# Service event—Medicare fee charged, total Australian currency N[NNN].NN

## Identifying and definitional attributes

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| **Metadata item type:** | Data Element |
| **Short name:** | Medicare fee charged |
| **Synonymous names:** | Charge |
| **METEOR identifier:** | 601591 |
| **Registration status:** | • Commonwealth Department of Health, Standard 14/10/2015 |
| **Definition:** | The total amount charged as contained on accounts submitted by the practitioner to claim payment for a service provided, expressed in Australian dollars. |

## Value domain attributes

### Representational attributes

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| **Representation class:** | Total |
| **Data type:** | Currency |
| **Format:** | N[NNN].NN |
| **Maximum character length:** | 6 |
| **Unit of measure:** | Australian currency (AU$) |
| **Unit of measure precision:** | 2 |

### Source and reference attributes

| | |
|---|---|
| **Submitting organisation:** | Department of Health |

## Data element attributes

### Collection and usage attributes

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| **Guide for use:** | The provider determines the fee they charge the patient for services they provide. |
| **Collection methods:** | Derived item. |

**Comments:**

In the past, this variable along with the Schedule Fee (Fee_Used_Amt) has caused some confusion. The Schedule Fee is the fee used in calculating Medicare benefits for services provided, while the charge is the fee charged by the provider. The charge may be above, below or equal to the Schedule Fee for a particular item.

**Business rules:**

For direct billed services, the charge is equal to the benefit paid. For patient billed services paid by the HIC prior to the account being settled with the medical practitioner, the fee charged will reflect the amount recorded on the account. The medical practitioner may not subsequently receive this, since some practitioners accept the Medicare benefit as full settlement of the account.

Under Section 14 of the Health Insurance Act, the Medicare benefit cannot exceed the expense incurred, ie, should the fee charged be less than the benefit level, the benefit payable would equal the fee charged.

**Related Data Elements:**

**Adjustment Reason (ADJ_RSN_CDE)**

Where the fee charged is a negative amount, as is the case when a negative adjustment is made to a service line, the service line must be accompanied by an adjustment reason (ADJ_RSN_CDE).

# Source and reference attributes

| | |
|---|---|
| **Submitting organisation:** | Department of Health |
| **Reference documents:** | HIC Encyclopedia |
| | Medicare Statistics System (MSS) File Descriptions |

# Relational attributes

| | |
|---|---|
| **Related metadata references:** | See also Service event—amount of Medicare Benefit Schedule (MBS) benefit paid, Australian currency N[NNN].NN |
| | • Commonwealth Department of Health, Standard 14/10/2015 |
| **Implementation in Data Set Specifications:** | Medicare Benefits Schedule (MBS) state/territory data extract 2013-14Commonwealth Department of Health, Standard 14/10/2015 |

*Implementation start date:* 01/07/2013

*Implementation end date:* 30/06/2014

*DSS specific information:*

Variable name = FEECHARGED