



New inpatient telehealth (video) psychiatry services from 1 November 2024

Last updated: 22 November 2024

- These changes will:
 - implement new psychiatry telehealth video attendance items for the admission and some subsequent consultations with inpatients in private hospitals;
 - take effect from 1 November 2024; and
 - be temporarily instated for a period of two years until 31 October 2026.
- These changes are relevant for psychiatrists, referrers, hospitals, medical administrators, and insurers operating in the private health system.
- The intention of the items is to effectively support timely patient admission to hospital and in-patient care.

What are the changes?

Effective 1 November 2024 there will be a revised structure for items for MBS psychiatry items. The new structure includes:

- 1 **new** item (**92483**) for an initial video consultation for attendance in hospital of a new patient.
- 5 **new** items (**92478-92482**) for subsequent time-tiered video attendances in hospital.
- 1 **new explanatory note (N.8.1)** for the time-tiered items (**92478-92483**).

As a result of the above changes, there are also consequential amendments required to change the item numbers referenced within the descriptors of three other items:

- 3 **amended items (296, 297, 299)**

A summary of item number changes is found at **Attachment A** of this fact sheet.

Why are the changes being made?

The changes were announced in the 2024-2025 Budget and aim to support appropriate access to care for patients through enabling psychiatrists to use video telehealth consultations to admit patients to hospital and provide some in-patient services.

The changes are the outcome of Government liaison with stakeholders, including the psychiatry sector. The value of telehealth as an option for inpatient admission consultations

and care is supported, acknowledging due consideration to the clinical and practical appropriateness for each patient.

What does this mean for providers and referrers?

Providers will need to familiarise themselves with the changes and any associated rules and explanatory notes. Providers are responsible for ensuring services claimed from Medicare using their provider number meet all legislative requirements.

Referrers will need to familiarise themselves with the changes to the scope of services supporting inpatient admission.

How will these changes affect patients?

These changes are designed to ensure that psychiatry patients receive the highest clinical inpatient care where urgency of admission is critical. The MBS video telehealth admission item replicates the MBS item for face-to-face assessment.

Subsequent time tiered telehealth consultations items will be limited to a single video consultation for each week of admission, acknowledging the requirement to assess best practice guidelines for individual patient needs.

Who was consulted on the changes?

This change is an outcome of Government liaison with the sector including the Royal Australian and New Zealand College of Psychiatrists (RANZCP) and the Australian Private Hospital Association (APHA).

How will the changes be monitored and reviewed?

Psychiatry items will be subject to MBS compliance checks and providers may be required to submit evidence about the services claimed.

The new MBS psychiatry items will be implemented for an initial period of two years. They will be reviewed 12 months post implementation to assess their effectiveness. Any extension beyond two years will be subject to Government consideration in a Budget context.

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 [MBS Online](#) and clicking 'Subscribe'.

The Department of Health and Aged Care 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. Detailed information on the MBS item listing within clinical categories is available on the [Department's website](#). 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](#). If you have a query in relation to private health insurance, you should email PHI@health.gov.au.

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 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](#) page.

New item descriptors (to take effect 1 November 2024)

Category 1 – Professional Attendances

Group A40 – Telehealth and phone attendance services

Subgroup 6 – Consultant psychiatrist telehealth services

92483

Telehealth attendance of more than 45 minutes by a consultant psychiatrist following referral of the patient to the consultant psychiatrist by a referring practitioner – an attendance on a patient located at a hospital if the patient:

(a) is a new patient for this consultant psychiatrist; or

(b) has not received a professional attendance from the consultant psychiatrist in the preceding 24 months;

other than attendance on a patient in relation to whom this item, or any of items 296, 297, 299, 300, 302, 304, 306, 308, 91827 to 91831, 91837 to 91839, 92437 and 92478 to 92482 has applied in the preceding 24 months (H)

Fee: \$301.05

Benefit: 75% = \$225.80

- Private Health Insurance Classification:
- Clinical category: Common List
- Procedure type: Type C

92478

Telehealth attendance for an admitted patient by a consultant psychiatrist; if:

(a) the attendance follows referral of the patient to the consultant psychiatrist by a referring practitioner; and

(b) the patient is located at a hospital; and

(c) the attendance is not more than 15 minutes duration; and

(d) the patient has not received a service to which item 92479, 92480, 92481, 92482 or 92483 applies in the last seven days (H)

Fee: \$50.10

Benefit: 75% = \$37.60

- Private Health Insurance Classification:
- Clinical category: Common List

Category 1 – Professional Attendances

- Procedure type: Type C

92479

Telehealth attendance for an admitted patient by a consultant psychiatrist; if:

- (a) the attendance follows referral of the patient to the consultant psychiatrist by a referring practitioner; and
- (b) the patient is located at a hospital; and
- (c) the attendance is at least 15 minutes, but not more than 30 minutes in duration; and
- (d) the patient has not received a service to which item 92478, 92480, 92481, 92482 or 92483 applies in the last seven days (H)

Fee: \$100.00

Benefit: 75% \$75.00

- Private Health Insurance Classification:
- Clinical category: Common List
- Procedure type: Type C

92480

Telehealth attendance for an admitted patient by a consultant psychiatrist; if:

- (a) the attendance follows referral of the patient to the consultant psychiatrist by a referring practitioner; and
- (b) the patient is located at a hospital; and
- (c) the attendance was at least 30 minutes, but not more than 45 minutes in duration; and
- (d) the patient has not received a service to which item 92478, 92479, 92481, 92482 or 92483 applies in the last seven days (H)

Fee: \$153.90

Benefit: 75% \$115.45

- Private Health Insurance Classification:
- Clinical category: Common List
- Procedure type: Type C

92481

Telehealth attendance for an admitted patient by a consultant psychiatrist; if:

- (a) the attendance follows referral of the patient to the consultant psychiatrist by a referring practitioner; and
- (b) the patient is located at a hospital; and

Category 1 – Professional Attendances

(c) the attendance was at least 45 minutes, but not more than 75 minutes in duration; and
(d) the patient has not received a service to which item 92478, 92479, 92480, 92482 or 92483 applies in the last seven days (H)

Fee: \$212.40

Benefit: 75% = \$159.30

- Private Health Insurance Classification:
- Clinical category: Common List
- Procedure type: Type C

92482

Telehealth attendance for an admitted patient by a consultant psychiatrist; if:

(a) the attendance follows referral of the patient to the consultant psychiatrist by a referring practitioner; and

(b) the patient is located at a hospital; and

(c) the attendance was at least 75 minutes in duration; and

(d) the patient has not received a service to which item 92478, 92479, 92480, 92481 or 92483 applies in the last seven days (H)

Fee: \$246.50

Benefit: 75% = \$184.90

- Private Health Insurance Classification:
- Clinical category: Common List
- Procedure type: Type C

Minor amendments from 1 November 2024

Category 1 – Professional Attendances

Group A8 – Consultant psychiatrist attendances to which no other item applies

296

Minor change to descriptor to include the new video attendance equivalent item numbers.

297

Minor change to descriptor to include the new video attendance equivalent item numbers.

299

Minor change to descriptor to include the new video attendance equivalent item numbers.

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.