



## Summary of Items - MBS Specialist Telehealth Services from 1 January 2022

- From 1 January 2022, patient access to specialist telehealth services will be supported by ongoing MBS arrangements.
- Patients will continue to be able to access specialist attendances performed either in person (face to face) or by video across all areas of Australia.
- **MBS specialist telehealth services from 1 January 2022 are for out-of-hospital services.**
- Patients can continue to access specialist services by telephone for less complex or shorter subsequent attendances, with a practitioner they have seen before. **Minor changes have been made to 6 items (5 phone and 1 video) which are indicated by red text.**

The specific item descriptors and MBS schedule fees for the new items are set out below. These are in addition to the general conditions described above.

### Group A40

| Item   | Description  | MBS Fee (\$) |
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| <b>Subgroup 4 – Specialist attendances telehealth services</b> |  |              |
| 91822  | Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if:<br>(a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration.<br>Where the attendance was other than a second or subsequent attendance as part of a single course of treatment   | 90.35        |
| 91823  | Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if:<br>(a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration.<br>Where the attendance is after the first attendance as part of a single course of treatment  | 45.40        |
| <b>Subgroup 5 – Consultant physician telehealth services</b>   |  |              |
| 91824  | Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if:<br>(a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration;<br>Where the attendance was other than a second or subsequent attendance as part of a single course of treatment | 159.35       |
| 91825  | Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if:   | 79.75        |



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|       | (a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration;<br>Where the attendance is not a minor attendance after the first as part of a single course of treatment   |        |
| 91826 | Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if:<br>(a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration;<br>Where the attendance is a minor attendance after the first as part of a single course of treatment   | 45.40  |
| 92422 | Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 45 minutes in duration for an initial assessment of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) following referral of the patient to the consultant physician by a referring practitioner, if:<br>(a) an assessment is undertaken that covers:<br>(i) a comprehensive history, including psychosocial history and medication review; and<br>(ii) comprehensive multi or detailed single organ system assessment; and<br>(iii) the formulation of differential diagnoses; and<br>(b) a consultant physician treatment and management plan of significant complexity is prepared and provided to the referring practitioner, which involves:<br>(i) an opinion on diagnosis and risk assessment; and<br>(ii) treatment options and decisions; and<br>(iii) medication recommendations; and<br>(c) an attendance on the patient to which item 110, 116 or 119 of the general medical services table or item 91824, 91825, 91826 or 91836 applies did not take place on the same day by the same consultant physician; and<br>(d) this item, or item 132 of the general medical services table, has not applied to an attendance on the patient in the preceding 12 months by the same consultant physician | 278.75 |
| 92423 | Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 20 minutes in duration after the first attendance in a single course of treatment for a review of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) if:<br>(a) a review is undertaken that covers:<br>(i) review of initial presenting problems and results of diagnostic investigations; and<br>(ii) review of responses to treatment and medication plans initiated at time of initial consultation; and<br>(iii) comprehensive multi or detailed single organ system assessment; and<br>(iv) review of original and differential diagnoses; and<br>(b) the modified consultant physician treatment and management plan is provided to the referring practitioner, which involves, if appropriate:<br>(i) a revised opinion on the diagnosis and risk assessment; and<br>(ii) treatment options and decisions; and<br>(iii) revised medication recommendations; and   | 139.55 |

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- (c) an attendance on the patient to which item 110, 116 or 119 of the general medical services table or item 91824, 91825, 91826 or 91836 applies did not take place on the same day by the same consultant physician; and
- (d) item 132 of the general medical services table or item 92422 applied to an attendance claimed in the preceding 12 months; and
- (e) the attendance under this item is claimed by the same consultant physician who claimed item 132 of the general medical services table or item 92422; and
- (f) this item, or item 133 of the general medical services table has not applied more than twice in any 12 month period

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**Subgroup 6 – Consultant psychiatrist telehealth services**

