



COVID-19 Temporary MBS Telehealth Services

Last updated: 20 July 2020

- Commencing 13 March 2020, new temporary MBS telehealth items have been made available to help reduce the risk of community transmission of COVID-19 and provide protection for patients and health care providers.
- The list of telehealth services has continued to expand since 13 March. This is the latest factsheet and provides details on all current telehealth items.
- The new temporary MBS telehealth items are available to GPs, medical practitioners, nurse practitioners, participating midwives, allied health providers and dental practitioners in the practice of oral and maxillofacial surgery.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- The new temporary MBS telehealth items are for out-of-hospital patients.
- From 20 July 2020, it will be a legislative requirement that GPs and Other Medical Practitioner (OMP) working in general practice can only perform a telehealth or telephone service where they have an existing relationship with the patient. There are limited exemptions to this requirement.
- It is a legislative requirement that the GP and OMP COVID-19 telehealth services, must be bulk billed for Commonwealth concession card holders, children under 16 years old and patients who are more vulnerable to COVID-19.
- Specialist and allied health service providers are no longer required to bulk bill COVID-19 telehealth items.
- Providers are expected to obtain informed financial consent from patients prior to providing the service; providing details regarding their fees, including any out-of-pocket costs.
- The bulk-billing incentive Medicare fees have temporarily doubled (until 30 September) for items relating to GP and OMP services, diagnostic imaging services (items 64990 and 64991) and pathology services (items 74990 and 74990). These items can be claimed with the telehealth items where appropriate. The fees are provided later in the factsheet. As of 20 April, two new bulk-billing incentive items have been introduced for services provided to patients who are more vulnerable to COVID-19.

What are the changes?

As part of the Australian Government's response to COVID-19, these items have been updated to ensure continuity of care for patients.

As of 30 March 2020 these items became general in nature and have no relation to diagnosing, treating or suspecting COVID-19.

A list of telehealth items is provided later in this fact sheet. Factsheet available on [MBS Online](#).



Why are the changes being made?

The temporary MBS telehealth items allow people to access essential Medicare funded health services in their homes and reduce their risk of exposure to COVID-19 within the community. Updates were made on 20 July 2020 to ensure patients receive care from a GP or practice with whom they have an existing relationship.

Who is eligible?

The new temporary MBS telehealth items are available to providers of telehealth services for a wide range of consultations. All Medicare eligible Australians can now receive these services. GPs and OMPs working in general practice may only provide a telehealth service where they have an existing relationship with the patient.

Additional detail is provided in the 'GPs and Other Medical Practitioners' factsheet, and 'Provider' FAQ.

GP and OMP services provided using the MBS telehealth items must be bulk billed for Commonwealth concession card holders, children under 16 years of age, and patients who are more vulnerable to COVID-19. For specialist and allied health services, bulk billing is at the discretion of the provider, so long as informed financial consent is obtained prior to the provision of the service.

Vulnerable means a patient at risk of COVID-19, so a person who:

- is required to self-isolate or self-quarantine in accordance with guidance issued by the Australian Health Protection Principal Committee in relation to COVID-19; or
- is at least 70 years old; or
- if the person identifies as being of Aboriginal or Torres Strait Islander descent—is at least 50 years old; or
- is pregnant; or
- is the parent of a child aged under 12 months; or
- is being treated for a chronic health condition; or
- is immune compromised; or
- meets the current national triage protocol criteria for suspected COVID-19 infection.

A chronic health condition is medical condition that has been present (or is likely to be present) for at least six months or is terminal. The Department of Health website provides additional detail online: <https://www.health.gov.au/health-topics/chronic-conditions/about-chronic-conditions>. The diagnosis of immune compromised is a clinical decision made by the patient's treating doctor. Please note this is guidance only, and does not constitute MBS claiming advice.

What telehealth options are available?

Videoconference services are the preferred approach for substituting a face-to-face consultation. However, in response to the COVID-19 pandemic, providers will also be able to offer audio-only services via telephone if video is not available. There are separate items available for the audio-only 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 MBSOnline: <http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist>. Further information can be found on the [Australian Cyber Security Centre website](#)

What does this mean for providers?

