



## Medicare Support in Response to Omicron - GP and Other Medical Officer (OMP) Longer Telephone Consultation

Last updated: 17 January 2022

**PLEASE NOTE:** The new Medicare Benefits Schedule (MBS) items are only available to general practitioners (GPs) and other medical practitioners (OMPs) working in a general practice setting.

**Other Medical Practitioner** includes specialist medical practitioners and consultant physicians working in a general practice setting in their capacity as an OMP.

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- The Australian Government has temporarily expanded telehealth support to GPs, OMPs and their patients in response to the Omicron variant.
  - MBS items 92746 (for GPs) and 92747 (for OMPs) will be available until 30 June 2022 for practitioners delivering longer telephone consultations, lasting 20 minutes or more.
  - Due to the increasing prevalence of the Omicron variant, these services are available nationally and follow the normal telehealth eligibility requirements and exemptions.
  - These measures complement the Government's \$106 million commitment over four years to make an expanded range of MBS telehealth services that were initially introduced in response to COVID-19 permanent, announced 13 December 2021.

### Who can receive MBS items 92746 and 92747?

All Medicare eligible Australians can receive these services if they have an established clinical relationship with a GP, OMP, or a medical practice. This requirement supports longitudinal and person-centred primary health care that is associated with better health outcomes.

An *established 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
- 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 doctor 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 medical practice that has provided at least one face-to-face service to the patient in the 12 months preceding the telehealth attendance.



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

The established relationship requirement does not apply to:

- children under the age of 12 months;
- people who are homeless;
- 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 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.

## Billing

- The fees for MBS items 92746 and 92747 are equivalent to a Level C consultation undertaken by a GP or OMP.
- Note: Due to time constraints, it has not been possible to amend the legislation that establishes 100% rebates for GP and OMP services. The rebate for these items is therefore paid at 85% of the item fee. The fee amount has been increased so that the Medicare rebate paid for this service is at the same level as the equivalent rebate for a Level C consultation undertaken by a GP or OMP.

## Item restrictions

- Standard MBS multiple same-day attendance rules apply to the new items.
- Medicare benefits may be paid for more than one attendance on a patient on the same day by the same medical practitioner, provided the subsequent attendances are not a continuation of the initial or earlier attendances.
- Note: there should be a reasonable lapse of time between the attendances before they can be regarded as separate attendances.



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## 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](http://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 service for providers seeking advice on interpretation of the MBS items and rules, 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](mailto:askMBS@health.gov.au).
- In addition, you can subscribe to '[News for Health Professionals](#)' on the Services Australia website to 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.



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Table 1: Longer telephone services introduced in January 2022

Service	Telephone items
GP consultation, 20 minutes or longer	92746
OMP consultation, 20 minutes or longer	92747

*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.*