Dr Matthew Lau
Consulting Suites, Knox Private Hospital
262 Mountain Highway, Wantirna3152
City Fertility Notting Hill
Unit 6, 33-37 Duerdin St.
Notting Hill 3168

ML OBGYN Specialist Clinic
Tel: (03) 9005 0994, 0481360083
Fax: (03) 8080 3256
Email: drmlobgyn@gmail.com
www.mlobgyn.com

	Clinic	Medicare base on 85% benefit	Out of Pocket	3rd party Billing
6-8week (16401)	170	75	95	
10-14 weeks (16500)				FTCS/ NIPT Antenatal Blood tests (BB)
16 weeks (16500)	60	41.35	18.65	Optional $2,000 to reach Medicare safety net
20 weeks				Morph Scan
22 weeks (16500)	60	41.35	18.65	
26-28 weeks (16500)	60	41.35	18.65	OGTT, FBE +/- Vit D blood test (BB)
28 weeks (16590)	3500	326.75	3,173.25	Remaining $1,500 if paid $2,000 at 16 weeks
31 weeks (16500)	60	41.35	18.65	
34 weeks (16500)				+/- growth scan + monitoring
36 weeks (16500)				
+/- 37 weeks				
38 weeks (16500)				
+/-39 weeks				
40 weeks (16500)				
+/- 41 weeks				
Total Clinic cost (estimate)	4150	732.55	3417.45	Estimation base on 10 visits
Delivery with health fund	covered			
Self funded: 16519 Uncomplicated 16522 Complicated	2000 2500	630.95 1260.20 (benefit 75%)	1369.05 1239.80	Payment will be collected by 37 weeks.
Hospital Fee	varies			
Anaesthetist Fee	varies			
Paediatrician Fee	Varies			

Please note that if the services of an Anaesthetist, Paediatrician or Surgical Assistant are required there may be further out of pocket fee from these Doctors. I will endeavour to manage your delivery personally.

However, circumstances may arise where this is not possible. I work within a group of obstetricians, one of whom will attend if such a situation arises. No extra charge will be incurred to you.

In the event of the Patient/ Spouse or Next of Kin being in default of the obligation to pay and the overdue account is then referred to a debt collection agency. The Patient/Spouse or Next of Kin shall be liable to pay the debt and commission charged by the agency. I (please print name)...have read the above Pregnancy fee schedule and agree to pay said fee within the required time frame.

Signature: Date: