



Continuing MBS Telehealth – Video and Phone Services

For Medical Practitioners in General Practice

Last updated: 24 June 2024

- MBS Telehealth (video and phone) items are permanent and available nationally.
- It remains a legislative requirement that medical practitioners working in general practice can only perform a telehealth service where they have an established clinical relationship with the patient, with limited exemptions (additional detail at **“Who is eligible?”**).
- A service may only be provided by video or phone where it is safe and clinically appropriate.
- 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.
- All providers are expected to obtain informed financial consent from patients prior to charging private fees for telehealth services.
- Changes to MBS telehealth for GPs and prescribed medical practitioners in general practice settings from 1 July 2024 relate to temporary telehealth items (refer **“What are the changes?”**).
- From 1 July 2024, specific COVID-19 temporary measures have expired as scheduled. This includes:
 - Level C phone consultations for antiviral assessment items 93716 and 93717.
 - Exemptions for patients that have tested COVID-19 positive within the last 7 days.
 - Exemptions for patients who require a PCR referral test for COVID-19 to confirm diagnosis.
- Exemptions to the established clinical relationship criteria for 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 remain.
- Since 1 July 2022, video and phone items are included in the prescribed pattern of services (‘80/20 rule’). From 1 October 2022, a new ‘30/20 phone rule’ has applied to phone items.

What are the changes?

- From 1 July 2024, video and phone items will continue with the following changes:
 - Blood borne virus and sexual reproductive health (BBVSRH) items have been made permanent and will continue to be available outside of the established clinical relationship criteria (refer **“Who is eligible?”**).

- Non-directive pregnancy counselling (NDPC) items will continue to be available, however these items are no longer exempt from the established clinical relationship criteria.
- Where clinically relevant, BBVSRH items can be used instead of NDPC items. For services relating to antenatal care which cannot be performed under BBVSRH items, GPs may consider specific antenatal items (see [Obstetrics Factsheet](#)) available to them. For perinatal mental health care, the Better Access items may also be a consideration.
- Mental health items continue with a permanent exemption to the established clinical relationship criteria.
- From 1 January 2024, temporary nicotine and smoking cessation counselling items have expired. These services can be accessed through general time-tiered items with the patient's usual provider.
- From 1 November 2023, new Level C (longer than 20 minutes) and D (longer than 40 minutes) phone items were introduced for patients registered in MyMedicare at their registered practice. For more information on MyMedicare, please see the [MyMedicare website](#).
- From 1 November 2023, new video Level E items (longer than 60 minutes) were made available. For further details see Introduction of new Level E consultation items lasting 60 minutes or more.
- From 1 November 2023, a 6-minute minimum time was introduced for general practitioner Level B video items.
- From 1 November 2023, higher bulk billing incentives for Commonwealth concession card holders and patients aged under 16 years of age was introduced and may be co-claimed with some video and phone consultations. For further details see [Bulk Billing in General Practice from 1 November 2023](#).

Who is eligible?

The MBS video and phone items are available to providers of telehealth services for a wide range of consultations. All Medicare eligible Australians can receive majority of these services if they have an established clinical relationship with a medical practitioner, or a medical practice. This is represented by MyMedicare or the established clinical relationship requirement below:

MyMedicare

For Level C and D phone services, a patient is eligible if they are registered in MyMedicare, and the service is provided by their registered practice. These requirements support longitudinal and person-centred primary health care that is associated with better health outcomes.

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

registration will establish the eligibility requirements for the Level C (longer than 20 minutes) and D (longer than 40 minutes) phone services, instead of the current established clinical relationship requirements and exemptions for the majority of National telehealth video and phone items. For more information on MyMedicare, please see the [MyMedicare website](#).

Established clinical relationship requirement:

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 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 medical practitioner 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 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 established clinical relationship requirement does not apply to:

- children under the age of 12 months; or
- people who are homeless; or
- 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; or
- people affected by natural disaster, defined as living in a local government area declared a natural disaster by a State or Territory government; or
- BBVSRH consultations; or
- mental health services.

A patient's participation in a previous video or phone consultation does not constitute a face-to-face service for the purposes of ongoing video and phone eligibility. New patients of a practice and regular patients who have not attended the practice face-to-face in the preceding 12 months, must have a face-to-face attendance if they do not satisfy any of the above exemptions. Subsequent services may be provided by video or phone, if safe and clinically appropriate to do so.

Practitioners should confirm that patients have either received an eligible face-to-face attendance, meet one or more of the relevant exemption criteria, or are registered in MyMedicare (when applicable) prior to providing a video or phone attendance. Failure to meet the established clinical relationship or the MyMedicare requirement may result in incorrect claiming.

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 the 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](#). Further information can be found on [the Australian Cyber Security Centre website](#).

What does this mean for providers?

MBS video and phone items allow providers to deliver essential health care services to their patients while ensuring continued quality is provided by a medical practitioner who knows the patient's medical history.

Providers do not need to be in their regular practice to provide video or phone services, but they must ensure that eligibility requirements are met before providing video or phone services to their patient.

When providing a video or phone service outside a practice, providers should use their provider number relevant to the appropriate practice and must provide safe services in accordance with normal professional standards.

