



COVID-19 high risk group temporary exemption from established relationship requirement

For Medical Practitioners in General Practice

Last updated: 27 November 2023

- A temporary exemption to the established clinical relationship requirement has been extended until 30 June 2024 for high-risk people who suspect they have COVID-19 and who meet the Pharmaceutical Benefits Schedule (PBS) criteria for COVID-19 antiviral therapy to seek a request to a private pathologist for PCR test in relation to COVID-19.
- A list of MBS telehealth services to which the established clinical relationship requirement applies is provided in the [1 January 2024 Continuing MBS Telehealth Medical Practitioners in General Practice](#) Factsheet.

What are the changes?

- From 24 December 2022 until 30 June 2024 (not 31 December 2023 as previously scheduled), high risk patients who would be eligible for treatment with COVID-19 antiviral medication, will be exempt from the established relationship requirement to access a request for a PCR test to confirm diagnosis from any medical practitioner.
- Under these new arrangements, any medical practitioner can provide a telehealth consultation to patients who:
 - do not meet the established clinical relationship; and
 - are eligible for PBS criteria for COVID-19 antiviral therapy; and
 - are experiencing acute respiratory symptoms; and
 - are seeking a request to a private pathologist for Polymerase Chain Reaction (PCR) testing in relation to COVID-19.
- These changes will enable high risk patients to continue to have timely access to PCR testing over the summer holiday period, while these patients and their usual practitioner may be on holiday.

What does this mean for providers?

From 24 December 2022 until 30 June 2024, the temporary exemption for high risk COVID-19 positive patients from the established relationship for telehealth consultations to seek a request to a private pathologist for PCR testing will apply.

Medicare Benefits Schedule

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[MBS Online](#)

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How will these changes affect patients?

Patients who suspect they have COVID-19 and who meet the PBS criteria for COVID-19 antiviral therapy will be able to seek a request for PCR testing via a telehealth consultation with any GP.

Who was consulted on the changes?

Consultation with stakeholders has informed the refinement of MBS telehealth items.

How will the changes be monitored and reviewed?

The Department of Health and Aged Care continues to monitor the use of the new MBS items. Use of the items that does not seem to be in accordance with Medicare guidelines and legislation will be actioned appropriately.

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 and Aged Care provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the *Health Insurance Act 1973* and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email askMBS@health.gov.au.

Private health insurance information on the product tier arrangements is available at 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.

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 the 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.

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.