The new temporary MBS telehealth items will allow providers to continue to deliver essential health care services to patients within their care.

Providers do not need to be in their regular practice to provide telehealth services. GPs and OMPs working in general practice must ensure that they have an existing clinical relationship with their telehealth patients, or be able to explain how their patients qualify for exemptions to this requirement. Additional detail is in the 'GPs and Other Medical Practitioners' factsheet.

The telehealth MBS items can substitute for current face-to-face consultations that available under the MBS when the service/s cannot be provided due to COVID-19 considerations. The telehealth items will have similar requirements to normal timed consultation items. Providers should use their provider number for their primary location, and must provide safe services in accordance with normal professional standards.

GP and OMP telehealth items must be bulk billed for vulnerable patients, concession card holders and children under 16 years at the time the service is being provided, meaning MBS rebates are paid to the provider. Rebates for services provided by GPs and non-vocationally registered medical practitioners will be paid at 85% of the new item fees - these fee amounts have been increased so that the Medicare rebates paid for the new GP and medical practitioner telehealth services are at the same level as the rebates paid for the equivalent face-to-face services. (Due to the urgency of the new telehealth arrangements, the Department of Health has not been able to amend the legislation that establishes 100% rebates for GP/medical practitioner services.)

For additional information on the use of telehealth items, please refer to the [Provider Frequently Asked Questions](#) document available on MBSOnline.

How will these changes affect patients?

From 20 July 2020, patients will be eligible for GP and OMP telehealth services if they have seen their GP or health practitioner (such as a practice nurse or Aboriginal and Torres Strait Islander health worker) within the same practice at least once in the preceding 12 months. This new safeguard will support longitudinal and person-centred primary health care that is associated with better health outcomes.

The temporary COVID-19 MBS telehealth items also requires GPs and OMPs to bulk-bill services to vulnerable patients, concession card holders and children under 16 years, so there will be no additional charge for these patients. Patients are required to consent to their service being bulk-billed. Eligible patients should ask their service providers about their telehealth options, where clinically appropriate.

Specialist and allied health telehealth items do not need to be bulk billed, however the provider must ensure informed financial consent is obtained prior to the provision of the service.



A [consumer factsheet](#) is available on MBSOnline which provides further information on how these changes will affect patients.

Who was consulted on the changes?

Targeted consultation with stakeholders has informed the new temporary MBS telehealth items. Due to the nature of the COVID-19 emergency, it was not reasonably possible to undertake normal, broad consultations prior to implementation.

How will the changes be monitored and reviewed?

The Department of Health will monitor the use of the new temporary MBS telehealth 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?

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 MBS TELEHEALTH ITEMS

GENERAL PRACTITIONER ATTENDANCES

These services need to be bulk-billed for vulnerable patients, concession card holders and children under 16 years, and are for out-of-hospital patients

Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
Standard GP Attendance Items introduced 13 March 2020			
Attendance for an obvious problem	3	91790	91795
Attendance less than 20 minutes	23	91800	91809
Attendance at least 20 minutes	36	91801	91810
Attendance at least 40 minutes	44	91802	91811
Health assessment for people of Aboriginal or Torres Strait Islander descent Items introduced 30 March 2020			
Health assessment	715	92004	92016
Chronic Disease Management Items introduced 30 March 2020			
Preparation of a GP management plan (GPMP)	721	92024	92068
Coordination of Team Care Arrangements (TCAs)	723	92025	92069
Contribution to a Multidisciplinary Care Plan, or to a review of a Multidisciplinary Care Plan, for a patient who is not a care recipient in a residential aged care facility	729	92026	92070
Contribution to a Multidisciplinary Care Plan, or to a review of a multidisciplinary care plan, for a resident in an aged care facility	731	92027	92071
Review of a GPMP or Coordination of a Review of TCAs	732	92028	92072
Autism, Pervasive Developmental Disorder and Disability Services Items introduced 30 March 2020			
Assessment, diagnosis and preparation of a treatment and management plan for patient under 13 years with an eligible disability, at least 45 minutes.	139	92142	92145
Pregnancy Support Counselling program Items introduced 30 March 2020			
Non-directive pregnancy support counselling, at least 20 minutes	4001	92136	92138
Eating Disorder Management Items introduced 30 March 2020			
GP without mental health skills training, preparation of an eating disorder treatment and	90250	92146	92154



