# COVID-19 Temporary MBS Telehealth Services

Last updated: 20 July 2020

* Commencing 13 March 2020, new temporary MBS telehealth items have been made available to help reduce the risk of community transmission of COVID-19 and provide protection for patients and health care providers.
* The list of telehealth services has continued to expand since 13 March. This is the latest factsheet and provides details on all current telehealth items.
* The new temporary MBS telehealth items are available to GPs, medical practitioners, nurse practitioners, participating midwives, allied health providers and dental practitioners in the practice of oral and maxillofacial surgery.
* A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
* The new temporary MBS telehealth items are for out-of-hospital patients.
* From 20 July 2020, it will be a legislative requirement that GPs and Other Medical Practitioner (OMP) working in general practice can only perform a telehealth or telephone service where they have an existing relationship with the patient. There are limited exemptions to this requirement.
* It is a legislative requirement that the GP and OMP COVID-19 telehealth services, must be bulk billed for Commonwealth concession card holders, children under 16 years old and patients who are more vulnerable to COVID-19.
* Specialist and allied health service providers are no longer required to bulk bill COVID-19 telehealth items.
* Providers are expected to obtain informed financial consent from patients prior to providing the service; providing details regarding their fees, including any out-of-pocket costs.
* The bulk-billing incentive Medicare fees have temporarily doubled (until 30 September) for items relating to GP and OMP services, diagnostic imaging services (items 64990 and 64991) and pathology services (items 74990 and 74990). These items can be claimed with the telehealth items where appropriate. The fees are provided later in the factsheet. As of 20 April, two new bulk-billing incentive items have been introduced for services provided to patients who are more vulnerable to COVID-19.

## What are the changes?

As part of the Australian Government’s response to COVID-19, these items have been updated to ensure continuiry of care for patients.

As of 30 March 2020 these items became general in nature and have no relation to diagnosing, treating or suspecting COVID-19.

A list of telehealth items is provided later in this fact sheet. Factsheet available on [MBS Online](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TempBB).

## Why are the changes being made?

The temporary MBS telehealth items allow people to access essential Medicare funded health services in their homes and reduce their risk of exposure to COVID-19 within the community. Updates were made on 20 July 2020 to ensure patients receive care from a GP or practice with whom they have an existing relationship.

## Who is eligible?

The new temporary MBS telehealth items are available to providers of telehealth services for a wide range of consultations. All Medicare eligible Australians can now receive these services. GPs and OMPs working in general practice may only provide a telehealth service where they have an existing relationship with the patient.

Additional detail is provided in the ‘GPs and Other Medical Practitioners’ factsheet, and ‘Provider’ FAQ.

GP and OMP services provided using the MBS telehealth items must be bulk billed for Commonwealth concession card holders, children under 16 years of age, and patients who are more vulnerable to COVID-19. For specialist and allied health services, bulk billing is at the discretion of the provider, so long as informed financial consent is obtained prior to the provision of the service.

Vulnerable means a patient at risk of COVID-19, so a person who:

* is required to self-isolate or self-quarantine in accordance with guidance issued by the Australian Health Protection Principal Committee in relation to COVID-19; or
* is at least 70 years old; or
* if the person identifies as being of Aboriginal or Torres Strait Islander descent—is at least 50 years old; or
* is pregnant; or
* is the parent of a child aged under 12 months; or
* is being treated for a chronic health condition; or
* is immune compromised; or
* meets the current national triage protocol criteria for suspected COVID-19 infection.

A chronic health condition is medical condition that has been present (or is likely to be present) for at least six months or is terminal. The Department of Health website provides additional detail online: <https://www.health.gov.au/health-topics/chronic-conditions/about-chronic-conditions>. The diagnosis of immune compromised is a clinical decision made by the patient’s treating doctor. Please note this is guidance only, and does not constitute MBS claiming advice.

## What telehealth options are available?

Videoconference services are the preferred approach for substituting a face-to-face consultation. However, in response to the COVID-19 pandemic, providers will also be able to offer audio-only services via telephone if video is not available. There are separate items available for the audio-only services.

