



**THE ACCIDENT COMPENSATION (RADIOLOGISTS COSTS)
REGULATIONS 1990, AMENDMENT NO. 2**

CATHERINE A. TIZARD, Governor-General

ORDER IN COUNCIL

At Wellington this 28th day of June 1993

Present:

HER EXCELLENCY THE GOVERNOR-GENERAL IN COUNCIL

PURSUANT to section 167 (1) (1) of the Accident Rehabilitation and Compensation Insurance Act 1992, Her Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, hereby makes the following regulations.

ANALYSIS

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| <ul style="list-style-type: none"> 1. Title and commencement 2. Interpretation 3. Corporation to pay certain costs | <ul style="list-style-type: none"> 4. Prohibition of contributions to cost of treatment provided by Crown health enterprises 5. Revocations 6. Schedule 7. Savings Schedule |
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REGULATIONS

1. Title and commencement—(1) These regulations may be cited as the Accident Compensation (Radiologists Costs) Regulations 1990, Amendment No. 2, and shall be read together with and deemed part of the

Accident Compensation (Radiologists Costs) Regulations 1990* (hereinafter referred to as the principal regulations).

(2) These regulations shall come into force on the 1st day of July 1993.

2. Interpretation—(1) Regulation 2 (1) of the principal regulations is hereby amended by revoking the definitions of the terms “hospital”, “private hospital”, “public hospital”, “Social Security benefit”, and State services”.

(2) Regulation 2 (1) of the principal regulations is hereby amended by revoking the definition of the term “radiologist”, and substituting the following definition:

“ ‘Radiologist’ means—

“(a) A registered specialist registered as a radiologist; or

“(b) A general practitioner treated as a radiologist by the relevant regional health authority for the purposes of a purchase agreement or arrangements made under section 51 of the Health and Disability Services Act 1993.”

(3) Regulation 2 (1) of the principal regulations is hereby amended by revoking the definition of the term “registered specialist”, and substituting the following definition:

“ ‘Registered specialist’ means any registered medical practitioner—

“(a) Registered as a specialist with the Medical Council of New Zealand; or

“(b) Recognised as a specialist by the Minister of Health immediately before the 14th day of November 1973 and still working as a specialist immediately before the 1st day of July 1993; or

“(c) Recognised by the relevant regional health authority as a specialist for the purposes of arrangements made in respect of pharmaceuticals under section 51 of the Health and Disability Services Act 1993 and eligible to receive remuneration as a specialist from a Crown health enterprise—

but does not include any specialist working outside his or her speciality.”

(4) Regulation 2 (2) of the principal regulations is hereby revoked.

3. Corporation to pay certain costs—(1) Regulation 4 (4) of the principal regulations is hereby amended by omitting the words “who is not acting in the course of employment by an area health board”, and substituting the words “in respect of whom the Corporation is not prohibited from making a payment in respect of that referral or prior treatment by section 27B of the Act”.

(2) Regulation 4 of the principal regulations is hereby amended by revoking subclause (5), and substituting the following subclause:

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

“(a) To the radiologist; or

“(b) To any person nominated by that radiologist; or

“(c) If they have already been paid by the claimant, then to the claimant.”

4. Prohibition of contributions to cost of treatment provided by Crown health enterprises—The principal regulations are hereby amended by inserting, after regulation 5, the following regulation:

“5A. Notwithstanding anything in these regulations, the Corporation shall not contribute to the costs of any treatment where that treatment is—

“(a) Provided or obliged to be provided by any Crown health enterprise;
or

“(b) Provided or obliged to be provided by any radiologist who is under a contract of service or contract for services with a Crown health enterprise where—

“(i) That contract relates to the provision of treatment which the Crown health enterprise is obliged to provide under a purchase agreement; and

“(ii) The radiologist is providing or obliged to provide the treatment pursuant to that contract with that Crown health enterprise.”

5. Revocations—Regulations 6, 7, 8, 10 (2), and 11 of the principal regulations are hereby revoked.

6. Schedule—(1) The principal regulations are hereby amended by revoking the Schedule (as substituted by regulation 3 of the Accident Compensation (Radiologists Costs) Regulations 1990, Amendment No. 1), and substituting the Schedule set out in the Schedule to these regulations.

