SURGEONS FEES

BACKGROUND

The Royal Australasian College of Surgeons (RACS) supports the principle within private practice that a professional fee charged should be justifiable and must not exploit a patient’s need or take financial advantage of the patient. This principle is clearly stipulated in the RACS Code of Conduct.

A contributing factor to concerns about surgeons’ fees is the lack of clarity or absence of clear informed financial consent (IFC), especially on any out-of-pocket expenses that may be incurred by the patient. RACS considers it a professional responsibility of surgeons to obtain informed financial consent from their private patients and strongly supports full disclosure and transparency of fees as early as possible in the patient-doctor relationship.

There are reports of a small number of surgeons charging extremely high fees for surgical procedures - some of these procedures relate to treatment for advanced malignancy - and that patients are sometimes not given ample warning of the costs for these surgical procedures. There are also reports that some surgeons charge hidden booking or administrative fees. RACS considers these fees to be unethical.

PRINCIPLES

▪ Choice: RACS supports a patient’s right to freely choose and select their own treating surgeon, in the private setting.

▪ Informed Consent: Full disclosure as to the likely outcomes of a procedure or no procedure must be given to the patient for their information within a reasonable timeframe. This means the patient understands the potential risks involved with the procedure and is prepared to proceed or not proceed. If there is any confusion or concerns about the advice or the cost, the patient should be made aware that they can seek a second opinion.

▪ Informed Financial Consent: Full disclosure of the costs of a procedure should be given to the patient for their acknowledgement and understanding, within a reasonable and acceptable timeframe. This means the patient understands the surgeon’s estimate of any patient fees (i.e. out of pocket fees) for the patient to freely accept or reject. An important aspect of IFC is to inform patients that an alternative to private care can be sought in the public system if there is any confusion or concerns about the cost the patient should be made aware that they can seek a second opinion.

▪ Surgeon’s Fees: Should be reasonable, justifiable and proportionate with no hidden booking or administration fees. The fee should not be exploitative or cause financial disadvantage to the patient. Discussion about fees is highly encouraged, any negotiation between a surgeon and a patient over fees should not restrict or unduly delay a patient’s access to quality surgical care.

▪ Fee Structures or Schedules: Any reference to published fee structures or schedules disclosed within the informed financial consent discussion should be clearly explained to the patient by their treating surgeon.

▪ Third Party: Full disclosure must be provided where any relevant or commercial interest a surgeon may have in or with a third party may influence a surgeon’s fee.

▪ Full Consultation: Sensitivity is encouraged when discussing peri-operative complications which may impact a patient’s procedure and fees. Further consultation before listing the patient for a procedure is encouraged, allowing respect and enough time for the patient to contemplate and discuss the matter with family, carers or to seek a second opinion.

Patients are encouraged to take an active role in their treatment and understand any costs associated with a procedure. Fees related to an operative procedure account for many factors, including the difficulty and duration of the procedure and the cost of providing care before, during and after the operation, such as theatre costs, anaesthesia, pathology, prostheses, other consumables and other hospital costs. The surgical procedure itself is only one component of a number of different fees the patient receives.
Before agreeing to a plan of treatment, patients are encouraged to:

- Ask for an estimated total cost of the procedure up front before agreeing to the surgery
- Confirm what is recoverable from their private health insurer or other sources and ask if there are any out-of-pocket costs.
- Before going into hospital as a private patient, ask the surgeon about the fees being charged by all of the health professionals that might be involved including anaesthesia, surgical assistants, pathology services, medical imaging, physiotherapists etc.
- Where there is concern about the proposed course of treatment or fees to be charged, ask for a second opinion or raise a concern with their referring practitioner

RACS does not set a schedule of fees for surgery and does not have regulatory powers. RACS encourages patients and surgeons alike to attempt to resolve their differences before taking the matter further.

Where a patient believes that fully informed consent has not occurred, RACS has an established process that may be able to assist. Unresolved enquiries may be escalated to the RACS Professional Conduct Committee for further action and possible sanctions.

In serious cases, involving potential misconduct, RACS may refer the complaint to the Medical Board of Australia, Medical Council of New Zealand or other appropriate authority.

ASSOCIATED DOCUMENTS

RACS Informed Consent Position Paper
RACS Informed Financial Consent Position Paper
A Patient’s Guide to Surgical Fees – Five Things to Know (Australia)
RACS Code of Conduct
Information, Choice of Treatment and Informed Consent (Medical Council of New Zealand)
Good Medical Practice: A Code of Conduct for Doctors in Australia (Australian Medical Council)
Informed Financial Consent – A Collaboration between Doctors and Patients (Australian Medical Association)

Approver: Chief Executive Officer
Authoriser: Professional Development and Standards Board