			
Pneumonia			
Adults with suspected pneumonia that can be managed safely in primary care – moderate pneumonia (CRB65 score 1 or 2 – see below) with no other co-morbidities : Children with pneumonia that can be safely managed in the community			
GP/NP/CP Follow-up Consult	\$79.00	One only	Follow up consultation for management post CXR result
RN Follow-up consult	\$39.00		
CXR to support management and avoid acute admission			
Pathway now pneumonia only not COPD/Pneumonia, can no longer claim extended consult			
In all categories where extended consultations and follow up consultations can be claimed, rural practices can claim the following (the following can be claimed)			
Rural GP/NP/CP Extended consultation	\$89.00	Maximum 2	At the time of acute presentation to a maximum of 30 minutes
Rural GP/NP/CP Follow up consult	\$89.00	One only	Limited to one per episode of care within 3 days of the initial consult
Rural RN Follow up consult	\$49.00		
In all categories where extended consultations and follow up consultations can be claimed, the following can be claimed when the care is provided after 5pm, on weekends or on public holidays.			
After hours GP/NP/CP Extended consultation	\$99.00	Maximum 2	At the time of acute presentation to a maximum of 30 minutes
After hours GP/NP/CP Follow up consult	\$99.00	One only	Limited to one per episode of care within 3 days of the initial consult
After hours RN Follow up consult	\$59.00		
<p>Packages of care Cannot be claimed with any other invoice on the same day. They include allocation for staff time as well as consumables</p> <p>Practice observations Practice observations – maximum 2 hours and based on treatment provided as evidenced in clinical notes. This can be claimed provided no IV administration invoices are claimed. This invoice can only be claimed at the time of the initial consultation. In-clinic observations can be claimed based on 3 x 10-minute baseline observations per hour. Practice observations can only be claimed at the time of the initial consult.</p> <p>GP/NP/CP extended consultation To cover an additional 15 minutes of GP/NP/CP time above the initial 15-minute consultation. This invoice can be claimed twice per episode of care to fund a maximum of 30 minutes of additional time. This invoice can only be claimed at the time of the initial consultation.</p> <p>GP/NP/CP follow up RN follow up A follow-up visit may be funded (based on treatment provided as evidenced in clinical notes). This is limited to one consult within the acute episode of care. While follow up consultations can be virtual, to be eligible for funding, documentation needs to include a two-way conversation between the practice and the patient. A sent message with no documented response does not meet the definition of a consultation.</p>			
<p>Urgent diagnostics can be accessed and co-ordinated by general practice or urgent care clinics without contacting the Primary Options team. Bookings can be made by the practice or the patient.</p> <p>Patients can arrange their own radiological investigation provided they have the required documentation with them, which includes the referral from the practice and the primary options claim number. This is dependent on the investigation being one of those listed above. Any investigations not listed will not be funded, irrespective of whether the practice has provided the patient with a claim number.</p> <p>Patients who are not acutely unwell and do not require a same day diagnostic test are not funded under POAC and should be referred to primary referred radiology. Radiology is only funded for same-day investigations, with the exception of ultrasounds through the DVT pathway which can be the next day with enoxaparin coverage.</p> <p>GP provided point of care ultrasound is excluded from POAC services – it is expected that patients will be charged for this service.</p>			