(2) Regulation 3 of, and the Schedule to, the Accident Compensation (Radiologists Costs) Regulations 1990, Amendment No. 1 are hereby revoked.

7. Savings—Notwithstanding these regulations, where a radiologist has provided, at any time before the close of the 30th day of June 1993, treatment to a claimant in respect of personal injury, the principal regulations shall continue to apply as if these regulations had not been made.

SCHEDULE

Reg. 6 (1)

NEW SCHEDULE SUBSTITUTED

“SCHEDULE

COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED BY
RADIOLOGISTS

The costs payable by the Corporation for treatments which are radiological services specified in this Schedule and which are performed by a radiologist are—

(a) In the case of a registered specialist registered as a radiologist, the costs specified below in respect of that service; and

(b) In the case of any other radiologist, 60 percent of the costs specified below in respect of that service,—

or, in either case, the costs that the radiologist would have charged the claimant if the service were one for which the Corporation was not making a payment, whichever is the lesser.

SCHEDULE—*continued*NEW SCHEDULE SUBSTITUTED—*continued*“SCHEDULE—*continued*”COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED BY
RADIOLOGISTS—*continued*

Anatomical Site	\$
<i>A. Upper limb and shoulder girdle</i>	
1. Sternum	39.25
2. Sterno-clavicular joints	39.25
3. Clavicle	37.30
4. Acromio-clavicular joints	37.30
5. Scapula	37.30
6. Shoulder	43.05
7. Humerus	36.35
8. Elbow joint	36.35
9. Forearm	36.35
10. Hand or wrist joint or both	35.45
11. Arthrogram	119.55
14. Tomography, additional	31.60
15. Upper limb (infant)	37.30
<i>B. Lower limb and pelvic girdle</i>	
1. Sacro-iliac joints	37.30
2. Pelvis	42.10
3. Pelvis plus hip joint	42.10
4. Pelvis or both hip joints or both pelvis and both hip joints	44.00
5. Hip joint (2 projections)	43.05
6. Femur	43.05
7. Knee joint	42.10
8. Knee joint plus intercondylar projection or axial projection	43.05
9. Leg	42.10
10. Ankle joint	42.10
11. Ankle joint plus projections in forced inversion or both or projections in forced eversion or both	43.05
12. Foot	35.45
13. Foot plus projection with weight bearing	40.15
14. Arthrogram	119.55
19. Tomography, additional	31.60
20. Lower limb (infant)	37.30
<i>C. Spinal column</i>	
1. Cervical spine	50.70
2. Thoracic spine	50.70
3. Lumbar spine plus lumbo-sacral joint	53.55
4. Sacro-coccygeal spine	50.70
5. Tomography, additional	31.60
6. Lower thoracic and lumbar spine	52.60
7. Cervical and upper thoracic spine	52.60

SCHEDULE—*continued*

NEW SCHEDULE SUBSTITUTED—*continued*

“SCHEDULE—*continued*”

COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED BY
RADIOLOGISTS—*continued*

Anatomical Site	\$
8. Lumbar spine	53.55
9. Lumbar spine and sacrum	53.55
<i>D. Respiratory system</i>	
1. Nasal sinuses	36.35
2. Naso-pharynx	35.45
4. Larynx	35.45
5. Thoracic inlet	35.45
6. Chest (PA projection)	31.60
7. Chest (with lateral projection)	41.15
8. Thoracic cage	38.25
15. AP tomography, additional	38.25
16. Lateral tomography, additional	38.25
<i>F. Alimentary system</i>	
1. Upper teeth	36.35
2. Lower teeth	36.35
3. Mandible	45.00
4. Temporo-mandibular joints	45.00
8. Abdomen (single projection)	40.15
9. Abdomen (2 or more projections)	48.80
25. Tomography, additional	31.60
<i>G. Renal system</i>	
1. Plain renal	40.15
2. Intravenous pyelogram	92.80
3. Retrograde pyelogram	96.60
4. Retrograde cystogram	88.00
5. Micturating cysto-urethrogram	96.60
10. Tomography, additional	31.60
<i>J. Nervous system</i>	
1. Skull	50.70
2. Nasal bones	37.30
3. Facial bones	48.80
4. Optic foramina	46.90
6. Auditory canals	37.30
7. Lumbar myelogram or radiculogram	125.30
8. Lumbar and thoracic myelogram or radiculogram	129.10
9. Lumbar, thoracic and cervical myelogram or radiculogram	138.70
18. Tomography, additional	31.60

