



# Specialist MBS Telehealth (video and phone) Services – out-of-hospital attendances

Last updated: 13 October 2025

- MBS specialist telehealth services provide access to a range of non-GP specialist, consultant physician and approved dental practitioner consultations.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- Items mentioned in this Specialist MBS Telehealth Factsheet are for out-of-hospital patients. For inpatient items please see Inpatient Telehealth Psychiatry Services Factsheet on [MBS Online - MBS Telehealth Services](#).
- Providers are expected to obtain informed financial consent from patients prior to providing the service by providing details regarding their fees, including any out-of-pocket costs.

## What are the changes?

From 1 November 2025, nine new subsequent phone items will be introduced for specialists and consultant physicians (92440, 92441, 92442, 92443, 92444, 92445, 92446, 92447 and 92448). These items have the same clinical requirements as equivalent in-person (face-to-face) and video items (see tables below for descriptions).

## Why are the changes being made?

The introduction of nine new subsequent phone items responds to a recommendation of the Medicare Benefits Schedule (MBS) Review Advisory committee (MRAC) post implementation review of MBS telehealth. The MRAC – Telehealth Post-Implementation Review – Final report is available on the [Department of Health, Disability and Ageing \(the department\) website](#).

## Information for providers

MBS telehealth items allow providers to continue to provide essential services to patients within their care.

Providers do not need to be in their regular practice to provide telehealth services. Providers should use their provider number relevant to the appropriate practice and must provide safe services in accordance with normal professional standards. For an

MBS benefit to be valid both the provider and patient must be in Australia at the time of the service.

MBS telehealth items can substitute for equivalent face-to-face consultations where it's clinically appropriate and safe to do so; these items have the same clinical requirements as the corresponding face-to-face consultation items.

All MBS items for specialist (non-GP) services require a valid referral to the relevant specialist or approved dental practitioner. For more information see [AskMBS Advisory – Non-GP specialist and consultant physician services | Australian Government Department of Health and Aged Care](#).

Telehealth services listed in the *Health Insurance (Professional Services Review Scheme) Regulations 2019* are included in the 'prescribed patterns of service rule'. Any medical practitioner who provides more than a combined 30 services per day on 20 or more days in a 12-month period (cumulative not consecutive) will be referred to the Professional Services Review (PSR).

Providers are encouraged to stay up to date with changes to these telehealth services, and additional information will be made available ahead of future MBS updates.

## Information for patients

Patients should ask their service providers about telehealth options that may be available where clinically appropriate.

## Who was consulted on the changes?

The introduction of nine new subsequent phone items was informed by stakeholder consultation through the MRAC's Post Implementation Review of MBS Telehealth released in June 2024. This included industry stakeholders, consumers, individual providers, organisations and researchers.

## Information about how services are monitored and reviewed

The department regularly reviews the use of MBS items in consultation with the profession.

Providers are responsible for ensuring Medicare services claimed using their provider number meet all legislative requirements. All Medicare claiming is subject to compliance checks and providers may be required to submit evidence about the services they bill. More information about the department's compliance program can be found on its website.

## What telehealth options are available?

Video services are the preferred approach for substituting a face-to-face consultation. However, providers can also offer audio-only services via phone where clinically appropriate. There are separate items available for phone 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 MBS Online](#). Further information can be found on [the Australian Cyber Security Centre website](#).

## 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](#). You can also subscribe to future MBS updates by visiting '[Subscribe to the MBS](#)' on the MBS Online website.

Providers seeking advice on interpretation of MBS items, explanatory notes and associated legislation can use the department's email advice service by emailing [askMBS@health.gov.au](mailto:askMBS@health.gov.au).

Private health insurance information on the product tier arrangements is available at [www.privatehealth.gov.au](http://www.privatehealth.gov.au). Detailed information on the MBS item listing within clinical categories is available on the [department's website](#). Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the *Private Health Insurance (Benefit Requirements) Rules 2011* found on the [Federal Register of Legislation](#). If you have a query in relation to private health insurance, you should email [PHI@health.gov.au](mailto:PHI@health.gov.au).

Subscribe to '[News for Health Professionals](#)' on the Services Australia website to 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.

The data file for software vendors when available can be accessed via the [Downloads](#) page.

