

An Australian Government Initiative

Desktop Guide



COVID-19 Non-VR GP (MDRAP & PEP or 19AB Exemption) MBS item numbers

For General Practice Services August 2020

TABLE OF CONTENTS

- COMMONLY USED ITEM NUMBERS
- CHRONIC DISEASE MANAGEMENT
- GP MULTIDISIPLINARY CASE CONFERENCING
- MEDICATION MANAGEMENT
- DIABETES CYCLE OF CARE
- ASTHMA CYCLE OF CARE
- HEALTH ASSESSMENTS
- **CERVICAL SCREENING**
- MENTAL HEALTH
- AFTER HOURS
- <u>VIDEO CONFERENCING (TELEHEALTH)</u>
- GENERL DISCLAIMER

	CONSULTATION ITEM NUMBERS			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY		
179 Telehealth 91794 Telephone 91799	Level A – Brief Consultation – In Rooms	Professional attendance at consulting rooms of not more than 5 minutes in duration (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area.		
181	Level A – Brief Consultation – Home Visit	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies), not more than 5 minutes in duration—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)		
90183	Level A – Brief Consultation – RACF Visit	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of not more than 5 minutes in duration—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by medical practitioner in an eligible area. (See MBS online for fee calculation)		
185 Telehealth 91806 Telephone 91815	Level B – Standard Consultation – In Rooms	Professional attendance at consulting rooms of more than 5 minutes in duration but not more than 25 minutes (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area		
187	Level B – Standard Consultation – Home Visit	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)		
90188	Level B – Standard Consultation – RACF Visit	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 5 minutes in duration but not more than 25 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)		
189 Telehealth 91807 Telephone 91816	Level C – Long Consultation – In Rooms	Professional attendance at consulting rooms of more than 25 minutes in duration but not more than 45 minutes (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible area		

		Professional attendance (other than an attendance at consulting	
191	Level C – Long Consultation – Home Visit	rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)	
90202	Level C – Long Consultation – RACF Visit	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 25 minutes in duration but not more than 45 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)	
203		Professional attendance at consulting rooms of more than 45	
Telehealth		minutes in duration (other than a service to which any other item applies)—each attendance, by a medical practitioner in an eligible	
91808	Level D – Prolonged Consultation – In Rooms	area	
Telephone			
91817			
206	Level D – Prolonged Consultation – Home Visit	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 45 minutes in duration—an attendance on one or more patients at one place on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)	
90212	Level D – Prolonged Consultation – RACF Visit	Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self-contained unit) of more than 45 minutes in duration—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area. (See MBS online for fee calculation)	
10990	Bulk Billing Item	DVA, under 16s and Commonwealth Concession Card holders. Can be claimed concurrently for eligible patients.	
10991	Bulk Billing Item	DVA, under 16s and Commonwealth Concession Card holders. Region specific. Can be claimed concurrently for eligible patients.	
11506	Spirometry	Measurement of respiratory function before and after inhalation of bronchodilator	
11707	ECG	12 Lead Electrocardiography, tracing only	
11731	Implanted electrocardiogram loop recording	Implanted electrocardiogram loop recording, by a medical practitioner, including reprogramming when required; retrieval of stored data, analysis, interpretation and report by a medical practitioner. Applicable once in a 4 week period.	

	EXTENDED CONSULTATION			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY		
214	Brief Extended Consultation – Imminent danger of death	Professional attendance by a medical practitioner for a period of not less than 1 hour but less than 2 hours (other than a service to which another item applies) on a patient in imminent danger of death		
215	Standard Extended Consultation – Imminent danger of death	Professional attendance by a medical practitioner for a period of not less than 2 hours but less than 3 hours (other than a service to which another item applies) on a patient in imminent danger of death		
218	Long Extended Consultation – Imminent danger of death	Professional attendance by a medical practitioner for a period of not less than 3 hours but less than 4 hours (other than a service to which another item applies) on a patient in imminent danger of death		
219	Prolonged Extended Consultation – Imminent danger of death	Professional attendance by a medical practitioner for a period of not less than 4 hours but less than 5 hours (other than a service to which another item applies) on a patient in imminent danger of death		
220	Extra Prolonged Extended Consultation – Imminent danger of death	Professional attendance by a medical practitioner for a period of 5 hours or more (other than a service to which another item applies) on a patient in imminent danger of death		