management plan, lasting at least 20 minutes, but less than 40 minutes			
GP without mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes	90251	92147	92155
GP with mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes	90252	92148	92156
GP with mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes	90253	92149	92157
Review of an eating disorder treatment and management plan	90264	92170	92176
Eating disorder psychological treatment (EDPT) service, lasting at least 30 minutes, but less than 40 minutes	90271	92182	92194
EDPT service, at least 40 minutes	90273	92184	92196
Mental Health Services Items introduced 30 March 2020			
GP without mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes	2700	92112	92124
GP without mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	2701	92113	92125
Review of a GP mental health treatment plan or Psychiatrist Assessment and Management Plan	2712	92114	92126
Mental health treatment consultation, at least 20 minutes	2713	92115	92127
GP with mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes	2715	92116	92128
GP with mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	2717	92117	92129
Items introduced 13 March 2020			
Focussed Psychological Strategies (FPS) treatment, lasting at least 30 minutes, but less than 40 minutes	2721 and 2729	91818	91842
FPS treatment, at least 40 minutes	2725 and 2731	91819	91843
Urgent After Hours Attendance Items introduced 30 March 2020			
Urgent attendance, unsociable after hours	599	92210	92216



OTHER MEDICAL PRACTITIONER ATTENDANCES

These services need to be bulk-billed for vulnerable patients, concession card holders and children under 16 years, and are for out-of-hospital patients

Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
Standard Attendance Items introduced 13 March 2020			
Attendance of not more than 5 minutes	52	91792	91797
Attendance of more than 5 minutes but not more than 25 minutes	53	91803	91812
Attendance of more than 25 minutes but not more than 45 minutes	54	91804	91813
Attendance of more than 45 minutes	57	91805	91814
Attendance of not more than 5 minutes	179	91794	91799
Attendance of more than 5 minutes but not more than 25 minutes. Modified Monash 2-7 area	185	91806	91815
Attendance of more than 25 minutes but not more than 45 minutes. Modified Monash 2-7 area	189	91807	91816
Attendance of more than 45 minutes. Modified Monash 2-7 area	203	91808	91817
Health assessment for people of Aboriginal or Torres Strait Islander descent Items introduced 30 March 2020			
Health assessment	228	92011	92023
Chronic Disease Management Items introduced 30 March 2020			
Preparation of a GP management plan (GPMP)	229	92055	92099
Coordination of Team Care Arrangements (TCAs)	230	92056	92100
Contribution to a Multidisciplinary Care Plan, or to a review of a Multidisciplinary Care Plan, for a patient who is not a care recipient in a residential aged care facility	231	92057	92101
Contribution to a Multidisciplinary Care Plan, or to a review of a multidisciplinary care plan, for a resident in an aged care facility	232	92058	92102
Review of a GPMP or Coordination of a Review of TCAs	233	92059	92103
Pregnancy support Counselling program Items introduced 30 March 2020			
Non-directive pregnancy support counselling of at least 20 minutes	792	92137	92139



Eating Disorder Management			
Items introduced 30 March 2020			
Medical Practitioner without mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes	90254	92150	92158
Medical Practitioner without mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes	90255	92151	92159
Medical Practitioner with mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes	90256	92152	92160
Medical Practitioner with mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes	90257	92153	92161
Review of an eating disorder treatment and management plan	90265	92171	92177
Eating disorders psychological treatment (EDPT) service, lasting at least 30 minutes, but less than 40 minutes	90275	92186	92198
EDPT service, at least 40 minutes	90277	92188	92200
Urgent After Hours Attendance			
Items introduced 30 March 2020			
Urgent attendance, unsociable after hours	600	92211	92217
Mental Health			
Items introduced 30 March 2020			
Medical Practitioner without mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes	272	92118	92130
Medical Practitioner without mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	276	92119	92131
Review of a GP mental health treatment plan or Psychiatrist Assessment and Management Plan	277	92120	92132
Medical Practitioner mental health treatment consultation, at least 20 minutes	279	92121	92133
Medical Practitioner with mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes	281	92122	92134
Medical Practitioner with mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	282	92123	92135



