WorkCover QUEENSLAND

Chinese Medicine
Table of Costs

Effective 1 August 2025

Chinese Medicine Table of Costs

Quick reference table – Common Item Numbers

Item number	Description (High level)	Insurer prior approval required	Fee – GST not included
300004	Initial Consultation	No	$132
300005	Subsequent Consultation	Yes (see table below)	$104

You can click on the item numbers in the table to view details.

Item number / service	Description
300004 Initial Consultation **Insurer prior approval required** No **Fee – GST not included**[1] $132	A one-on-one initial consultation for acupuncture in the treatment of work-related injuries or conditions, or the first consultation in a new episode of care for the treatment of work-related injuries or conditions. Services to be conducted in accordance with the Clinical Framework for the Delivery of Health Services[2]. Initial consultation may include: • subjective assessment • objective assessment • treatment/service • tailored goal setting and treatment planning • setting expectations of recovery and return to work • clinical recording • communication (with referrer) – any relevant information for the worker's rehabilitation to the insurer. **Please note:** A provider cannot bill for multiple initial consultations or multiple subsequent consultations for the same injured worker on the same day.

300005 Subsequent Consultation

Insurer prior approval required	Yes
Fee – GST not included[1]	$104

A one-on-one subsequent consultation for acupuncture in the treatment of work-related injuries or conditions.

The first **five (5)** consultations (including initial consultation) are pre-approved, provided the injuries have not previously been treated by an allied health provider.

If additional treatment is required, submit a Provider Management Plan[3] (PMP) The PMP should include a comprehensive treatment plan containing:

- expected functional gains
- transition of care to self-management and
- treatment timeframes.

Services to be conducted in accordance with the Clinical Framework for the Delivery of Health Services[2].

Subsequent consultation may include:

- ongoing assessment (subjective and objective)
- intervention/treatment
- setting expectations of recovery and return to work
- clinical recording
- communication with the insurer of any relevant information for the worker's rehabilitation.

Please note: A provider cannot bill for multiple initial consultations or multiple subsequent consultations for the same injured worker on the same day.

1. Rates do not include GST. Check with the Australian Taxation Office or your tax advisor if GST is applicable.
2. WorkCover Queensland encourages the adoption of the nationally recognised Clinical Framework for the Delivery of Health Services when treating a worker with a work-related injury or condition.
3. A Provider Management Plan (PMP) template is available on the Workers' Compensation Regulatory Services' website.

Who can provide Chinese medicine services to workers?

All acupuncture services performed must be provided by a Chinese medicine practitioner who has a current registration in the Division of Acupuncture under the Australian Health Practitioner Regulation Agency (AHPRA).

Consultations (Item number 300004, 300005)

For an accepted claim, the insurer will pay the cost of an initial consultation however not for an initial and subsequent consultation on the same day unless in exceptional circumstances, as approved by the insurer.

A provider cannot bill for multiple initial consultations or multiple subsequent consultations for the same claimant on the same day.

Consultations may include the following elements:

- **Subjective (history) assessment –** consider major symptoms and lifestyle dysfunction; current/past history and treatment; pain, aggravating and relieving factors; general health; medication; risk factors and key functional requirements of the worker's job.
- **Objective (physical) assessment –** assess movement—for example active, passive, resisted, repeated, muscle tone, spasm, weakness, accessory movements, passive intervertebral movements—and pain by carrying out appropriate procedures and tests. Assess overall work function level and any physical impairments preventing the worker's pain from resolving.
- **Assessment results (prognosis formulation) –** provide a provisional prognosis for treatment, limitations to function and progress for return to work.
- **Reassessment (subjective and objective) –** evaluate the physical progress of the worker using outcome measures for relevant, reliable, and sensitive assessment. Compare against the baseline measures and treatment goals. Identify factors compromising treatment outcomes and implement strategies to improve the worker's ability to return to work and normal functional activities. Actively promote self-management (such as ongoing exercise programs) and empower the worker to play an active role in their rehabilitation.
- **Treatment (intervention) –** formulate and discuss the treatment goals, progress and expected outcomes with the worker. Provide treatment modalities including exercise programs according to the goals of therapy.
- **Clinical recordings –** record information in the worker's clinical records, including the purpose and results of procedures and tests.
- **Communication (with the referrer) –** communicate any relevant information for the worker's rehabilitation to insurer. Acknowledge referral and liaise with the treating medical practitioner about treatment.

When transitioning between pre-approved and prior approved services, it is recommended that you contact the insurer for clarification on what (if any) restrictions may apply.

The insurer will not pay a fee for the completion of a Provider Management Plan (PMP).

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