No specific equipment is required to provide Medicare-compliant telehealth services. Practitioners must ensure that their chosen telecommunications solution meets their clinical requirements and satisfies privacy laws. To assist providers with their privacy obligations, a privacy checklist for telehealth services has been made available on MBSOnline: <http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist>. Further information can be found on the [Australian Cyber Security Centre website](https://www.cyber.gov.au/publications/web-conferencing-security)

## What does this mean for providers?

The new temporary MBS telehealth items will allow providers to continue to deliver essential health care services to patients within their care.

Providers do not need to be in their regular practice to provide telehealth services. GPs and OMPs working in general practice must ensure that they have an existing clinical relationship with their telehealth patients, or be able to explain how their patients qualify for exemptions to this requirement. Additional detail is in the ‘GPs and Other Medical Practitioners’ factsheet.

The telehealth MBS items can substitute for current face-to-face consultations that available under the MBS when the service/s cannot be provided due to COVID-19 considerations. The telehealth items will have similar requirements to normal timed consultation items. Providers should use their provider number for their primary location, and must provide safe services in accordance with normal professional standards.

GP and OMP telehealth items must be bulk billed for vulnerable patients, concession card holders and children under 16 years at the time the service is being provided, meaning MBS rebates are paid to the provider. Rebates for services provided by GPs and non-vocationally registered medical practitioners will be paid at 85% of the new item fees - these fee amounts have been increased so that the Medicare rebates paid for the new GP and medical practitioner telehealth services are at the same level as the rebates paid for the equivalent face-to-face services. (Due to the urgency of the new telehealth arrangements, the Department of Health has not been able to amend the legislation that establishes 100% rebates for GP/medical practitioner services.)

For additional information on the use of telehealth items, please refer to the [Provider Frequently Asked Questions](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TempBB) document available on MBSOnline.

## How will these changes affect patients?

From 20 July 2020, patients will be eligible for GP and OMP telehealth services if they have seen their GP or health practitioner (such as a practice nurse of Aboriginal and Torres Strait Islander health worker) within the same practice at least once in the preceding 12 months. This new safeguard will support longitudinal and person-centred primary health care that is associated with better health outcomes.

The temporary COVID-19 MBS telehealth items also requires GPs and OMPs to bulk-bill services to vulnerable patients, concession card holders and children under 16 years, so there will be no additional charge for these patients. Patients are required to consent to their service being bulk-billed. Eligible patients should ask their service providers about their telehealth options, where clinically appropriate.

Specialist and allied health telehealth items do not need to be bulk billed, however the provider must ensure informed financial consent is obtained prior to the provision of the service.

A [consumer factsheet](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TempBB) is available on MBSOnline which provides further information on how these changes will affect patients.

## Who was consulted on the changes?

Targeted consultation with stakeholders has informed the new temporary MBS telehealth items. Due to the nature of the COVID-19 emergency, it was not reasonably possible to undertake normal, broad consultations prior to implementation.

## How will the changes be monitored and reviewed?

The Department of Health will monitor the use of the new temporary MBS telehealth items. Use of the items that does not seem to be in accordance with the relevant Medicare guidelines and legislation will be actioned appropriately.

## Where can I find more information?

COVID-19 National Health Plan resources for the general public, health professionals and industry are available from the [Australian Government Department of Health website](https://www.health.gov.au/resources/collections/coronavirus-covid-19-national-health-plan-resources).

The full item descriptors and information on other changes to the MBS can be found on the MBS Online website at [www.mbsonline.gov.au](http://www.mbsonline.gov.au). You can also subscribe to future MBS updates by visiting [MBS Online](http://www.mbsonline.gov.au/) and clicking ‘Subscribe’.

The Department of Health provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the Health Insurance Act and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email [askMBS@health.gov.au](mailto:askMBS@health.gov.au).

Subscribe to ‘[News for Health Professionals](https://www.humanservices.gov.au/organisations/health-professionals/news/all)’ on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact Services Australia on the Provider Enquiry Line – 13 21 50.

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This sheet is current as of the Last updated date shown above, and does not account for MBS changes since that date.

