

EAT LOVE LIVE

Fee Schedule

Eat Love Live is committed to providing compassionate, individual, evidence informed and effective support for all our clients. All Eat Love Live clinicians have additional training in supporting people with eating disorders and are [Credentialed Eating Disorder Clinicians](#) (CEDC).

The Eat Love Live team are supported by clinical leaders with over 20 years' experience in the provision of eating disorder support and are committed to ongoing training and regular supervision to ensure they are providing safe and effective support for all clients.

The initial assessment is an important part of engagement in the healing process. [You can read more about what to expect here.](#)

After an initial assessment with a clinician, they will then spend considerable further time formulating a support plan, connecting with treatment teams and completing the relevant documents and communication. This is reflected in the higher cost of initial assessments.

Fees

Eat Love Live charge for services provided in line with our scheduled fees which reflect that you are accessing a specialist, private service. Eat Love Live is not a registered NDIS provider.

NDIS standards are that a dietitian and physiotherapist charge \$193.99 per one hour block. This is below our scheduled fee. NDIS clients will incur (and must agree to cover) an out of pocket fee (OOP) to meet Eat Love Live's standard fees as a private practice.

Face to Face & Telehealth Consultations Dietitian and Physiotherapy:

Appointment type	Appointment fee	NDIS to cover	Out of Pocket fee (OOF)/ Cost incurred to client
Initial assessment (60 mins)	\$240	\$193.99	\$46
Standard review (60 mins)	\$225	\$193.99	\$31
Late cancellation/failure to attend – Standard review (60 mins) OR Initial Assessment (60min)	\$225	\$193.99	\$31 \$46 (Initial)

Report writing, advocacy letters & extra administration to support client care (per hour or pro rata)	\$225	\$193.99	\$31
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If there are insufficient funds from NDIS to pay an invoice the Client will be liable to settle the invoice with Eat Love Live and claim this back from NDIS in the future.

Eligibility

As an out of pocket fee (OOP) applies to all sessions with our clinicians to bridge the gap between the NDIS schedule rate for appointments and our private practice fee schedule, Eat Love Live will only be able to work with Self-Managed NDIS clients entering into NDIS Service Agreements or Plan managed clients that **have permission from their plan manager prior to engaging that they are able to accept a provider with an Out of Pocket fee.**

The NDIS does not allow for Plan Managed participants to pay an out of pocket fee (OOP) for services in therapy and some Plan management companies are happy to support these NDIS agreements and allow the client to pay the OOP cost. Please contact your individual plan manger for confirmation.

Self-Managed NDIS participants can use registered or unregistered NDIS providers (and are not subject to NDIS price limits), the NDIS states that those who are Plan Managed have a price limit of \$193.99 per one hour block with a dietitian and physiotherapist as such the OOP fee is charged as a separate line item.

We appreciate that many clients are drawn to our service because of the calibre of our clinicians, their specialist areas of expertise and our unique practice values. If you are Plan Managed NDIS participant and we are unable to support you through our service, please reach out to our reception team on (03) 9087 8379 for recommendations of like-minded clinicians and practices we can refer you to.

Invoicing

Invoices for appointments will feature two billable items: the cost of the appointment billable to NDIS, and the out of pocket cost for the appointment incurred by the client.

Self-Managed NDIS clients: Self-managed NDIS clients are to settle the full invoice as per Eat Love Live's scheduled fees – on the day of the appointment. The paid invoice will then be supplied via email for the client to claim independently.

Session structure:

Client facing time

This is a minimum for 3/4 of the allocated time and includes the time that the clinician and client are interacting.

Non-client facing time

This is a maximum of 1/4 of the allocated session time and is the time that the clinician spends engaged in associated administration that ensures quality care and optimal outcomes. This includes

time to prepare for the session, time to review and reflect post session and document important information. This also includes time connecting and advocating with the multidisciplinary care team to ensure consistent, evidence-based support and optimum outcomes for the client.

Administration to support client care

This may include and is not limited to:

- Clinician time to attend and engage in case conferences and meetings that are not covered by Medicare care plan item numbers.
- Support and advocacy letter writing including for special consideration, disability support, NDIS plan creation and miscellaneous that require more than the non-client facing time of sessions; and are not covered by Medicare item numbers or NDIS plans.
- Creating reports and additional considerable communication about sessions for a parent not in the session, such as split families.

Please note that a minimum of 3 hours of the allocated funding provided by NDIS for dietetic or physiotherapy services need to be reserved for reports writing and team meetings.

Session duration

Please consider when booking reviews the time you will need to address all the items on your agenda. We recommend reviews are booked as the Standard Review (60-minute session time in the calendar), especially during the assessment period and when starting to work with a clinician.

The clinician will discuss with you when it is appropriate clinically to book shortened reviews.

If a Standard Review is booked and all of the time is not needed, such as the consultation and non-client facing time is completed within a short review period - the lower fee will be charged.

Client's responsibilities

Clients need to ensure that our reception has a copy of their NDIS plan and signs and returns the NDIS agreement form provided to them a minimum of 48 hours prior to the scheduled initial assessment.

If this is not complete withing 48 hours prior to the initial assessment, we will cancel the appointment to avoid incurring a Late cancellation/ Failure to attend fee.