COVID-19 Bulk-billing incentives

Frequently Asked Questions

Last updated: 20 April 2020

- From 13 March 2020 to 30 September 2020 (inclusive), 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.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- It is a legislative requirement that the new telehealth services, where they are provided by GPs and Other Medical Practitioners (OMP), must be bulk billed for Commonwealth concession card holders, children under 16 years old and patients who are more vulnerable to COVID-19.
- The bulk billing incentive Medicare fees have 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 new temporary MBS telehealth items where appropriate.
- As of 20 April 2020, two new bulk-billing incentive items have been introduced for services provided to patients who are more vulnerable to COVID-19.
- Please refer to the ‘Provider Frequently Asked Questions’ on MBS Online for general information on eligibility, telehealth arrangements, referrals, bulk-billing and claiming, and assignment of benefits.
- Please note that this information is accurate as of this date. This is an evolving situation and it is possible that some of this information could change in response to the circumstances. Please continue to check MBS Online (www.mbsonline.gov.au) regularly for any further announcements.

**Why are the changes being made?**

- The Australian Government is temporarily expanding access to bulk-billing incentives in order to protect all Australians, including vulnerable groups such as the elderly, those with chronic conditions and Aboriginal and Torres Strait Islander communities, from the coronavirus (COVID-19).

**What are the changes being made?**

- The Australian Government has previously doubled bulk-billing incentives for patients under 16 years old and for Commonwealth concession card holders (items 10990, 10991 and 10992).
- As of 20 April, there will be two new bulk-billing incentives introduced for vulnerable patients (items 10981 and 10982). These bulk-billing incentives will be equivalent to 10990 (metropolitan) and 10991 (regional). They provide bulk-billing incentives where an unreferred medical service is provided to a patient at risk of COVID-19 who is not admitted to a hospital.

**Can these new bulk-billing incentives be claimed with new COVID-19 telehealth and telephone consultation items?**

- Yes. The bulk-billing incentive items can be claimed with face-to-face attendances or with the new COVID-19 telehealth and telephone services, where the conditions of the bulk-billing incentives are met.
Who can claim these new bulk-billing incentives?

- Doctors who bulk bill are eligible to claim the new bulk-billing incentives. Further information about provider eligibility to claim bulk-billing incentives is available at https://www.servicesaustralia.gov.au/organisations/health-professionals/topics/education-guide-claiming-bulk-bill-incentive-items/33011.

- On 1 January 2020, the classification system used to determine eligibility for Rural Bulk Billing Incentives was updated to use the Modified Monash Model (MMM) 2019 geographical classification system which replaces the Rural Remote and Metropolitan Areas (RRMA) that dates back to 1991.

- The changes to the Rural Bulk Billing Incentives were made to ensure that the higher incentives are payable only to areas now classified as regional, rural and remote (MM 2 – 7 locations).


Can these new bulk-billing incentives be claimed in addition to existing bulk-billing incentive items?

- No. For example, if a medical service is provided to a patient who is both under 16 years old and falls under the definition of a vulnerable patient, or if a medical service is provided to a patient who is both a holder of a Commonwealth concession card and falls under the definition of a vulnerable patient, only one relevant bulk-billing incentive may be claimed.

- The new bulk-billing incentives cannot be co-claimed with existing bulk-billing incentives 10990 and 10991.

Who is a vulnerable patient under the new bulk-billing incentives?

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.
New COVID-19 bulk-billing incentives

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New Item

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<th>Temporary Fee (20 April – 30 September 2020)</th>
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* 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.

Further 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.

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. 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.

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.