# Specialist MBS face-to-face and telehealth items – out-of-hospital attendances

Table 1. Specialist services

| Service                                  | Face-to-face items | Video items | Phone items |
|------------------------------------------|--------------------|-------------|-------------|
| <b>Specialist. Initial attendance</b>    | 104                | 91822       |             |
| <b>Specialist. Subsequent attendance</b> | 105                | 91823       | 91833       |

Table 2. Consultant Physician services

| Service                                            | Face-to-face items | Video items | Phone items |
|----------------------------------------------------|--------------------|-------------|-------------|
| <b>Consultant physician. Initial attendance</b>    | 110                | 91824       |             |
| <b>Consultant physician. Subsequent attendance</b> | 116                | 91825       | 92440       |
| <b>Consultant physician. Minor attendance</b>      | 119                | 91826       | 91836       |

Table 3. Consultant Physician services

| Service                                                                                                                                              | Face-to-face items | Video items | Phone items |
|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Consultant physician. Initial assessment, patient with at least 2 morbidities, prepare a treatment and management plan, at least 45 minutes</b>   | 132                | 92422       |             |
| <b>Consultant physician, Subsequent assessment, patient with at least 2 morbidities, review a treatment and management plan, at least 20 minutes</b> | 133                | 92423       | 92443       |

Table 4. Specialist and Consultant Physician services

| Service                                                                                                                                         | Face-to-face items | Video items | Phone items |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Specialist or consultant physician early intervention services for children with autism, pervasive developmental disorder, or disability</b> | 137                | 92141       |             |

Table 5. Geriatrician services

| Service                                                                                                         | Face-to-face items | Video items | Phone items |
|-----------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Geriatrician, prepare an assessment and management plan, patient at least 65 years, more than 60 minutes</b> | 141                | 92623       |             |
| <b>Geriatrician, review a management plan, more than 30 minutes</b>                                             | 143                | 92624       | 92448       |

Table 6. Consultant Psychiatrist services

| Service                                                                | Face-to-face items | Video items | Phone items |
|------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Consultant psychiatrist. Consultation, not more than 15 minutes</b> | 300                | 91827       | 91837*      |
| <b>Consultant psychiatrist. Consultation, 15 to 30 minutes</b>         | 302                | 91828       | 91838*      |
| <b>Consultant psychiatrist. Consultation, 30 to 45 minutes</b>         | 304                | 91829       | 91839*      |
| <b>Consultant psychiatrist. Consultation, 45 to 75 minutes</b>         | 306                | 91830       |             |
| <b>Consultant psychiatrist. Consultation, more than 75 minutes</b>     | 308                | 91831       |             |

*\*Where the attendance is after the first attendance as part of a single course of treatment*

Table 7. Consultant Psychiatrist services

| Service                                                                                                                                                                                              | Face-to-face items | Video items | Phone items |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Consultant psychiatrist, prepare a treatment and management plan, patient under 13 years with autism or another pervasive developmental disorder, at least 45 minutes</b>                         | 289                | 92434       |             |
| <b>Consultant psychiatrist, prepare a management plan, more than 45 minutes</b>                                                                                                                      | 291                | 92435       |             |
| <b>Consultant psychiatrist, review management plan, 30 to 45 minutes</b>                                                                                                                             | 293                | 92436       | 92444       |
| <b>Consultant psychiatrist, attendance, new patient (or has not received attendance in preceding 24 mths), more than 45 minutes</b>                                                                  | 296                | 92437       |             |
| <b>Consultant psychiatrist, interview of a person other than patient, in the course of initial diagnostic evaluation of patient, 20 to 45 minutes</b>                                                | 348                | 92458       |             |
| <b>Consultant psychiatrist, interview of a person other than patient, in the course of initial diagnostic evaluation of patient, 45 minutes or more</b>                                              | 350                | 92459       |             |
| <b>Consultant psychiatrist, interview of a person other than patient, in the course of continuing management of patient, not less than 20 minutes, not exceeding 4 attendances per calendar year</b> | 352                | 92460       |             |

Table 8. Consultant Psychiatrist services

| Service                                                                                                                                                                                                | Face-to-face items | Video items | Phone items |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Consultant psychiatrist, group psychotherapy, at least 1 hour, involving group of 2 to 9 unrelated patients or a family group of more than 3 patients, each referred to consultant psychiatrist</b> | 342                | 92455       |             |
| <b>Consultant psychiatrist, group psychotherapy, at least 1 hour, involving family group of 3 patients, each referred to consultant psychiatrist</b>                                                   | 344                | 92456       |             |
| <b>Consultant psychiatrist, group psychotherapy, at least 1 hour, involving family group of 2 patients, each referred to consultant psychiatrist</b>                                                   | 346                | 92457       |             |

