

Planning for day surgery

Health Partners



So your specialist has booked you in for day surgery – sounds quick and easy. While it does mean you'll be able to go home the day of your procedure, you may be feeling nervous and wondering what to expect.

Common day surgery procedures are typically elective surgeries such as cataracts, oral surgery, and grommets, as well as diagnostic procedures like colonoscopies and endoscopies.

These and many other procedures take place in day surgery clinics or larger hospitals and are designed to make the surgical process easier for you, to help minimise complications, maximise recovery time and free up hospitals for more serious surgical interventions.

To help support you, we explain what's involved, including how your cover works and tips on making your experience as smooth as possible.

Use this in conjunction with our Going to Hospital brochure or visit healthpartners.com.au/going-to-hospital

Understanding your costs

Some day surgery facilities may not look like large hospitals but the costs associated with your procedure are structured similarly. This means you might see 'theatre or accommodation' fees on your day surgery statement, and find that your hospital cover excess still applies to day admissions.

Excess

An excess is the amount you need to pay towards a hospital admission, and is paid directly to the hospital or day surgery facility prior to or on your admission. As day surgery is still an inpatient procedure (different to 'outpatient' procedures that might be conducted in a doctor's private rooms i.e. a skin lesion removal), you will be required to pay your excess (if you have one) consistent with the amount you selected when taking out your hospital cover. Choosing the higher excess when you take out hospital cover helps to reduce the cost of your annual premium.

Your excess is only payable once in a 12 month period – we call it a 'rolling year'. This means if you had an admission on March 1 and paid your excess, but had to be admitted again in June of the same year – you wouldn't pay the excess on the June admission, and it wouldn't be payable for any other admissions until after March 1 the following year.

Co-payment

Some covers have a co-payment which means the daily amount you agree to pay towards your hospital accommodation. The co-payment is limited to a maximum of 5 days per person to a maximum of 10 days per membership, per rolling year. Excess rules and co-payment can depend on your cover: generally they are per person, and on some family covers, kids don't pay an excess or co-payment, but it's best to check. We know it can be a bit confusing, so feel free to call 1300 113 113 and one of our Member Care consultants can help you understand.

MBS fees

Medicare sets a standard fee for all medical procedures as part of the Medicare Benefits Schedule (MBS). This is what Medicare pays the doctor/specialist to perform your procedure. When you're admitted to day surgery as a private patient, Medicare will reimburse 75% of the scheduled MBS item fee they have set, and Private Health Insurance, by law, can only pay the remaining 25%. If your specialist charges above this, it will be your out-of-pocket cost or your gap.

Out-of-pocket costs

Specialists and anaesthetists are able to set their own fees in Australia. If the doctor charges above the MBS fee, you will need to pay the 'gap', usually before surgery. Health Partners has an agreement with many doctors known as our Access Gap scheme.

This is an arrangement we have to minimise or eliminate gaps for our members. Not all doctors participate, and if they do, it's at the doctor's discretion as to whether they use Access Gap for each admission, so chat to your doctor about whether they will apply it in your situation.

4 tips to save

When you learn you might be having day surgery, call us first.

We can discuss how to reduce your out-of-pocket costs where possible, and help you understand what you're covered for.

Inpatient or outpatient?

Some facilities sometimes perform minor procedures that do not require admission and are classed as 'outpatient' treatment. Check with your doctor if you're unsure if your procedure is classed as an inpatient admission. Health insurers by law cannot cover outpatient procedures or consultations.

Don't be afraid to discuss costs with your doctor up front.

It's a good idea to get Medicare Benefits Scheme (MBS) item numbers, and quotes from your specialist, anaesthetist and anyone else involved in your surgery, just like you would for an overnight procedure. Remember to ask your specialist whether they participate in Health Partners Access Gap scheme, which may reduce or eliminate your out-of-pocket gap.

Get a second opinion if you're unsure.

Remember: if you think the quote for your surgery is too expensive, you are within your rights to seek a second opinion. Sometimes this can be as easy as ringing another surgeon and asking for a quote based on your MBS item numbers or checking with your GP for another referral if you need.

What to expect on the day

Fasting If you're having a general anaesthetic or sedation, you will need to ensure you haven't had anything to eat or drink. Your doctor or day surgery facility will let you know how long you need to fast for. If you are unsure, call your doctors rooms or day surgery facility.

Arrive early Even for a quick procedure, arrive with plenty of time to be admitted.

Recovery You will spend a short time in recovery or be asked to stay for monitoring until the doctor or nurse has given you the ok to leave. If you're in pain, make sure you let them know.

Transport Make sure to organise transport to and from the hospital, as you won't be able to drive or operate heavy machinery for at least 24 hours.

How to prepare

Your preparation will depend on what kind of surgery you're having so here are some general tips.

- Complete all required forms You will often be required by the hospital to complete admission forms electronically prior to the day of your surgery, along with any relevant eligibility checks.
- Double check your admission time Make sure you're prepared to arrive on time to ensure all pre-operative care and any last administration can be carried out. This can include the payment of any excess or co-payment due.
- Medications Discuss your regular medications with your doctor or day surgery facility to check whether you should take them on the day of your surgery.
- Ask questions Don't be afraid to ask questions of your GP and specialist on what to expect.
- Recovery at home Organise your home for your recovery ahead of time: consider stocking your freezer with frozen meals and making a comfortable recovery space. If you have had an anaesthetic or sedation, make sure you have a responsible person to pick you up and take care of you along with children or pets.
- Clothing Wear loose comfortable clothing and footwear.
- What to bring Your Health Partners card, lip balm, pen, jumper or cardigan, reading material in case you have a long wait, identification, phone, current medications and any relevant admission paperwork.
- What not to bring Leave valuables like fine jewellery at home. Hospitals are safe places, but there may not be somewhere for you to lock things up for peace of mind.

Your recovery

- Follow all post-operative instructions from both the specialist and day surgery facility. Ask questions if you are unsure.
- You'll likely have a follow up appointment with your specialist where you can discuss how the surgery went and they will check in on your recovery.
- Check what other appointments you might need to make to continue your recovery i.e. optometrist following cataract surgery or physiotherapist after knee arthroscopy. Extras cover might be useful here.
- Health Partners members with extras cover can use their membership card at participating pharmacies to save on certain prescriptions and over the counter medicines. Find out more at healthpartners.com.au/pharmacy-benefits



1300 113 113 Plan better | Pay less | Recover easier

Our team is available via phone, email or webchat. Visit healthpartners.com.au/contact

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