

# ORTHOTISTS SCHEDULE OF FEES EFFECTIVE 1 JULY 2025



## **DEFINITIONS**

### **Treatment Cycle**

- Treatment cycle referral arrangements were introduced on 1 October 2019.
- For more information providers must refer to Notes for Allied Health Providers - Section One: General and Section 2 relevant to your profession.

**The treatment cycle does not apply to the following items:**

<b>UT13-35</b>	<b>Consumables</b>
<b>UT36-37</b>	<b>Repairs</b>
<b>UT38-40</b>	<b>Special Services</b>
<b>UT76-78</b>	<b>Multi-disciplinary case conferencing</b>
<b>UT90</b>	<b>Report</b>
<b>UT41</b>	<b>Request for Service</b>

**Any allied health services provided to a DVA client while they are admitted to hospital.**

### **Initial Consultation**

- Each treatment cycle must start with an initial consultation.
- Only one initial consultation item can be claimed with each treatment cycle.
- Includes the completion or update of a patient care plan.
- Treatment for White Card holders must be related to an accepted disability. Eligibility must be established before starting treatment and supply or an orthosis.

### **Subsequent Consultation**

- Cannot be claimed on the same day as an initial consultation for the same client.
- Should be claimed for ongoing treatment of a condition.
- Two subsequent consultations cannot be claimed on the same day.

**Shaded items require prior financial authorisation from DVA. To obtain prior financial authorisation, please contact the DVA using the details at the end of the schedule.**

**If the clinical needs of an entitled person requires provision above the specified fee or quantity limits listed in the Orthotists Schedule of Fees, orthotists are to seek prior financial authorisation before the supply of services.**

**FURTHER INFORMATION TO ASSIST YOU WHEN TREATING MEMBERS OF THE  
VETERAN COMMUNITY IS CONTAINED IN THE 'NOTES FOR ORTHOTISTS'  
AVAILABLE ON THE DVA WEBSITE AT:**

**<http://www.dva.gov.au/providers/allied-health-professionals>**

## **FACE-TO-FACE SERVICES**

### **ROOMS**

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT01	Initial Consultation – Rooms	\$75.10	GST-free
UT02	Subsequent Consultation – Rooms	\$75.10	GST-free

### **HOME**

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT03	Initial Consultation – Home	\$84.55	GST-free
UT04	Subsequent Consultation – Home	\$75.10	GST-free

## **PERMANENT TELEHEALTH SERVICES**

- Permanent telehealth services must be provided in accordance with the conditions set out in the *Notes for Allied Health Providers – Section One: General*.
- Telehealth services can only be provided if the full service can be delivered safely and in accordance with all relevant professional standards and clinical guidelines.
- Services without a specific telehealth item number must be delivered in person.
- Initial consultations cannot be provided under permanent telehealth arrangements.
- Phone consultations can only be provided when video conferencing is unavailable.
- Telehealth services can only be claimed where a visual or audio link has been established with the patient.
- Telehealth services may be delivered to clients in hospital or residential aged care facilities, where the equivalent in person service does not require prior approval.  
Telehealth may be considered outside of these requirements on a case by case basis via prior financial authorisation.

ITEM NO.	ITEM DESCRIPTION	FEE (excluding GST)	GST STATUS ++
UT70	Subsequent Consultation – Video Conference	\$75.10	GST-free
UT71	Subsequent Consultation – Phone Consultation	\$75.10	GST-free

## **TREATMENT CYCLE**

- Only one End of Cycle Report item can be claimed with each treatment cycle.
- Item is only claimable after an End of Cycle Report has been submitted to the DVA client's usual GP.
- To support continuity of care, an End of Cycle Report can be submitted after eight sessions of treatment. However, a total of 12 sessions should still be provided before moving to a new treatment cycle.
- Where the DVA client requires a shorter length of treatment and an additional treatment cycle is not required, a minimum of two sessions of treatment must be provided before an End of Cycle Report can be claimed.

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT90	End of Cycle Report	\$34.50	Taxable

## **MULTI-DISCIPLINARY CASE CONFERENCING**

- These items can be claimed for participating in multi-disciplinary case conferences.
- The case conference must be organised by the DVA client's usual general practitioner (GP), as defined in the Notes for allied health providers Section One: General.
- The case conference must include at least two allied health providers.
- Only one item per DVA client can be claimed in a three month period.