Items introduced 13 March 2020			
Focussed Psychological Strategies (FPS) treatment, lasting at least 30 minutes, but less than 40 minutes	283 and 371	91820	91844
FPS treatment, at least 40 minutes	286 and 372	91821	91845

SPECIALIST, CONSULTANT PHYSICIAN, PSYCHIATRIST, PAEDIATRICIAN, GERIATRICIAN, PUBLIC HEALTH PHYSICIAN, NEUROSURGEON AND ANAESTHETIST ATTENDANCES			
These services are for out-of-hospital patients			
Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
Specialist Services			
Items introduced 13 March 2020			
Specialist. Initial attendance	104	91822*	91832*
Specialist. Subsequent attendance	105	91823*	91833*
Consultant Physician Services			
Items introduced 13 March 2020			
Consultant physician. Initial attendance	110	91824 **	91834 **
Consultant physician. Subsequent attendance	116	91825**	91835**
Consultant physician. Minor attendance	119	91826**	91836**
Items introduced 6 April 2020			
Consultant physician. Initial assessment, patient with at least 2 morbidities, prepare a treatment and management plan, at least 45 minutes	132	92422**	92431**
Consultant physician, Subsequent assessment, patient with at least 2 morbidities, review a treatment and management plan, at least 20 minutes	133	92423**	92432**
Specialist and Consultant Physician Services			
Items introduced 30 March 2020			
Specialist or consultant physician early intervention services for children with autism, pervasive developmental disorder or disability	137	92141	92144
Geriatrician Services			
Items introduced 6 April 2020			
Geriatrician, prepare an assessment and management plan, patient at least 65 years, more than 60 minutes	141	92623	92628
Geriatrician, review a management plan, more than 30 minutes	143	92624	92629



Consultant Psychiatrist services			
Items introduced 6 April 2020			
Consultant psychiatrist, prepare a treatment and management plan, patient under 13 years with autism or another pervasive developmental disorder, at least 45 minutes	289	92434	92474
Consultant psychiatrist, prepare a management plan, more than 45 minutes	291	92435	92475
Consultant psychiatrist, review management plan, 30 to 45 minutes	293	92436	92476
Consultant psychiatrist, attendance, new patient (or has not received attendance in preceding 24 mths), more than 45 minutes	296	92437	92477
Items introduced 13 March 2020			
Consultant psychiatrist. Consultation, not more than 15 minutes	300	91827	91837
Consultant psychiatrist. Consultation, 15 to 30 minutes	302	91828	91838
Consultant psychiatrist. Consultation, 30 to 45 minutes	304	91829	91839
Consultant psychiatrist. Consultation, 45 to 75 minutes	306	91830	91840
Consultant psychiatrist. Consultation, more than 75 minutes	308	91831	91841
Items introduced 20 April 2020			
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	342	92455	92495
Consultant psychiatrist, group psychotherapy, at least 1 hour, involving family group of 3 patients, each referred to consultant psychiatrist	344	92456	92496
Consultant psychiatrist, group psychotherapy, at least 1 hour, involving family group of 2 patients, each referred to consultant psychiatrist	346	92457	92497
Items introduced 6 April 2020			
Consultant psychiatrist, interview of a person other than patient, in the course of initial diagnostic evaluation of patient, 20 to 45 minutes	348	92458	92498
Consultant psychiatrist, interview of a person other than patient, in the course of initial diagnostic evaluation of patient, 45 minutes or more	350	92459	92499
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	352	92460	92500



Items introduced 30 March 2020			
Consultant psychiatrist, prepare an eating disorder treatment and management plan, more than 45 minutes	90260	92162	92166
Consultant psychiatrist, to review an eating disorder plan, more than 30 minutes	90266	92172	92178
Paediatrician Services			
Items introduced 30 March 2020			
Paediatrician early intervention services for children with autism, pervasive developmental disorder or disability	135	92140	92143
Paediatrician, prepare an eating disorder treatment and management plan, more than 45 minutes	90261	92163	92167
Paediatrician, to review an eating disorder plan, more than 20 minutes	90267	92173	92179
Public Health Physician Services			
Items introduced 20 April 2020			
Public health physician, level A attendance	410	92513	92521
Public health physician, level B attendance, less than 20 minutes	411	92514	92522
Public health physician, level C attendance, at least 20 minutes	412	92515	92523
Public health physician, level D attendance, at least 40 minutes	413	92516	92524
Neurosurgery attendances			
Items introduced 20 April 2020			
Neurosurgeon, initial attendance	6007	92610	92617
Neurosurgeon, minor attendance	6009	92611	92618
Neurosurgeon, subsequent attendance, 15 to 30 minutes	6011	92612	92619
Neurosurgeon, subsequent attendance, 30 to 45 minutes	6013	92613	92620
Neurosurgeon, subsequent attendance, more than 45 minutes	6015	92614	92621
Anaesthesia Attendances			
Items introduced 22 May 2020			
Anaesthetist, professional attendance, advanced or complex	17615	92701	92712

*For all specialties that have an existing arrangement to access consultations at the specialist rate.

**For all specialties that have an existing arrangement to access consultations at the consultant physician rate.



OBSTETRICIANS, GPs, MIDWIVES, NURSES OR ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH PRACTITIONERS ATTENDANCES

These services for out-of-hospital patients
Items introduced 13 March 2020

Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
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	16400	91850	91855
Postnatal attendance by an obstetrician or GP	16407	91851	91856
Postnatal attendance by: (i) a midwife (on behalf of and under the supervision of the medical practitioner who attended the birth); or (ii) an obstetrician; or (iii) a general practitioner	16408	91852	91857
Antenatal attendance	16500	91853	91858

DENTAL PRACTITIONER IN THE PRACTICE OF ORAL AND MAXILLOFACIAL SURGERY ATTENDANCES

These services are for out-of-hospital patients
Items introduced 22 May 2020

Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
Dental practitioner (oral and maxillofacial surgery only), initial attendance	51700	54001	54003
Dental practitioner (oral and maxillofacial surgery only), subsequent attendance	51703	54002	54004



PARTICIPATING NURSE PRACTITIONER ATTENDANCES

These services are for out-of-hospital patients
Items introduced 13 March 2020

Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
Attendance for an obvious problem	82200	91192	91193
Attendance less than 20 minutes	82205	91178	91189
Attendance at least 20 minutes	82210	91179	91190
Attendance at least 40 minutes	82215	91180	91191

MENTAL HEALTH ATTENDANCES

GP mental health attendances and OMP mental health attendances are included under the GP and OMP tables above.
These services are for out-of-hospital patients

Service	Existing Items <i>current video-conference items</i> <u>Current geographic restrictions apply</u>	Telehealth items <i>via video-conference</i> <u>Geographic restrictions do not apply</u>	Telephone items – <i>for when video-conferencing is not available</i> <u>Geographic restrictions do not apply</u>
Clinical Psychologists Items introduced 13 March 2020			
Attendance lasting more than 30 minutes but less than 50 minutes	80001	91166	91181
Attendance lasting at least 50 minutes	80011	91167	91182
Psychologists Items introduced 13 March 2020			
Attendance lasting more than 20 minutes but less than 50 minutes	80101	91169	91183
Attendance lasting at least 50 minutes	80111	91170	91184
Occupational Therapists Items introduced 13 March 2020			
Attendance lasting more than 20 minutes but less than 50 minutes	80126	91172	91185
Attendance lasting at least 50 minutes	80136	91173	91186
Social Workers Items introduced 13 March 2020			
Attendance lasting more than 20 minutes but less than 50 minutes	80151	91175	91187
Attendance lasting at least 50 minutes	80161	91176	91188



