Medical Practitioners in General Practice MBS Telehealth (video and phone) Services

Last updated: 21 August 2025

* Medicare Benefits Schedule (MBS) telehealth services include video and phone services for non-referred attendances.
* It is a legislative requirement that medical practitioners using the telehealth (video and phone) items listed in this factsheet can only perform a telehealth service when they have an established clinical relationship with the patient, unless an exemption applies (see *Eligibility Requirements)*.
* A service may only be provided by telehealth where it is safe and clinically appropriate.
* Providers are expected to obtain informed financial consent from patients prior to providing the service, providing details regarding their fees, including any out-of-pocket costs.
* From 1 July 2024, the following changes to telehealth items occurred:
* Blood-borne virus and sexual or reproductive health (BBVSRH) items became exempt from the established clinical relationship requirement.
	+ Non-directive pregnancy counselling (NDPC) items require an established clinical relationship. GPs may consider other services to substitute for care previously provided under NDPC, if appropriate, such as specific antenatal items (see [Obstetrics Factsheet](https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-Telehealth-Updates-April%202023)) and Better Access items for perinatal mental health care.
* Mental health items are exempt from the established clinical relationship requirement.

## 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’.

Furthermore, an additional change has been made to clarify Approved Medical Deputising Services (AMDS) eligibility for MBS telehealth (see *Eligibility Requirements)*.

## 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 ofMBS telehealth. The change is intended to reduce misinterpretation, although the clinical requirements of the services will not change.

The change to clarify AMDS eligibility for MBS telehealth is in response to stakeholder feedback. The change is intended to reduce any ambiguity around AMDS’s eligibility to access MBS telehealth and will apply retrospectively.

## Information for providers

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

Providers should use the provider number relevant to the practice of employment at the time, through which the service is being conducted. Services must be provided in accordance with safe and normal professional standards. Providers are encouraged to maintain clinical relationships with their patients through face-to-face services where appropriate

MBS telehealth items can substitute for equivalent face-to-face consultations where it’s clinically appropriate and safe to do so; these items have the same clinical requirements as the corresponding face-to-face consultation items.

Non-directive pregnancy counselling items remain available to patients with an established clinical relationship with their GP. However, where relevant, and deemed urgent and appropriate for a patient who does not have an established clinical relationship, the BBVSRH items, obstetric antenatal items (see [Obstetrics Factsheet](https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-Telehealth-Updates-April%202023)), specific GP mental health and urgent afterhours services may be considered. These alternatives are available to any patient from any GP.

Telehealth services contribute to Standardised Whole Patient Equivalent (SWPE) calculations which determine the value of Practice Incentives Program (PIP) and Workplace Incentive Program (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.

Telehealth services are included in the ‘prescribed patterns of service rule’. Any medical practitioner who provides more than a combined 80 services per day on 20 or more days in a 12-month period (cumulative not consecutive) will be referred to the Professional Services Review (PSR). 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 (cumulative not consecutive) would be referred to the PSR for peer review of their practice.

## Information for patients

Patients should ask their service providers about their telehealth options, where clinically appropriate. The updated terminology clarifies original regulations and does not impact fees or how the items work and therefore do not impact patients’ experience.

To be eligible for MBS telehealth services, patients must have an established clinical relationship, meet the exemption criteria, or for level C and D telephone services, be registered in MyMedicare with the practice providing the service.

Patients are encouraged to speak to their doctor or general practice about the most appropriate consult for their circumstances. Patients interested in ongoing telehealth consultations are encouraged to maintain their access by having in-person consultations as required.

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.

## Eligibility Requirements

MBS video and phone items in this factsheet are available to providers of telehealth services for a wide range of consultations. All Medicare eligible Australians can receive most of these services if they have an *established clinical relationship* with a medical practitioner. Longer telephone services are available for patients registered in MyMedicare.

**MyMedicare**

MyMedicare is a voluntary patient registration model that aims to formalise the relationship between patients and their preferred primary care teams.

Registration provides eligibility for GP MBS telehealth Level C (longer than 20 minutes) and D (longer than 40 minutes) phone services, rendered by providers in their registered practice. These requirements support longitudinal and person-centred primary health care that is associated with better health outcomes.

For more information on MyMedicare, please see the [MyMedicare website](https://www.health.gov.au/our-work/mymedicare#:~:text=MyMedicare%20is%20a%20new%20voluntary%20patient%20registration%20model.,invests%20%2419.7%20million%20over%204%20years%20in%20MyMedicare.).