ITEM NO.	DESCRIPTION	FEE (excluding GST)	GST STATUS ++
UT76	GP initiated case conference – 15 to less than 20 minutes	\$57.00	GST-free
UT77	GP initiated case conference – 20 to less than 40 minutes	\$97.75	GST-free
UT78	GP initiated case conference – 40 minutes and over	\$162.60	GST-free

## **PRIVATE HOSPITALS**

- Treatment cycle arrangements do not apply to allied health treatment provided to DVA clients while they are admitted to hospital.
- The Department will only pay for health care services carried out by providers in private hospitals when the contract between DVA and the hospital does not already cover these services.
- It is the provider's responsibility to determine whether or not health care services are included in the bed-day rate under the DVA contract, before providing services. This can be done by contacting the Veteran Liaison Officer at the hospital or DVA.

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT07	Initial Consultation – Private Hospital	\$84.55	GST-free
UT08	Subsequent Consultation – Private Hospital	\$75.10	GST-free

## **RESIDENTIAL AGED CARE FACILITIES (RACFs)**

- A case-mix based funding model for aged care commenced on 1 October 2022 – the Australian National Aged Care Classification (AN-ACC).
- It is the responsibility of the RACF to provide allied health services consistent with each resident's individual care plan.
- It is the health care provider's responsibility to determine if the RACF is funded to deliver the allied health service before treatment is provided.
- DVA will only pay for an allied health service delivered to a DVA client living in a RACF, if the facility is not otherwise funded to provide that service.
- Where DVA funds treatment, Treatment Cycle arrangements **apply** to the services provided to DVA clients in a RACF.

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT11	Initial Consultation – RACF	\$84.55	GST-free
UT12	Subsequent Consultation – RACF	\$75.10	GST-free

## **PUBLIC HOSPITALS**

Treatment cycle arrangements do not apply to allied health treatment provided to DVA clients while they are admitted to hospital.

The Department will only pay for health care services carried out in public hospitals in exceptional circumstances, and only where DVA has given prior financial authorisation.

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT05	Initial Consultation – Public Hospital	\$84.55	GST-free
UT06	Subsequent Consultation – Public Hospital	\$75.10	GST-free

## **SUPPLY OF ORTHOSES**

The following item numbers are for orthoses supplied by orthotists. The following item numbers cannot be claimed for orthoses supplied by DVA-contracted suppliers of the DVA Rehabilitation Appliances Program (RAP) for Mobility and Functional Support.

There is a limit on the number of orthoses that can be provided to an entitled person within a 365 day period, as outlined in the table below. Additional provision above the limits requires prior financial authorisation and clinical justification

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
<b>Lower Limb Orthosis</b>			
UT13	Foot orthosis, aid or appliance, single ( <b>prefabricated</b> ) <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of one per foot per 365 day period</b>	Invoice fee+ (up to \$126.10)	GST-free (38-45)
UT14	Foot orthosis, single, shelf item ( <b>customised</b> ) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of one per foot per 365 day period</b>	\$163.75	GST-free (38-45)
UT15	Foot orthosis, single ( <b>custom</b> ) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of one per foot per 365 day period</b>	Up to \$422.65#	GST-free (38-45)
UT16	Ankle support/brace single ( <b>prefabricated</b> ), includes ankle guards <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of three per 365 day period</b>	Invoice fee+ (up to \$105.10)	GST-free (38-45)
UT17	Ankle support/brace single ( <b>customised</b> ), includes ankle guards <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of three per 365 day period</b>	\$163.75	GST-free (38-45)

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT18	Ankle level orthosis, single Ankle Foot Orthosis (AFO) <b>(prefabricated)</b> , includes moon boots/walkers <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of two per 365 day period</b>	Invoice fee+ (up to \$221.70)	GST-free (38-45)
UT19	Ankle level orthosis, single Ankle Foot Orthosis (AFO) <b>(customised)</b> , includes moon boots/walkers <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of two per 365 day period</b>	\$291.65	GST-free (38-45)
UT20	Ankle level orthosis, single Ankle Foot Orthosis (AFO) <b>(Custom)</b> <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of two per 365 day period</b>	Up to \$991.65#	GST-free (38-45)
UT21	Hip / knee level orthosis, single <b>(prefabricated)</b> - e.g. hinged braces <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of three per 365 day period</b>	Invoice fee+ (up to \$416.60)	GST-free (38-45)
UT22	Hip / knee level orthosis, single <b>(customised)</b> - e.g. hinged braces <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of three per 365 day period</b>	\$583.35	GST-free (38-45)
UT23	Hip / knee orthosis, single <b>(custom)</b> <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of three per 365 day period</b>	Up to \$1808.25#	GST-free (38-45)
UT24	Complex lower limb orthosis, single <b>(custom)</b> e.g. Knee Ankle Foot Orthosis (KAFO), Hip Knee Ankle Foot Orthosis (HKAFO) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of three per 365 day period</b>	Up to \$2566.60#	GST-free (38-45)