SCHEDULE—*continued*NEW SCHEDULE SUBSTITUTED—*continued*“SCHEDULE—*continued*”COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED BY
RADIOLOGISTS—*continued*

Anatomical Site	\$
<i>U. Ultrasound</i>	
1. Gall bladder and upper abdomen	39.25
2. Kidney and bladder	88.00
3. Head	76.50
6. Female pelvis	38.25
7. Testis	76.50
8. Foreign body localisation	76.50
9. Musculo-skeletal injury (tendon, joint, or haematoma)	76.50
<i>CT. Computerised tomography</i> —only for head injuries or spinal injuries or both and only on request by a registered specialist in respect of whom the Corporation is not prohibited from making a payment in respect of that treatment by section 27B of the Act, and with the prior approval of the Corporation.	
The Corporation shall not grant such approval unless—	
(a) The application for approval specifies that the computerised tomography is for the purpose of determining whether to request treatment to which Part II of the Schedule to the Accident Compensation (Specialists Costs) Regulations (No. 2) 1990* applies, and is likely to be followed by a request for approval for such treatment; and	
(b) The Corporation is satisfied that if such a request were to be made approval for that treatment would be likely to be given.	
1. Scan of brain (8 or more slices)	273.50
2. Scan of spine (25 slices or less)	328.00
3. Scan of spine (25 or more slices)	464.75
4. Scan of chest, abdomen, pelvis, or extremities (any number of slices)	328.00

BS. Bone Scintigraphy—only on request by a registered specialist in respect of whom the Corporation is not prohibited from making a payment in respect of that treatment by section 27B of the Act, and with the prior approval of the Corporation.

The Corporation shall not grant such approval unless—

- (a) The application for approval specifies that the bone scintigraphy is for the purpose of determining whether to request treatment to which Part II of the Schedule to the Accident Compensation (Specialists Costs) Regulations (No. 2) 1990* applies and is likely to be

*S.R. 1990/233

Amendment No. 1: S.R. 1992/33

Amendment No. 2: S.R. 1993/210

SCHEDULE—*continued*

NEW SCHEDULE SUBSTITUTED—*continued*

“SCHEDULE—*continued*”

COSTS PAYABLE BY CORPORATION IN RESPECT OF TREATMENTS PROVIDED BY
 RADIOLOGISTS—*continued*

Anatomical Site	\$
followed by a request for approval for such treatment; and	
(b) The Corporation is satisfied that if such a request were to be made approval for that treatment would be likely to be given.	
1. Single view	143.45
2. Whole body	210.40
<i>BE. Barium examinations (location of foreign body)—</i>	
1. Barium swallow	52.60
2. Barium meal	57.40
3. Barium follow through	71.75
4. Barium enema	95.65
<i>OT. Other—</i>	
1. Ascending urethrogram	76.50
2. Mammogram	57.40
3. Comparison view—opposite side	14.40
4. Venogram, limb	129.10
5. Contrast media, per 20 ml	21.05”

DIANE WILDERSPIN,
 Acting for Clerk of the Executive Council.

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 1 July 1993, omit from the Accident Compensation (Radiologists Costs) Regulations 1990 references to terms repealed by the Health Reforms (Transitional Provisions) Act 1993. Regulations affected or superseded by the sections enacted in 1993 as sections 27, 27B, and 27C of the Accident Rehabilitation and Compensation Insurance Act 1992 are amended or revoked.

Amendments are made to permit payment to a person nominated by the treatment provider.

The new regulation 5A prohibits payments being made to Crown health enterprises pursuant to the principal regulations.

A new Schedule is substituted for the existing Schedule.

The amendments made by these regulations do not affect payment for treatment provided before 1 July 1993.

Issued under the authority of the Acts and Regulations Publication Act 1989.

Date of notification in *Gazette*: 30 June 1993.

These regulations are administered in the Accident Rehabilitation and Compensation Insurance Corporation.