



**THE ACCIDENT COMPENSATION (ANAESTHETISTS COSTS)  
REGULATIONS 1990**

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PAUL REEVES, Governor-General

ORDER IN COUNCIL

At Wellington this 10th day of September 1990

Present:

HIS EXCELLENCY THE GOVERNOR-GENERAL IN COUNCIL

PURSUANT to section 120 (1) (f) of the Accident Compensation Act 1982, His Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, hereby makes the following regulations.

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ANALYSIS

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## REGULATIONS

**1. Title and commencement**—(1) These regulations may be cited as the Accident Compensation (Anaesthetists Costs) Regulations 1990.

(2) These regulations shall come into force on the 15th day of October 1990.

**2. Interpretation**—(1) In these regulations, unless the context otherwise requires,—

“The Act” means the Accident Compensation Act 1982:

“Anaesthetist” means—

(a) A specialist anaesthetist; or

(b) A general practitioner providing anaesthetic services:

“Claimant” means a person who has suffered personal injury by accident to which the Act applies:

“Consultation” means any treatment provided by an anaesthetist, including any service performed or treatment provided at any consultation that is not specified in the Schedule to these regulations; and includes the issue of any certificate to the Corporation as a result of the consultation; but does not include any routine pre-operative or post-operative consultation in respect of any treatment specified in the Schedule to these regulations that is to be or has been performed by that anaesthetist (whether or not the Corporation makes any payment in respect of the treatment):

“Corporation” means the Accident Compensation Corporation:

“General practitioner” means any registered medical practitioner working in a non-specialist capacity; and includes any specialist working outside his or her registered speciality:

“Hospital” has the same meaning as in the Hospitals Act 1957:

“Personal injury by accident” means personal injury by accident to which the Act applies:

“Principal economic activity” includes study activities and domestic household activities that are not directly remunerated; and in the case of domestic household activities shall be determined without regard to whether or not the person has a spouse or other household member who is able to perform those activities:

“Private hospital” means a licensed hospital as defined in section 118 of the Hospitals Act 1957:

“Public hospital” means any hospital that is not a private hospital and is operated by the Crown or an area health board:

“Registered medical practitioner” means any person who holds a current annual practising certificate issued by the Medical Council of New Zealand:

“Social Security benefit” means any benefit payable under Part II of the Social Security Act 1964 or any regulations in force under that Part; and includes any payment in respect of any specific treatment made to any anaesthetist under any arrangement entered into under section 97 of the Social Security Act 1964:

“Specialist anaesthetist” means any registered medical practitioner registered as a specialist in anaesthesia with the Medical Council of New Zealand:

“State services” has the same meaning as in the State Sector Act 1988.

(2) No person shall be regarded as acting in the course of employment by the State services or an area health board by reason of that person being a general practitioner contracted to work in a special area designated as such by the Director-General of Health.

**3. Application**—(1) Subject to these regulations, these regulations shall apply in respect of any treatment provided on or after the 15th day of October 1990 by an anaesthetist to a claimant in respect of personal injury by accident, irrespective of—

- (a) The date on which any fee for any treatment was charged or paid; or
- (b) The date on which the personal injury by accident occurred.

(2) These regulations (other than regulation 13) shall not apply in respect of any treatment provided before the 15th day of October 1990 by an anaesthetist to a claimant in respect of personal injury by accident, irrespective of the date of the charging or payment of any fee for the treatment.

**4. Corporation to pay certain costs**—(1) Subject to these regulations, the Corporation shall pay the costs of treatment provided by an anaesthetist to any claimant in respect of personal injury by accident to the extent specified in regulation 8 of, and the Schedule to, these regulations.

(2) The Corporation shall not pay any costs unless it has received such information and declarations as it may require in order to verify that the claimant has suffered personal injury by accident and that the treatment in respect of which the claim for payment is made was provided in respect of personal injury by accident.

(3) The Corporation shall not pay any costs unless it has been advised of the date on which the treatment was provided and the specific nature of that treatment.

(4) The Corporation shall not pay any costs in respect of any treatment provided by an anaesthetist unless the claimant has, in respect of the personal injury by accident for which the claimant is treated, been referred to the anaesthetist by another registered medical practitioner who is not acting in the course of employment by an area health board.

