



INFORMED FINANCIAL CONSENT

Dear Sir/Madame,

Please be advised that our practice requires you to sign or acknowledge the informed financial consent document. This document outlines the consultation fees and any addental out-of-pocket expenses associated with our services. We kindly ask that you return all signed or acknowledged documentation to our administrative team.

ITEM NUMBER	**Private Fee**
Follow ups (minimum Fee)	\$440
Rebates can vary based on the time spent with a patient minimum fee.	
Follow ups (More than 45 minutes)	\$540
Rebates can vary based on the time spent with patient.	
Initial Appointment	\$765
291 Appointment	\$850





Missed Appointments, Cancellations at Short Notice and other pocket services:

We highly recommend reading the cancellation notice and non-attendance policy before making appointments. We require a minimum of two business days cancellation notice for your appointment, and a cancellation fee will apply to all patients, including any third-party subsidized patients (e.g. Medicare, Insurers etc.).

- A \$ 300 cancellation fee will apply for new patients.
- A \$ 200 cancellation fee will apply for patients currently receiving care.

Please also be aware that additional out-of-pocket fees for scripts required outside of consultation will incur a **minimum** fee of \$160+GST.

Depending on approval for the PBS script, QScript access, and the number of medications, the fee will increase. Compulsory regulations to access and check a patient's history on QScript, including obtaining PBS approval, could limit the specialist consult time/ increase the duration of the specialist consult, leading to increased costs. It is common practice for patients to obtain regular medications, including psychiatrist initiated S8 medications, from their GP.

Please note that any correspondence besides that with the referring GP will incur additional out-of-pocket fees during or outside of consultation. If you require letters from insurers, lawyers, employers, educators, or social services, please discuss it with our administrative team before scheduling a consultation. Please note that such letters will be invoiced to you.

Furthermore, suppose you request to share your patient information with other healthcare providers apart from the referring GP. In that case, you will be charged a minimal fee associated with



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Provider Number 277928DT

administrative costs, depending on the amount and communication method. Please note that this doesn't apply to the current referring doctor.

Our policy is for patients to settle all existing invoices fully before providing any services requested. If you have any questions or concerns, please get in touch with us.

Thank you for your cooperation.

Administrative Team

Dr Bawani Marsden Clinic

Patient acknowledgement:

"I/We acknowledge and agree that this clinic will submit claims to Medicare for all services rendered. I/We understand that consultation fees are determined based on the recommendations of the Australian Medical Association (AMA) and Medicare. I/We have been informed of any out-of-pocket expenses that may be applicable prior to the commencement of services. I/We further understand that these fees are subject to annual review on November 1st each year, in accordance with the AMA's fee schedule updates."

schedule updates."	
Name:	Date:
(Person responsible for the account)	
Signature:	