

Quick Guide: COVID-19 Bulk Billed MBS Telehealth Services

General Practitioners

Fact Sheet

Version 5 / Up to date as of 20 July 2020

From 13 March 2020 to 30 September 2020 (inclusive), new MBS telehealth items are available for telehealth and phone services, as part of the COVID-19 response.

From 20 July 2020, all temporary COVID-19 phone and telehealth items for GPs and Other Medical Practitioners (OMPs) (with the exception of the after hours items and bulk billing incentives) can only be used by the patient's '**usual medical practitioner**'. This is defined as a medical practitioner (other than a specialist or consultant physician) who:

- a) has provided at least one face to face service to the patient in the past 12 months; or
- b) is located at a medical practice at which at least one service to the patient was provided, or arranged by, in the past 12 months; or
- c) is a participant in the Approved Medical Deputising Service (AMDS) program if:
 - i. the AMDS provider has a formal agreement in place with a medical practice to provide services to its patients; and
 - ii. the medical practice has provided, or arranged, at least one service to the patient in the past 12 months.

The new requirement does not apply to a person who is under the age of 12 months, a person who is experiencing homelessness, a person who is in a COVID-19 impacted area, a person receiving an urgent after-hours service (in unsociable hours), or a person who receives the service from a medical practitioner located at an Aboriginal Medical Service or an Aboriginal Community Controlled Health Service.

The temporary COVID-19 services must be **bulk billed** by General Practitioners and Other Medical Practitioners for Commonwealth concession card holders, children under 16 years of age, and patients who are more vulnerable to COVID-19. This includes a patient 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.

Source: www.mbsonline.gov.au (Mar 2020) – refer to source for full item details including eligibility & restrictions.

*Service must be for an unreferral service & for Commonwealth concession card holders or children under 16 years. . Items 10981 and 10982 are now available for patients that are vulnerable to COVID-19. The rebate for these item has been doubled as part of the COVID-19 response.

75% and/or 85%/100% rebate also applies to some of these item numbers

Refer to MBS(Medicare Benefit Schedule) for full patient eligibility guidelines.

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	Existing Items face to face	COVID-19 Telehealth	COVID-19 Telephone items
Standard Consultations			
GP attendance for an obvious problem	3	91790	91795
GP attendance less than 20 minutes	23	91800	91809
GP attendance at least 20 minutes	36	91801	91810
GP attendance at least 40 minutes	44	91802	91811
After Hours			
GP urgent after hours, unsociable (11pm-7am)	599	92210	92216
Bulk Billing Incentives*			
Bulk Billing item: General medical services MM1		10990/10981	
Bulk Billing item: General medical services MM2-7		10991/10982	
Bulk Billing item: Diagnostic Imaging services		64990	
Bulk Billing item: Diagnostic Imaging services MM2-7		64991	
Bulk Billing item: Pathology services		74990	
Bulk Billing item: Pathology services MM2-7		74990	
Aboriginal Health Assessment			
GP ATSI health assessment	715	92004	92016
Chronic Disease Management			
GP management plan, prepare	721	92024	92068
GP team care arrangement, co-ordinate development	723	92025	92069
GP contribution to prepare or review a multidisciplinary care plan, prepared by another provider	729	92026	92070
GP contribution to prepare or review a multidisciplinary care plan, prepared by a provider when the patient was admitted or by a RACF	731	92027	92071
GP attendance to coordinate a GP management plan or team care arrangements	732	92028	92072
Pregnancy Support			
GP pregnancy support item, more than 20 minutes	4001	92136	92138

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Autism Management			
GP early intervention services for children with autism, pervasive developmental disorder or disability	139	92142	92145
Eating Disorder Management			
GP without mental health training, prepare an eating disorder treatment and management plan, 20 to 40 minutes	90250	92146	92154
GP without mental health training, prepare an eating disorder treatment and management plan, more than 40 minutes	90251	92147	92155
GP with mental health training, prepare an eating disorder treatment and management plan, 20 to 40 minutes	90252	92148	92156
GP with mental health training, prepare an eating disorder treatment and management plan, more than 40 minutes	90253	92149	92157
GP to review an eating disorder plan	90264	92170	92176
GP eating disorder FPS treatment, 30 to 40 minutes	90271	92182	92194
GP eating disorder FPS treatment, more than 40 minutes	90273	92184	92196
Mental Health			
GP without mental health training, prepare a mental health plan, 20 to 40 minutes	2700	92112	92124
GP without mental health training, prepare a mental health plan, more than 40 minutes	2701	92113	92125
GP to review a mental health plan	2712	92114	92126
GP mental health consult, more than 20 minutes	2713	92115	92127
GP with mental health training, prepare a mental health plan, 20 to 40 minutes	2715	92116	92128
GP with mental health training, prepare a mental health plan, more than 40 minutes	2717	92117	92129
Focused Psychological Strategies treatment of 30 to 40 minutes	2729	91818	91842
Focused Psychological Strategies treatment of more than 40 minutes	2731	91819	91843

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