Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Amendment Regulations 2024

Cindy Kiro, Governor-General

Order in Council

At Wellington this 2nd day of April 2024

Present:
The Right Hon Christopher Luxon presiding in Council

These regulations are made under section 324 of the Accident Compensation Act 2001—

(a) on the advice and with the consent of the Executive Council; and

(b) on the recommendation of the Minister for ACC made in accordance with section 324(2) of that Act.

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Regulations

1 Title

These regulations are the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Amendment Regulations 2024.

2 Commencement

These regulations come into force on 1 June 2024.

3 Principal regulations

These regulations amend the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003.

4 Regulation 9 amended (Counsellors' costs)

(1) In regulation 9(1)(a), replace "$106.80" with "$112.02".

(2) In regulation 9(1)(b), replace "$83.74" with "$87.83".

5 Regulation 11 amended (Hyperbaric oxygen treatment costs)

In regulation 11(2)(a), replace "$57.97" with "$60.50".

6 Regulation 13 amended (Medical practitioners' costs)

(1) In regulation 13(2)(a)(i), replace "$61.42" with "$63.61".

(2) In regulation 13(2)(a)(ii), replace "$34.54" with "$35.77".

(3) In regulation 13(2)(a)(iii), replace "$57.52" with "$59.57".

(4) In regulation 13(2)(a)(iv), replace "$63.15" with "$65.40".

(5) In regulation 13(5)(b), replace "$47.58" with "$49.27".

7 Regulation 14 amended (Nurses' costs)

(1) In regulation 14(2)(a)(i), replace "$35.14" with "$37.92".

(2) In regulation 14(2)(a)(ii), replace "$16.51" with "$17.81".

(3) In regulation 14(2)(a)(iii), replace "$30.39" with "$32.79".

(4) In regulation 14(2)(a)(iv), replace "$36.13" with "$38.98".

8 Regulation 15 amended (Medical practitioners' and nurses' costs for combined treatment)

(1) In regulation 15(2)(a)(i), replace "$63.97" with "$66.64".

(2) In regulation 15(2)(a)(ii), replace "$37.38" with "$38.94".

(3) In regulation 15(2)(a)(iii), replace "$60.11" with "$62.62".

(4) In regulation 15(2)(a)(iv), replace "$65.69" with "$68.43".

9 Regulation 15A amended (Nurse practitioners' costs)

(1) In regulation 15A(2)(a)(i), replace "$57.64" with "$62.19".

(2) In regulation 15A(2)(a)(ii), replace "$30.22" with "$32.61".

(3) In regulation 15A(2)(a)(iii), replace "$54.00" with "$58.27".

(4) In regulation 15A(2)(a)(iv), replace "$59.27" with "$63.95".

10 Regulation 15B amended (Nurse practitioners' and nurses' costs for combined treatment)

(1) In regulation 15B(2)(a)(i), replace "$56.70" with "$61.18".

(2) In regulation 15B(2)(a)(ii), replace "$30.68" with "$33.10".

(3) In regulation 15B(2)(a)(iii), replace "$53.22" with "$57.42".

(4) In regulation 15B(2)(a)(iv), replace "$58.27" with "$62.87".

11 Regulation 16 amended (Specialists' costs)

(1) In regulation 16(2)(a)(i), replace "$103.23" with "$106.90".

(2) In regulation 16(2)(a)(ii), replace "$80.93" with "$83.81".

(3) In regulation 16(3)(a), replace "$40.47" with "$41.91".

12 Regulation 17 amended (Specified treatment providers' costs)

In regulation 17(3)(a), replace "$65.77" with "$68.99".

13 Schedule replaced

Replace the Schedule with the Schedule set out in the Schedule of these regulations.

