



# Supporting Bulk Billing in General Practice

Last updated: 22 August 2023

- Subject to the passage of legislation, from 1 November 2023 Medicare Benefits Schedule (MBS) bulk billing incentive payments will be increased for a range of consultation items.
- The increase triples the benefits of the current standard bulk billing incentives, including the rural bulk billing incentives, which are scaled and increase in line with the remoteness of the general practice based on the Modified Monash Model.
- There are no changes to patient eligibility for bulk billing incentives. Commonwealth concession card holders and patients aged under 16 years of age will be eligible for the higher bulk billing incentives when they receive an eligible service. Further information on Commonwealth concession cards is available at [www.servicesaustralia.gov.au/concession-and-health-care-cards](http://www.servicesaustralia.gov.au/concession-and-health-care-cards).
- The bulk billing incentive payment is in addition to the MBS benefit that applies to the eligible service that is rendered to the patient.
- The value of MBS bulk billing incentives are scaled and increase for patients who live in regional, rural and remote communities.

## What are the changes?

Subject to the passage of legislation, from 1 November 2023 higher bulk billing incentives for Commonwealth concession card holders and patients aged under 16 years of age will be introduced and may be co-claimed with the following consultation items:

- MBS Levels B, C, D and E face-to-face general attendance consultations (and out of rooms, residential aged care facilities and after hours equivalents)
- MBS Level B telehealth (video and telephone) general attendance consultations
- MBS Levels C and D telehealth (video and telephone) general attendance consultations, where a patient is registered with a general practice through MyMedicare and receives the service through the practice where they are registered
- Level E telehealth (video only) general attendance consultations, where a patient is registered with their general practice through MyMedicare and receives the service through the practice where they are registered

The current, standard bulk billing incentives for Commonwealth concession card holders and patients aged under 16 years of age may continue to be co-claimed with MBS Level A (and equivalent) consultations, Level C, D and E telehealth consultations where the patient is not enrolled in MyMedicare, and all other relevant un-referred services (e.g. chronic disease

management items, general practice Better Access mental health items, eating disorder items, health assessments items, minor procedures etc).

Higher bulk billing incentives will continue to be paid for rural, regional and remote parts of Australia. Tables showing the bulk billing incentive item arrangements for each Modified Monash area are available on MBS Online.

**Note:** existing telehealth eligibility rules continue to apply. For example, patients must have received an eligible face-to-face consultation with their GP or practice in the preceding 12 months to be eligible for a telehealth consultation.

## Why are the changes being made?

The increased bulk billing incentives will support younger Australians and concessional patients to access general practice services, targeting investment in primary care to those who most need it. This is important for the whole health care system, especially to prevent unnecessary emergency department presentations and hospital admissions.

## What does this mean for providers?

Increasing the MBS bulk billing incentives will support GPs to continue to bulk bill Australians who feel cost of living pressures most acutely. This will help ensure that investment in general practice is focused where it is most needed.

## How will these changes affect patients?

Eligible patients will be more likely to be able to find a GP willing to bulk bill the most common consultations particularly in rural and remote areas where it is recognised that there are higher levels of chronic and complex health conditions as well as socioeconomic disadvantage.

## Who was consulted on the changes?

The new MBS bulk billing incentive supports the recommendation of the Strengthening Medicare Taskforce to increase more affordable care, assisting Australians on low incomes to access primary care at no or low cost.

## How will the changes be monitored and reviewed?

The claiming of MBS bulk billing incentive payments will continue to be subject to MBS compliance checks, which may require a provider to submit evidence to substantiate that services were validly claimed.

## 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](http://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](mailto:askMBS@health.gov.au).

Private health insurance information on the product tier arrangements is available at [www.privatehealth.gov.au](http://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](mailto: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.

**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.**