## **COVID-19 – TEMPORARY MBS TELEHEALTH ITEMS**

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| **GENERAL PRACTITIONER ATTENDANCES** These services need to be bulk-billed for vulnerable patients, concession card holders and children under 16 years, and are for out-of-hospital patients | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| **Standard GP Attendance** Items introduced 13 March 2020 | | | |
| Attendance for an obvious problem | 3 | 91790 | 91795 |
| Attendance less than 20 minutes | 23 | 91800 | 91809 |
| Attendance at least 20 minutes | 36 | 91801 | 91810 |
| Attendance at least 40 minutes | 44 | 91802 | 91811 |
| **Health assessment for people of Aboriginal or Torres Strait Islander descent** Items introduced 30 March 2020 | | | |
| Health assessment | 715 | 92004 | 92016 |
| **Chronic Disease Management** Items introduced 30 March 2020 | | | |
| Preparation of a GP management plan (GPMP) | 721 | 92024 | 92068 |
| Coordination of Team Care Arrangements (TCAs) | 723 | 92025 | 92069 |
| Contribution to a Multidisciplinary Care Plan, or to a review of a Multidisciplinary Care Plan, for a patient who is not a care recipient in a residential aged care facility | 729 | 92026 | 92070 |
| Contribution to a Multidisciplinary Care Plan, or to a review of a multidisciplinary care plan, for a resident in an aged care facility | 731 | 92027 | 92071 |
| Review of a GPMP or Coordination of a Review of TCAs | 732 | 92028 | 92072 |
| **Autism, Pervasive Developmental Disorder and Disability Services** Items introduced 30 March 2020 | | | |
| Assessment, diagnosis and preparation of a treatment and management plan for patient under 13 years with an eligible disability, at least 45 minutes. | 139 | 92142 | 92145 |
| **Pregnancy Support Counselling program** Items introduced 30 March 2020 | | | |
| Non-directive pregnancy support counselling, at least 20 minutes | 4001 | 92136 | 92138 |
| **Eating Disorder Management** Items introduced 30 March 2020 | | | |
| GP without mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes | 90250 | 92146 | 92154 |
| GP without mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes | 90251 | 92147 | 92155 |
| GP with mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes | 90252 | 92148 | 92156 |
| GP with mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes | 90253 | 92149 | 92157 |
| Review of an eating disorder treatment and management plan | 90264 | 92170 | 92176 |
| Eating disorder psychological treatment (EDPT) service, lasting at least 30 minutes, but less than 40 minutes | 90271 | 92182 | 92194 |
| EDPT service, at least 40 minutes | 90273 | 92184 | 92196 |
| **Mental Health Services** Items introduced 30 March 2020 | | | |
| GP without mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes | 2700 | 92112 | 92124 |
| GP without mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes | 2701 | 92113 | 92125 |
| Review of a GP mental health treatment plan or Psychiatrist Assessment and Management Plan | 2712 | 92114 | 92126 |
| Mental health treatment consultation, at least 20 minutes | 2713 | 92115 | 92127 |
| GP with mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes | 2715 | 92116 | 92128 |
| GP with mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes | 2717 | 92117 | 92129 |
| Items introduced 13 March 2020 | | | |
| Focussed Psychological Strategies (FPS) treatment, lasting at least 30 minutes, but less than 40 minutes | 2721 and 2729 | 91818 | 91842 |
| FPS treatment, at least 40 minutes | 2725 and 2731 | 91819 | 91843 |
| **Urgent After Hours Attendance** Items introduced 30 March 2020 | | | |
| Urgent attendance, unsociable after hours | 599 | 92210 | 92216 |

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| **OTHER MEDICAL PRACTITIONER ATTENDANCES** These services need to be bulk-billed for vulnerable patients, concession card holders and children under 16 years, and are for out-of-hospital patients | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| **Standard Attendance** Items introduced 13 March 2020 | | | |
| Attendance of not more than 5 minutes | 52 | 91792 | 91797 |
| Attendance of more than 5 minutes but not more than 25 minutes | 53 | 91803 | 91812 |
| Attendance of more than 25 minutes but not more than 45 minutes | 54 | 91804 | 91813 |
| Attendance of more than 45 minutes | 57 | 91805 | 91814 |
| Attendance of not more than 5 minutes | 179 | 91794 | 91799 |
| Attendance of more than 5 minutes but not more than 25 minutes. Modified Monash 2-7 area | 185 | 91806 | 91815 |
| Attendance of more than 25 minutes but not more than 45 minutes. Modified Monash 2-7 area | 189 | 91807 | 91816 |
| Attendance of more than 45 minutes. Modified Monash 2-7 area | 203 | 91808 | 91817 |
| **Health assessment for people of Aboriginal or Torres Strait Islander descent** Items introduced 30 March 2020 | | | |
| Health assessment | 228 | 92011 | 92023 |
| **Chronic Disease Management** Items introduced 30 March 2020 | | | |
| Preparation of a GP management plan (GPMP) | 229 | 92055 | 92099 |
| Coordination of Team Care Arrangements (TCAs) | 230 | 92056 | 92100 |
| Contribution to a Multidisciplinary Care Plan, or to a review of a Multidisciplinary Care Plan, for a patient who is not a care recipient in a residential aged care facility | 231 | 92057 | 92101 |
| Contribution to a Multidisciplinary Care Plan, or to a review of a multidisciplinary care plan, for a resident in an aged care facility | 232 | 92058 | 92102 |
| Review of a GPMP or Coordination of a Review of TCAs | 233 | 92059 | 92103 |
| **Pregnancy support Counselling program** Items introduced 30 March 2020 | | | |
| Non-directive pregnancy support counselling of at least 20 minutes | 792 | 92137 | 92139 |