Schedule
Schedule replaced

r 13

Schedule
Costs of treatment

rr 6, 7, 10–17

Item number	Treatment	Cost ($)
Dentists' costs		
	Examination	
DE1	Dental consultation, including examination	52.05
DE2	Periodic oral examination or review	33.46
DE3	Extended initial examination (complex cases relating to dental implants, orthodontics, and advanced restorative work), including study models, photographs, and tomography	143.70
	Radiological examination and interpretation	
DX1	Periapical or bitewing film (each)	26.01
DX2	Occlusal (each)	26.01
DX3	Panorex	68.01
DX4	Other additional images (per treatment episode)	10.26
DX7	Acute sedation (IV only) (initial consultation only)	179.61
	Emergency temporary cover	
DT1	Emergency temporary cover	50.38
	General oral surgery	
	Extractions	
DG1	Extraction of permanent or rooted deciduous tooth (per first tooth)	134.41
DG2	Surgical removal of tooth, including insertion and removal of sutures	215.54
DG4	Extraction of subsequent permanent or deciduous tooth in the same quadrant arch as for DG1	73.44
	Surgery	
DG5	Management of lacerations by suturing (per operative site)	140.11
DG7	Incision and drainage abscess cellulitis	158.05
DG8	Excision of traumatic mucous cyst	186.81
DG10	Splint application or removal (for 3 splint units)	107.76
DG11	Cleaning of wound and removal of debris	49.26
DG14	Reduction of fractured alveolar process	104.92
DG15	Repositioning of displaced tooth (per tooth) or replacing avulsed tooth	52.44
DG17	Occlusal adjustment (simple)	34.94
DG22	Minor surgical operations not otherwise covered by this schedule	150.45
DG23	Provision of bite splints	215.54
	Restorative	
DR1	Amalgam 1 surface filling (including 2 fillings on the one surface)	95.45
DR2	Amalgam 2 surface filling (approximo-occlusal)	124.85

Item number	Treatment	Cost ($)
DR3	Complex amalgam restoration	180.63
DR6	Non-metallic simple fillings (including 2 fillings on the one surface)	110.12
DR7	Non-metallic filling (2 or more surfaces per tooth)	146.87
DR8	Rebonding tooth fragment or coronal portion	98.72
DR9	Complex reconstruction in composite resin (direct)	196.09
	Prosthodontics	
DP1	Plastic denture (1 tooth—material of choice)	549.77
DP2	Each additional tooth (all dentures)	24.63
DP5	Metal-framed partial denture (1 tooth)	1,258.99
DP7	Transitional denture replacing missing tooth or teeth	500.87
DP8	Full upper or lower denture	821.10
DP11	Reline or rebase denture	257.06
DP13	Repair (all types)	83.96
DP14	Addition of tooth to existing denture (includes additional tooth)	154.21
	Crown and bridge	
	Inlay or onlay and veneers	
DC3	Indirect inlay or onlay	313.49
DC6	Porcelain veneer	922.92
DC7	Composite resin veneer	201.15
DC8	Post (wrought or preformed)	107.76
DC9	Composite or amalgam core	129.33
DC11	Cast post and core (metal or ceramic)	247.16
	Crowns	
DC15	All ceramic crown	1,091.24
DC16	Porcelain fused to metal crown	1,049.35
DC17	Cast gold crown (full and three-quarters)	986.44
	Bridges	
DC19	Maryland bridge	760.34
DC20	Composite bridge (per unit)	251.44
DC25	Re-cementing crown, bridge, veneer, or inlay	37.77
DC26	Non-composite bridge (on injured teeth that meet the requirement for a crown) (3 units)	2,570.03
DC27	Replacement of non-composite bridge	3,075.00
	Endodontics	
DN1	Pulpotomy or pulpectomy	143.70
DN2	Irrigation and dressing of root canal system	145.86
DN3	Complete preparation and obturation of root canal (per canal)—open or closed apex	323.31
DN5	Apicectomy and retrograde filling (per canal)	314.77
DN6	Removal of root filling (per canal)	252.53
DN7	Removal of post, post crown, or crown	252.53
DN8	Bleaching, 1 non-vital tooth (per treatment)	179.61
DN9	Pulp capping	41.97
DN10	Removal of fractured post or instrument	252.53

