Continuing MBS Telehealth – Video and Phone Services

For Medical Practitioners in General Practice

Last updated: 22 December 2023

- MBS video and phone items introduced on a temporary basis in response to the COVID-19 pandemic have now been made permanent. Video and phone services are available from medical practitioners in general practice, specialists, nurse practitioners, participating midwives, allied health providers and dental practitioners in the practice of oral and maxillofacial surgery services.
- It remains a legislative requirement that medical practitioners working in general practice can only perform a telehealth service where they have an established clinical relationship with the patient, with limited exemptions.
- Temporary exemptions from the established clinical relationship requirement for general
 practice video and phone services apply to patients with a confirmed COVID-19
 diagnosis, and for patients who suspect they have COVID-19 and meet the PBS criteria
 for COVID-19 anti-viral therapy and require a referral for a PCR test to verify diagnosis
 (additional detail at "Who is eligible?").
- A service may only be provided by video or phone where it is safe and clinically appropriate.
- Bulk billed video and phone services are eligible for incentive payments when provided to Commonwealth concession card holders and children under 16 years of age.
- All providers are expected to obtain informed financial consent from patients prior to charging private fees for telehealth services.
- From 1 January 2024:
 - Temporary blood borne virus and sexual reproductive health items have been extended to 30 June 2024.
 - Temporary exemptions to the established relationship criteria for permanent mental health and non-directive pregnancy support counselling items have also been extended to 30 June 2024. (see "What are the changes").
 - Temporary nicotine cessation counselling items have expired (see "What are the changes"). Patients should discuss nicotine cessation with their usual GP or access Quitline ("13 QUIT", 13 7848).
- From 1 November 2023, new video and phone services were introduced for Level C, D
 phone and E (video) general attendances (see "What are the changes?").

 Since 1 July 2022, video and phone items has been included in the prescribed pattern of services ('80/20 rule). From 1 October 2022, a new '30/20 phone rule' has applied to phone items.

What are the changes?

- From 1 January 2024, video and phone arrangements will continued with the following changes:
 - Blood borne virus and sexual reproductive health items have been extended to 30 June 2024. These items are not subject to the established clinical relationship criteria when provided by video or phone.
 - Mental health and non-directive pregnancy support counselling items exemption to the established clinical relationship criteria have been extended to 30 June 2024.
 - Exemptions continue for patients who are subject to COVID-19 public health orders requiring isolation or quarantine, or patients that have tested COVID-19 positive within the last 7 days, verified by either a laboratory test or COVID-19 rapid antigen self-test (RAT) which has been approved for supply in Australia by the Therapeutic Goods Administration, or persons who would be eligible for PBS COVID-19 oral antiviral therapy and require a PCR test to confirm diagnosis have unrestricted access to MBS video and phone items, without needing to demonstrate an established clinical relationship with their telehealth provider.
 - Temporary nicotine and smoking cessation counselling items will expire on 31 December 2023. These services can be accessed through general time-tiered items with the patient's usual provider.
- From 1 November 2023, new Level C (longer than 20 minutes) and D (longer than 40 minutes) phone items were introduced for patients registered in MyMedicare at their registered practice. Linking these phone items to MyMedicare registration ensures that they are provided in the context of continuous care between the patient and their preferred primary care team. For more information on MyMedicare please see the MyMedicare website.
- From 1 November 2023 MBS Level C phone consultations specific for patients in very rural and remote areas (MM6 and MM7) ceased. However, the Level C and D phone items are available to all Australians registered with MyMedicare. All other video and phone time tiered items (including level C and D video) will continue to be available if patients meet the established clinical relationship or exemption criteria.
- From 1 November 2023, new video Level E items (longer than 60 minutes) were made available. For further details see Introduction of new Level E consultation items lasting 60 minutes or more.
- From 1 November 2023, a 6-minute minimum time was introduced for general practitioner Level B video items.