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| 91827 | Telehealth attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was not more than 15 minutes duration   | 45.75  |
| 91828 | Telehealth attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was at least 15 minutes, but not more than 30 minutes in duration   | 91.30  |
| 91829 | Telehealth attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was at least 30 minutes, but not more than 45 minutes in duration   | 140.55 |
| 91830 | Telehealth attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was at least 45 minutes, but not more than 75 minutes in duration   | 194.00 |
| 91831 | Telehealth attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was at least 75 minutes in duration   | 225.10 |
| 92434 | Telehealth attendance of at least 45 minutes in duration, by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with autism or another pervasive developmental disorder, if the consultant physician does all of the following:<br>(a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider);<br>(b) develops a treatment and management plan which must include the following:<br>(i) an assessment and diagnosis of the patient's condition;<br>(ii) a risk assessment;<br>(iii) treatment options and decisions;<br>(iv) if necessary—medication recommendations;<br>(c) provides a copy of the treatment and management plan to the referring practitioner; | 278.75 |



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|       | <p>(d) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient;</p> <p>(other than attendance on a patient for whom payment has previously been made under this item, or item 135, 137, 139 or 289 of the general medical services table, or item 92140, 92141, 92142 or 92145)</p>  |        |
| 92435 | <p>Telehealth attendance of more than 45 minutes by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if:</p> <p>(a) the attendance follows referral of the patient to the consultant for an assessment or management by a medical practitioner in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and</p> <p>(b) during the attendance, the consultant:</p> <ul style="list-style-type: none"><li>(i) uses an outcome tool (if clinically appropriate); and</li><li>(ii) carries out a mental state examination; and</li><li>(iii) makes a psychiatric diagnosis; and</li></ul> <p>(c) the consultant decides that it is clinically appropriate for the patient to be managed by the referring practitioner without ongoing treatment by the consultant; and</p> <p>(d) within 2 weeks after the attendance, the consultant:</p> <ul style="list-style-type: none"><li>(i) prepares a written diagnosis of the patient; and</li><li>(ii) prepares a written management plan for the patient that:<ul style="list-style-type: none"><li>(A) covers the next 12 months; and</li><li>(B) is appropriate to the patient's diagnosis; and</li><li>(C) comprehensively evaluates the patient's biological, psychological and social issues; and</li><li>(D) addresses the patient's diagnostic psychiatric issues; and</li><li>(E) makes management recommendations addressing the patient's biological, psychological and social issues; and</li></ul></li><li>(iii) gives the referring practitioner a copy of the diagnosis and the management plan; and</li><li>(iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:<ul style="list-style-type: none"><li>(A) the patient; and</li><li>(B) the patient's carer (if any), if the patient agrees; and</li></ul></li></ul> <p>(e) in the preceding 12 months, a service to which this item or item 291 of the general medical services table applies has not been provided</p> | 478.05 |
| 92436 | <p>Telehealth attendance of more than 30 minutes but not more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if:</p> <p>(a) the patient is being managed by a medical practitioner or a participating nurse practitioner in accordance with a management plan prepared by the consultant in accordance with item 291 or 92435; and</p> <p>(b) the attendance follows referral of the patient to the consultant for review of the management plan by the medical practitioner or a participating nurse practitioner managing the patient; and</p> <p>(c) during the attendance, the consultant:</p> <ul style="list-style-type: none"><li>(i) uses an outcome tool (if clinically appropriate); and</li><li>(ii) carries out a mental state examination; and</li><li>(iii) makes a psychiatric diagnosis; and</li></ul>   | 298.85 |

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|       | <ul style="list-style-type: none"><li>(iv) reviews the management plan; and</li><li>(d) within 2 weeks after the attendance, the consultant:<ul style="list-style-type: none"><li>(i) prepares a written diagnosis of the patient; and</li><li>(ii) revises the management plan; and</li><li>(iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and</li><li>(iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:<ul style="list-style-type: none"><li>(A) the patient; and</li><li>(B) the patient's carer (if any), if the patient agrees; and</li></ul></li></ul></li><li>(e) in the preceding 12 months, a service to which item 291 of the general medical services table or item 92435 applies has been provided; and</li><li>(f) in the preceding 12 months, a service to which this item, or item 293 of the general medical services table applies has not been provided</li></ul> |        |
| 92437 | Telehealth attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's speciality of psychiatry following referral of the patient to the consultant physician by a referring practitioner: <ul style="list-style-type: none"><li>(a) if the patient:<ul style="list-style-type: none"><li>(i) is a new patient for this consultant physician; or</li><li>(ii) has not received an attendance from this consultant physician in the preceding 24 months; and</li></ul></li><li>(b) the patient has not received an attendance under this item, or item 91827 to 91831, 91837 to 91839, 92455 to 92457, or item 296, 297, 299 or 300 to 346 of the general medical services table, in the preceding 24 months</li></ul>   | 274.95 |
| 92455 | Telehealth attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): <ul style="list-style-type: none"><li>(a) of not less than 1 hour in duration; and</li><li>(b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's speciality of psychiatry; and</li><li>(c) involving a group of 2 to 9 unrelated patients or a family group of more than 3 patients, each of whom is referred to the consultant physician by a referring practitioner;<br/>—each patient</li></ul>   | 52.05  |
| 92456 | Telehealth attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): <ul style="list-style-type: none"><li>(a) of not less than 1 hour in duration; and</li><li>(b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's speciality of psychiatry; and</li><li>(c) involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner;<br/>—each patient</li></ul>   | 69.10  |
| 92457 | Telehealth attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): <ul style="list-style-type: none"><li>(a) of not less than 1 hour in duration; and</li></ul>   | 102.20 |

