Information for patients without a Medicare Card

Do I need to pay for treatment?

You must pay for treatment if you:

- do not have a Medicare card, or
- are not covered by a Reciprocal Healthcare Agreement

Patients without Medicare are 'Medicare ineligible'.

I have a Medicare card but did not bring it today. Why do I have to acknowledge costs?

You must bring your Medicare card to every hospital visit. If we don't have your Medicare number on file, we will send you an invoice.

If you can provide your Medicare number after treatment, we will cancel your invoice. We can also contact Medicare to search for your card number with your consent.

The following Medicare ineligible patients may not need to pay:

- asylum seekers, immigration detainees or refugees
- patients being diagnosed or treated for tuberculosis or leprosy
- organ or tissue donors

Ask our staff for more information.

I have insurance. Why do I need to pay?

Patients with insurance must pay all costs of treatment upfront in the Emergency Department and Outpatient Clinics of our HHS. We will send you a receipt for claiming. Not all insurance funds will pay the entire amount. We recommend you contact your insurer at the earliest opportunity.

I was in a work accident. Do I need to pay?

If you are Medicare ineligible and do not have an approved workers' compensation claim, you must pay for treatment. If your claim is later approved, we will refund money paid.

Do I pay if I was in a motor vehicle accident?

If you are Medicare ineligible, and do not have an approved insurance claim or cannot provide all the accident details including the driver at fault required to qualify for motor accident funding, you must pay for treatment. If it is later found that you have an approved insurance claim or qualify for motor accident funding, we will refund money paid.

What is a reciprocal healthcare agreement?

Australia has reciprocal healthcare agreements with eleven countries. The agreements provide visitors to Australia with subsidised medical treatment.

You may qualify for subsidised treatment if you live in one of these countries and are visiting Australia on an eligible temporary visa.

- United Kingdom
- New Zealand
- Belgium
- Sweden
- Slovenia
- The Netherlands
- Finland ^
- Republic of Ireland ^
- Norway ^
- Malta # ^
- Italy #

\# Covered for six months after arrival in Australia.

^ Student visa holders not covered.

Visitors on a retiree visa (Subclass 405 or 410) are usually not covered under the agreements.

I am from a country with a reciprocal healthcare agreement. What do I need to do?

To show that you qualify for treatment under a reciprocal healthcare agreement, we need copies of both your:

- passport
- visa grant notice

We will ask for these documents at every presentation.

If you do not bring these, you must acknowledge the cost of treatment at Medicare ineligible rates and pay for treatment.

If you later provide the copies of these documents as evidence you qualify for treatment under the agreements, we will refund money paid.

For full terms, visit:

https://www.servicesaustralia.gov.au/individuals/services/medicare/reciprocal-health-care-agreements/when-you-visit-australia

Treatment costs

Effective 1 July 2023 – 30 June 2024
Costs are subject to change

Emergency department

The treatment cost is based on your triage category:

Triage category	Cost
1	$1,485.80
2	$1,251.85
3	$940.65
4	$603.30
5	$383.75

Additional costs where provided:
- diagnostic imaging (Medicare Benefits Schedule fee)
- pathology services ($120.15 per request)
- pharmaceuticals* (full cost)
- admitted services fees (see below)

Outpatients departments

$416.30 for each scheduled appointment (including telephone/virtual/email consultations)

Additional costs where provided:
- diagnostic imaging (Medicare Benefits Schedule fee)
- pathology (public – $120.15 per request)
- pathology (private – Medicare Benefits Schedule fee)
- pharmaceuticals* (full cost)
- admitted services fees (see below)

Admitted services

Accommodation fee in a general medical ward:
- overnight ($2,510.55 per night)
- same day ($2,121.55)

Wards providing specialised care charge higher fees:

Ward	Cost per day
Intensive Care Unit	$6,321.10
Coronary Care Unit	$4,228.60
Rehabilitation	$1,319.15
Renal Dialysis	$1,179.80
Newborn Qualified	$2,510.55
Newborn Special	$4,066.55

Accommodation fees include nursing services and meals.

Medicare Ineligible Patients are required to pay a daily co-payment of $1,247.10 per day if admitted for greater than 35 days and no longer receiving acute care.

Additional costs where provided:
- operating theatre
  - one hour or less ($1,147.90)
  - greater than one hour ($2,886.80)
- pharmaceuticals (full cost)
- prosthetics, medical aids, appliances (full cost)
- inter-hospital ambulance transport (full cost)

You will be admitted as a private patient for all elective admissions and transfers from private hospitals.

Private patients will be charged for consultations, procedures, investigations, and anaesthetist fees at 100% of the Medicare Benefits Schedule fee. Tissue and blood products are charged at full cost.

*Pharmaceuticals (Non-admitted) HIV Treatment for Medicare Ineligible patients living with HIV in Australia $30.00. This fee applies for those accepted under the Federation Funding Agreement (FFA) for access to HIV treatment for people who are not eligible for Medicare.

What treatment alternatives are available outside of this hospital?

- General Practitioners (GPs) are private doctors who provide a wide range of health services for situations that are not an emergency.
- Private hospitals provide most treatment which is available in public hospitals.
- Private allied health professionals are also available in the community.

Need help or assistance?
For information regarding using private health insurance, contact our **Patient Option Liaison Officers (POLOs)**
POLO.GCHHS@health.qld.gov.au
Robina Hospital: 0478 325 640
Gold Coast University Hospital: 0403 095 032

Interpreter services

Gold Coast Health provides interpreter services for patients attending the hospital who are from non-English speaking backgrounds. If you require the assistance of an interpreter, please indicate this on your registration form and advise the hospital prior to any medical appointments.
Interpreter services are provided free-of-charge to all patients who require the service, including non-Medicare patients.