- From 1 November 2023, higher bulk billing incentives for Commonwealth concession card holders and patients aged under 16 years of age was introduced and may be co-claimed with the following video and phone consultations:
 - Level B video and phone general attendance consultations; and
 - Levels C and D video and phone and Level E (video only) general attendance consultations, where a patient is registered with a general practice through MyMedicare and receives the service through the practice where they are registered; and
 - The standard bulk billing incentives for Commonwealth concession card holders and patients aged under 16 years of age may continue to be co-claimed with Level C, D and E video and phone consultations where the patient is not enrolled in MyMedicare or does not receive the service through the practice where they are registered.
 - For further details see Bulk Billing in General Practice from 1 November 2023
- To support patient safety and high-quality care, two prescribed pattern of service rules have been applied to general practice video and phone services:
 - From 1 July 2022, the prescribed pattern of service ('80/20 rule') was expanded to include all consultation types (face-to-face, video and phone); and
 - From 1 October 2022, a phone specific prescribed pattern of service ('30/20 rule') for medical practitioner services, took effect.
- As of 1 January 2022, MBS video and phone items will be included in the Standardised Whole Patient Equivalent (SWPE) calculation of Practice Incentives Program (PIP) and the Workforce Incentive Program - Practice Stream (WIP) payments.

Who is eligible?

The MBS video and phone items are available to providers of telehealth services for a wide range of consultations. All Medicare eligible Australians can receive majority of these services if they have an established clinical relationship with a medical practitioner, or a medical practice. This is represented by MyMedicare or the *established clinical relationship requirement* below:

MyMedicare

For Level C and D phone services, a patient is eligible if they are registered in MyMedicare, and the service is provided by their registered practice. These requirements support longitudinal and person-centred primary health care that is associated with better health outcomes.

MyMedicare is a new voluntary patient registration model that aims to formalise the relationship between patients and their preferred primary care teams. MyMedicare registration will establish the eligibility requirements for the relevant new telehealth phone services, instead of the current established clinical relationship requirements and exemptions for the majority of National telehealth video and phone items. For more information on MyMedicare please see the MyMedicare website.

Established clinical relationship requirement:

An established clinical relationship means the medical practitioner performing the service:

- has provided at least one face-to-face service to the patient in the 12 months preceding the telehealth attendance; or
- the medical practitioner is located at a medical practice where the patient has had at least one face-to-face service arranged by that practice in the 12 months preceding the telehealth attendance (including services performed by another medical practitioner located at the practice, or a service performed by another health professional located at the practice, such as a practice nurse or Aboriginal and Torres Strait Islander health worker); or
- is a participant in the Approved Medical Deputising Service program, and the Approved Medical Deputising Service provider employing the medical practitioner has a formal agreement with a general practice that has provided at least one face-to-face service to the patient in the 12 months preceding the telehealth attendance.

The established clinical relationship requirement is a rolling requirement. For each telehealth consultation, the patient must meet one of the eligibility requirements outlined above, unless one of the following exemptions applies.

The established clinical relationship requirement does not apply to:

- children under the age of 12 months; or
- people who are homeless; or
- patients receiving an urgent after-hours (unsociable hours) service; or
- patients of medical practitioners at an Aboriginal Medical Service or an Aboriginal Community Controlled Health Service; or
- people living in an area declared as a natural disaster area due by a State or Territory Government; or
- people isolating because of a COVID-related State or Territory public health order, or in COVID-19 quarantine because of a State or Territory public health order; or
- people affected by natural disaster, defined as living in a local government area declared a natural disaster by a State or Territory government.

Temporary exemptions from the established clinical relationship requirements have also been provided for patients accessing specific MBS items for:

- blood borne viruses, sexual or reproductive health consultations;
- pregnancy counselling services;
- mental health services;
- from 14 October 2022 until 30 June 2024, patients that have tested COVID-19 positive
 within the last 7 days, verified by either a laboratory test or COVID-19 rapid antigen selftest (RAT) which has been approved for supply in Australia by the Therapeutic Goods
 Administration; and

• from 1 January 2023 until 30 June 2024, a person who suspects they have COVID-19 and who meets the PBS criteria for COVID-19 antiviral therapy and requires a medical practitioner referral for a PCR test to verify diagnosis.

A patient's participation in a previous video or phone consultation does not constitute a face-to-face service for the purposes of ongoing video and phone eligibility. New patients of a practice and regular patients who have not attended the practice face-to-face in the preceding 12 months, must have a face-to-face attendance if they do not satisfy any of the above exemptions. Subsequent services may be provided by video or phone, if safe and clinically appropriate to do so.