(5) The Corporation shall not pay any costs in respect of any treatment that is an anaesthetic service provided by a general practitioner unless it is satisfied that—

- (a) Specialist anaesthetists are unavailable in the area, or are not available in sufficient numbers to provide a complete service; and
- (b) The standard of equipment and professional backup available to the general practitioner is adequate to ensure acceptable standards of patient safety are maintained.

(6) The costs payable by the Corporation, as required or permitted under these regulations, shall be paid—

- (a) To the anaesthetist; or
- (b) If they have already been paid by the claimant, then to the claimant.

**5. Corporation to pay equivalent of Social Security benefit to Crown Bank Account**—In addition to the costs payable under regulation 4 of these regulations, in any case where costs are payable under that regulation and the total cost of the treatment includes a Social Security benefit, the Corporation shall pay an amount equivalent to that Social

Security benefit to a Crown Bank Account nominated by the Minister of Finance.

**6. Second opinions**—(1) The Corporation shall decline to make any payment in respect of any treatment that it considers may not be necessary or appropriate or that it considers may have exceeded the number or duration necessary or appropriate in the particular case until it has obtained a second opinion on the matter.

(2) Where the Corporation, after having obtained the second opinion, believes that the treatment was unnecessary or inappropriate, it shall decline to make any payment in respect of the treatment or part of the treatment (as appropriate) and shall advise the claimant and the anaesthetist accordingly.

(3) Nothing in this regulation shall apply in any case where the treatment concerned or the number of treatments or duration of the treatment concerned has been provided with the prior approval of the Corporation.

**7. Costs not payable in respect of certain treatment**—No payment shall be made by the Corporation under these regulations in respect of any treatment provided by an anaesthetist—

- (a) In a public hospital; or
- (b) To any claimant as an out-patient of a public hospital; or
- (c) While the anaesthetist is acting in the course of employment in the State services or by an area health board.

**8. Consultation costs**—Subject to these regulations, the Corporation shall pay in respect of a consultation provided by an anaesthetist to any claimant in respect of personal injury by accident the amount that the anaesthetist would have charged the claimant if the consultation were one for which the Corporation was not making a payment (less any Social Security benefit), or the amount specified below (less any Social Security benefit), whichever is the lesser:

|                         |    |    |       |
|-------------------------|----|----|-------|
| Initial consultation    | .. | .. | \$90  |
| Subsequent consultation |    | .. | \$45. |

**9. Certificates**—The Corporation shall not make any payment under these regulations in respect of any certificate provided to the Corporation by an anaesthetist, other than the payment in respect of the consultation that relates to the issue of the certificate.

**10. Conditions applying to payments for anaesthetic procedures**—

(1) The Corporation shall not make any payment in respect of any treatment specified in the Schedule to these regulations unless—

- (a) The treatment is provided as a necessary adjunct to treatment that has been approved under the Accident Compensation (Specialists Costs) Regulations (No. 2) 1990\* or the Accident Compensation (Dental Specialists Costs) Regulations (No. 2) 1990†; or
- (b) The treatment is an item marked in the Schedule with an asterisk (\*) and is provided by a specialist anaesthetist in that specialist

\*S.R. 1990/233

†S.R. 1990/238

anaesthetist's rooms and the prior approval of the Corporation to the provision of the treatment has been obtained.

(2) Except as provided in subclause (3) of this regulation, the Corporation shall not give the approval referred to in subclause (1) (b) of this regulation unless it is satisfied that it is necessary for the due restoration of the claimant to his or her principal economic activity or would enable the claimant to undertake remunerated employment that the treatment be provided.

(3) Nothing in this regulation shall apply in respect of any treatment that is discovered to be necessary to perform, and is performed, during the course of any treatment approved under any regulations referred to in subclause (1) (a) of this regulation.

**11. Goods and services tax**—(1) All amounts specified or referred to in these regulations are inclusive of goods and services tax.

(2) Where any amount is to be calculated in a manner that involves the deduction of any Social Security benefit, the full amount of that benefit, including any goods and services tax component, shall be deducted.