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
<b>Upper Limb Orthosis</b>			
UT25	Upper limb orthosis, single ( <b>prefabricated</b> ) - e.g. wrist splints, shoulder and elbow supports <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of three per 365 day period</b>	Invoice fee+ (up to \$233.40)	GST-free (38-45)
UT26	Upper limb orthosis, single ( <b>customised</b> ) - e.g. wrist splints, shoulder and elbow supports <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of three per 365 day period</b>	\$408.40	GST-free (38-45)
UT27	Upper limb orthosis ( <b>custom</b> ) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of three per 365 day period</b>	Up to \$875.05#	GST-free (38-45)
<b>Spinal Orthosis</b>			
UT28	Spinal level orthosis ( <b>prefabricated</b> ), includes abdominal binders and hernia supports <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of two per 365 day period</b>	Invoice fee+ (up to \$291.65)	GST-free (38-45)
UT29	Spinal level orthosis ( <b>customised</b> ), includes abdominal binders and hernia supports <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of two per 365 day period</b>	\$466.65	GST-free (38-45)
UT30	Spinal orthosis ( <b>custom</b> ) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of two per 365 day period</b>	Up to \$2333.25#	GST-free (38-45)
UT31	Cervical level orthosis ( <b>prefabricated</b> ) <i>Claim the invoiced cost only, not exceeding the maximum fee</i> <b>Limit of two per 365 day period</b>	Invoice fee+ (up to \$291.65)	GST-free (38-45)
UT32	Cervical level orthosis ( <b>customised</b> ) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of two per 365 day period</b>	\$466.65	GST-free (38-45)
UT33	Cervical level orthosis ( <b>custom</b> ) <i>Fee includes follow-up consultations^ and complete initial components</i> <b>Limit of two per 365 day period</b>	Up to \$875.05#	GST-free (38-45)
<b>Customisation and Manufacture of Orthoses</b>			
UT34	Scan, cast or foam impression of body part or both feet to customise an orthoses (excluding an item supplied under the RAP) or manufacture a custom orthoses <b>Limit of two per 365 day period</b>	\$105.10	GST-free**

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT35	Manufacture of custom orthosis (excludes prefabricated and customised) <i>(Note: If manufacture time exceeds 5 hours, specify the actual number of hours required to manufacture as part of prior financial authorisation. Refer to clauses 5 and 6 of the Notes for Allied Health Providers – Section 2(n) Orthotists.)</i> <b>Limit of two per 365 day period</b>	\$87.60 per hour up to 5 hours#	GST-free**

## **REPAIRS OF ORTHOSES**

Orthotists may claim repairs for normal wear and tear of an orthotic item. The following item numbers are for repairs and/or modifications to an orthosis (including items supplied under the RAP) after the first three months of supply/an episode of care. The following item numbers cannot be claimed for any repairs and/or modifications to an orthosis within the first three months of supply/an episode of care because the costs are included in the supply fee.

Orthotists may claim repairs for an orthotic item within the first three months of supply where the repair is needed for reason other than normal wear and tear. Claiming the supply and repairs of orthoses (excluding items supplied under the RAP) must occur on the date when the item is supplied and fitted or repaired, and not in advance.

There is a limit on the number of repairs that can be provided to an entitled person with a 365 days period, as outlined in the table below. Additional provision above the limits requires prior financial authorisation and clinical justification. UT36 and UT37 cannot be claimed together for the same repair.

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT36	Minor Repair (less than 30 minutes of labour) <b>Limit of two per 365 day period</b>	Up to \$58.40	GST-applicable
UT37	Major Repair (more than 30 minutes of labour) <b>Limit of two per 365 day period</b>	Up to \$175.10	GST-applicable

## **SPECIAL SERVICES**

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
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UT38	Above DVA Schedule Limits – Taxable	Fee By Negotiation	Taxable
UT39	Above DVA Schedule Limits – GST-free	Fee By Negotiation	GST-free
UT40	<p>Postage</p> <p><i>Use this item to claim an actual amount of postage or freight directly attributable to items purchased for an entitled person (excluding items ordered through RAP); and/or sent directly to an entitled person.</i></p> <p>Claim should be <b>exclusive of GST</b>, not exceeding the maximum. DVA will automatically add GST to the amount claimed.</p>	\$14.65	Taxable

## **DIRECT SUPPLY TO DVA**

The following item number is for when DVA requests that you provide:

- a written report; or
- a consultation to an entitled person, either separately or in conjunction with a written report.