Practitioners should confirm that patients have either received an eligible face-to-face attendance, meet one or more of the relevant exemption criteria, or are registered in *MyMedicare* (when applicable) prior to providing a video or phone attendance. Failure to meet the *established clinical relationship* or the *MyMedicare* requirement may result in incorrect claiming.

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 the 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.

What does this mean for providers?

The MBS video and phone items allow providers to deliver essential health care services to their patients while ensuring continued quality is provided by a medical practitioner who knows the patient's medical history.

Providers do not need to be in their regular practice to provide video or phone services, but they must ensure that eligibility requirements are met before providing video or phone services to their patient.

When providing a video or phone service outside a practice, providers should use their provider number relevant to the appropriate practice and must provide safe services in accordance with normal professional standards.

The MBS telehealth items have the same clinical requirements as the corresponding face-to-face consultation items and have the same MBS benefit.

Video and phone services contribute to Standardised Whole Patient Equivalent (SWPE) calculations which determine the value of PIP and WIP payments. Including video and phone

into the SWPE ensures that payments that support quality improvement activities and subsidies for allied health workers reflect contemporary practice.

To further support the integrity of the Medicare program the existing prescribed pattern of practice (80/20 rule) has, since 1 July 2022, included medical practitioner face-to-face, video and phone consultations, excluding vaccine suitability assessments. Any medical practitioner who provides more than a combined 80 services per day on 20 or more days in a 12-month period will be referred to the Professional Services Review (PSR).

Since 1 October 2022, a prescribed pattern of service (a '30/20 rule') has applied to phone attendances provided by medical practitioners. Under the 30/20 rule, any medical practitioner who provides 30 or more phone consultations per day on 20 or more days in a 12-month period would be referred to the PSR for peer review of their video and phone practice.

How will these changes affect patients?

Patients will continue to have access to MBS video and phone services, noting that the current eligibility requirements for these services are largely unchanged from 1 January 2022.

This means patients must have an established clinical relationship, meet the exemption criteria, or (when applicable) be registered in MyMedicare with the practice providing the service.

Patients seeking support to quit smoking or vaping use are encouraged to speak to their usual provider or access Quitline services for help to quit smoking and/or vaping. You can call the hotline on 13 QUIT (13 7848), to talk to a counsellor or request a call back. More information and resources are available at www.quit.org.au. Resources for health professionals are also available through the Quit Centre - www.quitcentre.org.au

Patient-end support services by medical practitioners linked to pre-COVID specialist video consultations in regional and remote areas were removed from 1 January 2022. However, optometry, practice nurse and Aboriginal health worker patient-end support items will be retained. Other MBS items continue to support multidisciplinary care and case-conferences with specific items for medical practitioners, specialists and allied health providers, where appropriate.

Who was consulted on the changes?

Consultation with stakeholders has informed the introduction and refinement of MBS video and phone items. The transition to permanent arrangements has also been informed by medical experts and key stakeholders within the health sector.

How will the changes be monitored and reviewed?

The Department of Health and Aged Care continues to monitor the use of all MBS items. Use of 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 sheet is current as of the last updated date shown above and does not account for MBS changes since that date.

General Practitioner (GP) Services

As of 1 January 2024

Table 1: Standard GP services introduced on 13 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items only available with MyMedicare
Attendance for an obvious problem	3	91790	
Attendance at least 6 minutes but less than 20 minutes	23	91800	
Attendance at least 20 minutes	36	91801	91900
Attendance at least 40 minutes	44	91802	91910
Attendance at least 60 minutes	123	91920	

Table 2: Short and long GP phone consultations introduced on 1 July 2021

Service	Telephone items
Short consultation, less than 6 minutes	91890
Long consultation, 6 minutes or greater	91891

Table 3: Health assessment for Indigenous People introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Health assessment	715	92004	

Table 4: Chronic Disease Management items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Preparation of a GP management plan (GPMP)	721	92024	

Coordination of Team Care Arrangements (TCAs)	723	92025	
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	
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	
Review of a GPMP or Coordination of a Review of TCAs	732	92028	

Table 5: Autism, pervasive developmental disorder and disability services introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
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	

Table 6: Pregnancy Support Counselling program items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Non-directive pregnancy support counselling, at least 20 minutes	4001	92136	92138

