
Paying for pregnancy, birth and newborn baby care

Summary

- The cost of having a baby in Victoria will depend mostly on whether you choose to use the public or private health system.
 - Most women in Victoria choose to have their babies through the public hospital system. This is a safe, high-quality and affordable option.
 - Families can choose from a number of 'models of care' including midwifery-led models, birth centres, home births, and care that is shared between your general practitioner (GP) and your nearest hospital.
 - Having your baby through the private health system can incur high costs, even if you have private health insurance.
 - Free Maternal and Child Health services throughout Victoria will help you ensure your baby meets their growth targets.
 - Some Centrelink payments are available to eligible families to offset the costs of caring for a baby.
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The cost of having a baby in Victoria can vary considerably from one family to another, depending mostly on whether you choose to use the public or private health system.

The costs of your healthcare – antenatal care, hospital costs for the labour and birth, and any follow-up care – are one consideration. Then there are other costs associated with having a baby that you might need to factor in: preparing a nursery and buying or renting equipment such as car seats or baby capsules and prams. One parent giving up work to care for the baby can add more financial strain if you are going from two incomes in the household to one.

Some families will be eligible for certain **Centrelink** payments to offset the cost of having a baby in Victoria.

Public hospital care

Most women in Victoria choose to have their babies through the public hospital system. This is a safe, high-quality and affordable option.

For **Medicare** card holders, most of the costs of your care and hospital stay will be covered.

Which maternity hospital you use will depend on where you live, your health and your preferences. See the fact sheet **[Having a baby in Victoria](#)** for more information.

Models of antenatal care available in Victoria

There are a number of models of antenatal care (care during pregnancy) available in Victoria. Again, which one you choose will depend on your medical history, your preferences and where you live.

Midwives clinics

Clinics with midwifery-led care will look after all your needs during your pregnancy. This is unless there are complications, in which case you might be referred to an obstetrician.

You will see the same midwife or group of midwives throughout your pregnancy and your baby will be delivered by the midwives and doctors that are on duty in the birthing unit. All public hospitals can offer home visits with a midwife if you go home early (usually within 48 hours after the birth).

Midwives clinics are generally attached to public hospitals in Victoria, so Medicare will mostly cover your antenatal care.

Team midwifery and midwifery group practice

Under team midwifery and midwifery group practice, the same group of midwives will care for you throughout your pregnancy, labour and birth, and during the postnatal period.

Many women prefer this option because it means that the midwives they become familiar with throughout their pregnancy are also there for their labour and birth, and postnatal care.

Many of the larger public hospitals in metropolitan areas offer this model of antenatal care. If you have a Medicare card and use a public hospital, your out-of-pocket expenses will be minimal.

Shared care

Shared care is where your care needs are met by your choice of healthcare professional (generally your GP) and your maternity hospital. Under this model, you will receive most of your care from your chosen healthcare professional. You will still go to the hospital for a small number of visits and for the birth or if there are complications.

Some women prefer this model if it means they can have the majority of their antenatal care needs provided by a doctor with whom they already have a relationship.

If you choose this model, you will have to pay the difference between what your GP charges and the Medicare rebate. If your doctor bulk-bills, you will have no extra care costs.

Birth centre

Birth centres are mostly located in hospitals, and are staffed and run by midwives. Being located in a hospital, there is medical back-up if complications occur.

Whether you can use this option will depend on your health, where you live and your birthing history. You will not be able to use this option if you have a high-risk pregnancy.

If the birth centre is attached to a public hospital, for Medicare card holders, most of the costs of your care and hospital stay will be covered.

Home birth

If you choose to have a home birth, the costs will vary depending on whether you are cared for under the public or private home birth model.

A public home birth program is available at selected public health services. Under this model, you will be cared for by public hospital midwives throughout your pregnancy, labour and birth, and postnatal period. If you have a Medicare card your out-of-pocket expenses will be minimal.

Whether you can use this option will depend on your health, where you live and your birthing history. You will not be able to choose this option if you have a high-risk pregnancy.

If you choose to have your baby at home under the private home birth model, you will need to organise a private midwife to attend the birth. Private midwives work for themselves rather than a hospital, meaning there is a cost for this service.