**12. Application of regulations to certificates and treatments provided overseas**—Nothing in these regulations shall limit or restrict section 75 (8) of the Act.

**13. Savings**—Notwithstanding the revocation of the Accident Compensation (Specialists Costs) Regulations 1989\* by regulation 12 (1) of the Accident Compensation (Specialists Costs) Regulations 1990†, those regulations shall continue to apply in respect of any treatment provided by a specialist anaesthetist before the 15th day of October 1990.

\*S.R. 1989/330  
†S.R. 1990/107

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Reg. 4

## SCHEDULE

COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED  
BY ANAESTHETISTS

The costs payable by the Corporation for treatment that is an anaesthetic service specified in this Schedule performed by an anaesthetist is \$31.50 for each unit specified below (less any Social Security benefit), or the fee that the anaesthetist would have charged the patient if the service were one for which the Corporation was not making a payment (less any Social Security benefit), whichever is the lesser.

The costs payable under this Schedule calculated on a unit basis include—

- (a) Routine pre-operative visits:
- (b) Routine post-operative visits:
- (c) The actual administration of the anaesthetic, together with appropriate fluid therapy and monitoring:
- (d) The provision by the anaesthetist of all materials, drugs, gases, and fluids where appropriate:
- (e) Any hospital fees charged to the anaesthetist.

Where more than one operation is performed under one anaesthetic, the basic units associated with only one procedure may be applied.

PART I  
BASIC UNITS

|                        |   | Units |
|------------------------|---|-------|
| <b>Head &amp; Neck</b> |   |       |
| H1                     | All superficial procedures except: .. ..            | 2     |
| H1 (a)                 | If intubation required .. ..                        | 3     |
| H1 (b)                 | Meloplasty .. ..                                    | 4     |
| H2                     | All procedures on ear except: .. ..                 | 2     |
| H2 (a)                 | If intubation required .. ..                        | 3     |
| H2 (b)                 | Major microsurgical procedures .. ..                | 5     |
| H3                     | All procedures on eye and lids except: .. ..        | 2     |
| H3 (a)                 | If intubation required .. ..                        | 3     |
| H3 (b)                 | Eyeball operations .. ..                            | 5     |
| H4                     | All nose and sinus operations except: .. ..         | 4     |
| H4 (a)                 | Radical operations .. ..                            | 6     |
| H5                     | All intraoral operations except: .. ..              | 3     |
| H5 (a)                 | If intubation required .. ..                        | 4     |
| H5 (b)                 | Radical ops (mandible osteotomy, etc.) .. ..        | 6     |
| H6                     | All procedures on facial bones except: .. ..        | 3     |
| H6 (a)                 | Radical operations .. ..                            | 6     |
| H7                     | All intracranial operations except: .. ..           | 10    |
| H7 (a)                 | In sitting position .. ..                           | 12    |
| H7 (b)                 | Burr holes .. ..                                    | 8     |
| H7 (c)                 | Intracranial vascular operations .. ..              | 14    |
| H8                     | Larynx, oesophagus, thyroid, trachea, parotid .. .. | 5     |
| H9                     | All vascular procedures in the neck except: .. ..   | 8     |
| H9 (a)                 | Simple ligation .. ..                               | 4     |

SCHEDULE—*continued*COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED  
BY ANAESTHETISTS—*continued*PART I—*continued*BASIC UNITS—*continued*