**Established clinical relationship requirement (see** [AN.1.1](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

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 received at least one face-to-face service arranged by that practice in the 12 months preceding the telehealth attendances (including services performed by another medical practitioner located at the practice, or 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 patient is:
	+ Under the age of 12 months
	+ Homeless
	+ 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
	+ Affected by natural disaster, defined as living in a local government area declared a natural disaster by a State or Territory government; or
* The service is:
	+ An urgent after-hours (unsociable hours) service, including when these services are provided by an Approved Medical Deputising Service; or
	+ Rendered by a medical practitioner in an Aboriginal Medical Service or an Aboriginal Community Controlled Health Service (ACCHO); or
	+ A BBVSRH consultation; or
	+ A mental health service.

A patient’s participation in a previous video or phone consultation does not constitute a face-to-face service for the purposes of ongoing telehealth eligibility.

Practitioners should confirm that patients have either received an eligible face-to-face attendance, meet one or more of the relevant exemption criteria, or, where relevant, are registered in MyMedicare prior to providing a telehealth attendance. Failure to meet the established clinical relationship or the MyMedicare requirement may result in incorrect claiming or out-of-pockets costs for patients.

## Who was consulted on the changes?

The use of updated language was informed by stakeholder consultation, including a Post Implementation Review of MBS Telehealth by MRAC released in June 2024.

The MBS Review Advisory Committee – Telehealth Post-Implementation Review – Final report is available on the [Department of Health, Disability and Aged Care’s website](https://www.health.gov.au/resources/publications/mbs-review-advisory-committee-telehealth-post-implementation-review-final-report?language=en) (the department).

**Information about how services are monitored and reviewed**

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’s compliance program can be found on its website at [[Medicare compliance](https://www.health.gov.au/topics/medicare/compliance)](https://www.health.gov.au/topics/medicare/compliance).

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

## 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](https://www.mbsonline.gov.au/). You can also subscribe to future MBS updates by visiting ‘[Subscribe to the MBS](https://www9.health.gov.au/mbs/subscribe.cfm)’ on the MBS Online website.

The department 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](https://www.privatehealth.gov.au/health_insurance/phichanges/index.htm). Detailed information on the MBS item listing within clinical categories is available on the [department’s website](https://www.health.gov.au/topics/private-health-insurance/private-health-insurance-reforms). 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](https://www.legislation.gov.au). If you have a query in relation to private health insurance, you should email PHI@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 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](https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/downloads) page.

# General Practitioner (GP) Services

Table 1: Standard GP services since 13 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items  | 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 since 1 July 2021

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |
| --- | --- |
| Service | Phone items |
| Short consultation, less than 6 minutes | 91890 |
| Long consultation, 6 minutes or greater | 91891 |

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

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items  | Phone items |
| Health assessment | 715 | 92004 |  |

Table 4: Chronic Disease Management items since 30 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | 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 & disability services since 30 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | 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 since 30 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

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

Table 7: Eating Disorder Management items since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | 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 since 13 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | 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 since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | 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 since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | Phone items |
| Urgent attendance, unsociable after hours | 599 | 92210 |  |

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

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Face-to-face | Video items | 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 |

# Non-GP medical practitioners services

Table 12: General attendance services since on 13 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service by a Medical Practitioner (not a general practitioner)  | Equivalent face-to-face Items | Video items | 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 not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area  | **Equivalent face-to-face Items** | **Video items** | **Phone items only available with MyMedicare** |
| Attendance of not more than 5 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area | 179 | 91794 |  |
| Attendance of more than 5 minutes but not more than 25 minutes by a medical practitioner (not including a general practitioner, specialist, or consultant physician) practicing in a Modified Monash 2-7 area | 185 | 91806 |  |
| 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 since 1 July 2021

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |
| --- | --- |
| 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 since 30 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | Phone items |
| Health assessment | 228 | 92011 |  |

Table 15: Chronic Disease Management items since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service by Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Video items | 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 since 30 March 2020

Video and phone items are subject to eligibility criteria. **(see** [**AN.1.1**](https://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.1.1&qt=noteID&criteria=AN%2E1%2E1)**)**

|  |  |  |  |
| --- | --- | --- | --- |
| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Video items | 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 since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Video items | 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 since 13 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Video items | 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 since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Video items | Phone items |
| Medical practitioner (not including a general practitioner, specialist, or consultant physician) without mental health skills training, preparation of a GP mental health treatment plan, lasting at least 20 minutes, but less than 40 minutes | 272 | 92118 |  |
| 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 since 30 March 2020

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Equivalent face-to-face Items | Video items | Phone items |
| Urgent attendance, unsociable after hours | 600 | 92211 |  |

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

|  |  |  |  |
| --- | --- | --- | --- |
| Service by a Medical Practitioner (not including GP, specialist, or consultant physician)  | Equivalent face-to-face Items | Video items | 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 an eligible area, of not more than 5 minutes. Modified Monash 2-7 area |  | 92717 | 92733 |
| 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 |

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

date