



COVID-19 Temporary MBS Allied Health Services for Residents of Aged Care Facilities

Last updated: 23 December 2020

Commencing 10 December 2020 and available until 30 June 2022, temporary Medicare Benefits Schedule (MBS) items have been made available to improve access to multidisciplinary care for residents of residential aged care facilities (RACF) during the COVID-19 pandemic.

The new items apply to RACF residents referred for allied health services under the following treatment, management or care plans:

- Multidisciplinary Care Plans; OR
- GP Management Plans; OR
- Shared Care Plans; OR
- Team Care Plans; AND/OR
- Aboriginal and Torres Strait Islander Health Assessments.

Under the new items, allied health providers may claim a call-out or 'flag-fall' fee to cover their costs to travel to a RACF to provide a face-to-face service.

These temporary MBS items are applicable for non-admitted patients that reside in a RACF and cannot be claimed as part of hospital treatment

What are the temporary changes?

As part of the Australian Government's response to COVID-19, 69 new temporary MBS allied health attendances items have been introduced to support the provision of comprehensive care for residents within RACF.

The new temporary allied health MBS items are:

Group M29, sub-group 1, Group M30, sub-group 1 and Group M31, sub-group 1

- Twenty nine (29) new initial/long attendance allied health items for residents of RACF.

Group M29, sub-group 3, Group M30, sub-group-3 and Group M31, sub-group 2

- Thirty three (33) new subsequent/standard allied health items for residents of RACF.

Group M29, sub-group 2, Group M30, sub-group 2 and Group M31, sub-group 3

- Seven (7) new additional physical therapies items for residents of RACF who have used the annual maximum of five (5) initial and subsequent services.

A separate flag fall item (90004) has also been introduced. This can be claimed by allied health providers with the first attendance provided face-to-face at a RACF.

A list of the new items is provided later in this fact sheet.



New Initial/Long attendance allied health items

The temporary initial/long attendance items allow allied health providers to undertake an extended consultation with a RACF resident referred to them under an eligible treatment, management or care plan.

Initial/long attendance items can be claimed only once per patient per calendar year. For example, a patient may receive initial attendances once each for podiatry and physiotherapy, but not twice for a service by the same type of provider.

Initial/long attendance items are included in patients' maximum allocation of five (5) allied health services per calendar year. This means there is a maximum of ten (10) individual services per calendar year when an additional five (5) physical therapies items are included (see below).

The temporary initial/long attendance allied health items must be provided face-to-face.

These new arrangements are replicated for Aboriginal and Torres Strait Islander patients living in a RACF who are eligible for allied health follow-up services after receiving an Aboriginal and Torres Strait Islander health assessment.

Temporary subsequent/standard allied health items

The new temporary subsequent/standard allied health items replicate the clinical requirements of existing allied health items, but enable providers to claim flag-fall for their attendance at a RACF (billed only for the first patient seen on a RACF visit).

Medicare benefits are available for up to five (5) subsequent/standard allied health services per patient per calendar year. Any initial/long attendance allied health attendance items claimed during this period are to be included in this maximum allocation (e.g. one initial/long service and four subsequent/standard services).

The new temporary subsequent/standard attendance items can be provided face-to-face or via telehealth (video and phone). A flag-fall cannot be claimed for telehealth services.

Temporary additional physical therapy items

The temporary additional physical therapy items allow eligible RACF residents to receive an additional five (5) physical therapy services per calendar year when referred under an eligible treatment, management or care plan.

The five (5) additional services are for physiotherapy, exercise physiology and occupational health services. Patients are eligible for these services when they have used their existing allocation of five (5) allied health services. No new referral is required if the additional services were already included in a patient's eligible treatment, management or care plan.

The new temporary additional physical therapy items must be provided face-to-face.



Group Therapy items

The new temporary allied group therapy items replicate the clinical requirements of existing allied health items for Diabetes education, exercise physiology and dietetic services, but enable providers to claim flag-fall for their attendance at a RACF (billed only for the first patient seen on a RACF visit).

In addition, eligible patients living in a RACF are able to receive an additional two (2) exercise physiology group services, for a maximum of ten 10 allied health group services per calendar year.

The two (2) additional exercise physiology group services can only be claimed where residents have utilised their existing allocation of eight (8) allied health group services. No new referral is required for these services if they are included in a patient's eligible treatment, management or care plan.