For example, this may occur when DVA requires a second opinion concerning treatment for a veteran. DVA will give financial authorisation and advise the fee at the time of the request, according to this Schedule of Fees. The kilometre allowance is included in the fee, and is not to be claimed in addition to the fee.

***Note: UT41 does not cover the supply of clinical notes, care plans or other information requested by DVA as part of monitoring activities, as these are provided free-of-charge under contractual obligations. In addition, UT41 does not cover the supply of clinical justification for prior financial authorisation requests.***

ITEM NO.	DESCRIPTION	FEE	GST STATUS ++
UT41	Report or service specifically request by DVA	Fee By Negotiation	Taxable

## **KEY**

#	DVA will pay up to the specified fee depending on the clinical needs of an entitled person. If the clinical needs of an entitled person is above the specified fee or requires a greater quantity of items, an alternative fee or quantity may be negotiated with DVA as part of prior financial authorisation. DVA will pay an alternative fee or quantity under UT38 or UT39. Refer to clauses 5 and 6 of the Notes for Allied Health Providers – Section 2(n) Orthotists.
+	<p>‘Invoice fee’ means the purchase price of an item (excluding postage) plus 20 per cent of the purchase price to cover administrative costs attributable to purchasing an item for an entitled person. For example, the purchase price is \$50 and 20 per cent of the purchase price is \$10 totalling \$60. Claim \$60 as the invoice fee.</p> <p>To claim an actual amount of postage or freight directly attributable to an item purchased for an entitled person (excluding items ordered through RAP), use UT40.</p>
^	‘Follow up consultations’ means subsequent consultations for fitting and review, which may be one or more subsequent consultations.
++ <b>Recognised Professional</b>	Paragraph 38-10(1)(b) of the Goods and Services Tax (GST) Act states that only a ‘recognised professional’ can supply GST-free health services as listed in section 38-10. Please refer to section 195-1 of the GST Act for the definition of ‘recognised professional’ for GST purposes.
**	These items are only GST-free for Recognised Professionals. DVA will automatically add GST to these items when claimed by non-Recognised Professionals who are registered for GST.

## DVA CONTACTS

Further information on allied health services may be obtained from DVA. The contact numbers for health care providers requiring further information or prior financial authorisation for all States & Territories are listed below:

### PHONE NUMBER:

1800 550 457 (Select Option 3, then Option 1)

### POSTAL ADDRESS FOR ALL STATES AND TERRITORIES:

Health Approvals & Home Care Section  
Department of Veterans' Affairs  
GPO Box 9998  
BRISBANE QLD 4001

### DVA WEBSITE:

<http://www.dva.gov.au/providers/allied-health-professionals>

**DVA email for prior financial authorisation:**  
[health.approval@dva.gov.au](mailto:health.approval@dva.gov.au)

The appropriate prior approval request form can be found at: <https://www.dva.gov.au/providers/services-requiring-prior-approval>

## CLAIMS FOR PAYMENT

For more information about claims for payment visit: <https://www.dva.gov.au/providers/claiming-and-compliance/provider-claims>

**Claim Enquiries:** 1300 550 017  
(Option 2 Allied Health)

### Claiming Online and DVA Webclaim

DVA offers online claiming utilising Medicare Online Claiming. DVA Webclaim is available on the Services Australia [Provider Digital Access \(PRODA\) Service](#). For more information about the online solutions available:

- DVA Webclaim/Technical Support –  
Phone 1800 700 199 or email  
[eBusiness@servicesaustralia.gov.au](mailto:eBusiness@servicesaustralia.gov.au)
- Billing, banking and claim enquiries –  
Phone 1300 550 017
- Visit the Services Australia website at:  
[doing business online](#)

### Manual Claiming

Please send all claims for payment to:

Veterans' Affairs Processing  
Services Australia  
GPO Box 964  
ADELAIDE SA 5001

DVA provider fillable and printable health care claim forms & service vouchers are also available on the DVA website at:  
<https://www.dva.gov.au/providers/provider-forms>