Item number	Treatment	Cost ($)
DN11	Repair of perforation	252.53
DN13	Negotiation of calcified canal (can be used with item DN3)	252.53
	Periodontics	
DD1	Gingivectomy	120.34
DD2	Crown lengthening (per tooth)	251.44
DD4	Subgingival curettage (per tooth)	100.40
DD7	Site preparation for dental implant	367.21
DD8	Placement of membrane	393.43
DD9	Substitute bone material	157.36
	Dental implants	
DM1	Resilient linings (tooth or teeth)	75.55
DM2	Fixture head impressions and copings (per fixture)	403.92
DM3	Dental implant crown (per single unit)	1,259.01
DM4	Dental stent and guide (per fixture)	136.40
DM5	Definitive abutment (per fixture)	403.92
DM6	Temporary abutment (per fixture)	50.35
DM7	Repairs to abutments (per fixture)	87.38
	Claimants under 18 years old	
DY1	Dental consultation (including examination)	67.75
DY14	Temporary crown	125.91
DY15	Temporary bridge	125.91
DY21	Surgical decoronation	440.67
DY22	Removal of deciduous teeth	30.78
Hyperbaric oxygen treatment costs		
H1	Neurological assay before recompression	100.03
H2	Neurological assay after recompression	89.99
H3	In-chamber treatment supervision (per hour)	104.57
H4	Out-of-chamber treatment supervision (per hour)	51.25
Medical practitioners', nurses', and nurse practitioners' costs		
	Burn or abrasion	
MB1	Treatment of burn not exceeding 4 cm^2	34.96
MB2	Treatment of burn at single site exceeding 4 cm^2	68.85
MB3	Treatment of significant abrasions not exceeding 4 cm^2 at single site	34.97
MB4	Treatment of significant abrasions exceeding 4 cm^2 at single site	68.85
MB5	Significant burns or abrasions (not including fractures) at multiple sites (exceeding 4 cm^2): necessary wound cleaning, preparation, and dressing	100.31
	Dislocation	
MD1	Dislocation of finger or toe with splint or strapping	40.51
MD2	Dislocation of thumb: closed reduction and immobilisation	113.51
MD3	Dislocation of elbow with radiological confirmation: closed reduction and immobilisation	105.14
MD4	Dislocation of shoulder: closed reduction and collar and cuff immobilisation	75.74
MD5	Dislocation of patella: closed reduction and cast immobilisation	180.19

Item number	Treatment	Cost ($)
	Fracture	
MF1	Fractured finger or toe (proximal, middle, or distal phalanx): closed reduction and immobilisation	40.51
MF2	Fractured finger or toe (proximal, middle, or distal phalanx): requiring local anaesthetic	56.00
MF3	Fractured metatarsal: closed reduction (not requiring cast): closed reduction, immobilisation by strapping	40.51
MF4	Fractured metacarpal(s) hand: with or without local anaesthetic, immobilisation by strapping	56.00
MF5	Fractured carpal bone, including scaphoid: treatment by cast immobilisation, not requiring reduction	126.17
MF6	Fractured tarsal or metatarsal bones (excluding calcaneum or talus): treatment by cast immobilisation	180.19
MF7	Fractured calcaneum or talus: treatment by cast immobilisation	180.19
MF8	Fractured clavicle	75.74
MF9	Fractured distal radius and ulna: cast immobilisation not requiring reduction	126.17
MF10	Fractured distal radius and ulna requiring closed reduction, involving regional or other form of anaesthesia	150.85
MF11	Fractured shaft radius and ulna: treatment by cast immobilisation	126.17
MF12	Fractured distal humerus (supracondylar or condylar): treatment by cast immobilisation	126.17
MF13	Fractured proximal or shaft humerus: immobilisation by collar and cuff or U-slab	76.51
MF14	Fractured shaft tibia or fibula, or both: treatment by cast immobilisation with reduction	180.19
MF15	Fractured distal tibia or fibula, or both: treatment by cast immobilisation with reduction	180.19
MF16	Fractured fibula (without tibial fracture): immobilisation with soft tissue strapping	76.51
	Miscellaneous	
MM1	Abscess or haematoma: drainage with incision (with or without local anaesthetic agent)	31.55
MM2	Insertion of IV line for administration of IV medications or electrolytes or transfusion (if provided under local or national guideline approved by the Corporation)	63.10
MM3	Nail, simple removal	25.27
MM4	Nail, removal or wedge resection requiring the use of digital anaesthesia	105.14
MM5	Removal of embedded or impacted foreign body from cornea or conjunctiva (with use of topical anaesthetic), or from auditory canal or nasal passages, or from skin or subcutaneous tissue with incision, or from rectum or vagina	33.97
MM6	Pinch skin graft	78.89
MM7	Dental anaesthetic	29.47
MM8	Epistaxis: arrest during episode by nasal cavity packing with or without cautery	46.60