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| **Eating Disorder Management** Items introduced 30 March 2020 | | | |
| Medical Practitioner without mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes | 90254 | 92150 | 92158 |
| Medical Practitioner without mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes | 90255 | 92151 | 92159 |
| Medical Practitioner with mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes | 90256 | 92152 | 92160 |
| Medical Practitioner with mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes | 90257 | 92153 | 92161 |
| Review of an eating disorder treatment and management plan | 90265 | 92171 | 92177 |
| Eating disorders psychological treatment (EDPT) service, lasting at least 30 minutes, but less than 40 minutes | 90275 | 92186 | 92198 |
| EDPT service, at least 40 minutes | 90277 | 92188 | 92200 |
| **Urgent After Hours Attendance** Items introduced 30 March 2020 | | | |
| Urgent attendance, unsociable after hours | 600 | 92211 | 92217 |
| **Mental Health** Items introduced 30 March 2020 | | | |
| Medical Practitioner without mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes | 272 | 92118 | 92130 |
| Medical Practitioner without mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes | 276 | 92119 | 92131 |
| Review of a GP mental health treatment plan or Psychiatrist Assessment and Management Plan | 277 | 92120 | 92132 |
| Medical Practitioner mental health treatment consultation, at least 20 minutes | 279 | 92121 | 92133 |
| Medical Practitioner with mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes | 281 | 92122 | 92134 |
| Medical Practitioner with mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes | 282 | 92123 | 92135 |
| Items introduced 13 March 2020 | | | |
| Focussed Psychological Strategies (FPS) treatment, lasting at least 30 minutes, but less than 40 minutes | 283 and 371 | 91820 | 91844 |
| FPS treatment, at least 40 minutes | 286 and 372 | 91821 | 91845 |

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| **SPECIALIST, CONSULTANT PHYSICIAN, PSYCHIATRIST, PAEDIATRICIAN, GERIATRICIAN, PUBLIC HEALTH PHYSICIAN, NEUROSURGEON AND ANAESTHETIST ATTENDANCES**  These services are for out-of-hospital patients | | | |
| **Service** | **Existing Items**  *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| **Specialist Services** Items introduced 13 March 2020 | | | |
| Specialist. Initial attendance | 104 | 91822\* | 91832\* |
| Specialist. Subsequent attendance | 105 | 91823\* | 91833\* |
| **Consultant Physician Services** Items introduced 13 March 2020 | | | |
| Consultant physician. Initial attendance | 110 | 91824 \*\* | 91834 \*\* |
| Consultant physician. Subsequent attendance | 116 | 91825\*\* | 91835\*\* |
| Consultant physician. Minor attendance | 119 | 91826\*\* | 91836\*\* |
| Items introduced 6 April 2020 | | | |
| Consultant physician. Initial assessment, patient with at least 2 morbidities, prepare a treatment and management plan, at least 45 minutes | 132 | 92422\*\* | 92431\*\* |
| Consultant physician, Subsequent assessment, patient with at least 2 morbidities, review a treatment and management plan, at least 20 minutes | 133 | 92423\*\* | 92432\*\* |
| **Specialist and Consultant Physician Services** Items introduced 30 March 2020 | | | |
| Specialist or consultant physician early intervention services for children with autism, pervasive developmental disorder or disability | 137 | 92141 | 92144 |
| **Geriatrician Services** Items introduced 6 April 2020 | | | |
| Geriatrician, prepare an assessment and management plan, patient at least 65 years, more than 60 minutes | 141 | 92623 | 92628 |
| Geriatrician, review a management plan, more than 30 minutes | 143 | 92624 | 92629 |

