



Fees for services provided to Medicare Ineligible Patients

Patients not covered by Medicare, including overseas patients, are required to pay for their medical services on a full cost recovery basis.

The following table provides a guide to the costs per day for services provided to Medicare ineligible patients. Please note that this is a guide only, and that fees charged to Medicare ineligible patients are determined on a case-by-case basis.

Service Type	Fees 2021-22
Acute Medical Services (1)	
Same day (fee per day)	
• Single Room	\$600
• Shared Room	\$400
Overnight (fee per day)	
• Single Room	\$800
• Shared Room	\$600
Maternity - Birthing Package	
• Normal delivery	\$7,000
• Caesarean delivery	\$12,000
Oncology / Renal Dialysis (fee per visit)	\$900
Outpatient Services	
Medical Imaging (fee per schedule)	CMBS
Specialist Clinics (fee per service event)	\$400
Nursing and Allied Clinics (fee per service event)	\$250
In Home Care Services	
Nursing (fee per hour)	\$200

(1) Note Acute Medical Services exclude a number of costs, such as:

- Medical costs billed separately by the treating medical practitioner;
- Diagnostics such as pathology or medical imaging;
- Prostheses;
- Pharmacy supplies; and
- Theatre fees.

For more information on the specific fees payable for your individual care requirements please contact the MDHS finance department on 03 5461 0333.