Item number	Treatment	Cost ($)
	Open wound	
MW1	Closure of open wound (or wounds) less than 2 cm: any necessary care and treatment, including cleaning and debriding, exploration, administration of anaesthetic, and dressing	37.15
MW2	Closure of open wound (or wounds) of skin and subcutaneous tissue or mucous membrane 2 cm to 7 cm long: any necessary care and treatment, including cleaning and debriding, exploration, administration of anaesthetic, and dressing	70.89
MW3	Closure of open wound (or wounds) of skin and subcutaneous tissue or mucous membrane exceeding 7 cm long: any necessary care and treatment, including cleaning and debriding, exploration, administration of anaesthetic, and dressing	93.81
MW4	Amputation of digit, including use of anaesthetic, debridement of bone and soft tissue, and closure of wound	105.14
	Soft tissue injury	
MT1	Simple soft tissue injuries: management of simple sprain of wrist, ankle, knee, elbow, or other soft tissue injury requiring crepe bandage or similar immobilisation not requiring formal strapping	16.50
MT2	Soft tissue injury (other than splinting of dislocated or fractured digit), unless specified elsewhere: application of plaster or padded splint or specific strapping within agreed guidelines (includes splinting of Achilles tendon injury and serious ankle sprains)	76.51
MT3	Aspiration of inflamed joint, tendon, bursa, or other subcutaneous tissue or space (with or without injection)	37.12
MT4	Extensor tendon: primary repair	189.26
MT5	Ruptured Achilles tendon: management by plaster immobilisation	185.52
Radiologists' costs		
	Extremities	
RA01	Sternum	66.31
RA02	Sternoclavicular joints	75.79
RA03	Clavicle	56.84
RA04	Acromio-clavicular joints	56.84
RA05	Scapula	56.84
RA06	Shoulder	61.58
RA07	Humerus	61.58
RA08	Elbow joint	52.10
RA09	Forearm	52.10
RA10	Hand or wrist joint, or both	52.10
RA11	Wrist or hand for bone age	52.10
RA15	Upper limb (infant)	61.58
RA21	Sacroiliac joints	61.58
RA22	Pelvis or both hips (1 projection)	61.58
RA25	Hip joint (more than 1 projection)	66.31
RA26	Femur	61.58
RA27	Knee joint	56.84
RA28	Knee joint (and intercondylar or axial)	66.31
RA29	Tibia and fibula	56.84
RA30	Ankle joint	61.58
RA32	Foot	56.84

