Telehealth Services Provided by GPs and Non-Specialist Medical Practitioners to Patients in Rural and Remote Areas

Last updated: 2 October 2019

- On 1 November 2019, new Medicare Benefits Schedule (MBS) items will be introduced to allow general practitioners (GPs) and non-specialist medical practitioners to provide services by videoconference to patients living in rural and remote areas.
- The new MBS items will help to ensure that people living in rural and remote locations receive timely primary care services that support the established clinical relationship between the patient and his or her usual doctor.
- Only patients living in Modified Monash Model (MMM) 6 and 7 areas will be eligible for the new service.

What are the changes?

From 1 November 2019, GPs and non-specialist medical practitioners will be able to offer patients in rural and remote areas the option of a general attendance service by video consultation.

- Under the arrangements, 12 new items will be introduced to the MBS, four items for GPs and eight items for non-specialist medical practitioners:
  - MBS items 2461, 2463, 2464, and 2465 for services provided by GPs;
  - MBS items 2471, 2472, 2475 and 2478 for services provided by non-specialist medical practitioners located in MMM 1 areas; and
  - MBS items 2480, 2481, 2482, and 2483 for services provided by non-specialist medical practitioners located in MMM 2-7 areas.
- There is no restriction on the geographic location of the practitioner providing the new telehealth service.
- To be eligible for the new telehealth service, a patient must:
  - be living in a MMM 6 or 7 area;
  - have received three face-to-face professional attendances in the preceding twelve months from the practitioner who will provide the telehealth service; and
  - at the time of the consultation, be at least 15 kilometres by road from the practitioner.
• The service must have both an audio and a video component. A Medicare benefit will not be paid for a service provided by telephone only (that is, an audio connection, but with no video).

Clinical Requirements and Recommended Fees

• The new telehealth items will replicate the clinical requirements and MBS rebates of the current time-tiered general attendance items in consulting rooms used by GPs and non-specialist medical practitioners (table below).

<table>
<thead>
<tr>
<th>Practitioner Type</th>
<th>New Telehealth Item</th>
<th>Replicated Consultation Item</th>
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<tbody>
<tr>
<td>General Practitioner</td>
<td>2461</td>
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<td>2465</td>
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<tr>
<td>Non-Specialist Medical Practitioner MMM 1</td>
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<td>Non-Specialist Medical Practitioner MMM 2-7</td>
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MBS item descriptors and explanatory notes for these items are available at www.mbsonline.gov.au

Why are the changes being made?

Access to timely primary care services can be difficult for patients in rural and remote Australia.

Flexible service delivery models, including the telehealth/videoconference model of healthcare delivery, help to address inequities in the provision of health care services and have the potential to deliver improved health outcomes to people living in rural and remote locations.

What does this mean for GPs and non-specialist medical practitioners?

GPs and non-specialist medical practitioners will have greater flexibility when providing services to isolated patients. The new items will help to overcome restrictions imposed by remoteness and long travel times, allowing doctors to better manage their patients’ health needs.

The new items are only available to medical practitioners who have an established clinical relationship with the patient requesting the telehealth consultation. This is to ensure that patients receive services from providers who are familiar with their health needs and are able to provide continuity of care.

For the purposes of the new arrangements, “established clinical relationship” means that the patient has had at least three face-to-face consultations in the preceding 12 months with the doctor providing the telehealth consultation.
How will these changes affect patients?

From 1 November 2019, people living in rural and remote communities will be able to request a video consultation with their doctor.

Only patients living in rural and remote areas will be eligible for the new service. Also, at the time when the service takes place, the patient and the doctor must be at least 15 kilometres apart by road.

Although there is no restriction on where the doctor is located, the patient and the doctor must already have an established clinical relationship. This means that the doctor must have seen the patient for a face-to-face consultation three times in the preceding twelve months.

This will help to ensure that doctors providing the telehealth service are already familiar with the patient’s health and medical needs.

There is no restriction on the technology or software that doctors and patients use to contact one another. However, the patient and the doctor must be able to both see and hear each other. A Medicare benefit cannot be paid for a telephone-only consultation that does not also include video.

Who was consulted on the changes?

The Department consulted with stakeholders on key elements and principles of the new MBS telehealth arrangements for GPs and non-specialist medical practitioners. This included stakeholders representing general practice including the Australian Medical Association, Royal Australian College of General Practitioners and the Australian College of Rural and Remote Medicine.

How will the changes be monitored and reviewed?

The Department of Human Services will monitor the use of the new MBS telehealth items by GPs and non-specialist medical practitioners. Use of the items that does not seem to be in accordance with the relevant Medicare guidelines and legislation will be referred to the Department of Health for appropriate action.

Where can I find more information?

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 Department of Human Services 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 Department of Human Services website or contact the Department of Human Services on the Provider Enquiry Line – 13 21 50.
The data file for software vendors is expected to become available on 1 November 2019 and can be accessed via the MBS Online website under the Downloads page.

*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.*