Temporary Flag-Fall items

The flag-fall items apply to a provider's first attendance at a RACF to provide an MBS service, per occasion. The flag-fall is to be claimed per RACF attendance rather than per patient attendance. Where two or more RACFs are co-located or are adjacent to each other, a practitioner is not eligible for extra compensation for visiting the second facility, this is consistent with the GP RACF attendance arrangements. Once the flag-fall item is billed, providers may then bill an applicable attendance item for each of the RACF patients they see. The fees for the call-out items are \$48.50 paid an equivalent benefit of 85%, or \$41.25 for allied health providers.

Recognising the ongoing risk of COVID-19 transmission and the vulnerable population of aged care residents, allied providers should minimise their attendance to multiple RACFs.

Who is eligible?

The temporary allied health MBS telehealth items are available to eligible patients living in RACF whose health care is being managed under an eligible treatment, management or care plan.

Residents whose services are required to be provided, at no cost, by their residential aged care service under the *Aged Care Act 1997* should continue to access allied health services via this pathway. The new RACF-specific allied health MBS items do not change the obligations of aged care providers under the *Quality of Care Principles*, but enable eligible residents to receive more Medicare-subsidised allied health services if required

Why are the changes being made?

Many people in RACF have experienced deconditioning because of the COVID-19 pandemic. Deconditioning is a complex process of physiological change following a period of inactivity and bedrest.

Increasing access to allied health services in person, and remotely via telehealth if appropriate, will help residents maintain and improve their health and wellbeing.

What does this mean for providers?

The temporary MBS items better support allied providers to continue to deliver essential health care services to patients living in residential aged care.

The changes to the MBS build upon existing arrangements for patient eligibility for allied health care, through chronic disease management and Aboriginal and Torres Strait Islander health assessments. All MBS items for allied health



services require a valid referral to the relevant allied health professional. A patient must be referred by an eligible medical practitioner, and services can form part of an eligible treatment, management or care plan, including:

- GP Management Plans
- Shared Care Plans
- Team Care Plans
- Multidisciplinary Care Plans.

The expectations of the new temporary MBS items, where there are telehealth equivalent items, is that face to face services continue to be the preferred modality for service delivery. Where there are limitations to face to face services, such as infection control protocols, video conference may be provided. Healthcare providers can also offer audio-only services via telephone, under the appropriate COVID-19 item, if video is not available. When providing telehealth services the provider must ensure that:

- the patient has to be present for the telehealth attendance
- patient (or carer) has consented to the service prior to the attendance
- assignment of benefit requirements are met when a services is bulk billed
- that a telehealth or phone service is provided only where it is safe and clinically appropriate to do so

Further information regarding telehealth service provision can be found at: [Covid-19 telehealth items guide](#)

The new RACF specific allied health MBS items, and the flag fall rebate, are only available for those practitioners who are not employed by the RACF operator

How will these changes affect patients?

Residents in RACF will have access to more Medicare-subsidised services. Allied health telehealth items do not need to be bulk billed, however, the provider must ensure informed financial consent is obtained prior to any service which attracts a co-payment.

Patients should talk to their GPs about their multidisciplinary care needs, including options for accessing allied health services.

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 Aged Care Royal Commission's special report on the COVID-19 pandemic in aged care is available from the [Commission's website](#).

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.



COVID-19 – TEMPORARY ALLIED HEALTH MBS ITEMS

For allied health services under a GP Management Plan or Multidisciplinary Care Plan

Service	Existing Items Face to Face (F2F) Only	COVID Telehealth Video – V Phone - P	Initial/ Long Attendance RACF	Subsequent/ Standard Attendance RACF
Aboriginal or Torres Strait Islander health service	10950	93000 – Video 93013 - Phone	93501 – F2F	93524 – F2F 93537 – Video 93538 – Phone
Diabetes education health service	10951	93000 – Video 93013 – Phone	93502 – F2F	93525 – F2F 93537 – Video 93538 – Phone
Audiology health service	10952	93000 – Video 93013 – Phone	93503 – F2F	93526 – F2F 93537 – Video 93538 – Phone
Exercise physiology service	10953	93000 – Video 93013 – Phone	93504 – F2F	93527 – F2F 93537 – Video 93538 – Phone
Dietetics health service	10954	93000 – Video 93013 – Phone	93505 – F2F	93528 – F2F 93537 – Video 93538 – Phone
Mental health service	10956	93000 – Video 93013 – Phone	93506 – F2F	93529 – F2F 93537 – Video 93538 – Phone
Occupational therapy health service	10958	93000 – Video 93013 – Phone	93507 – F2F	93530 – F2F 93537 – Video 93538 – Phone
Physiotherapy health service	10960	93000 – Video 93013 – Phone	93508 – F2F	93531 – F2F 93537 – Video 93538 – Phone
Podiatry health service	10962	93000 – Video 93013 – Phone	93509 – F2F	93532 – F2F 93537 – Video 93538 – Phone
Chiropractic health service	10964	93000 – Video 93013 – Phone	93510 – F2F	93533 – F2F 93537 – Video 93538 – Phone
Osteopathy health service	10966	93000 – Video 93013 – Phone	93511 – F2F	93534 – F2F 93537 – Video 93538 – Phone
Psychology health service	10968	93000 – Video 93013 – Phone	93512 – F2F	93535 – F2F 93537 – Video 93538 – Phone
Speech pathology health service	10970	93000 – Video 93013 – Phone	93513 – F2F	93536 – F2F 93537 – Video 93538 – Phone



