# Audiology and Otolaryngology MBS Telehealth (video and phone) Services

Last updated: 13 March 2025

- Medicare Benefit Schedule (MBS) telehealth services include video and phone services provided by audiologists and otolaryngologists.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- MBS items exist for the remote programming, by video or phone, of auditory implants (i.e. cochlear implants) and/or sound processors by audiologists and otolaryngologists.
- Medicare benefits apply to programming services delivered both face-to-face and via telehealth.

## What are the changes?

From **1 March 2025**, the term 'telehealth attendance' will collectively refer to both video and phone attendances. Where an MBS item can only be claimed for a specific attendance format, it will specifically state 'phone attendance' or 'video attendance'.

No changes have been made to the service or fee of the remote programming of auditory implant items (i.e. cochlear implants) and/or sound processors. These items will continue to enable eligible patients to access Medicare benefits for telehealth services for the programming of auditory implant items; equivalent face-to-face services will continue.

# Why are the changes being made?

The MBS item descriptors and notes are being updated in response to stakeholder feedback received during the MBS Review Advisory Committee (MRAC) post-implementation review of MBS telehealth. The change is intended to reduce misinterpretation, although the clinical requirements of the services will not change.

# Information for providers

MBS telehealth items allow providers to continue to deliver essential health care services to patients within their care. The change only clarifies existing regulations and does not impact fees or how the items work.

Providers do not need to be in their regular practice to provide telehealth services. Providers should use their provider number relevant to the appropriate practice and must provide safe services in accordance with normal professional standards.

MBS telehealth items can be substituted for equivalent face-to-face services where it's clinically appropriate and safe to do so; these items have the same clinical requirements as the corresponding face-to-face items.

Medical practitioners, or those performing the service on behalf of a medical practitioner, can claim items 11302 (face-to-face), 11342 (video) and 11345 (phone).

Audiologists can claim items 82301 (face-to-face), 82302 (video) and 82304 (phone).

## Information for patients

Patients should ask their service providers about their telehealth options. Updated terminology clarifies existing regulations and does not impact fees or how the items work and therefore does not impact a patients' experience.

## Who was consulted on the changes?

The use of updated language was informed by stakeholder consultation, including a Post Implementation Review of Telehealth by MRAC released in March 2024. Significant public consultation was performed as part of the MRAC's review, with over 450 submissions received from health experts, health organisations, relevant peak bodies, patients and providers.

# Information about how changes be monitored and reviewed

The Department of Health and Aged Care (the Department) regularly reviews the use of MBS items in consultation with the profession.

Providers are responsible for ensuring Medicare services claimed using their provider number meet all legislative requirements. All Medicare claiming is subject to compliance checks and providers may be required to submit evidence about the services they bill. More information about the Department of Health and Aged Care's (the Department's) compliance program can be found on its website at Medicare compliance.

# 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. You can also subscribe to future MBS updates by visiting 'Subscribe to the MBS' on the MBS Online website.

The Department provides an email advice service for providers seeking advice on interpretation of 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 <a href="mailto:askMBS@health.gov.au">askMBS@health.gov.au</a>.

Private health insurance information on the product tier arrangements is available at <a href="https://www.privatehealth.gov.au">www.privatehealth.gov.au</a>. Detailed information on the MBS item listing within clinical categories is available on the <a href="https://www.privatehealth.gov.au">Department's website</a>. 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 <u>Federal Register of Legislation</u>. If you have a query in relation to private health insurance, you should email <u>PHI@health.gov.au</u>.

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.

The data file for software vendors when available can be accessed via the **Downloads** page.

# **Audiology and Otolaryngology MBS Telehealth items**

#### **Category 2 - DIAGNOSTIC PROCEDURES AND INVESTIGATIONS**

#### **Group D1 - Miscellaneous Diagnostic Procedures and Investigations**

#### **Subgroup 3 - Otolaryngology**

#### 11342

- Programming by video attendance of an auditory implant, or the sound processor of an auditory implant, unilateral, performed by or on behalf of a medical practitioner, if a service to which item 82301, 82302 or 82304 applies has not been performed on the patient on the same day.
- Applicable up to a total of 4 services to which this item, item 11302 or item 11345 applies on the same day

#### 11345

- Programming by phone attendance of an auditory implant, or the sound processor of an auditory implant, unilateral, performed by or on behalf of a medical practitioner, if a service to which item 82301, 82302 or 82304 applies has not been performed on the patient on the same day.
- Applicable up to a total of 4 services to which this item, item 11302 or item 11342 applies on the same day

#### **Category 8 - MISCELLANEOUS SERVICES**

#### **Group M15 - Diagnostic Audiology Services**

#### 82302

- Audiology health service by video attendance for programming of an auditory implant, or the sound processor of an auditory implant, unilateral, performed on a patient by an eligible audiologist if:
  - (a) the service is not performed for the purpose of a hearing screening; and
  - (b) a service to which item 11302, 11342 or 11345 applies has not been performed on the person on the same day.
- Applicable up to a total of 4 services to which this item, item 82301 or item 82304 applies on the same day

MBS Online

#### 82304

Audiology health service by phone attendance for programming of an auditory implant, or the sound processor of an auditory implant, unilateral, performed on a patient by an eligible audiologist if:

- (a) the service is not performed for the purpose of a hearing screening; and
- (b) a service to which item 11302, 11342 or 11345 applies has not been performed on the person on the same day.

Applicable up to a total of 4 services to which this item, item 82301 or item 82302 applies on the same day

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.