



ALLIED HEALTH SERVICES

Allied Health Multidisciplinary Case Conferences

Last updated: 8 December 2021

- From 1 November 2021, new Medicare Benefits Schedule (MBS) items are available for eligible allied health practitioners participating in certain multidisciplinary case conferences with medical practitioners.
- The new items apply to non-admitted patients for:
 - Chronic disease management under the care of a medical practitioner (other than a specialist or consultant physician) in either community or residential aged care settings.
 - Early diagnosis and treatment for children under 13 years with, or suspected of having, a pervasive developmental disorder (including autism), under the care of a consultant psychiatrist or paediatrician.
 - An eligible disability, diagnosed or suspected, for children under 13 years, under the care of a specialist, consultant physician or GP. (See definition of eligible disability below).
- Under the new items, eligible allied health practitioners may claim reimbursement for participating in multidisciplinary case conferences through three time-tiered items: 15-20 minutes, 20-40 minutes and over 40 minutes.
- The new items are intended to increase uptake of multidisciplinary case conferences, improve care co-ordination, and support the outcomes that matter most to patients and their families.

Who is eligible?

For each patient group, the new items are only available for eligible allied health practitioners who are invited to attend a case conference by the patient's treating medical practitioner. These are:

For chronic disease management case conferences: Aboriginal and Torres Strait Islander health practitioners; Aboriginal health workers; audiologists; chiropractors; diabetes educators; dietitians; exercise physiologists; mental health workers; occupational therapists; osteopaths; physiotherapists; podiatrists; psychologists; or speech pathologists.

For autism, pervasive developmental disorder, and eligible disability case conferences: Aboriginal and Torres Strait Islander health practitioners; Aboriginal health workers; audiologists; mental health nurses; mental health workers; occupational therapists; optometrists; orthoptists; physiotherapists; psychologists; or speech pathologists.

Note: Mental health workers can include services provided by members of five different allied health professional groups. 'Mental health workers' are drawn from the following: psychologists; mental health nurses; occupational therapists; social workers; Aboriginal and Torres Strait Islander health practitioners; and Aboriginal health workers. For further information see MBS explanatory note MN.3.4.

As per existing arrangements, other providers can continue to participate in case conferences, however they will not be able to access the new items.



What items are available?

There are 3 MBS items for participation by eligible allied health practitioners in multidisciplinary case conferences for patients with chronic disease – when the allied health practitioner is invited to attend by the patient's treating medical practitioner (other than a specialist or consultant physician):

Group M3 – Chronic disease management case conference services

- 3 new items for allied health multidisciplinary case conferences for chronic disease management – MBS items 10955, 10957 and 10959.

These patients must have a **Chronic Disease Management Plan** in place before a chronic disease case conference can be claimed.

There are 3 MBS items for participation by eligible allied health practitioners in multidisciplinary case conferences for children under 13 diagnosed with, or suspected of having, a pervasive developmental disorder (including autism), when invited to attend by the patient's treating consultant psychiatrist or paediatrician:

Group M10 – Autism, pervasive developmental disorder and disability case conference services

- 3 new items for allied health multidisciplinary case conferences for children with autism or another pervasive development disorder – MBS items 82001, 82002 and 82003.

There are 3 MBS items for participation by eligible allied health practitioners in multidisciplinary case conferences for children under 13 diagnosed with, or suspected of having, an eligible disability - when the allied health practitioner is invited to attend by the patient's treating specialist, consultant physician or general practitioner (does not include other medical practitioners).

Group M10 – Eligible disability case conference services

- 3 new items for allied health multidisciplinary case conferences for children with an eligible disability – MBS items 82001, 82002 and 82003.

Eligible disability means any of the following:

- a) sight impairment that results in vision of less than or equal to 6/18 vision or equivalent field loss in the better eye, with correction;
- b) hearing impairment that results in:
 - i. a hearing loss of 40 decibels or greater in the better ear, across 4 frequencies; or
 - ii. permanent conductive hearing loss and auditory neuropathy;
- c) deafblindness;
- d) cerebral palsy;
- e) Down syndrome;
- f) Fragile X syndrome;
- g) Prader-Willi syndrome;
- h) Williams syndrome;
- i) Angelman syndrome;
- j) Kabuki syndrome;
- k) Smith-Magenis syndrome;
- l) CHARGE syndrome;
- m) Cri du Chat syndrome;
- n) Cornelia de Lange syndrome;
- o) microcephaly, if a child has:
 - i. a head circumference less than the third percentile for age and sex; and
 - ii. a functional level at or below 2 standard deviations below the mean for age on a standard development test or an IQ score of less than 70 on a standardised test of intelligence;
- p) Rett's disorder.