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|   | (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and  |        |
|   | (c) involving a family group of 2 patients, each of whom is referred to the consultant physician by a referring practitioner;<br>—each patient  |        |
| 92458   | Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes, but less than 45 minutes, in duration, in the course of initial diagnostic evaluation of a patient   | 133.85 |
| 92459   | Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 45 minutes in duration, in the course of initial diagnostic evaluation of a patient  | 184.80 |
| 92460   | Telehealth attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes in duration, in the course of continuing management of a patient— if that attendance and another attendance to which this item or item 352 of the general medical services table applies have not exceeded 4 in a calendar year for the patient | 133.85 |
| <b>Subgroup 7 – Specialist attendances phone services</b> |   |        |
| 91833   | Phone attendance for a person by a specialist in the practice of the specialist's specialty if:<br>(a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration;<br>Where the attendance is after the first attendance as part of a single course of treatment  | 45.40  |
| <b>Subgroup 8 – Consultant physician phone services</b>   |   |        |
| 91836   | Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if:<br>(a) the attendance follows referral of the patient to the specialist; and<br>(b) the attendance was of more than 5 minutes in duration;<br>Where the attendance is a minor attendance after the first as part of a single course of treatment  | 45.40  |

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### Subgroup 9 – Consultant psychiatrist phone services

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| 91837  | Phone attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was not more than 15 minutes duration;<br><b>Where the attendance is after the first attendance as part of a single course of treatment</b>  | 45.75  |
| 91838  | Phone attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner and<br>(b) the attendance was at least 15 minutes, but not more than 30 minutes in duration;<br><b>Where the attendance is after the first attendance as part of a single course of treatment</b>   | 91.30  |
| 91839  | Phone attendance for a person by a consultant psychiatrist; if:<br>(a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and<br>(b) the attendance was at least 30 minutes, but not more than 45 minutes in duration<br><b>Where the attendance is after the first attendance as part of a single course of treatment</b>   | 140.55 |
| <b>Subgroup 17 - GP, Specialist and Consultant Physician Autism Service - Telehealth Service</b> |  |        |
| 92140  | Telehealth attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics, following referral of the patient to the consultant by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient aged under 13 years with autism or another pervasive developmental disorder, if the consultant paediatrician does all of the following:<br>(a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider);<br>(b) develops a treatment and management plan, which must include the following:<br>(i) an assessment and diagnosis of the patient's condition;<br>(ii) a risk assessment;<br>(iii) treatment options and decisions;<br>(iv) if necessary—medical recommendations;<br>(c) provides a copy of the treatment and management plan to the referring practitioner and one or more allied health providers, if appropriate, for the treatment of the patient | 278.75 |
| 92141  | Telehealth attendance of at least 45 minutes in duration by a specialist or consultant physician following referral of the patient to the specialist or consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with an eligible disability if the specialist or consultant physician does all of the following:<br>(a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider);<br>(b) develops a treatment and management plan, which must include the following:<br>(i) an assessment and diagnosis of the patient's condition;<br>(ii) a risk assessment;<br>(iii) treatment options and decisions;<br>(iv) if necessary—medication recommendations;  | 278.75 |



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(c) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient

(other than attendance on a patient for whom payment has previously been made under this item or item 137, 139 or 289)

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**Subgroup 23— Consultant Physician and Psychiatrist - Eating Disorder Treatment and Management Plan – Telehealth Service**

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| 92162 | Telehealth attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for the preparation of an eating disorder treatment and management plan for an eligible patient, if:<br><br>(a) the patient has been referred by a referring practitioner; and<br><br>(b) during the attendance, the consultant psychiatrist:<br><br>(i) uses an outcome tool (if clinically appropriate); and<br><br>(ii) carries out a mental state examination; and<br><br>(iii) makes a psychiatric diagnosis; and<br><br>(c) within 2 weeks after the attendance, the consultant psychiatrist:<br><br>(i) prepares a written diagnosis of the patient; and<br><br>(ii) prepares a written management plan for the patient that:<br><br>(A) covers the next 12 months; and<br><br>(B) is appropriate to the patient's diagnosis; and<br><br>(C) comprehensively evaluates the patient's biological, psychological and social issues; and<br><br>(D) addresses the patient's diagnostic psychiatric issues; and<br><br>(E) makes management recommendations addressing the patient's biological, psychological and social issues; and<br><br>(iii) gives the referring practitioner a copy of the diagnosis and the management plan; and<br><br>(iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:<br><br>(A) the patient; and<br><br>(B) the patient's carer (if any), if the patient agrees | 478.05 |
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| 92163 | Telehealth attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for the preparation of an eating disorder treatment and management plan for an eligible patient, if:<br><br>(a) the patient has been referred by a referring practitioner; and<br><br>(b) during the attendance, the consultant paediatrician undertakes an assessment that covers:<br><br>(i) a comprehensive history, including psychosocial history and medication review; and<br><br>(ii) comprehensive multi or detailed single organ system assessment; and<br><br>(iii) the formulation of diagnoses; and<br><br>(c) within 2 weeks after the attendance, the consultant paediatrician:<br><br>(i) prepares a written diagnosis of the patient; and<br><br>(ii) prepares a written management plan for the patient that involves:<br><br>(A) an opinion on diagnosis and risk assessment; and<br><br>(B) treatment options and decisions; and<br><br>(C) medication recommendations; and<br><br>(iii) gives the referring practitioner a copy of the diagnosis and the management plan; and<br><br>(iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:<br><br>(A) the patient; and<br><br>(B) the patient's carer (if any), if the patient agrees | 278.75 |
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**Subgroup 25— Review of an Eating Disorder Plan - Telehealth Service**

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| 92172 | Telehealth attendance of at least 30 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for an eligible patient, if:<br><br>(a) the consultant psychiatrist reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and<br><br>(b) the patient has been referred by a referring practitioner; and<br><br>(c) during the attendance, the consultant psychiatrist:<br><br>(i) uses an outcome tool (if clinically appropriate); and<br><br>(ii) carries out a mental state examination; and<br><br>(iii) makes a psychiatric diagnosis; and<br><br>(iv) reviews the eating disorder treatment and management plan; and | 298.85 |
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|       | (d) within 2 weeks after the attendance, the consultant psychiatrist: <ul style="list-style-type: none"><li>(i) prepares a written diagnosis of the patient; and</li><li>(ii) revises the eating disorder treatment and management; and</li><li>(iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and</li><li>(iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:<ul style="list-style-type: none"><li>(A) the patient; and</li><li>(B) the patient's carer (if any), if the patient agrees</li></ul></li></ul>   |        |
| 92173 | Telehealth attendance of at least 30 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for an eligible patient, if: <ul style="list-style-type: none"><li>(a) the consultant paediatrician reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and</li><li>(b) the patient has been referred by a referring practitioner; and</li><li>(c) during the attendance, the consultant paediatrician:<ul style="list-style-type: none"><li>(i) uses an outcome tool (if clinically appropriate); and</li><li>(ii) carries out a mental state examination; and</li><li>(iii) makes a psychiatric diagnosis; and</li><li>(iv) reviews the eating disorder treatment and management plan; and</li></ul></li><li>(d) within 2 weeks after the attendance, the consultant paediatrician:<ul style="list-style-type: none"><li>(i) prepares a written diagnosis of the patient; and</li><li>(ii) revises the eating disorder treatment and management; and</li><li>(iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and</li><li>(iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:<ul style="list-style-type: none"><li>(A) the patient; and</li><li>(B) the patient's carer (if any), if the patient agrees</li></ul></li></ul></li></ul> | 139.55 |