	CHRONIC DISEASE MANAGEMENT			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY		
228 Telehealth 92011 Telephone 92023	Health Assessment for Aboriginal or Torres Strait islander	Professional attendance by a medical practitioner at consulting rooms or in another place other than a hospital or residential aged care facility, for a health assessment of a patient who is of Aboriginal or Torres Strait Islander descent—this item or item 715 not more than once in a 9 month period		
229 Telehealth 92055 Telephone 92099	GP Management Plan (GPMP)	Attendance by a medical practitioner, for preparation of a GP management plan for a patient (other than a service associated with a service to which any of items 735 to 758 and items 235 to 240 apply)		
230 Telehealth 92056 Telephone 92100	Team Care Arrangement (TCA)	Attendance by a medical practitioner, to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of items 735 to 758 and items 235 to 240 apply)		
231 Telehealth 92057 Telephone 92101	GP Contribution to, or Review of, Multidisciplinary Care Plan prepared by another Provider	Contribution by a medical practitioner, to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of items 735 to 758 and items 235 to 240 apply)		
232 Telehealth 92058 Telephone 92102	GP Contribution to, or Review of, Multidisciplinary Care Plan prepared by RACF	Contribution by a medical practitioner, to:(a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or(b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider(other than a service associated with a service to which items 735 to 758 and items 235 to 240 apply)		
233 Telehealth 92059 Telephone 92103	Review of GP Management Plan and/or Team Care Arrangement	Attendance by a medical practitioner to review or coordinate a review of:(a) a GP management plan prepared by a medical practitioner (or an associated medical practitioner) to which item 721 or item 229 applies; or(b) team care arrangements which have been coordinated by the medical practitioner (or an associated medical practitioner) to which item 723 or item 230 applies		

	GP MULTIDISCII	PLINARY CASE CONFERENCE
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY
235	Standard Organise and coordinate a case conference	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)
236	Long Organise and coordinate a case conference	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate:(a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)
237	Prolonged Organise and coordinate a case conference	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 40 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)
238	Standard Participate in a case conference	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)
239	Long Participate in a case conference	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)
240	Prolonged Participate in a case conference	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in: (a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility; or (c) a multidisciplinary discharge case conference; if the conference lasts for at least 40 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)
243	Lead and coordinate a case conference for a patient with Cancer	Attendance by a medical practitioner, as a member of a case conference team, to lead and coordinate a multidisciplinary case conference on a patient with cancer to develop a multidisciplinary treatment plan, if the case conference is of at least 10 minutes, with a multidisciplinary team of at least 3 other medical practitioners from different areas of medical practice (which may include general practice), and, in addition, allied health providers
244	Lead and coordinate a case conference for a patient with Cancer	Attendance by a medical practitioner, as a member of a case conference team, to participate in a multidisciplinary case conference on a patient with cancer to develop a multidisciplinary treatment plan, if the case conference is of at least 10 minutes , with a multidisciplinary team of at least 4 medical practitioners from different areas of medical practice (which may include general practice), and, in addition, allied health providers

	MEDICATION MANAGEMENT REVIEW			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY		
245	Domiciliary Medication Management Review (DMMR)	Participation by a medical practitioner in a Domiciliary Medication Management Review (DMMR) for a patient living in a community setting, in which the medical practitioner, with the patient's consent: (a) assesses the patient as: (i) having a chronic medical condition or a complex medication regimen; and (ii) not having their therapeutic goals met; and (b) following that assessment: (i) refers the patient to a community pharmacy or an accredited pharmacist for the DMMR; and (ii) provides relevant clinical information required for the DMMR; and (c) discusses with the reviewing pharmacist the results of the DMMR including suggested medication management strategies; and (d) develops a written medication management plan following discussion with the patient; and (e) provides the written medication management plan to a community pharmacy chosen by the patient For any particular patient—this item or item 900 is applicable not more than once in each 12 month period, except if there has been a significant change in the patient's condition or medication regimen requiring a new DMMR		
249	Residential Medication Management Review (RMMR)	Participation by a medical practitioner in a residential medication management review (RMMR) for a patient who is a permanent resident of a residential aged care facility—other than an RMMR for a resident in relation to whom, in the preceding 12 months, this item or item 903 has applied, unless there has been a significant change in the resident's medical condition or medication management plan requiring a new RMMR		

