

COVID-19 Bulk Billed MBS Telehealth Services

Aboriginal Health & Chronic Disease

Fact Sheet

Version 4 / 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.

These services must be bulk billed by GPs and Other Medical Practitioners (OMPs) 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.

What does this mean for providers?

Providers will benefit from the greater flexibility in how they deliver services to their patients during the COVID-19 pandemic.

Providers do not need to be in their regular practice to provide telehealth services. Providers who offer their services from home isolation or quarantine should use their provider number for their primary location and must provide safe services in accordance with normal professional standards.

Telehealth or phone services should only be provided where it is safe and clinically appropriate to do so. Practitioners must ensure they are appropriately credentialed by Medicare to provide the below mental health services.

The new telehealth services must be bulk billed by GPs and OMPs for Commonwealth concession card holders, children under 16 years of age, and patients who are more vulnerable to COVID-19, meaning MBS rebates are paid to the provider. Rebates will be paid at 85% of the new item fee amount, which have been increased to result in the same payment as an equivalent GP face to face service. The Department of Health has not been able to amend the regulations, which set out 100% rebates, due to the urgency of these arrangements.

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

*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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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 www.health.gov.au/.
- **The full item descriptor(s)** and information on other changes to the MBS can be found on the MBS Online website at www.mbsonline.gov.au/. You can also subscribe to future MBS updates by visiting MBS Online 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.
- Subscribe to 'News for Health Professionals' on the Services Australia website and you will receive regular news highlights.

GP Chronic Disease Item Numbers

Item	COVID-19 Video conference items Must be bulk billed	Fee*
92024	GP management plan, prepare	\$172.40
92025	GP team care arrangement, co-ordinate development	\$136.60
92026	GP contribution to prepare or review a multidisciplinary care plan, prepared by another provider	\$84.15
92027	GP contribution to prepare or review a multidisciplinary care plan, prepared by a provider when the patient was admitted or by a RACF	\$84.15
92028	GP attendance to coordinate a GP management plan or team care arrangements	\$86.10
92004	GP Aboriginal health assessment	\$253.70
Item	COVID-19 Telephone items Must be bulk billed	Fee*
92068	GP management plan, prepare	\$172.40
92069	GP team care arrangement, co-ordinate development	\$136.60
92070	GP contribution to prepare or review a multidisciplinary care plan, prepared by another provider	\$84.15
92071	GP contribution to prepare or review a multidisciplinary care plan, prepared by a provider when the patient was admitted or by a RACF	\$84.15
92072	GP attendance to coordinate a GP management plan or team care arrangements	\$86.10
92016	GP Aboriginal health assessment	\$253.70

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Other Medical Practitioner Chronic Disease Item Numbers

Item	COVID-19 Video conference items Must be bulk billed	Fee*
92055	OMP management plan, prepare	\$137.90
92056	OMP team care arrangement, coordinate development	\$109.25
92057	OMP contribution to prepare or review a multidisciplinary care plan, prepared by another provider	\$67.35
92058	OMP contribution to prepare or review a multidisciplinary care plan, prepared by a provider when the patient was admitted or by a RACF	\$67.35
92059	OMP attendance to coordinate a GP management plan or team care arrangements	\$68.55
92011	OMP Aboriginal health assessment	\$202.90
Item	COVID-19 Telephone items Must be bulk billed	Fee*
92099	OMP management plan, prepare	\$137.90
92100	OMP team care arrangement, coordinate development	\$109.25
92101	OMP contribution to prepare or review a multidisciplinary care plan, prepared by another provider	\$67.35
92102	OMP contribution to prepare or review a multidisciplinary care plan, prepared by a provider when the patient was admitted or by a RACF	\$67.35
92103	OMP attendance to coordinate a GP management plan or team care arrangements	\$68.55
92023	OMP Aboriginal health assessment	\$202.90

Eligible Allied Health Chronic Disease Item Numbers

Item	COVID-19 Video conference items	Fee*
93000	Allied Health CDM services (all 13 items)	\$63.25
93048	Allied Follow-up CDM services (all 13 items) for people of ATSI descent. Equivalent to items 81300-81360.	\$63.25
Item	COVID-19 Telephone items	Fee*
93013	Allied Health CDM services (all 13 items)	\$63.25
93061	Allied Follow-up CDM services (all 13 items) for people of ATSI descent. Equivalent to items 81300-81360.	\$63.25

Eligible Practice Nurse or Aboriginal and Torres Strait Islander Health Practitioner Chronic Disease Item Numbers

Item	COVID-19 Video conference items	Fee*
93200	Follow up service for an Indigenous person who has received a health assessment	\$28.70
93201	Service provided to a person with a chronic disease	\$14.45
Item	COVID-19 Telephone items	Fee*
93202	Follow up service for an Indigenous person who has received a health assessment	\$28.70
93203	Service provided to a person with a chronic disease	\$14.45

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