Table 7: Eating Disorder Management items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
GP without mental health skills training, preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes	90250	92146	

GP without mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes	90251	92147	
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	
GP with mental health skills training, preparation of an eating disorder treatment and management plan, at least 40 minutes	90253	92149	
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

Table 8: Mental Health Services items introduced 13 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Focussed Psychological Strategies (FPS) treatment, lasting at least 30 minutes, but less than 40 minutes	2721	91818	91842
FPS treatment, at least 40 minutes	2725	91819	91843

Table 9: Mental Health Services items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
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	
GP without mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	2701	92113	
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	
GP with mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	2717	92117	

Table 10: Urgent After-Hours Attendance items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Urgent attendance, unsociable after hours	599	92210	

Table 11: Blood borne viruses, sexual or reproductive health consultation introduced 1 July 2021

Service	Face to face	Telehealth items via video	Phone items
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of not more than 5 minutes		92715	92731
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of more than 5 minutes in duration but not more than 20 minutes		92718	92734
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner of more than 20 minutes in duration but not more than 40 minutes		92721	92737
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a general practitioner lasting at least 40 minutes in duration		92724	92740

Medical Practitioners working in General Practice (not a GP) or (not including a GP, Specialist or Consultant Physician)

Services (as of 1 January 2024)

Table 12: General attendance services introduced on 13 March 2020

Service by a Medical Practitioner (not a general practitioner)	Equivalent face to face Items	Telehealth items via video	Phone items only available with MyMedicare
Attendance of not more than 5 minutes	52	91792	
Attendance of more than 5 minutes but not more than 25 minutes	53	91803	
Attendance of more than 25 minutes but not more than 45 minutes	54	91804	91903
Attendance of more than 45 minutes but not more than 60 minutes	57	91805	91913
Attendance of more than 60 minutes	151	91923	
Service by a Medical Practitioner by a medical practitioner (not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area	Equivalent face to face Items	Telehealth items via videoconference	Telephone Phone items only available with MyMedicare
Attendance of not more than 5 minutes by a medical practitioner (not including	179	91794	
a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area			

Attendance of more than 25 minutes but not more than 45 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area	189	91807	91906
Attendance of more than 45 minutes but not more than 60 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area	203	91808	91916
Attendance of More than 60 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area	165	91926	

Table 13: Short and long Phone consultations introduced on 1 July 2021

Service by a Medical Practitioner (not including GP, specialist, or consultant physician)	Phone items
Short consultation, less than 6 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician)	91892
Long consultation, 6 minutes or greater by a medical practitioner (not including a general practitioner, specialist, or consultant physician)	91893

Table 14: Health assessment for people of Aboriginal or Torres Strait Islander descent items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Health assessment	228	92011	

Table 15: Chronic Disease Management items introduced 30 March 2020

Service by Medical Practitioner (not including GP, specialist, or consultant physician)	Equivalent face to face Items	Telehealth items via video	Phone items
Preparation of a GP management plan (GPMP) by a medical practitioner (not including a general practitioner, specialist, or consultant physician)	229	92055	
Coordination of Team Care Arrangements (TCAs) by a medical practitioner (not including a general practitioner, specialist, or consultant physician	230	92056	
Contribution to a Multidisciplinary Care Plan, or to a review of a Multidisciplinary Care Plan, by a medical practitioner (not including a general practitioner, specialist, or consultant physician) for a patient who is not a care recipient in a residential aged care facility	231	92057	
Contribution to a Multidisciplinary Care Plan, or to a review of a multidisciplinary care plan, by a medical practitioner (not including a general practitioner, specialist, or consultant physician) for a resident in an aged care facility	232	92058	
Review of a GPMP or Coordination of a Review of TCAs by a medical practitioner (not including a general practitioner, specialist, or consultant physician)	233	92059	

Table 16: Pregnancy Support Counselling program items introduced 30 March 2020

Service by a Medical Practitioner (not including GP, specialist, or consultant physician)	Equivalent face to face Items	Telehealth items via video	Phone items
Non-directive pregnancy support counselling, at least 20 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician)	792	92137	92139

