# COVID-19 Temporary MBS Telehealth Services

Specialists, consultant physicians, psychiatrists, paediatricians, geriatricians, public health physicians, neurosurgeons and anaesthetists

Last updated: 27 April 2021

* Commencing 13 March 2020 and extending until 31 December 2021, 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 temporary MBS telehealth items are available to specialists, consultant physicians, psychiatrists, paediatricians, geriatricians, public health physicians, neurosurgeons and anaesthetists.
* A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
* The temporary MBS telehealth items are for out-of-hospital patients.
* All providers are expected to obtain informed financial consent from patients prior to charging private fees for COVID-19 telehealth services.
* The Department continues to review the ongoing role of telehealth to support the pandemic response in consultation with peak medical professional groups.

## What are the changes?

As part of the Australian Government’s response to COVID-19, eighty (80) items for specialists, consultant physicians, psychiatrists, geriatricians, paediatricians, public health physicians, neurosurgeons and anaesthetists are available to ensure continued access to essential Medicare rebated consultation services.

The temporary telehealth and telephone items are:

Group A40, sub-groups 4-38:

* 4 items for specialist attendances
* 10 items for consultant physician attendances
* 2 specialist and consultant physician early intervention services
* 4 geriatrician services for assessment and management
* 34 consultant psychiatrist services including consultations, group psychotherapy and interviews
* 6 paediatrician services for early intervention and services for treatment of eating disorders
* 8 services for public health physician attendances
* 10 services for neurosurgeon attendances
* 2 items for anaesthesia attendances

A list of the temporary telehealth items is provided later in this fact sheet.

## Who is eligible?

The 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.

Bulk billing is at the discretion of all providers, so long as informed financial consent is obtained prior to the provision of the service.

## 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](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist) has been made available on MBSOnline. Further information can be found on the [Australian Cyber Security Centre website](https://www.cyber.gov.au/).

## Why are the changes being made?

The Government has extended its national COVID-19 emergency health response for a further six months, to
31 December 2021. This will ensure that patients continue to have access to key health initiatives, including
Medicare-subsidised telehealth services.

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.

## What does this mean for providers?

The temporary MBS telehealth items 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. Providers should use their provider number for their primary location, and must provide safe services in accordance with normal professional standards.

The telehealth MBS items can substitute for current face-to-face consultations that are available under the MBS when the service/s cannot be provided due to COVID-19 considerations. The telehealth items have the same clinical requirements as the corresponding face-to-face consultation items.

For additional information on the use of telehealth items, please refer to the [Provider Frequently Asked Questions](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TempBB) document available on MBSOnline.

## How will these changes affect patients?

Patients should ask their service providers about their telehealth options, where clinically appropriate.

The MBS specialist and consultant physician 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](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TempBB) 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 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.

The extension of the temporary COVID-19 telehealth measures for another six months, until 31 December 2021, was a recommendation of the Australian Health Protection Principal Committee.

## How will the changes be monitored and reviewed?

The Department of Health continues to monitor the use of the 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](https://www.health.gov.au/resources/collections/coronavirus-covid-19-national-health-plan-resources).

The full item descriptors and information on other changes to the MBS can be found on the [MBS Online website](http://www.mbsonline.gov.au). You can also subscribe to future MBS updates by visiting [MBS Online](http://www.mbsonline.gov.au/) 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](https://www.servicesaustralia.gov.au/organisations/health-professionals/news/all)’ 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**

SPECIALIST, CONSULTANT PHYSICIAN, PSYCHIATRIST, PAEDIATRICIAN, GERIATRICIAN, PUBLIC HEALTH PHYSICIAN, NEUROSURGEON AND ANAESTHETIST ATTENDANCES

These services are for out-of-hospital patients.

Table 1. Specialist services introduced 13 March 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| Specialist. Initial attendance | 104 | 91822\* | 91832\* |
| Specialist. Subsequent attendance | 105 | 91823\* | 91833\* |

Table 2. Consultant Physician services introduced 13 March 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| Consultant physician. Initial attendance | 110 | 91824 \*\* | 91834 \*\* |
| Consultant physician. Subsequent attendance | 116 | 91825\*\* | 91835\*\* |
| Consultant physician. Minor attendance | 119 | 91826\*\* | 91836\*\* |

Table 3. Consultant Physician services introduced 6 April 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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\*\* |

Table 4. Specialist and Consultant Physician services introduced 30 March 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| Specialist or consultant physician early intervention services for children with autism, pervasive developmental disorder or disability | 137 | 92141 | 92144 |

Table 5. Geriatrician services introduced 6 April 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 6. Consultant Psychiatrist services introduced 13 March 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 7. Consultant Psychiatrist services introduced 6 April 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |
| 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 |

Table 8. Consultant Psychiatrist services introduced 20 April 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 9. Consultant Psychiatrist services introduced 30 March 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 10. Paediatrician services introduced 30 March 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 11. Public Health Physician services introduced 20 April 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 12. Neurosurgery attendances introduced 20 April 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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 |

Table 13. Anaesthesia Attendances introduced 22 May 2020

| **Service** | **Existing Items** *face to face* | **Telehealth items** *via video-conference* | **Telephone items** *– for when video-conferencing is not available* |
| --- | --- | --- | --- |
| 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.