Eligible private midwives are authorised to provide Medicare-rebated care. You will need to check whether your chosen private midwife is eligible and what the total costs are likely to be. With the Medicare rebate, this often means you will get about half of the costs back. Some private health funds also offer rebates for private midwifery services.

Under this model, you might have one midwife who sees you throughout your pregnancy and then attends the birth. Sometimes this service is offered by a small group of midwives, any one of whom will attend the birth.

Private hospital and antenatal care

If you want to choose your own obstetrician and have your baby at a particular hospital, you will have to use the private health system. This will mean you are liable for all the costs associated with your antenatal care. If you have private health insurance, the insurer will cover a portion of your costs (depending on your policy) but you will still be out of pocket.

How much you will be out of pocket depends on:

- what your obstetrician charges
- how much care you require (including tests and scans)
- if you require a caesarean for the birth
- which hospital you choose
- your private health insurance policy.

Receiving care if you do not have a Medicare card

If you do not have a Medicare card, you will be liable for all the costs associated with your pregnancy, labour and birth, and postnatal care for you and your baby, whether it is provided in the public or private health system. In many cases you will be asked to pay for these services upfront.

Some countries, such as New Zealand, Ireland and the United Kingdom, have what is called a 'Reciprocal Health Care Agreement' with Australia. If you are a citizen of one of the 11 countries that are part of the agreement, you may be entitled to limited subsidised health services for *medically necessary* treatment. This means it only applies to episodes of ill-health or injury that occur while you are visiting Australia, and that must be treated before you can return home. It does not include planned or elective treatment.

If you are visiting Australia on a student visa, you may not be eligible for Medicare assistance. In this case, and as a condition of your student visa, you might be required to take out Overseas Student Health Cover.

If you are an asylum seeker or refugee, you are entitled to free medical care except for a small co-payment for medications.

The Royal Women's Hospital publishes a **list of its fees** on its website. This can be used as a guide to fees in the public health system.

Paying for newborn care

For healthy babies, the costs associated with newborn baby care are minimal thanks to the Commonwealth Government's Australia-wide immunisation program and Victoria's free Maternal and Child Health services. If your baby is admitted to a special care nursery and you don't have a Medicare card, or are a private patient, there may be some costs. Check with the hospital and your health care fund.

Vaccinations for newborn babies

In Victoria, there is a routine schedule of vaccines (for Australian citizens, permanent residents or Medicare card holders) provided free under the National Immunisation Program. Under the program, newborn babies will be immunised for free against:

- Hepatitis B (given within seven days of birth but preferably within 24 hours)
- diphtheria, tetanus, pertussis, hepatitis B, poliomyelitis, *Haemophilus influenzae* type b (given together), pneumococcal and rotavirus (all given between six and eight weeks of age).

You can speak with your GP (general practitioner or GP) or council about where to go for immunisations in your area.

For more information see the **Immunisation – childhood** fact sheet.

Maternal and child health services

After your baby is born, the hospital will notify your local council of the birth and give them your contact details. The council will then pass this information on to your local Maternal and Child Health (MCH) service. Your MCH nurse will then make contact to arrange a home visit a few days after you leave hospital. If you live in a rural or regional area, this visit may take a few weeks to occur.

During your home visit, the MCH nurse will check how you and your baby are going and give you information about upcoming consultations and health services.

It is recommended that you have visits with your MCH nurse when your baby is two, four and eight weeks old. After that, a further six consultations are recommended up until your child is aged three and a half years. This will ensure your child is meeting their developmental milestones and give you a chance to discuss anything to do with your parenting role.

All maternal and child health consultations are free.

For more information see the **Maternal and child health services** fact sheet.

Centrelink payments

As a new parent, you may be eligible for one or more Centrelink payments. These are:

- Parental Leave Pay – financial support for up to 18 weeks to help parents take time off work to care for a newborn baby (including adopted children)
- Newborn Upfront Payment and Newborn Supplement – an increase to your Family Tax Benefit Part A payment when you have a baby or adopt a child
- Dad and Partner Pay – supporting dads or partners caring for a newborn baby (or recently adopted child) with up to two weeks of government-funded pay
- Family Tax Benefit – a two-part payment that helps with the cost of raising children.

You can start the claim process for these payments as early as three months before your baby is due. For more information visit the **Having a baby** page on the Australian Government Department of Human Services website.

Where to get help

- Your doctor
- Midwife
- Obstetrician

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