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**Subgroup 31—Geriatric Medicine – Telehealth Services**

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| 92623 | Telehealth attendance of more than 60 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine, if:<br><br>(a) the patient is at least 65 years old and referred by a medical practitioner practising in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and<br><br>(b) the attendance is initiated by the referring practitioner for the provision of a comprehensive assessment and management plan; and<br><br>(c) during the attendance:<br>(i) all relevant aspects of the patient's health are evaluated in detail using appropriately validated assessment tools if indicated (the <b>assessment</b> ); and<br>(ii) the patient's various health problems and care needs are identified and prioritised (the <b>formulation</b> ); and<br>(iii) a detailed management plan is prepared (the <b>management plan</b> ) setting out:<br>(A) the prioritised list of health problems and care needs; and<br>(B) short and longer term management goals; and<br>(C) recommended actions or intervention strategies to be undertaken by the patient's general practitioner or another relevant health care provider that are likely to improve or maintain health status and are readily available and acceptable to the patient and the patient's family and carers; and<br>(iv) the management plan is explained and discussed with the patient and, if appropriate, the patient's family and any carers; and<br>(v) the management plan is communicated in writing to the referring practitioner; and<br><br>(d) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 of the general medical services table or item 91822, 91823, 91833, 91824, 91825, 91826 or 91836 applies has not been provided to the patient on the same day by the same practitioner; and<br><br>(e) an attendance to which this item or item 145 of the general medical services table applies has not been provided to the patient by the same practitioner in the preceding 12 months | 478.05 |
| 92624 | Telehealth attendance of more than 30 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine to review a management plan previously prepared by that consultant physician or specialist under item 141, 92623 or 145, if:<br><br>(a) the review is initiated by the referring medical practitioner practising in general practice or a participating nurse practitioner; and<br><br>(b) during the attendance:<br>(i) the patient's health status is reassessed; and<br>(ii) a management plan prepared under item 141, 92623 or 145 is reviewed and revised; and<br>(iii) the revised management plan is explained to the patient and (if appropriate) the patient's family and any carers and communicated in writing to the referring practitioner; and  | 298.85 |

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- (c) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 of the general medical services table or item 91822, 91823, 91833, 91824, 91825, 91826 or 91836 applies was not provided to the patient on the same day by the same practitioner; and
- (d) an attendance to which item 141 or 145 of the general medical services table, or item 92623 applies has been provided to the patient by the same practitioner in the preceding 12 months; and
- (e) an attendance to which this item, or item 147 of the general medical services table applies has not been provided to the patient in the preceding 12 months, unless there has been a significant change in the patient's clinical condition or care circumstances that requires a further review

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**Subgroup 33— Public health physician – Telehealth Services**

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| 92513 | Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management   | 20.65  |
| 92514 | Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant:<br>(a) taking a patient history;<br>(b) arranging any necessary investigation;<br>(c) implementing a management plan;<br>(d) providing appropriate preventive health care;<br>for one or more health-related issues, with appropriate documentation           | 45.15  |
| 92515 | Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant:<br>(a) taking a detailed patient history;<br>(b) arranging any necessary investigation;<br>(c) implementing a management plan;<br>(d) providing appropriate preventive health care;<br>for one or more health-related issues, with appropriate documentation   | 87.35  |
| 92516 | Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant:<br>(a) taking an extensive patient history;<br>(b) arranging any necessary investigation;<br>(c) implementing a management plan;<br>(d) providing appropriate preventive health care;<br>for one or more health-related issues, with appropriate documentation | 128.60 |

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**Subgroup 34— Public health physician – Phone Services**

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| 92521 | Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management; | 20.65 |
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Where the attendance is not the first attendance for that particular clinical indication

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| 92522 | Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant:<br>(a) taking a patient history;<br>(b) arranging any necessary investigation;<br>(c) implementing a management plan;<br>(d) providing appropriate preventive health care;<br>for one or more health-related issues, where the attendance is not the first attendance for those particular health-related issues, with appropriate documentation | 45.15 |
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**Subgroup 35— Neurosurgery attendances – Telehealth Services**