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| **Consultant Psychiatrist services** Items introduced 6 April 2020 | | | |
| Consultant psychiatrist, prepare a treatment and management plan, patient under 13 years with autism or another pervasive developmental disorder, at least 45 minutes | 289 | 92434 | 92474 |
| Consultant psychiatrist, prepare a management plan, more than 45 minutes | 291 | 92435 | 92475 |
| Consultant psychiatrist, review management plan, 30 to 45 minutes | 293 | 92436 | 92476 |
| Consultant psychiatrist, attendance, new patient (or has not received attendance in preceding 24 mths), more than 45 minutes | 296 | 92437 | 92477 |
| Items introduced 13 March 2020 | | | |
| Consultant psychiatrist. Consultation, not more than 15 minutes | 300 | 91827 | 91837 |
| Consultant psychiatrist. Consultation, 15 to 30 minutes | 302 | 91828 | 91838 |
| Consultant psychiatrist. Consultation, 30 to 45 minutes | 304 | 91829 | 91839 |
| Consultant psychiatrist. Consultation, 45 to 75 minutes | 306 | 91830 | 91840 |
| Consultant psychiatrist. Consultation, more than 75 minutes | 308 | 91831 | 91841 |
| Items introduced 20 April 2020 | | | |
| Consultant psychiatrist, group psychotherapy, at least 1 hour, involving group of 2 to 9 unrelated patients or a family group of more than 3 patients, each referred to consultant psychiatrist | 342 | 92455 | 92495 |
| Consultant psychiatrist, group psychotherapy, at least 1 hour, involving family group of 3 patients, each referred to consultant psychiatrist | 344 | 92456 | 92496 |
| Consultant psychiatrist, group psychotherapy, at least 1 hour, involving family group of 2 patients, each referred to consultant psychiatrist | 346 | 92457 | 92497 |
| Items introduced 6 April 2020 | | | |
| Consultant psychiatrist, interview of a person other than patient, in the course of initial diagnostic evaluation of patient, 20 to 45 minutes | 348 | 92458 | 92498 |
| Consultant psychiatrist, interview of a person other than patient, in the course of initial diagnostic evaluation of patient, 45 minutes or more | 350 | 92459 | 92499 |
| Consultant psychiatrist, interview of a person other than patient, in the course of continuing management of patient, not less than 20 minutes, not exceeding 4 attendances per calendar year | 352 | 92460 | 92500 |
| Items introduced 30 March 2020 | | | |
| Consultant psychiatrist, prepare an eating disorder treatment and management plan, more than 45 minutes | 90260 | 92162 | 92166 |
| Consultant psychiatrist, to review an eating disorder plan, more than 30 minutes | 90266 | 92172 | 92178 |
| **Paediatrician Services**  Items introduced 30 March 2020 | | | |
| Paediatrician early intervention services for children with autism, pervasive developmental disorder or disability | 135 | 92140 | 92143 |
| Paediatrician, prepare an eating disorder treatment and management plan, more than 45 minutes | 90261 | 92163 | 92167 |
| Paediatrician, to review an eating disorder plan, more than 20 minutes | 90267 | 92173 | 92179 |
| **Public Health Physician Services**  Items introduced 20 April 2020 | | | |
| Public health physician, level A attendance | 410 | 92513 | 92521 |
| Public health physician, level B attendance, less than 20 minutes | 411 | 92514 | 92522 |
| Public health physician, level C attendance, at least 20 minutes | 412 | 92515 | 92523 |
| Public health physician, level D attendance, at least 40 minutes | 413 | 92516 | 92524 |
| **Neurosurgery attendances**  Items introduced 20 April 2020 | | | |
| Neurosurgeon, initial attendance | 6007 | 92610 | 92617 |
| Neurosurgeon, minor attendance | 6009 | 92611 | 92618 |
| Neurosurgeon, subsequent attendance, 15 to 30 minutes | 6011 | 92612 | 92619 |
| Neurosurgeon, subsequent attendance, 30 to 45 minutes | 6013 | 92613 | 92620 |
| Neurosurgeon, subsequent attendance, more than 45 minutes | 6015 | 92614 | 92621 |
| **Anaesthesia Attendances**  Items introduced 22 May 2020 | | | |
| Anaesthetist, professional attendance, advanced or complex | 17615 | 92701 | 92712 |

\*For all specialties that have an existing arrangement to access consultations at the specialist rate.

\*\*For all specialties that have an existing arrangement to access consultations at the consultant physician rate.

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| **OBSTETRICIANS, GPs, MIDWIVES, NURSES OR ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH PRACTITIONERS ATTENDANCES**  These services for out-of-hospital patients Items introduced 13 March 2020 | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| Antenatal Service provided by a Nurse, Midwife or an Aboriginal and Torres Strait Islander health practitioner on behalf of, and under the supervision of, a medical practitioner | 16400 | 91850 | 91855 |
| Postnatal attendance by an obstetrician or GP | 16407 | 91851 | 91856 |
| Postnatal attendance by:  (i) a midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or  (ii) an obstetrician; or  (iii) a general practitioner | 16408 | 91852 | 91857 |
| Antenatal attendance | 16500 | 91853 | 91858 |

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| **DENTAL PRACTITIONER IN THE PRACTICE OF ORAL AND MAXILLOFACIAL SURGERY ATTENDANCES**  These services are for out-of-hospital patients Items introduced 22 May 2020 | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| Dental practitioner (oral and maxillofacial surgery only), initial attendance | 51700 | 54001 | 54003 |
| Dental practitioner (oral and maxillofacial surgery only), subsequent attendance | 51703 | 54002 | 54004 |

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| **PARTICIPATING NURSE PRACTITIONER ATTENDANCES** These services are for out-of-hospital patients Items introduced 13 March 2020 | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| Attendance for an obvious problem | 82200 | 91192 | 91193 |
| Attendance less than 20 minutes | 82205 | 91178 | 91189 |
| Attendance at least 20 minutes | 82210 | 91179 | 91190 |
| Attendance at least 40 minutes | 82215 | 91180 | 91191 |

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| **MENTAL HEALTH ATTENDANCES** GP mental health attendances and OMP mental health attendances are included under the GP and OMP tables above.  These services are for out-of-hospital patients | | | |
| **Service** | **Existing Items** *current video-conference items* *Current geographic restrictions apply* | **Telehealth items** *via video-conference Geographic restrictions do not apply* | **Telephone items** *– for when video-conferencing is not available* *Geographic restrictions do not apply* |
| **Clinical Psychologists** Items introduced 13 March 2020 | | | |
| Attendance lasting more than 30 minutes but less than 50 minutes | 80001 | 91166 | 91181 |
| Attendance lasting at least 50 minutes | 80011 | 91167 | 91182 |
| **Psychologists** Items introduced 13 March 2020 | | | |
| Attendance lasting more than 20 minutes but less than 50 minutes | 80101 | 91169 | 91183 |
| Attendance lasting at least 50 minutes | 80111 | 91170 | 91184 |
| **Occupational Therapists** Items introduced 13 March 2020 | | | |
| Attendance lasting more than 20 minutes but less than 50 minutes | 80126 | 91172 | 91185 |
| Attendance lasting at least 50 minutes | 80136 | 91173 | 91186 |
| **Social Workers** Items introduced 13 March 2020 | | | |
| Attendance lasting more than 20 minutes but less than 50 minutes | 80151 | 91175 | 91187 |
| Attendance lasting at least 50 minutes | 80161 | 91176 | 91188 |

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| **ALLIED HEALTH ATTENDANCES**These services are for out-of-hospital patients | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items**  *video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| **Chronic disease management** Items introduced 30 March 2020 | | | |

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| Allied health CDM services (all 13 items) | 10950, 10951, 10952, 10953, 10954, 10956, 10958, 10960, 10962, 10964, 10966, 10968, 10970 | 93000 | 93013 |
| Items introduced 20 April 2020 | | | |
| CDM service provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner | 10997 | 93201 | 93203 |
| **Follow-up Allied Health Services for people of Aboriginal or Torres Strait Islander descent** Items introduced 30 March 2020 | | | |
| Allied health Follow-up services (all 13 items) | 81300, 81305, 81310, 81315, 81320, 81325, 81330, 81335, 81340, 81345, 81350, 81355, 81360 | 93048 | 93061 |
| Items introduced 20 April 2020 | | | |
| Follow up services provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner | 10987 | 93200 | 93202 |
| **Pregnancy Support Counselling program** Items introduced 30 March 2020 | | | |
| Non-directive pregnancy support counselling by eligible psychologist, social worker or mental health nurse, at least 30 minutes | 81000, 81005, 81010 | 93026 | 93029 |
| **Autism, Pervasive Developmental Disorder and Disability Services** Items introduced 30 March 2020 | | | |
| Psychologist. Autism, pervasive developmental disorder and disability assessment service for children under 13 years, at least 50 minutes | 82000 | 93032 | 93040 |
| Speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist. Autism, pervasive developmental disorder and disability assessment service for children under 13 years, at least 50 minutes | 82005, 82010, 82030 | 93033 | 93041 |
| Psychologist. Treatment of a pervasive developmental disorder or eligible disability for children under 15 years, at least 30 minutes | 82015 | 93035 | 93043 |
| Speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist. Treatment of a pervasive developmental disorder or eligible disability for children under 15 years, at least 30 minutes | 82020, 82025, 82035 | 93036 | 93044 |
| **Eating Disorder Services** Items introduced 30 March 2020 | | | |
| Dietitian, eating disorders service, at least 20 minutes | 82350 | 93074 | 93108 |
| Clinical psychologist, eating disorders service lasting more than 30 minutes, but less than 50 minutes | 82352 | 93076 | 93110 |
| Clinical psychologist, eating disorders service, at least 50 minutes | 82355 | 93079 | 93113 |
| Psychologist, eating disorders service, lasting more than 20 minutes, but less than 50 minutes | 82360 | 93084 | 93118 |
| Psychologist, eating disorders service, at least 50 minutes | 82363 | 93087 | 93121 |
| Occupational therapist, eating disorders service, lasting more than 20 minutes, but less than 50 minutes | 82368 | 93092 | 93126 |
| Occupational therapist, eating disorders service, at least 50 minutes | 82371 | 93095 | 93129 |
| Social worker, eating disorders service, lasting more than 20 minutes, but less than 50 minutes | 82376 | 93100 | 93134 |
| Social worker, eating disorders service, at least 50 minutes | 82379 | 93103 | 93137 |
| **Group Dietetics Services** Items introduced 22 May 2020 | | | |
| Dietitian, eligible, assessment for a group service | 81120 | 93284 | 93286 |
| Dietitian, eligible, group service | 81125 | 93285 | Not Available |

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| --- | --- | --- | --- |
| **PARTICIPATING MIDWIFE ATTENDANCES** These services for out-of-hospital patients Items introduced 13 March 2020 | | | |
| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| Short antenatal attendance lasting up to 40 minutes | 82105 | 91211 | 91218 |
| Long antenatal attendance lasting at least 40 minutes | 82110 | 91212 | 91219 |
| Short postnatal attendance lasting up to 40 minutes | 82130 | 91214 | 91221 |
| Long postnatal attendance lasting at least 40 minutes | 82135 | 91215 | 91222 |

|  |  |  |
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| **Bulk Billing Incentives\*** | | |
| **Item** | **Temporary Fee (30 March – 30 September 2020)** | **Temporary Benefit (30 March – 30 September 2020)** |
| 10990 | $15.00 | $12.75 |
| 10991 | $22.70 | $19.30 |
| 10992 | $22.70 | $19.30 |
| 64990 | $14.10 | $12.00 |
| 64991 | $21.30 | $18.15 |
| 74990 | $14.10 | $12.00 |
| 74991 | $21.30 | $18.15 |
| **New Item** | **Temporary Fee (20 April – 30 September 2020)** | **Temporary Benefit (20 April – 30 September 2020)** |
| 10981 | $15.00 | $12.75 |
| 10982 | $22.70 | $19.30 |

## **\*** Note: bulk billing incentives are paid at the 85% MBS rate. While the fee for an incentive for a service provided by a metropolitan practice is $15.00, the MBS rebate – which is paid to the practitioner rather than the patient – is $12.75. For non-metropolitan practices, the fee is $22.70 and the actual payment received by the practitioner is $19.30. These arrangements have applied to the MBS bulk billing incentive payments since their introduction.