



Registered specialist costs

Effective 1 June 2024

ACC Information sheet

This information sheet lists the Cost of Treatment Regulations amounts ACC can pay for specialist treatments.

Code	Item description	Fixed rate for first visit \$ (excl. GST)	Fixed rate for first visit \$ (incl. GST)	Fixed rate for follow up visit (excl. GST)	Fixed rate for follow up visit (incl. GST)
CS01	Visit to all registered specialists except those specified for CS02	83.81	96.38	41.91	48.20
CS02	Visit for internal medicine, neurosurgery, occupational medicine, paediatrics, psychological medicine or psychiatry, rehabilitation medicine (also known as CON).	106.90	122.94	41.91	48.20

Code	Item description	Flat rate \$ (excl. GST)	Flat rate \$ (incl. GST)
Repair recent wound			
SR1	Not exceeding 7cm, superficial	145.33	167.13
SR2	Not exceeding 7cm, deeper tissue	193.76	222.82
SR3	Exceeding 7cm, superficial	242.22	278.55
SR4	Exceeding 7cm, deeper tissue	290.65	334.25
Fractures (closed reduction)			
SF1	Phalanges	100.35	115.40
SF2	Metacarpals, excluding Bennetts	180.60	207.69
SF3	Metatarsals	140.49	161.56
SF4	Bennetts	260.87	300.00
SF5	Carpal bones	130.41	149.97

SF6	Colles	240.79	276.91
SF7	Radius and ulna – shafts	290.94	334.58
Code	Item description	Flat rate \$ (excl. GST)	Flat rate \$ (incl. GST)
Fractures (closed reduction) continued			
SF8	Radius – head and neck	260.87	300.00
SF9	Humerus	290.94	334.58
SF10	Talus – neck	270.91	311.55
SF11	Calcaneus	270.91	311.55
SF12	Other tarsals	170.59	196.18
SF13	Ankle – fracture dislocation, Potts	421.39	484.60
SF14	Tibia and fibula – shaft	481.57	553.81
SF15	Tibia and fibula – upper end	421.39	484.60
SF16	Tibia and fibula – involving joint traction	491.59	565.33
SF17	Femur, any site, with/without traction	742.45	853.82
Haematoma, abscess or other infection			
SH1	Small – aspiration	25.13	28.90
SH2	Large – incision and drainage (local anaesthetic)	119.78	137.75
SH3	Large – incision and drainage (general anaesthetic)	130.41	149.97
Foreign body removal			
SB1	Under local anaesthetic	95.38	109.69
SB2	Under general anaesthetic	210.68	242.28
SB3	From cornea or sclera	65.26	75.05
SB4	From ear, other than by simple syringing	100.35	115.40
SB5	From muscle, tendon, or other deep tissue	301.00	346.15
SB6	From nose, other than by simple probing	120.40	138.46
SB7	From throat, additional fee	100.35	115.40
Dislocations (closed reduction)			
SD1	Elbow, wrist, thumb, and fingers with strapping/splint	200.66	230.76
SD2	Shoulder	120.40	138.46
SD3	Patella	170.59	196.18
SD4	Hip	240.79	276.91

Plaster			
Code	Item description	Flat rate \$ (excl. GST)	Flat rate \$ (incl. GST)
SP1	Upper limb – above elbow	150.50	173.08
SP2	Upper limb – below elbow	130.41	149.97
Plaster continued			
SP3	Lower limb – above knee	180.60	207.69
SP4	Lower limb – below knee	150.50	173.08
Other			
SM1	Aspiration of joint	25.13	28.90
SM2	Amputation of all or part of one digit	220.76	253.87
SM3	Extensor tendon, primary repair	351.16	403.83
SM4	Nail, simple removal of	100.35	115.40

Specific clauses

The clauses below are taken from the principal regulations that are in effect – the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003. The clauses have been updated in line with the amendments in the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Amendment Regulations 2024.

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1. This regulation applies if –
 - a. a claimant visits or is visited by a ... medical practitioner who –
 - i. is a ... specialist; and
 - ii. during the visit, is practicing within a recognised branch of medicine included in his or her scope of practice; and
 - b. any treatment received by the claimant during the visit is specified in the Schedule under the heading "... specialists' costs".
2. For the first visit that the claimant has, the Corporation is liable to pay –
 - a. Either –
 - i. \$106.90 GST excl (\$122.94 GST incl), if the visit was within any of the following recognised branches of medicine:
 - a. internal medicine:
 - b. neurosurgery:
 - c. occupational medicine:
 - d. paediatrics:
 - e. psychological medicine or psychiatry:
 - f. rehabilitation medicine; or
 - ii. \$83.81 GST excl (\$96.38 GST incl), if the visit was with a specialist practising within any other recognised branch of medicine; plus
 - b. the amount specified for any treatment the claimant receives.

3. For each further visit that the claimant has with the specialist, in relation to the same injury, the Corporation is liable to pay –
 - a. \$41.91 GST excl (\$48.20 GST incl); plus
 - b. the amount specified for any treatment the claimant receives.
4. If the claimant receives 2 or more treatments at the same visit, the Corporation is liable to pay –
 - a. the amount specified for the more or most expensive treatment the claimant receives; plus
 - b. 50% of the amount specified for each other treatment the claimant receives.
5. However, if at the same visit the claimant receives a treatment and a more comprehensive treatment for the same injury, the Corporation is liable to pay only the amount specified for the more comprehensive treatment.

Disclaimer

All information in this publication was correct at the time of printing, May 2024. This information is intended to serve only as a general guide to arrangements under the Accident Compensation Act 2001 and Regulations. For any legal or financial purposes this Act takes precedence over the contents of this guide.