What does this mean for providers?

The new MBS items will allow allied health practitioners to receive a payment for participating in multidisciplinary case conferences with the patient's medical practitioner and other providers.

The case conference must be organised by the medical practitioner and involve at least two other persons providing different kinds of care to the patient. The patient and family members or carers can attend the case conference, but will not count towards the minimum of two other care providers. The allied health practitioner can be counted as one of these other two persons and must be invited to attend by the organising medical practitioner.

The eligible allied health practitioner does not need all participants to be MBS-eligible to be able to claim payment for their participation.

In some instances, two eligible allied health practitioners from the same profession may participate in the same case conference, where both provide different aspects of care to the patient. For instance, the two providers from the same profession have different specialisations that are clinically relevant to the same patient and cannot be provided by one of the providers alone. In this instance, both providers will be able to claim the new items.

How often can these items be claimed?

The new items can be accessed in line with current arrangements for the medical practitioners caring for these patients.

Case conferencing items for chronic disease management of a patient can be accessed no more than once every 3 months, in line with existing arrangements for reviews of Team Care Arrangements. However, where there has been a significant change in the patient's clinical condition, another case conference may be arranged earlier than the three months limitation. This would be for exceptional circumstances and the claim must be annotated with this advice to enable Services Australia to properly assess the claim. A change of care providers does not qualify as an exceptional circumstance.

There are no frequency restrictions for case conferencing items for patients with or suspected of autism, a pervasive developmental disorder or an eligible disability.

Do I need to have had a pre-existing relationship with the patient?

As case conferences can be used to determine what type of care may be needed going forward, the new items do not require the allied health practitioner to have a pre-existing relationship with the patient. However, the patient must agree to the allied health practitioner participating in the case conference.

The case conference may lead to an agreed care plan between all participating providers, including the number of allied health practitioner services required and how they are allocated among eligible allied health practitioners within a patient's entitlement.

Is a referral from the medical practitioner needed?

A referral is not required for eligible allied health services in order to access the new items, however the allied health practitioner must be invited to participate in the case conference by the patient's treating medical practitioner. In



In addition, the patient must agree to the allied health practitioner participating in the case conference and be informed that Medicare will be accessed to fund the service. The patient may agree through discussion with their medical practitioner. The allied health practitioner should ensure that the patient has agreed and that their agreement has been recorded appropriately.

Referrals are still required for any allied health practitioners providing treatment items to patients, as per existing requirements for chronic disease management, pervasive developmental disorder and eligible disability patients.

Patients should be informed that a charge will be incurred for the service, for which they are eligible for a Medicare rebate. Patients should also be informed if there will be any out-of-pocket costs.

Allied health practitioners claiming one of the MBS items must record the day, start and end times, the names of all participants and all matters discussed in the patient's medical record.

Can the new items be accessed via Telehealth?

The new case conferencing items can be accessed in-person, via videoconference or telephone, using the same item number. There is no requirement that all participants use the same communication method.

Why are the changes being made?

The MBS Review was conducted by expert committees and working groups focusing on specific areas of the MBS. These new items have been implemented following recommendations from the:

- General Practice and Primary Care Clinical Committee of the MBS Review Taskforce to promote greater uptake of GP-led multidisciplinary case conferences for people with chronic disease.
- Allied Health Reference Group of the MBS Review Taskforce to promote multidisciplinary planning for children with autism or any pervasive development disorder under the care of a paediatrician or psychiatrist.

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?

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.



ALLIED HEALTH CASE CONFERENCE SERVICES

Chronic Disease Management Case Conference Services

Table 1. Allied Health Chronic Disease Management Case Conference MBS items introduced 1 November 2021

Service	Items in person, via video conference or via telephone
Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which another item in this Group applies)	10955
Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which another item in this Group applies)	10957
Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; if the conference lasts for at least 40 minutes (other than a service associated with a service to which another item in this Group applies)	10959

Autism, Pervasive Developmental Disorder and Disability Case Conference Services

Table 2. Allied Health Autism, Pervasive Developmental Disorder and Disability Case Conference MBS items introduced 1 November 2021

Service	Items in person, via video conference or via telephone
Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a community case conference if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which another item in this Group applies)	82001
Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a community case conference if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which another item in this Group applies)	82002
Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a community case conference if the conference lasts for at least 40 minutes (other than a service associated with a service to which another item in this Group applies)	82003