

Fees at Nunawading Clinic

Effective from the 1st June 2026, the doctors at Nunawading Clinic have agreed to become a Medicare Bulk Billing practice for a trial period.

This means that Bulk Billing is available for consultations with all patients who have a valid Medicare Card seen in-person at Nunawading Clinic and for telephone/telehealth consultations from Nunawading Clinic that are eligible for Medicare Benefits.

Private fees

Private fees may apply for procedures and for services where a Medicare rebate is not available. For example:

1. Medical Procedures

Procedures vary in cost and complexity and are not part of the agreement with Medicare to become a Bulk Billing clinic. Your doctor may charge a private fee for any procedures including minor surgery eg: suturing, removal of skin lumps/cancers etc. These fees will vary with duration and complexity of the procedure. Where eligible you may be entitled to a partial rebate from Medicare.

2. Services that are not eligible for a Medicare Benefit.

Telephone/Telehealth Appointments (12 month rule) – If you have not been seen in-person by a doctor at Nunawading Clinic in the last 12 months, Medicare will not pay for the telephone/telehealth appointment. The doctor will therefore charge a non-rebateable private fee.

Iron Infusions – There is no Medicare Item number for Iron infusions. The iron infusion procedure will incur a private fee.

Ear Syringing – There is no Medicare Item number for ear syringing by the practice nurse and so this service will incur a private fee.

Workcover & TAC – Medicare does not provide a rebate for services compensated by Workcover or TAC and so these items cannot be bulk-billed. This means that at least until your employer or insurer accepts the claim and agrees to pay your medical fees you are responsible for the account. Usually you will have to pay the account and claim the cost back from your employer. If the claim is rejected (i.e. the service is no longer considered compensable by WorkCover or TAC) you should contact the clinic and we will try to arrange for a refund from your doctor and for the service to be Bulk Billed.

Medical Reports – Medical reports are administrative, they are not covered by Medicare and cannot be bulk billed. Fees vary depending on the type of report needed.

3. Other services

Wound Care – If you have a wound that requires ongoing treatment and care, ongoing visits for treatment will be bulk billed but will only be available if you provide your own dressings.

Vaccines – While the consultation for administering the vaccine will generally be bulk billed, there will be a fee for the vaccine itself (unless government funded).

Please discuss the expected cost with your doctor before any of the above services are provided.

Please note that patients seen at Vermont Health Care will be billed in accordance with the doctor's billing policy at that clinic. Vermont Health Care is not a Medicare bulk billing practice. For more information please [click here](#).