



## COVID-19 Temporary MBS Telehealth Services

### GPs and Other Medical Practitioners

Last updated: 18 September 2020

- Commencing 13 March 2020 and extending until 31 March 2021, 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 temporary MBS telehealth items are available to GPs, medical practitioners, specialists, consultant physicians, 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 temporary MBS telehealth items are for out-of-hospital patients.
- It is a legislative requirement that GPs and Other Medical Practitioners (OMPs) working in general practice can only perform a telehealth or telephone service where they have an established clinical relationship with the patient. There are limited exemptions to this requirement.
- GP and OMP COVID-19 telehealth services are eligible for MBS incentive payments when provided as bulk billed services to Commonwealth concession card holders and children under 16 years of age.
- All providers are expected to obtain informed financial consent from patients prior to charging private fees for COVID-19 telehealth services.
- The temporary GP and OMP bulk billing incentive items for patients who are vulnerable to COVID-19 and the temporary doubling of all Medicare bulk-billing incentive fees ceased as of 1 October 2020.

### What are the changes?

From 1 October 2020:

- GPs and OMPs providing COVID-19 telehealth services are not required to bulk bill their patients.
- Temporary MBS COVID-19 bulk billing incentive items 10981 (for GPs) and 10982 (for OMPs) ceased.
- The temporary doubling of fees for MBS bulk billing incentive items 10990, 10991, 10992, 64990, 64991, 74990 and 74991 ceased.

A list of telehealth items is provided later in this fact sheet. Factsheet available on [MBS Online](#).

### Why are the changes being made?

The Government has extended its national COVID-19 emergency health response for a further six months, to 31 March 2021. This will ensure that patients continue to have access to key health initiatives, including Medicare-subsidised telehealth services.



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. Previous updates made on 20 July 2020 ensure patients receive care from a GP, an OMP or a general practice with whom they have an established clinical relationship.

## Who is eligible?

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

Additional detail is provided in the 'GPs and Other Medical Practitioners' factsheet, and 'Provider' FAQ at [MBS Online](#)

Bulk billed GP and OMP services provided using the MBS telehealth items are eligible for MBS incentive payments when provided to Commonwealth concession card holders and children under 16 years of age.

Patients are eligible for GP and OMP telehealth services if they have an established clinical relationship with a GP, OMP, or a medical practice. This requirement supports longitudinal and person-centred primary health care that is associated with better health outcomes.

An *established relationship* means the medical practitioner performing the service:

- has provided a face-to-face service to the patient in the last 12 months; or
- is located at a medical practice where the patient has had a face-to-face service arranged by that practice in the last 12 months (including services performed by another doctor located at the practice, or a service performed by another health professional located at the practice, such as a practice nurse or Aboriginal and Torres Strait Islander health worker); or
- is a participant in the Approved Medical Deputising Service program, and the Approved Medical Deputising Service provider employing the medical practitioner has a formal agreement with a medical practice that has provided at least one face-to-face service to the patient in the last 12 months.

The *existing relationship* requirement does not apply to:

- children under the age of 12 months;
- people who are homeless;
- patients living in a COVID-19 impacted area;
- patients receiving an urgent after-hours (unsociable hours) service; or
- patients of medical practitioners at an Aboriginal Medical Service or an Aboriginal Community Controlled Health Service.

A *COVID-19 impacted area* is one where a person's movement is restricted by a State or Territory public health requirement that applies to the person's location. This includes patients subject to quarantine, and other restrictions intended to support infection control.

Current COVID-19 impacted areas in Victoria are listed at: <https://www.dhhs.vic.gov.au/victorias-restriction-levels-covid-19>



New patients of a practice and regular patients who have not attended the practice in the last 12 months are encouraged to book their next appointment as a face-to-face attendance. Subsequent services may be provided by telehealth, if it is safe and clinically appropriate to do so.

## 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](#).

## What does this mean for providers?

The temporary MBS telehealth items allow providers to deliver essential health care services to their patients while ensuring continued quality is provided by a medical practitioner who knows the patient's medical history.

Providers do not need to be in their regular practice to provide telehealth services, but they must ensure that the established clinical relationship, as defined in the MBS, exists before providing telehealth services to their patient. Only a face-to-face attendance with the patient in the 12 months prior to the date of service of the proposed telehealth consultation satisfies this new requirement. Telehealth and telephone attendances prior to 20 July 2020 do not satisfy the new requirement.

Providers should use their provider number for their primary location, and must provide safe services in accordance with normal professional standards.

The telehealth MBS items can substitute for current face-to-face consultations that are available under the MBS when the service/s cannot be provided due to COVID-19 considerations. The MBS telehealth items have the same clinical requirements as the corresponding face-to-face consultation items.

Rebates for services provided by GPs and OMPs are 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 OMP 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/OMP services.)

For additional information on the use of telehealth items, please refer to the [Provider Frequently Asked Questions](#) document available on MBSOnline.

## How will these changes affect patients?

Patients are eligible for GP and OMP telehealth services if they have an established clinical relationship with a GP, OMP, or a medical practice. This requirement supports longitudinal and person-centred primary health care that is associated with better health outcomes.



An *established relationship* is defined as the patient having seen the same practitioner for a face-to-face service in the last 12 months, or having seen a doctor or other health practitioner (such as a practice nurse or Aboriginal and Torres Strait Islander health worker) at the same medical practice for a face-to-face service during the same period.

This requirement does not apply to people who are homeless; patients receiving an urgent after-hours (unsociable hours) service; children under the age of 12 months; patients of medical practitioners at an Aboriginal Medical Service or an Aboriginal Community Controlled Health Service; and people living in a COVID-19 impacted area.

A COVID-19 impacted area is one where a person's movement is restricted by a state or territory public health requirement that applies to the person's location. This includes patients subject to quarantine, and other restrictions intended to support infection control.

A [consumer factsheet](#) 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 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.

The extension of the temporary COVID-19 telehealth measures for another six months, until 31 March 2021, was a recommendation of the Australian Health Protection Principal Committee.

## How will the changes be monitored and reviewed?

The Department of Health continues to monitor the use of the new MBS 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](#).

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](#) 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](#)' 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

<b>GENERAL PRACTITIONER ATTENDANCES</b>			
<b>Service</b>	<b>Existing Items face to face</b>	<b>Telehealth items via video- conference</b>	<b>Telephone items – for when video- conferencing is not available</b>
<b>Standard GP Attendance</b> 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
<b>Health Assessment for People of Aboriginal or Torres Strait Islander Descent</b> Items introduced 30 March 2020			
Health assessment	715	92004	92016
<b>Chronic Disease Management</b> 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
<b>Autism, Pervasive Developmental Disorder and Disability Services</b> 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
<b>Pregnancy Support Counselling program</b> Items introduced 30 March 2020			
Non-directive pregnancy support counselling, at least 20 minutes	4001	92136	92138



<b>Eating Disorder Management</b>			
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
<b>Mental Health Services</b>			
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			
Focused 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

OTHER MEDICAL PRACTITIONER ATTENDANCES			
Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
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	231	92057	92101





patient who is not a care recipient in a residential aged care facility			
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
<b>Pregnancy support Counselling program</b> Items introduced 30 March 2020			
Non-directive pregnancy support counselling of at least 20 minutes	792	92137	92139
<b>Eating Disorder Management</b> 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
<b>Urgent After Hours Attendance</b> Items introduced 30 March 2020			
Urgent attendance, unsociable after hours	600	92211	92217
<b>Mental Health Services</b> 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