



# *Government Gazette*

of the State of

New South Wales

**Number 519–Other**  
**Friday, 4 November 2022**

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## **ASSOCIATIONS INCORPORATION ACT 2009**

Cancellation of registration pursuant to section 80

TAKE NOTICE that **BYRON BAY COMMUNITY ASSOCIATION INC – Y0161701** became registered under the Corporations Act 2001 as **BYRON COMMUNITY CENTRE LTD - ACN 660 579 760** a company limited by guarantee, on 20 July 2022 and accordingly its registration under the Associations Incorporation Act 2009 is cancelled as of that date.

Terri McArthur  
Delegate of the Commissioner,  
NSW Fair Trading  
28 October 2022

## GEOGRAPHICAL NAMES ACT 1966

PURSUANT to the provisions of Section 8 of the *Geographical Names Act 1966*, the Geographical Names Board hereby notifies that it proposes to assign the names:

- **Shellharbour North Beach** for a beach approximately 1km long located to the north of Shellharbour township between Cowrie Island and Barrack Point
- **Shellharbour South Beach** for a beach approximately 700 metres long located to the south of Shellharbour township between Shellharbour Beachside Holiday Park and the break wall
- **Gadhu Beach** for a beach approximately 80 metres long located immediately south of the break wall

The position and extent for these features is recorded and shown within the Geographical Names Register of New South Wales. The proposal can be viewed and submissions lodged on the Geographical Names Board website at [www.gnb.nsw.gov.au](http://www.gnb.nsw.gov.au) from 4 November to 4 December 2022. Alternatively, written submissions may be mailed to the Secretary, Geographical Names Board, 346 Panorama Ave, Bathurst, NSW 2795.

In accordance with Section 9 of the *Geographical Names Act 1966*, all submissions lodged may be subject to a Government Information (Public Access) application and may be viewed by a third party to assist the Board in considering this proposal.

NARELLE UNDERWOOD  
Chair

Geographical Names Board  
346 Panorama Ave  
BATHURST NSW 2795

## GEOGRAPHICAL NAMES ACT 1966

PURSUANT to the provisions of Section 10 of the *Geographical Names Act 1966*, the Geographical Names Board has this day assigned the name listed hereunder as a geographical name.

**Lake Victoria Parklands** for a reserve located adjacent to Lake Victoria Way and Warradale Road, in the suburb of Silverdale, Wollondilly LGA.

The position and extent for this feature is recorded and shown within the Geographical Names Register of New South Wales. This information can be accessed through the Board's website at [www.gnb.nsw.gov.au](http://www.gnb.nsw.gov.au)

NARELLE UNDERWOOD  
Chair

Geographical Names Board  
346 Panorama Ave  
BATHURST NSW 2795

## **ASSOCIATIONS INCORPORATION ACT 2009**

### **Cancellation of incorporation pursuant to section 74**

TAKE NOTICE that the incorporation of the following associations is cancelled by this notice pursuant to section 74 of the Associations Incorporation Act, 2009.

<b>BATEMANS BAY BOATERS ASSOCIATION INCORPORATED</b>	<b>INC1601008</b>
<b>BEARDSON FOR CONSERVATION INCORPORATED</b>	<b>INC1400628</b>
<b>CASINO QUOTA CLUB INCORPORATED</b>	<b>Y0499601</b>
<b>EPPING RSL SWIMMING CLUB INC</b>	<b>INC1600390</b>
<b>LOGOSLIFE INTERNATIONAL INCORPORATED</b>	<b>INC9896528</b>
<b>NAMOI FLOWER GARDEN CLUB INCORPORATED</b>	<b>INC9886037</b>
<b>SYDNEY KOREAN WRITERS CLUB INCORPORATED</b>	<b>INC9885559</b>
<b>THE ESSENTIAL FOUNDATION INCORPORATED</b>	<b>Y1140020</b>
<b>UPPER HUNTER CHRISTIAN EDUCATION ASSOCIATION INCORPORATED</b>	<b>INC9896677</b>
<b>WAGGA AND DISTRICT BOWLING ASSOCIATION INCORPORATED</b>	<b>Y2645219</b>

Cancellation is effective as at the date of gazettal.