Item number	Treatment	Cost ($)
RA35	Long legs (hips to ankles), including measurement	71.05
RA40	Lower limb (infant)	66.31
	Head, neck, and spine	
RB01	Cervical spine	71.05
RB02	Thoracic spine	66.31
RB03	Lumbar spine, including lumbosacral joint	66.31
RB04	Sacro-coccygeal spine	61.58
RB08	Spine (scoliosis views)	71.05
RB10	Skull	66.31
RB12	Nasal bones	56.84
RB13	Facial bones	61.58
RB14	Optic foramina	52.10
RB16	Auditory canals (plain films only)	66.31
RB21	Nasal sinuses	52.10
RB22	Nasopharynx	61.58
RB23	Mastoids (bilateral)	66.31
RB24	Larynx or trachea, or both	56.84
RB31	Upper teeth	52.10
RB32	Lower teeth	52.10
RB33	Mandible or OPG or lateral cephalogram	71.05
RB34	Temporo-mandibular joints	71.05
RB35	Salivary gland	61.58
RB37	Pharynx	61.58
	Chest, including breast	
RC05	Thoracic inlet	61.58
RC06	Chest (1 view)	61.58
RC07	Chest (more than 1 view)	61.58
RC08	Chest and thoracic cage	75.79
RC09	Chest and both oblique views	75.79
	Mammography	
RC31	Screening mammogram	104.20
RC32	Recall mammogram	142.10
RC35	Problem mammogram bilateral	208.42
RC36	Problem mammogram unilateral	137.36
RC40	Needle localisation	279.47
RC41	Galactogram	279.47
RC45	Breast aspiration biopsy	279.47
RC46	Breast biopsy with stereotaxis	279.47
	GI, GU, and obstetrics—no contrast modifiers permitted	
	Radiology	
RD01	Abdomen (1 projection)	61.58
RD02	Abdomen (2 or more projections)	61.58
RD07	Pelvimetry (1 view)	61.58
RD08	Pelvimetry (2 or more views)	61.58

Item number	Treatment	Cost ($)
	Screening	
RD10	Contrast swallow (oesophagus only)	483.13
RD11	Contrast study upper GI tract	483.13
RD13	Small bowel meal	483.13
RD14	Small bowel enema (enteroclysis)	809.97
RD15	Contrast enema	483.13
RD20	Dynamic proctogram	483.13
RD30	ERCP	483.13
RD40	IVP, including plain film and tomography	279.47
RD44	Cystogram: retrograde or antegrade	483.13
RD45	Urethrogram	483.13
RD46	Micturating cysto-urethrogram	483.13
RD47	Ascending urethrogram	483.13
	Special procedures	
RS42	Tube injection	279.47
RS43	Dacrocystogram	279.47
RS44	Sialogram	279.47
RS46	Hysterosalpingogram	483.13
RS61	Myelogram cervical	483.13
RS62	Myelogram lumbar	483.13
RS63	Myelogram multilevel	483.13
RS70	Arthrogram	279.47
RS71	Arthrogram—upper limb	279.47
RS73	Arthrogram—lower limb	279.47
	Ultrasound	
	Abdomen and pelvis	
RU01	US abdomen	146.83
RU02	US abdomen and pelvis	184.73
RU03	US renal tracts	137.36
RU04	US abdominal aorta (without Doppler)	137.36
RU06	US pelvis (transabdominal only)	137.36
	Infants	
RU10	US infant head	137.36
RU11	US infant pylorus	137.36
RU12	US infant heart	260.51
RU13	US infant hips	137.36
RU19	US infant miscellaneous	137.36
	Various	
RU20	US thyroid or neck	137.36
RU21	US scrotum and testes	137.36
RU22	US breast	137.36
RU23	US veins	194.20
RU24	US eye	137.36
RU25	US chest	137.36

Item number	Treatment	Cost ($)
RU27	US injection or aspiration	274.73
RU28	US additional region	99.47
RU29	US miscellaneous	137.36
	Skeletal	
RU30	US shoulder	194.20
RU31	US musculo-skeletal	146.83
RU32	US foreign body localisation	108.94
RU39	US skeletal miscellaneous	146.83
	Intracavitary	
RU40	US prostate	170.52
RU41	US anus or rectum	170.52
RU42	US female pelvis (includes transvaginal and transabdominal, or transvaginal only)	170.52
RU43	US trans-oesophageal	288.93
RU44	US intraoperative	288.93
RU49	US intracavitary (miscellaneous)	170.52
	Vascular	
RU51	Duplex or Doppler of chest	232.10
RU56	Duplex or Doppler of additional limb (arterial or venous)	184.73
	Pregnancy	
RU60	US routine pregnancy less than 28 weeks	146.83
RU61	US problem pregnancy	184.73
RU62	US pregnancy exceeding 28 weeks	184.73
RU64	US with amniocentesis	274.73
RU68	US pregnancy (per extra foetus exceeding 1)	71.05
	Additional	
RX24	X-ray additional region	52.10
RX25	Domiciliary X-ray (in addition)	99.47
Specialists' costs		
	Repair recent wound	
SR1	Not exceeding 7 cm (superficial)	150.50
SR2	Not exceeding 7 cm (deeper tissue)	200.66
SR3	Exceeding 7 cm (superficial)	250.84
SR4	Exceeding 7 cm (deeper tissue)	301.00
	Fractures (closed reduction)	
SF1	Phalanges	100.35
SF2	Metacarpals (excluding Bennett's fracture)	180.60
SF3	Metatarsals	140.49
SF4	Bennett's fracture	260.87
SF5	Carpal bones	130.41
SF6	Colles' fracture	240.79
SF7	Radius and ulna—shafts	290.94
SF8	Radius—head and neck	260.87
SF9	Humerus	290.94

