

# Perth Orthopaedic & Sports Medicine Centre

## **Keith Holt**

MBBS, FRACS (Ortho) FAOrthA

Orthopaedic Surgeon

Knee and Shoulder Surgery

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**Provider: Dr Keith Holt**

**Provider Number: 047836CK**

### **Details of the Tele-Health Consultation to be claimed with Medicare:**

**Item Numbers:** 1st Video Consultation: 91822 Follow Up: 91823

**Fee = MBS Rebate:** 1st Video Consultation: \$75.05 Follow Up: \$37.70

**Item Numbers:** 1st Phone Consultation: 91832 Follow Up: 91833

**Fee = MBS Rebate:** 1st Phone Consultation: \$75.05 Follow Up: \$37.70

### **AGREEMENT:**

If you (the patient) would like to assign the Medicare Benefit for your consultation directly to the provider (i.e. have your bill sent to Medicare directly), simply return this form by email: either by adding a signature and date to the form where indicated or, if you cannot add a signature, by typing your full name in the signature area, thereby consenting to this.

If you (the patient) are unable to sign, then a parent or guardian may do this on your behalf providing that the relationship of the person signing is both appropriate and indicated.

Patient's Name: \_\_\_\_\_

Parent or Guardian's Name (if applicable): \_\_\_\_\_

Relationship to patient (if applicable): \_\_\_\_\_

**SIGNATURE** or **NAME:** \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/2020

**To Return: 1) Perform 'Save as' - then - 2) Print if you want - then - 3) Email back**

**Privacy Note:** Your personal information is protected by law, under the Privacy Act 1988, and within the conditions for administration of payments and services. The above information is required to process your application for a claim with Medicare. Your information may be used by the department, or given to other parties where you have agreed to that, or where it is required and authorised by law (including for the purpose of research or conducting investigations). You can get more information about the way in which the department may manage your personal information, including its privacy policy, on line.