Dated this 3rd day of November 2022

Megan Green  
Delegate of the Commissioner for Fair Trading  
Department of Customer Service

## Plumbing and Drainage Act 2011

Order under section 20

I, Stephen Sharp, Manager Plumbing, Building Construction and Compliance, Better Regulation Division, Department of Customer Service as delegate under the Plumbing and Drainage Act 2011 (the Act):

- (1) pursuant to sections 20(1) of the *Plumbing and Drainage Act 2011* by this Order, authorise the fittings described in Schedule 1 to be, on and from the date on which this Order is published in the *New South Wales Government Gazette*, authorised fittings to be used for plumbing and drainage work for the purposes of Section 8 of the *Plumbing and Drainage Act 2011*.

Signed this 3rd day of November 2022



Stephen Sharp  
MANAGER PLUMBING  
BUILDING CONSTRUCTION AND COMPLIANCE  
BETTER REGULATION DIVISION  
DEPARTMENT OF CUSTOMER SERVICE

### Attachments

- Schedule 1

## Schedule 1

### Authorised fittings to be used for plumbing and drainage

#### 1. HYDRALOOP

A fitting that -

- (a) is defined by NSW Health as a Greywater Processing Device (GPD)
- (b) is manufactured in the Netherlands by Hydraloop BV; and
- (c) receives wastewater from a shower, bath and/or washing machine, and uses physical separation, biological treatment, and disinfection with UV light to produce greywater suitable for household re-use;

Can be used for Plumbing and Drainage work under the following factors-

- (a) only installed as part of a trial initiated by Sydney Water Corporation on the effects of water re-use and conservation, until the fitting meets the evidence of suitability outlined in Part A5 of the Plumbing Code of Australia; and
- (b) the Sydney Water Corporation shall advise the plumbing regulator the address or addresses where the fitting is installed; and
- (c) any pressurised greywater pipe work connected on the outlet of the fitting shall have a recycled water rough in type inspection arranged in accordance with s.13(1) of the Plumbing and Drainage Act 2011; and
- (d) on the initial commissioning of the fitting a recycled water final inspection shall be arranged in accordance with s.13(1) of the Plumbing and Drainage Act 2011; and
- (e) the fitting is installed in compliance with any requirements under Local Government Act 1993; and
- (f) the fitting manufacturers installation instructions are adhered to including future servicing requirements: and
- (g) any faults identified associated with the fitting that pose an imminent threat to public health are to be advised to the plumbing regulator in accordance with s. 11(2) of the Plumbing and Drainage Act 2011; and
- (h) at the completion of the trial period determined by Sydney Water Corporation, should the fitting not meet the evidence of suitability outlined in Part A5 of the Plumbing Code of Australia, the fitting shall be disconnected and removed from use.

**Workers Compensation (Private Hospital Maximum Rates)  
Order 2022**  
under the

*Workers Compensation Act 1987*

I, Adam Dent, Chief Executive, State Insurance Regulatory Authority, pursuant to section 62 (1A) of the *Workers Compensation Act 1987* make the following Order.

Dated this 2<sup>nd</sup> day of November 2022



Adam Dent  
Chief Executive  
State Insurance Regulatory Authority

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**1. Name of Order**

This Order is the *Workers Compensation (Private Hospital Maximum Rates) Order 2022*

**2. Commencement**

This Order commences on 7 November 2022.

**3. Application of Order**

This Order applies to the hospital treatment of a worker at a private hospital, being treatment of a type referred to in clause 5 and provided on or after the date of commencement of this Order, whether the treatment relates to an injury that is received before, on, or after that date. This Order sets the maximum fees for which an employer is liable under the *Workers Compensation Act 1987* for any treatment provided by a Private Hospital with respect to an injured worker.

For clarity, this Order applies to treatment provided to exempt workers and to injured workers receiving treatment under the Act outside of NSW.

**4. Definitions**

In this Order:

***the Act*** means the *Workers Compensation Act 1987*.

***the Authority*** means the State Insurance Regulatory Authority as constituted under section 17 of the State Insurance and Care Governance Act 2015.

***Admitted patient*** means a patient who undergoes a hospital's admission process to receive treatment and/or care. This treatment and/or care is provided over a period of time and can occur in hospital and/or in the person's home (for hospital-in-the-home



patients).

**Electroconvulsive therapy (ECT)** means treatment involving the delivery of brief, carefully controlled electric currents through the brain.

**GST** means the goods and services tax payable under the GST Law.

**GST Law** has the same meaning as in the A New Tax System (Goods and Services Tax) Act 1999 (Cth).

**Health record** means a record of the health information of an individual.

**Health Information** has the same meaning as in the Health Records and Information Privacy Act 2002.

**Insurer** means the employer's workers compensation insurer.

**Intensive care (level 1 or level 2)** has the same meaning as clause 6(h) of the Private Health Facilities Regulation 2017 in relation to an intensive care (level 1 or level 2) class private health facility. Staffing must meet the requirements set out in Part 8 of Schedule 2 of the Private Health Facilities Regulation 2017. In accordance with Part 8 of Schedule 2 of the Private Health Facilities Regulation 2017, and the standards referenced within this Regulation, ventilated and critically ill patients require a minimum nurse to patient ratio of 1:1, and a minimum 1:2 nurse to patient ratio for lower acuity patients (clinically determined).