Table 9. Consultant Psychiatrist services

| Service                                                                                                        | Face-to-face items | Video items | Phone items |
|----------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Consultant psychiatrist, prepare an eating disorder treatment and management plan, more than 45 minutes</b> | 90260              | 92162       |             |
| <b>Consultant psychiatrist, to review an eating disorder plan, more than 30 minutes</b>                        | 90266              | 92172       | 92441       |

Table 10. Paediatrician services

| Service                                                                                                                    | Face-to-face items | Video items | Phone items |
|----------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Paediatrician early intervention services for children with autism, pervasive developmental disorder, or disability</b> | 135                | 92140       |             |

| Service                                                                                              | Face-to-face items | Video items | Phone items |
|------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Paediatrician, prepare an eating disorder treatment and management plan, more than 45 minutes</b> | 90261              | 92163       |             |
| <b>Paediatrician, to review an eating disorder plan, more than 20 minutes</b>                        | 90267              | 92173       | 92442       |

Table 11. Public Health Physician services

| Service                                                                  | Face-to-face items | Video items | Phone items |
|--------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Public health physician, level A attendance</b>                       | 410                | 92513       | 92521*      |
| <b>Public health physician, level B attendance, less than 20 minutes</b> | 411                | 92514       | 92522*      |
| <b>Public health physician, level C attendance, at least 20 minutes</b>  | 412                | 92515       |             |
| <b>Public health physician, level D attendance, at least 40 minutes</b>  | 413                | 92516       |             |

*\*Where the attendance is not the first attendance for that particular clinical indication*

Table 12. Neurosurgery attendances

| Service                                                                                 | Face-to-face items | Video items | Phone items |
|-----------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Neurosurgeon, initial attendance</b>                                                 | 6007               | 92610       |             |
| <b>Neurosurgeon, minor attendance, after the first in a single course of treatment.</b> | 6009               | 92611       | 92618       |
| <b>Neurosurgeon, subsequent attendance, 15 to 30 minutes</b>                            | 6011               | 92612       | 92445       |
| <b>Neurosurgeon, subsequent attendance, 30 to 45 minutes</b>                            | 6013               | 92613       | 92446       |



| Service                                                          | Face-to-face items | Video items | Phone items |
|------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Neurosurgeon, subsequent attendance, more than 45 minutes</b> | 6015               | 92614       | 92447       |

Table 13. Anaesthesia attendances

| Service                                                           | Face-to-face items | Video items | Telephone items |
|-------------------------------------------------------------------|--------------------|-------------|-----------------|
| <b>Anaesthetist, professional attendance, advanced or complex</b> | 17615              | 92701       |                 |

Table 14. Approved Oral and Maxillofacial Surgery attendances

| Service                                                                                 | Face-to-face items | Video items | Phone items |
|-----------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Dental practitioner (oral and maxillofacial surgery only), initial attendance</b>    | 51700              | 54001       |             |
| <b>Dental practitioner (oral and maxillofacial surgery only), subsequent attendance</b> | 51703              | 54002       | 54004       |

Table 15. Obstetricians, GPs, Midwives, Nurses or Aboriginal and Torres Strait Islander health practitioner services

| Service                                                                                                                                                                                  | Face-to-face items | Video items | Phone items |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| <b>Antenatal Service provided by a Nurse, Midwife or an Aboriginal and Torres Strait Islander health practitioner on behalf of, and under the supervision of, a medical practitioner</b> | 16400              | 91850       | 91855       |
| <b>Postnatal attendance by an obstetrician or GP</b>                                                                                                                                     | 16407              | 91851       | 91856       |
| <b>Postnatal attendance by:</b>                                                                                                                                                          | 16408              | 91852       | 91857       |

| Service                                                                                                                                                                   | Face-to-face items | Video items | Phone items |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------|
| (i) a 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 |                    |             |             |
| <b>Antenatal attendance</b>                                                                                                                                               | 16500              | 91853       | 91858       |

| Service                                                       | Face to face equivalent | Video items | Phone items |
|---------------------------------------------------------------|-------------------------|-------------|-------------|
| <b>Attendance for an obvious problem</b>                      | 82200                   | 91192       | 91193       |
| <b>Attendance greater than 6 minutes less than 20 minutes</b> | 82205                   | 91178       | 91189       |
| <b>Attendance at least 20 minutes</b>                         | 82210                   | 91179       | 91190       |
| <b>Attendance at least 40 minutes</b>                         | 82215                   | 91180       | 91191       |
| <b>Attendance at least 60 minutes</b>                         | 82216                   | 91206       |             |

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 factsheet is current as of the Last updated date shown above and does not account for MBS changes since that date.