ALLIED HEALTH ATTENDANCES			
These services are for out-of-hospital patients			
Service	Existing Items face to face	Telehealth items video-conference	Telephone items – for when video- conferencing is not available
Chronic disease management Items introduced 30 March 2020			
Allied health CDM services (all 13 items)	10950, 10951, 10952, 10953, 10954, 10956, 10958, 10960, 10962, 10964, 10966, 10968, 10970	93000	93013
Items introduced 20 April 2020			
CDM service provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner	10997	93201	93203
Follow-up Allied Health Services for people of Aboriginal or Torres Strait Islander descent Items introduced 30 March 2020			
Allied health Follow-up services (all 13 items)	81300, 81305, 81310, 81315, 81320, 81325, 81330, 81335, 81340, 81345, 81350, 81355, 81360	93048	93061
Items introduced 20 April 2020			
Follow up services provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner	10987	93200	93202
Pregnancy Support Counselling program Items introduced 30 March 2020			
Non-directive pregnancy support counselling by eligible psychologist, social worker or mental health nurse, at least 30 minutes	81000, 81005, 81010	93026	93029
Autism, Pervasive Developmental Disorder and Disability Services Items introduced 30 March 2020			
Psychologist. Autism, pervasive developmental disorder and disability assessment service for children under 13 years, at least 50 minutes	82000	93032	93040
Speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist. Autism, pervasive developmental	82005, 82010, 82030	93033	93041



disorder and disability assessment service for children under 13 years, at least 50 minutes			
Psychologist. Treatment of a pervasive developmental disorder or eligible disability for children under 15 years, at least 30 minutes	82015	93035	93043
Speech pathologist, occupational therapist, audiologist, optometrist, orthoptist or physiotherapist. Treatment of a pervasive developmental disorder or eligible disability for children under 15 years, at least 30 minutes	82020, 82025, 82035	93036	93044
Eating Disorder Services Items introduced 30 March 2020			
Dietitian, eating disorders service, at least 20 minutes	82350	93074	93108
Clinical psychologist, eating disorders service lasting more than 30 minutes, but less than 50 minutes	82352	93076	93110
Clinical psychologist, eating disorders service, at least 50 minutes	82355	93079	93113
Psychologist, eating disorders service, lasting more than 20 minutes, but less than 50 minutes	82360	93084	93118
Psychologist, eating disorders service, at least 50 minutes	82363	93087	93121
Occupational therapist, eating disorders service, lasting more than 20 minutes, but less than 50 minutes	82368	93092	93126
Occupational therapist, eating disorders service, at least 50 minutes	82371	93095	93129
Social worker, eating disorders service, lasting more than 20 minutes, but less than 50 minutes	82376	93100	93134
Social worker, eating disorders service, at least 50 minutes	82379	93103	93137
Group Dietetics Services Items introduced 22 May 2020			
Dietitian, eligible, assessment for a group service	81120	93284	93286
Dietitian, eligible, group service	81125	93285	Not Available



PARTICIPATING MIDWIFE ATTENDANCES

These services for out-of-hospital patients
Items introduced 13 March 2020

Service	Existing Items <i>face to face</i>	Telehealth items <i>via video-conference</i>	Telephone items – <i>for when video-conferencing is not available</i>
Short antenatal attendance lasting up to 40 minutes	82105	91211	91218
Long antenatal attendance lasting at least 40 minutes	82110	91212	91219
Short postnatal attendance lasting up to 40 minutes	82130	91214	91221
Long postnatal attendance lasting at least 40 minutes	82135	91215	91222

Bulk Billing Incentives*

Item	Temporary Fee (30 March – 30 September 2020)	Temporary Benefit (30 March – 30 September 2020)
10990	\$15.00	\$12.75
10991	\$22.70	\$19.30
10992	\$22.70	\$19.30
64990	\$14.10	\$12.00
64991	\$21.30	\$18.15
74990	\$14.10	\$12.00
74991	\$21.30	\$18.15
New Item	Temporary Fee (20 April – 30 September 2020)	Temporary Benefit (20 April – 30 September 2020)
10981	\$15.00	\$12.75
10982	\$22.70	\$19.30

* Note: bulk billing incentives are paid at the 85% MBS rate. While the fee for an incentive for a service provided by a metropolitan practice is \$15.00, the MBS rebate – which is paid to the practitioner rather than the patient – is \$12.75. For non-metropolitan practices, the fee is \$22.70 and the actual payment received by the practitioner is \$19.30. These arrangements have applied to the MBS bulk billing incentive payments since their introduction.