



Changes to MBS heart health assessment items factsheet

Last updated: 1 October 2019

- From 1 November 2019, two interim Medicare Benefits Schedule (MBS) items will be amended for the heart health assessment.
- These items will still allow GPs and medical practitioners (other than a specialist or consultant physician) to conduct a heart health assessment that lasts at least 20 minutes, in consulting rooms.
- Eligible patients will still be able to receive a Medicare rebate for having a specific heart health assessment conducted by a GP or a medical practitioner.

What are the changes?

From 1 November 2019, there will be a minor change to the two interim items for the heart health assessment being reflected in the *Health Insurance Act 1973* and associated regulations. The interim items include:

- An item (699) for professional attendance for a heart health assessment by a general practitioner at consulting rooms lasting at least 20 minutes.
- An item (177) for professional attendance for a heart health assessment by a medical practitioner (other than a specialist or consultant physician) at consulting rooms lasting at least 20 minutes.

The change will see the rebate percentage increase from 85% to 100% of the fee. Simultaneously, the MBS fees will be adjusted to ensure that the rebate for eligible patients and remuneration for eligible providers will remain the same.

Why are the changes being made?

Heart disease and stroke are responsible for almost 30% of all deaths and 15% of Australia's total disease burden.

Amendment to the associated regulations will align the two items with other health assessment items in the MBS. These interim items support the prevention and treatment of heart disease which remains a major focus of the Government, and complements significant funding through the MBS and the Pharmaceutical Benefits Scheme (PBS).

The heart health assessment complements the range of MBS items that support rebates for individuals to discuss their risk of heart disease with their GP, including time-based consultations for preventive health, health assessments, and chronic disease management items.

What does this mean for providers?

Providers will still benefit from having access to MBS items that are specifically for assessing the cardiovascular risk of patients.



How will these changes affect patients?

Eligible patients will still be able to receive the same Medicare rebate amount they received before these changes for having a specific heart health assessment conducted by a GP or medical practitioner.

Who was consulted on the changes?

The Department of Health conducted an expedited consultation process prior to the initial listing of these items on 1 April 2019. Feedback was received from the the Royal Australian College of General Practitioners, the National Aboriginal Community Controlled Health Organisation and the Heart Foundation and considered by the Department prior to implementation of these interim items. Further consultation regarding this change to the associated regulations did not occur because it will not effect the rebate received by a patient or the assessment conducted by a patient's GP.

How will the changes be monitored and reviewed?

These items will be reviewed and evaluated over the next two years, in consultation with the profession, to help inform their effectiveness and any future improvements.

Heart health assessment items will be subject to compliance processes and activities, including random and targeted audits which may require a provider to submit information about the services claimed.

Significant variation from forecast expenditure may warrant review and amendment of fees, and incorrect use of MBS items can result in penalties including the health professional being asked to repay monies that have been incorrectly received.

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 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.

Subscribe to '[News for Health Professionals](#)' on the Department of Human Services 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 Department of Human Services website or contact the Department of Human Services on the Provider Enquiry Line – 13 21 50.



The data file for software vendors is expected to become available on 1 October 2019 and can be accessed via the MBS Online website under 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.