|                |  |    |    | Units |
|----------------|--|----|----|-------|
| <b>Thorax</b>  |  |    |    |       |
| T1             | All superficial anterior procedures except:              | .. | .. | 2     |
| T1 (a)         | If intubation required                                   | .. | .. | 3     |
| T1 (b)         | Radical breast operations                                | .. | .. | 4     |
| T2             | All superficial posterior procedures except:             | .. | .. | 3     |
| T2 (a)         | If intubation required                                   | .. | .. | 4     |
| T3             | Rib resection  | .. | .. | 5     |
|                | except:  |    |    |       |
| T3 (a)         | Thoracoplasty  | .. | .. | 9     |
| T3 (b)         | Pectus excavatum, etc.                                   | .. | .. | 6     |
| T4             | All intrathoracic operations except:                     | .. | .. | 14    |
| T4 (a)         | Cardiac bypass operations                                | .. | .. | 19    |
| <b>Spine</b>   |  |    |    |       |
| S1             | All procedures in cervical region except:                | .. | .. | 7     |
| S1 (a)         | Posterior prone approach                                 | .. | .. | 9     |
| S1 (b)         | Posterior sitting position                               | .. | .. | 12    |
| S2             | All procedures in thoracic region except:                | .. | .. | 9     |
| S2 (a)         | Thoracic sympathectomy                                   | .. | .. | 12    |
| S3             | All procedures in lumbar region                          | .. | .. | 7     |
| S4             | Extensive procedures (e.g. Harrington rod)               | .. | .. | 12    |
| <b>Abdomen</b> |  |    |    |       |
| A1             | All superficial anterior procedures except:              | .. | .. | 2     |
| A1 (a)         | If intubation required                                   | .. | .. | 3     |
| A2             | All superficial posterior procedures except:             | .. | .. | 3     |
| A2 (a)         | If intubation required                                   | .. | .. | 4     |
| A3             | All hernia repairs including orchiopexy except:          | .. | .. | 3     |
| A3 (a)         | Incisional hernia/wound dehiscence                       | .. | .. | 5     |
| A3 (b)         | Abdominal repair diaphragmatic hernia                    | .. | .. | 6     |
| A4             | All major abdominal blood vessels except:                | .. | .. | 10    |
| A4 (a)         | Aortic aneurysms   | .. | .. | 14    |
| A5             | Upper intraperitoneal procedures except:                 | .. | .. | 6     |
| A5 (a)         | Cholecystectomy  | .. | .. | 5     |
| A5 (b)         | Partial Hepatectomy (not incl. liver biopsy)             | .. | .. | 12    |
| A6             | All intraperitoneal gynaecological operations<br>except: | .. | .. | 4     |
| A6 (a)         | Abdominal Hysterectomy                                   | .. | .. | 5     |
| A6 (b)         | Radical Hysterectomy                                     | .. | .. | 7     |
| A7             | All other lower intraperitoneal operations<br>except:    | .. | .. | 5     |
| A7 (a)         | Appendicectomy   | .. | .. | 4     |

SCHEDULE—*continued*COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED  
BY ANAESTHETISTS—*continued*PART I—*continued*BASIC UNITS—*continued*

|  |  |    |    |    | Units |
|--|--|----|----|----|-------|
| A7 (b)   | Resection of rectum  | .. | .. | .. | 7     |
| A8   | All extraperitoneal procedures except:   | .. | .. | .. | 5     |
| A8 (a)   | Kidney and upper ureter  | .. | .. | .. | 6     |
| A8 (b)   | Cystectomy   | .. | .. | .. | 7     |
| A8 (c)   | Adrenalectomy  | .. | .. | .. | 9     |
| A8 (d)   | Cystostomy   | .. | .. | .. | 4     |
| <b>Perineum &amp; Pelvis</b>                       |  |    |    |    |       |
| P1   | All superficial procedures except:   | .. | .. | .. | 2     |
| P1 (a)   | Ano-rectal procedures  | .. | .. | .. | 3     |
| P1 (b)   | Prone position   | .. | .. | .. | 4     |
| P1 (c)   | Vulvectomy   | .. | .. | .. | 3     |
| P1 (d)   | Urethral operations e.g., urethroplasty, hypospadias,<br>etc.                            | .. | .. | .. | 4     |
| P1 (e)   | Radical procedures   | .. | .. | .. | 6     |
| P2   | All transurethral procedures except:   | .. | .. | .. | 2     |
| P2 (a)   | T.U.R. (Prostate or bladder tumours)   | .. | .. | .. | 4     |
| P3   | All vaginal procedures except:   | .. | .. | .. | 2     |
| P3 (a)   | Colporrhaphy   | .. | .. | .. | 3     |
| P3 (b)   | Hysterectomy   | .. | .. | .. | 5     |
| P4   | All superficial posterior procedures except:   | .. | .. | .. | 3     |
| P4 (a)   | If intubation required   | .. | .. | .. | 4     |
| P5   | All procedures on bony pelvis  | .. | .. | .. | 5     |
| <b>Limbs</b>                                       |  |    |    |    |       |
| L1   | All superficial procedures except:   | .. | .. | .. | 2     |
| L1 (a)   | If intubation required   | .. | .. | .. | 3     |
| L1 (b)   | Prone position   | .. | .. | .. | 4     |
| L2   | All arterial operations  | .. | .. | .. | 6     |
| L3   | Amputation of digits   | .. | .. | .. | 3     |
| L3 (a)   | Amputation of limbs  | .. | .. | .. | 4     |
| L4   | Muscles, bursae, tendons, cartilages, nerves, internal<br>fixation, minor joints except: | .. | .. | .. | 3     |
| L4 (a)   | If intubation required   | .. | .. | .. | 4     |
| L5   | All major open bone and major joint operations   | .. | .. | .. | 4     |
| L6   | Major joint replacements   | .. | .. | .. | 7     |
| L7   | Revision of major joint replacements   | .. | .. | .. | 8     |
| <b>Nerve Blocks (Therapeutic &amp; Diagnostic)</b> |  |    |    |    |       |
| *N1  | Single peripheral nerves, including I.V. regionals                                       | .. | .. | .. | 3     |
| *N2  | Lumbar epidural, caudal extradural, spinal   | .. | .. | .. | 4     |
| *N3  | Thoracic epidural, sympathectomy   | .. | .. | .. | 5     |