Table 17: Eating Disorder Management items introduced 30 March 2020

Service by a Medical Practitioner (not including GP, specialist, or consultant physician)	Equivalent face to face Items	Telehealth items via video	Phone items
Medical practitioner without mental health skills training (not including a general practitioner, specialist, or consultant physician), preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes	90254	92150	
Medical practitioner without mental health skills training (not including a general practitioner, specialist, or consultant physician), preparation of an eating disorder treatment and management plan, at least 40 minutes	90255	92151	
Medical practitioner with mental health skills training (not including a general practitioner, specialist, or consultant physician), preparation of an eating disorder treatment and management plan, lasting at least 20 minutes, but less than 40 minutes	90256	92152	
Medical practitioner with mental health skills training, (not including a general practitioner, specialist, or consultant physician), preparation of an eating disorder treatment and management plan, at least 40 minutes	90257	92153	

Review of an eating disorder treatment and management plan by medical practitioner (not including a general practitioner, specialist, or consultant physician)	90265	92171	92177
Eating disorder psychological treatment (EDPT) service, lasting at least 30 minutes, but less than 40 minutes conducted by medical practitioner (not including a general practitioner, specialist, or consultant physician)	90275	92186	92198
EDPT service, at least 40 minutes conducted by medical practitioner (not including a general practitioner, specialist, or consultant physician)	90277	92188	92200

Table 18: Mental Health items introduced 13 March 2020

Service by a Medical Practitioner (not including GP, specialist, or consultant physician)	Equivalent face to face Items	Telehealth items via video	Phone items
Focussed Psychological Strategies (FPS) treatment, conducted by medical practitioner (not including a general practitioner, specialist, or consultant physician) lasting at least 30 minutes, but less than 40 minutes	283	91820	91844
FPS treatment, conducted by medical practitioner (not including a general practitioner, specialist, or consultant physician) duration at least 40 minutes	286	91821	91845

Table 19: Mental Health items introduced 30 March 2020

Service by a Medical Practitioner (not including GP, specialist, or consultant physician)	Equivalent face to face Items	Telehealth items via video	Phone items
Medical practitioner (not including a general practitioner, specialist, or consultant physician) without mental health skills training, preparation of a	272	92118	

GP mental health treatment plan, lasting at least 20 minutes, but less			
than 40 minutes			
Medical practitioner (not including a general practitioner, specialist, or consultant physician), without mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	276	92119	
Review of a GP mental health treatment plan or Psychiatrist Assessment and Management Plan by medical practitioner (not including a general practitioner, specialist, or consultant physician)	277	92120	92132
Medical practitioner (not including a general practitioner, specialist, or consultant physician), mental health treatment consultation, at least 20 minutes	279	92121	92133
Medical practitioner (not including a general practitioner, specialist, or consultant physician) 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	
Medical practitioner (not including a general practitioner, specialist, or consultant physician) with mental health skills training, preparation of a GP mental health treatment plan, at least 40 minutes	282	92123	

Table 20: Urgent After-Hours Attendance items introduced 30 March 2020

Service	Equivalent face to face Items	Telehealth items via video	Phone items
Urgent attendance, unsociable after hours	600	92211	

Table 21: Blood borne viruses, sexual or reproductive health consultation introduced 1 July 2021

Service by a Medical Practitioner (not including GP, specialist, or consultant physician)	Equivalent face to face Items	Telehealth items via video	Phone items
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician) of not more than 5 minutes		92716	92732
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician) of more than 5 minutes in duration but not more than 20 minutes		92719	92735
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician) of more than 20 minutes in duration but not more than 40 minutes		92722	92738
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician) lasting at least 40 minutes in duration		92725	92741
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician), in		92717	92733

an eligible area, of not more than 5 minutes. Modified Monash 2-7 area		
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician), in an eligible area, of more than 5 minutes in duration but not more than 20 minutes. Modified Monash 2-7 area	92720	92736
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician), in an eligible area, of more than 20 minutes in duration but not more than 40 minutes. Modified Monash 2-7 area	92723	92739
Professional attendance for the provision of services related to blood borne viruses, sexual or reproductive health by a medical practitioner (not including a general practitioner, specialist, or consultant physician), in an eligible area, lasting at least 40 minutes in duration. Modified Monash 2-7	92726	92742