Item number	Treatment	Cost ($)
SF10	Talus—neck	270.91
SF11	Calcaneus	270.91
SF12	Other tarsals	170.59
SF13	Ankle—fracture dislocation (Pott's fracture)	421.39
SF14	Tibia and fibula—shaft	481.57
SF15	Tibia and fibula—upper end	421.39
SF16	Tibia and fibula—involving joint traction	491.59
SF17	Femur, any site (with or without traction)	742.45
	Haematoma, abscess, or other infection	
SH1	Small—aspiration	25.13
SH2	Large—incision and drainage (local anaesthetic)	119.78
SH3	Large—incision and drainage (general anaesthetic)	130.41
	Foreign body, removal of	
SB1	Under local anaesthetic	95.38
SB2	Under general anaesthetic	210.68
SB3	From cornea or sclera	65.26
SB4	From ear (other than by simple syringing)	100.35
SB5	From muscle, tendon, or other deep tissue	301.00
SB6	From nose (other than by simple probing)	120.40
SB7	From throat (additional fee)	100.35
	Dislocations (closed reduction)	
SD1	Elbow, wrist, thumb, and fingers with strapping or splint	200.66
SD2	Shoulder	120.40
SD3	Patella	170.59
SD4	Hip	240.79
	Plaster	
SP1	Upper limb—above elbow	150.50
SP2	Upper limb—below elbow	130.41
SP3	Lower limb—above knee	180.60
SP4	Lower limb—below knee	150.50
	Other	
SM1	Aspiration of joint	25.13
SM2	Amputation of all or part of 1 digit	220.76
SM3	Extensor tendon (primary repair)	351.16
SM4	Nail (simple removal)	100.35
Specified treatment providers' costs		
POD3	Podiatry: abscess or haematoma: drainage with incision (with or without local anaesthetic agent)	33.22
POD4	Podiatry: nail, simple removal	26.60
POD5	Podiatry: nail, removal or wedge resection requiring the use of digital anaesthesia	110.68
XRAY	X-ray services provided by chiropractor (maximum of 2 films per claimant per personal injury)	16.81
TMT	Any other treatment	27.42

Rachel Hayward,
Clerk of the Executive Council.

Explanatory note

This note is not part of the regulations but is intended to indicate their general effect.

These regulations, which come into force on 1 June 2024, amend the Accident Compensation (Liability to Pay or Contribute to Cost of Treatment) Regulations 2003 (the **principal regulations**). The amendments increase the costs that the Accident Compensation Corporation is liable to pay under the principal regulations for the treatments that those regulations relate to.

Regulatory impact statement

The Ministry of Business, Innovation, and Employment produced a regulatory impact statement on 23 June 2023 to help inform the decisions taken by the Government relating to the contents of this instrument.

A copy of this regulatory impact statement can be found at—

- https://www.mbie.govt.nz/dmsdocument/27564-regulatory-impact-statement-proposals-for-updates-to-acc-regulations-dealing-with-treatment-payments-after-2022-review-proactiverelease-pdf
- https://treasury.govt.nz/publications/informationreleases/ris

Issued under the authority of the Legislation Act 2019.
Date of notification in *Gazette*: 4 April 2024.
These regulations are administered by the Ministry of Business, Innovation, and Employment.

Wellington, New Zealand:
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