**Non-admitted patient** means a patient who does not undergo a hospital's formal admission process. There are three categories of non-admitted patient: emergency department patient; outpatient; and other non-admitted patient (treated by hospital employees off the hospital site – includes community/outreach services).

**Private hospital** means a hospital or licensed private health facility (as defined in the Private Health Facilities Act 2007) but excludes a public hospital.

**Same day patient** means an admitted patient who is admitted and discharged on the same date.

## **5. Fees for private hospital patient services generally**

- (1) An employer is not liable under the Act to pay any amount for hospital treatment provided to a worker at a facility that is not a public hospital or a private hospital as defined.
- (2) Where the service is a taxable supply for the purposes of the GST Law, the amount in the last column of the attached Table should be increased by the amount of GST payable.
- (3) The theatre fees include the costs of consumable and disposable items. Only in exceptional circumstances will additional fees be paid for high cost consumable and disposable items on provision of evidence from the hospital that the item is reasonably necessary.

- (4) There are Medical Benefits Schedule item numbers on the National Procedure Banding list that change the band to be applied dependent on the provision of a complexity certificate. If the procedure involves one or more of the indicators of high cost or complexity listed on the certificate, the higher banding is payable. A certificate of complexity must accompany the invoice claiming a higher banding level.
- (5) The facility fees also include the cost of pharmaceutical items provided during the admission. Only pharmaceutical items provided at discharge may be charged separately.
- (6) The overnight facility fees also include the cost of all allied health services provided during the admission except for overnight Rehabilitation patients. For overnight Rehabilitation patients allied health services are to be charged in accordance with the relevant Workers Compensation Fees Order for that professional discipline. Where services are provided by allied health disciplines with no relevant Fees Order, these providers must bill using the relevant payment classification code for their discipline e.g. OAS002 for occupational therapists, OTT002 for speech pathologists and OTT006 for all other therapies and treatments, at the equivalent rate for Physiotherapists under the Workers Compensation (Physiotherapy, Chiropractic, Osteopathy Fees) Order (applicable at the time of service) that best reflects the service provided.
- (7) Same day admissions for full and half day Rehabilitation and Psychiatric programs (excluding ECT) should be charged using the applicable Day Facility Fee. This fee includes the cost of all allied health services provided during the admission (including any allied health services which may not be covered by a Workers Compensation Fees Order).
  - (a) A Full-Day Rehabilitation Program is for patients who have an established rehabilitation need, do not require overnight care, and whose rehabilitation program and goals require the involvement of a multidisciplinary team. Full-Day rehabilitation programs should be used for treatments with at least 3 hours' duration.
  - (b) A Half-Day Rehabilitation Program is for patients who have an established rehabilitation need, do not require overnight care, and whose rehabilitation program and goals require the involvement of a multidisciplinary team. Half-Day rehabilitation programs should be used for treatments with at least 1.5 hours' duration.
  - (c) A Full-Day Psychiatric Program (excluding ECT) is for patients who have an established need for mental health services, do not require overnight care, and whose psychiatric program and goals require the involvement of a multidisciplinary team. Full-Day psychiatric programs should be used for treatments with at least 4.5 hours' duration.
  - (d) A Half-Day Psychiatric Program (excluding ECT) is for patients who have an established need for mental health services, do not require overnight care, and whose psychiatric program and goals require the involvement of a multidisciplinary team. Half-Day psychiatric programs should be used for treatments with at least 2.5 hours' duration.

## **6. Invoices for private hospital patients**

Invoices for private hospital patients are to be submitted to insurers and must include the following information:

- worker's first name and last name and claim number
- payee details
- ABN
- name of service provider who provided the service
- date of service
- Authority payment classification code
- Medicare Benefits Schedule (MBS) item and theatre band (where applicable)
- service cost for each Authority classification code
- theatre duration (if applicable)

## **7. Additional Information**

The insurer or the Authority may request additional information as evidence of the service provided and billed.