HEALTH ASSESSMENTS			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY	
224	Brief Health Assessment	Professional attendance by a medical practitioner to perform brief health assessment, lasting not more than 30 minutes an including: (a) collection of relevant information, including taking patient history; and (b) a basic physical examination; and (c) initiating interventions and referrals as indicated; and (c) providing the patient with preventive health care advice an information	
225	Professional attendance by a medical practitioner to standard health assessment, lasting more than 30 mi less than 45 minutes, including: (a) detailed in collection, including taking a patient history; and (b) an physical examination; and (c) initiating interventions an as indicated; and (d) providing a preventive health car for the patient		
226	Long Health Assessment	Professional attendance by a medical practitioner to perform a long health assessment, lasting at least 45 minutes but less than 60 minutes , including: (a) comprehensive information collection, including taking a patient history; and (b) an extensive examination of the patient's medical condition and physical function; and (c) initiating interventions and referrals as indicated; and (d) providing a basic preventive health care management plan for the patient	
227	Prolonged Health Assessment	Professional attendance by a medical practitioner to perform a prolonged health assessment (lasting at least 60 minutes) including: (a) comprehensive information collection, including taking a patient history; and (b) an extensive examination of the patient's medical condition, and physical, psychological and social function; and (c) initiating interventions or referrals as indicated; and (d) providing a comprehensive preventive health care management plan for the patient	
228 Telehealth 92011 Telephone 92023	Aboriginal and Torres Strait Islander Health Assessment	Professional attendance by a medical practitioner at consulting rooms or in another place other than a hospital or residential aged care facility, for a health assessment of a patient who is of Aboriginal or Torres Strait Islander descent—this item or item 715 not more than once in a 9 month period	

	MENTAL HEALTH			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY		
272 Telehealth 92118 Telephone	Standard Consultation - GP Mental Health Treatment Plan	Professional attendance by a medical practitioner (who has not undertaken mental health skills training) of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		
92130 276 Telehealth 92119 Telephone 92131	Long Consultation - GP Mental Health Treatment Plan	Professional attendance by a medical practitioner (who has not undertaken mental health skills training) of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		
277 Telehealth 92120 Telephone 92132	Review of GP Mental Health Treatment Plan	Professional attendance by a medical practitioner to review a GP mental health treatment plan which he or she, or an associated medical practitioner has prepared, or to review a Psychiatrist Assessment and Management Plan		
279 Telehealth 92121 Telephone 92133	Standard Consultation - Mental Health Consultation	Professional attendance by a medical practitioner in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem (to the extent not previously recorded), providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation		
281 Telehealth 92122 Telephone 92134	Standard Consultation - GP Mental Health Treatment Plan	Professional attendance by a medical practitioner (who has undertaken mental health skills training) of at least 20 minutes but less than 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		
282 Telehealth 92123 Telephone 92135	Long Consultation - GP Mental Health Treatment Plan	Professional attendance by a medical practitioner (who has undertaken mental health skills training) of at least 40 minutes in duration for the preparation of a GP mental health treatment plan for a patient		
283	Standard GP Focused Psychological Strategies – In Rooms	Professional attendance at consulting rooms by a medical practitioner, for providing focused psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes		
285	Standard GP Focused Psychological Strategies – Out of Rooms	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focused psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes. (See MBS online for fee calculation)		
286	Long GP Focused Psychological Strategies – In Rooms	Professional attendance at consulting rooms by a medical practitioner, for providing focused psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40 minutes		

287	Long GP Focused Psychological Strategies – Out of Rooms	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focused psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40 minutes. (See MBS online for fee calculation)
792 Telehealth 92137 Telephone 92139	Non-directive pregnancy support counselling	Professional attendance of at least 20 minutes in duration at consulting rooms by a medical practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who: (a) is currently pregnant; or (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or items 4001, 81000, 81005 or 81010 applies in relation to that pregnancy

*Many patients will not require a new plan after their initial plan has been prepared. A new plan should not be prepared unless clinically required, and generally not within 12 months of a previous plan. Ongoing management can be provided through the GP Mental Health Treatment Consultation and standard consultation items, as required, and reviews of progress through the GP Mental Health Treatment Plan Review item. A rebate for preparation of a GP Mental Health Treatment Plan will not be paid within 12 months of a previous claim for the patient for the same or another Mental Health Treatment Plan item or within three months following a claim for a GP Mental Health Treatment Review (item 277), other than in exceptional circumstances.