SCHEDULE—*continued*COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED  
BY ANAESTHETISTS—*continued*PART I—*continued*BASIC UNITS—*continued*

|  |                                     |    |    | Units |
|--|-------------------------------------|----|----|-------|
| <b>Endoscopy</b>   |                                     |    |    |       |
| E1   | Colpo-Cysto-Procto-Sigmoido-scopies | .. | .. | 2     |
| E2   | Arthro-Colono-Gastro-scopies        | .. | .. | 3     |
| E3   | Laparo-Oesophago-scopies            | .. | .. | 4     |
| E4   | Broncho-Laryngo-Mediastino-scopies  | .. | .. | 5     |
| <b>Intravenous Sedation</b>  |                                     |    |    |       |
| I  | Intravenous sedation                | .. | .. | 2     |
| <b>Resuscitation</b> (where the event occurs either while anaesthesia is not being administered or occurs during anaesthesia and results in the surgery being abandoned) |                                     |    |    |       |
| R1   | Where cardiac arrest does not occur | .. | .. | 1     |
| R2   | Where cardiac arrest occurs         | .. | .. | 2     |

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PART II  
MODIFYING UNITS

|    |   |    |    | Units |
|----|---|----|----|-------|
| 1. | Patient age under 1 year or over 70 years   | .. | .. | 1     |
| 2. | Prolonged anaesthesia beyond 4 hours  | .. | .. | 1     |
| 3. | Health status factor as per American Society of Anaesthesiologists Classification of Physical Status: |    |    |       |

| ASA Status | Elective | Emergency |
|------------|----------|-----------|
| 1          | 0        | 1         |
| 2          | 0        | 1         |
| 3          | 1        | 2         |
| 4          | 2        | 4         |
| 5 (rare)   | 4        | 6         |

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SCHEDULE—*continued*

PART III

TIME UNITS

Anaesthetic Time: Every 15 minutes (or part) . . . . . 1 unit

For the purposes of this clause “anaesthetic time” commences when the anaesthetist commences preparing the patient for induction, and ends when the patient may safely be placed under post-operative supervision.

MARIE SHROFF,  
Clerk of the Executive Council.

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EXPLANATORY NOTE

*This note is not part of the regulations, but is intended to indicate their general effect.*

These regulations, which come into force on 15 October 1990, make separate provision for the payment of anaesthetic costs. General practitioners providing anaesthetic services are included for the first time, and the Schedule is adjusted to follow the profession’s revision of the relative values guide in 1989.

All amounts stated are inclusive of goods and services tax.

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These regulations are administered in the Accident Compensation Corporation.