

AMA Informed Financial Consent

Informed Financial Consent (IFC) works best when doctors, hospitals and health insurers work together to provide information to patients about the costs associated with treatment, and the private health insurance benefits payable, prior to admission to hospital.

In 2013-14, 93% of all privately insured in-hospital medical services had either no gap or a known gap for the patient to pay.

The AMA encourages good IFC practice and the provision of information about medical fees to patients. Patients should always ask their doctor about his/her fees, and the fees of other doctors involved in their care, before going to hospital as a private patient.

You can find a range of useful IFC information produced by the AMA on **medical gaps** and **questions to ask your doctor** below.

AMA Policy

[AMA Position Statement on Informed Financial Consent 2015](#)

[AMA Position Statement on Setting Medical Fees and Billing Practices 2015](#)

AMA Informed Financial Consent Form Template

Below is a template doctors can use to provide written IFC to patients. Doctors can download this form and make any changes necessary to provide information about their fees to patients.

[Click Here to Download the pro-forma "estimate of fees" PDF Template](#)

[Click Here to Download the pro-forma "estimate of fees" Word Template](#)

Order "let's talk about fees..." brochures, pads and posters

The AMA IFC brochure, flyer and poster are available to download free of charge to medical practices to distribute to patients. They outline questions patients should ask their doctor and private health insurer about the cost of their treatment and any out of pockets costs they might incur before going to hospital as a private patient.

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What is a medical gap?

A medical gap (or out-of-pocket cost) is the difference between your doctor's fee and the combined amount of the Medicare rebate and the benefit your private health insurer will pay for a medical service. Government Medicare rebates have not kept pace with the increasing costs of delivering treatment.

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Doctors fees

The fees doctors charge patients for their professional medical services must cover their practice costs. Every private practising medical practitioner incurs a wide range of practice costs in order to provide a high quality services to patients.

The costs of running medical practices vary across the country, and across speciality groups. But every medical practice, be it a sole practitioner or a large corporate practice, incurs the cost of employing administrative and clinical practice staff, general running expenses such as computers, rent, electricity, professional indemnity insurance and in most cases the cost of medical equipment and supplies.

The practice costs must all be met entirely from the fee charged by the doctor for the medical services he/she provides to patients.

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Questions to ask your doctor about costs before you go to hospital

1. What are your fees?
2. Are there any fees for other doctors?
3. Will I have any out-of-pocket costs?
4. Is your fee an estimate only?
5. Can I have an estimate of your fees in writing?
6. If the cost changes, when will you let me know?
7. What if I need a prosthesis?
8. Should I contact my health fund?

Click Here for more information

Remember: If you are unclear about the total costs of your treatment... Ask your doctor and your health fund.

Related external content

Australian Association of Medical Surgical Assistants

Australian Association of Practice Managers

Australian Diagnostic Imaging Association

Australian Society of Anaesthetists

Private Health Insurance Administration Council

Private Health Insurance Ombudsman

Royal Australasian College of Surgeons

Department of Health - Private health insurance - Out of pocket expenses for private medical treatment