## **8. Fees for Surgically Implanted Prostheses and Handling**

- (1) Surgical prostheses are to be selected from the Department of Health Prostheses List (in accordance with the Private Health Insurance (Prostheses) Rules (Cth) rate current at the time of service) at the minimum benefit rate.
- (2) A 5% handling fee may be applied to each item up to a maximum of \$179.30 per item.

## **9. Fees payable for Allied Health Services for Non-Admitted patients for single mode of therapy for an individual or group program up to 2 hours**

- (1) Where a worker is provided with allied health services as a non-admitted patient for either a single mode of therapy or group program in a private hospital, the maximum amount for which an employer is liable under the Act for the provision of those services is in accordance with the relevant Workers Compensation Fees Order for that professional discipline.
- (2) Where there is no relevant Workers Compensation Fees Order for an allied health service provided, the service must be billed in accordance with the relevant community rate for that professional discipline.
- (3) A group program, defined as two or more patients receiving the same service at the same time with allied health or medical professionals, must be outcome based with a return to work emphasis.

## **10. Single rooms**

There is no additional fee payable for a single room.

## 11. Fees for Electro Convulsive Therapy (ECT)

As there is no theatre banding fee for ECT, this service is to be billed using the facility fee Band 3 (PTH006) and theatre Band 1 (PTH008) stated in the Fee Schedule to this Order.

Code	Private Hospitals Fee Schedule – commencing 7 November 2022 Under section 62 (1A) of the <i>Workers Compensation Act 1987</i>	Maximum Fees for services
<b>OVERNIGHT FACILITY FEES (Daily)</b>		
<b>PTH001</b>	<b>Advanced surgical</b> 1 to 14 days	\$889.30
	>14 days	\$602.60
<b>PTH002</b>	<b>Surgical</b> 1 to 14 days	\$837.10
	>14 days	\$602.60
<b>PTH003</b>	<b>Psychiatric</b> 1 to 21 days	\$795.50
	22 to 65 days	\$615.10
	Over 65 days	\$564.70
<b>PTH004</b>	<b>Rehabilitation</b> 1 to 49 days	\$864.10
	>49 days	\$635.00
<b>PTH005</b>	<b>Other (Medical)</b> 1 to 14 days	\$743.20
	>14 days	\$602.60
<b>PTH007</b>	<b>Intensive Care</b> < 5 days, level 2	\$3,458.20
	< 5 days, level 1	\$2,393.90
<b>PTH006</b>	<b>DAY FACILITY FEES (including Accident and Emergency attendance) (Daily)</b>	
	<b>Psychiatric</b>	
	Full-Day Program – treatments with at least 4.5 hours' duration	\$382.40
	Half-Day Program – treatments with at least 2.5 hours' duration.	\$298.80
	<b>Rehabilitation</b>	
	Full-Day Program – treatments with at least 3 hours' duration	\$382.40
	Half-Day Program - treatments with at least 1.5 hours' duration	\$298.80
	Band 1 – absence of anaesthetic or theatre times	\$382.40
	Band 2 – local anaesthetic, no sedation	\$449.10
	Band 3 – general or regional anaesthetic or intravenous sedation, less than 1 hour theatre time	\$506.90
Band 4 – general or regional anaesthetic or intravenous sedation, 1 hour or more theatre time	\$566.40	

<b>PTH008</b>	<b>THEATRE FEES – as per national procedure banding schedule</b> Multiple procedure rule: 100% of fee for first procedure, 50% for second procedure undertaken at the same time as the first, 20% for the third and subsequent procedures undertaken at the same time as the first.	
	Band 1A	\$214.80
	Band 1	\$382.40
	Band 2	\$654.90
	Band 3	\$801.00
	Band 4	\$1,084.20
	Band 5	\$1,592.80
	Band 6	\$1,827.40
	Band 7	\$2,442.50
	Band 8	\$3,400.50
	Band 9A	\$3,516.00
	Band 9	\$4,492.90
	Band 10	\$5,314.50
	Band 11	\$6,292.30
	Band 12	\$6,799.20
	Band 13	\$8,246.00
<b>PTH009</b>	<b>SURGICAL PROSTHESES FEES</b>	
	Prostheses	As per Dept of Health listed minimum rate
	Handling fee	5% of prosthesis fee capped at \$179.30
<b>WCO005</b>	<b>PROVISION OF HEALTH RECORDS</b>	
	Fee for the electronic provision of health records	Flat fee of \$60
	Fee for providing hard copies of health records (only where not maintained electronically).	\$38 (for first 33 pages or less) and an additional \$1.40 per page (up to a maximum of \$162 for additional pages) if more than 33 pages. This fee includes postage and handling