- +The recommended frequency for the review service, allowing for variation in patients' needs, is:
- · an initial review, which should occur between four weeks to six months after the completion of a GP Mental Health Treatment Plan; and
- · if required, a further review can occur three months after the first review.

In general, most patients should not require more than two reviews in a 12-month period, with ongoing management through the GP Mental Health Treatment Consultation and standard consultation items, as required.

	AFTER HOURS				
ATTE	NDANCE PI	ERIOD	ITEM NO		BRIEF GUIDE
Aft	er Hours – In I	Rooms	733 (<5 mins 1 patient)		
Mon-Fri 7am-8am or 6pm- 11pm	Sat 7am-8am or 12noon- 11pm	Sun & Pub Holidays 7am-11pm	737 (5-25 mins 1 patient) 741 (25-45 mins 1 patient) 745 (>45 mins 1 patient) 761-769 (>1-6 patients)		These items can only be used for the first patient. If more than one patient is seen on the one occasion, other items apply to a maximum of 6 patients
After Hours at a place other than consulting rooms					
Mon-Fri Before 8am or after 6pm	Sat Before 8am or After 12pm	Sun & Pub Holidays All day	772 (<5 mins >1-6 patient) 776 (5-25 mins >1-6 patient) 788 (25-45 mins >1-6 patient) 789 (>45mins >1-6 patients)		For consultations at the health centre, If more than one patient is seen on the one occasion, these items apply to a maximum of 6 patients
	1	ı			

	VIDEO CONFERENCING			
ITEM	NAME	DESCRIPTION / RECOMMENDED FREQUENCY		
812	Brief Video Conferencing Consultation – In Rooms	Professional attendance at consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) either: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); or (ii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service: for which a direction made under subsection 19(2) of the Act applies		
827	Brief Video Conferencing Consultation – Out of Rooms	Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a pecialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)		
829	Brief Video Conferencing Consultation - RACF	Professional attendance of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)		
867	Standard Video Conferencing Consultation – In Rooms	Professional attendance at consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) either: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); or (ii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies		
868	Standard Video Conferencing Consultation – Out of Rooms	Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a pecialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)		
869	Standard Video Conferencing Consultation - RACF	Professional attendance of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)		

873	Long Video Conferencing Consultation – In Rooms	Professional attendance at consulting rooms of at least 20 minutes in duration (whether or not continuous) by a medical practitioner who provides clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) either: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); or (ii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service: for which a direction made under subsection 19(2) of the Act applies
876	Long Video Conferencing Consultation – Out of Rooms	Professional attendance not in consulting rooms of at least 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)
881	Long Video Conferencing Consultation - RACF	Professional attendance of at least 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)
885	Prolonged Video Conferencing Consultation – In Rooms	Professional attendance at consulting rooms of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) either: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); or (ii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies
891	Prolonged Video Conferencing Consultation – Out of Rooms	Professional attendance not in consulting rooms of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance—at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)
892	Prolonged Video Conferencing Consultation - RACF	Professional attendance of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion—each patient. (See MBS online for fee calculation)

General Disclaimer

While reasonable efforts have been made to ensure that the contents of this document are factually correct, this document (including any attachments to it) is provided by PHN on a general basis only. Neither PHN or any of its directors, officers, employees, advisers, consultants, contractors and agents make any representation or warranty, express or implied, as to the currency, accuracy, reliability or completeness of the information referred to or contained in this document and none of those persons or entities accepts any responsibility or liability (except a liability that cannot lawfully be excluded) for any reliance placed on the contents of this document by any person.

Subject to any law to the contrary and to the maximum extent permitted by law, PHN and its directors, officers, employees, advisers, consultants, contractors and agents disclaim and exclude all liability for any loss, claim, demand, damages, costs and expenses of whatsoever nature (whether or not foreseeable):

- suffered or incurred by any person relying or acting on any information provided in, or omitted from, this document or any other written or oral opinions, advice or information provided by any of them; or
- arising as a result of or in connection with information in this document being inaccurate or incomplete in any way or by reason of any reliance thereon by any person;

and whether caused by reason of any negligence, accident, default or however otherwise caused.

Please refer to the Medicare Benefits Schedule online at <u>www.mbsonline.gov.au</u> for further information and comprehensive descriptions as claiming conditions may apply.

Desktop Guide to MBS Item Numbers Acknowledgement and thanks to Queensland Aboriginal and Islander Health Council (QAIHC) and various Primary Health Networks – November 2017