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| 92610 | Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment) | 136.85 |
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| 92611 | Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment | 45.40 |
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| 92612 | Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 15 minutes in duration but not more than 30 minutes in duration | 90.35 |
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| 92613 | Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 30 minutes in duration but not more than 45 minutes in duration | 125.15 |
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| 92614 | Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 45 minutes in duration | 159.35 |
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**Subgroup 36—Neurosurgery attendances – Phone Services**

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| 92618 | Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment | 45.40 |
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**Subgroup 37 —Specialist, anaesthesia telehealth services**

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| 92701 | Telehealth attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply) | 90.35 |
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**Group O1—Consultations**

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| Item | Description | MBS Fee (\$) |
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**Subgroup 1—dental practitioner telehealth services**

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| 54001 | Telehealth attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient is referred to the approved dental practitioner | 89.00 |
| 54002 | Telehealth attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient is referred to the approved dental practitioner               | 44.75 |

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**Subgroup 2—dental practitioner phone services**

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| 54004 | Phone attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient is referred to the approved dental practitioner | 44.75 |
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**Group T4—Obstetrics**

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| Item  | Description  | MBS Fee (\$) |
|---|--|--------------|
| <b>Subgroup 1 – Obstetric telehealth services</b> |  |              |
| 91850   | Antenatal telehealth service provided by a practice midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner, to a maximum of 10 services per pregnancy, if:<br>(a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and<br>(b) the service is not performed in conjunction with another antenatal attendance item in Group T4 for the same patient on the same day by the same practitioner  | 28.35        |
| 91851   | Postnatal telehealth attendance by an obstetrician or general practitioner (other than a service to which any other item applies) if:<br>(a) is between 4 and 8 weeks after the birth; and<br>(b) lasts at least 20 minutes in duration; and<br>(c) includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and<br>(d) is for a pregnancy in relation to which a service to which item 82140 applies is not provided.<br>Applicable once for a pregnancy  | 74.60        |
| 91852   | Postnatal telehealth attendance (other than a service to which any other item applies) if:<br>(a) the attendance is rendered by:<br>(i) a practice midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or<br>(ii) an obstetrician; or<br>(iii) a general practitioner; and<br>(b) is between 1 week and 4 weeks after the birth; and<br>(c) lasts at least 20 minutes; and<br>(d) is for a patient who was privately admitted for the birth; and<br>(e) is for a pregnancy in relation to which a service to which item 82130, 82135 or 82140, 91214, 91215, 91221 or 91222 is not provided.<br>Applicable once for a pregnancy | 55.55        |
| 91853   | Antenatal telehealth attendance  | 49.05        |

*GPs and OMPs working in general practice can only perform a telehealth or telephone service where they have an established clinical relationship with the patient.*



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**Subgroup 2 – Obstetric phone services**

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| 91855 | Antenatal phone service provided by a practice midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner, to a maximum of 10 services per pregnancy, if:<br><br>(a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and<br><br>(b) the service is not performed in conjunction with another antenatal attendance item in Group T4 for the same patient on the same day by the same practitioner   | 28.35 |
| 91856 | Postnatal phone attendance by an obstetrician or general practitioner (other than a service to which any other item applies) if:<br><br>(a) is between 4 and 8 weeks after the birth; and<br>(b) lasts at least 20 minutes in duration; and<br>(c) includes a mental health assessment (including screening for drug and alcohol use and domestic violence) of the patient; and<br>(d) is for a pregnancy in relation to which a service to which item 82140 applies is not provided.<br><br>Applicable once for a pregnancy   | 74.60 |
| 91857 | Postnatal phone attendance (other than a service to which any other item applies) if:<br><br>(a) the attendance is rendered by:<br>(i) a practice midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or<br>(ii) an obstetrician; or<br>(iii) a general practitioner; and<br>(b) is between 1 week and 4 weeks after the birth; and<br>(c) lasts at least 20 minutes; and<br>(d) is for a patient who was privately admitted for the birth; and<br>(e) is for a pregnancy in relation to which a service to which item 82130, 82135 or 82140 of the Health Insurance (Midwife and Nurse Practitioner) Determination 2015 or item 91214, 91215, 91221 or 91222 is not provided.<br><br>Applicable once for a pregnancy | 55.55 |
| 91858 | Antenatal phone attendance   | 49.05 |

*GPs and OMPs working in general practice can only perform a telehealth or telephone service where they have an established clinical relationship with the patient.*