For allied health services under a Allied Health Services for people of Aboriginal or Torres Strait Islander Health Assessment

Service	Existing Items Face to Face (F2F) Only	COVID Telehealth Video – V Phone - P	Initial/ Long Attendance RACF	Subsequent/ Standard Attendance RACF
Aboriginal or Torres Strait Islander health service	81300	93048 – Video 93061 - Phone	93546	93579 – F2F 93592 – Video 93593 – Phone
Diabetes education health service	81305	93048 – Video 93061 - Phone	93547	93580 – F2F 93592 – Video 93593 – Phone
Audiology health service	81310	93048 – Video 93061 - Phone	93548	93581 – F2F 93592 – Video 93593 – Phone
Exercise physiology service	81315	93048 – Video 93061 - Phone	93549	93582 – F2F 93592 – Video 93593 – Phone
Dietetics health service	81320	93048 – Video 93061 - Phone	93550	93583 – F2F 93592 – Video 93593 – Phone
Mental health service	81325	93048 – Video 93061 – Phone	93551	93584 – F2F 93592 – Video 93593 – Phone
Occupational therapy health service	81330	93048 – Video 93061 – Phone	93552	93585 – F2F 93592 – Video 93593 – Phone
Physiotherapy health service	81335	93048 – Video 93061 – Phone	93553	93586 – F2F 93592 – Video 93593 – Phone
Podiatry health service	81340	93048 – Video 93061 – Phone	93554	93587 – F2F 93592 – Video 93593 – Phone
Chiropractic health service	81345	93048 – Video 93061 – Phone	93555	93588 – F2F 93592 – Video 93593 – Phone
Osteopathy health service	81350	93048 – Video 93061 – Phone	93556	93589 – F2F 93592 – Video 93593 – Phone
Psychology health service	81355	93048 – Video 93061 – Phone	93557	93590 – F2F 93592 – Video 93593 – Phone
Speech pathology health service	81360	93048 – Video 93061 – Phone	93558	93591 – F2F 93592 – Video 93593 – Phone



Additional physical therapies (individual services) GP Management Plan or Multidisciplinary Care Plan		
Service	Existing Items Face to Face (F2F) Only	Additional physical therapies Face to Face (F2F) Only
Exercise physiology service	10953	93518
Occupational therapy health service	10958	93519
Physiotherapy health service	10960	93520

Additional physical therapies (individual services) Follow-up Allied Health Services for people of Aboriginal or Torres Strait Islander descent		
Service	Existing Items Face to Face (F2F) Only	Additional physical therapies Face to Face (F2F) Only
Exercise physiology service	81315	93571
Occupational therapy health service	81330	93572
Physiotherapy health service	81335	93573

Allied Health Flag Fall	
Service	Allied Health Flag Fall Face to Face (F2F) Only
Multidisciplinary Care Plan for residents in RACF M29, sub-group 1 to 3 (excluding 93537 and 93538)	90004
Allied Health Services for RACF residents of Aboriginal or Torres Strait Islander descent M30, sub-group-1 to 3 (excluding 93592 and 93593)	90004
Allied health Group therapy services for residents in RACF M31, sub-group 1 to 3	90004
Practitioners must retain relevant records as evidence of Medicare claims. All health professional groups (such as doctors, dentists, allied health professionals and pharmacists) are required to keep and maintain records for a minimum period of two years.	



Group Services			
Service	Existing Items Face to Face (F2F) Only	COVID Telehealth Video – V Phone - P	RACF Face to Face (F2F) Only
Diabetes education service - assessment for group services	81100	-	93606
Exercise physiology service - assessment for group services	81110	-	93607
Dietetics service - assessment for group services	81120	93284 – Video 93286 – Phone	93608
Diabetes education group services	81105	-	93613
Exercise physiology group services	81115	-	93614
Dietetics service group services	81125	93285– Video	93615
Additional Exercise physiology group services	81115	-	93620