MBS telehealth items have the same clinical requirements as the corresponding face-to-face consultation items and have the same MBS benefit.

As COVID-19 isolation requirements have lifted, so have the temporary COVID-19 telehealth measures. Providers are encouraged to maintain clinical relationships with their patients through face-to-face services where appropriate.

Where relevant and clinically urgent, BBVSRH items may be used in place of non-directive pregnancy counselling items. For services relating to antenatal care which cannot be performed under BBVSRH items, GPs are encouraged to consider the obstetric antenatal items available to them (see [Obstetrics Factsheet](#)) or GP mental health items for perinatal mental health care.

Obstetric MBS telehealth items are not subject to the established clinical relationship criteria. If patients have an established clinical relationship non-directive pregnancy counselling items remain available.

Video and phone 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.

To further support the integrity of the Medicare program the existing prescribed pattern of practice ('80/20 rule') has, since 1 July 2022, included medical practitioner face-to-face, video and phone consultations, excluding vaccine suitability assessments. Any medical practitioner who provides more than a combined 80 services per day on 20 or more days in a 12-month period will be referred to the Professional Services Review (PSR).

Since 1 October 2022, a prescribed pattern of service (a '30/20 rule') has applied to phone attendances provided by medical practitioners. 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 would be referred to the PSR for peer review of their video and phone practice.

How will these changes affect patients?

Patients will continue to have access to MBS video and phone services, noting that the current eligibility requirements for these services are largely unchanged from 1 January 2022.

This means patients must have an established clinical relationship, meet the exemption criteria, or (when applicable) be registered in MyMedicare with the practice providing the service.

As COVID-19 isolation requirements have been reduced, so have the temporary COVID-19 telehealth measures. 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.

Services with unfamiliar doctors or those not seen recently that may have been claimed as non-directive pregnancy counselling may continue via other MBS items. Where urgent and appropriate for a patient who does not have an established clinical relationship, the BBVSRH items, obstetric antenatal items (see [Obstetrics Factsheet](#)) and specific GP mental health services may be considered. These alternatives are available to any patient from any GP. Non-directive pregnancy counselling items remain available to patients with an established clinical relationship with their GP.

Patients seeking support to quit smoking or vaping use are encouraged to speak to their usual provider or access [Quitline](#) services for help to quit smoking and/or vaping. You can call the hotline on 13 QUIT (13 7848), to talk to a counsellor or request a call back. More

information and resources are available at www.quit.org.au. Resources for health professionals are also available through the Quit Centre - www.quitcentre.org.au.

Who was consulted on the changes?

Consultation with stakeholders has informed the introduction and refinement of MBS video and phone items. The transition to permanent arrangements has also been informed by medical experts and key stakeholders within the health sector.

The 1 July 2024 changes were informed by significant consultation and submissions received by the MBS Review Advisory Committee (MRAC) as part of its post-implementation review of MBS telehealth services. Over 450 submissions were received from health experts, health organisations, relevant peak bodies, patients, and providers.

How will the changes be monitored and reviewed?

The Department of Health and Aged Care continues to monitor the use of all MBS items. Use of items that does not seem to be in accordance with Medicare guidelines and legislation will be actioned appropriately.

Providers are responsible for ensuring services claimed from Medicare using their provider number meet all legislative requirements. These changes are subject to MBS compliance checks and providers may be required to submit evidence about the services 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](#). 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.

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.

General Practitioner (GP) Services

Table 1: Standard GP services introduced on 13 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | 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 introduced on 1 July 2021

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

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

| Service | Equivalent face-to-face Items | Telehealth items via video | Phone items |
|-------------------|-------------------------------|----------------------------|-------------|
| Health assessment | 715 | 92004 | |

Table 4: Chronic Disease Management items introduced 30 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | Phone items |
|--------------------------------------------|-------------------------------|----------------------------|-------------|
| Preparation of a GP management plan (GPMP) | 721 | 92024 | |

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| 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 and disability services introduced 30 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | 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 introduced 30 March 2020

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

Table 7: Eating Disorder Management items introduced 30 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | 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 introduced 13 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | 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 introduced 30 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | 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 introduced 30 March 2020

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

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

| Service | Face-to-face | Telehealth items via video | 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 |

Medical Practitioners working in General Practice (not a GP) or (not including a GP, Specialist or Consultant Physician)

Table 12: General attendance services introduced on 13 March 2020

| Service by a Medical Practitioner (not a general practitioner) | Equivalent face-to-face Items | Telehealth items via video | 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 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 | Telehealth items via video | 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 | 189 | 91807 | 91906 |

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| consultant physician) practicing in a Modified Monash 2-7 area | | | |
| 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 introduced on 1 July 2021

| 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 introduced 30 March 2020

| Service | Equivalent face-to-face Items | Telehealth items via video | Phone items |
|--------------------------|--------------------------------------|-----------------------------------|--------------------|
| Health assessment | 228 | 92011 | |

Table 15: Chronic Disease Management items introduced 30 March 2020

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

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

| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Telehealth items via video | 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 | 90257 | 92153 | |

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| disorder treatment and management plan, at least 40 minutes | | | |
| 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 introduced 13 March 2020

| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face items | Telehealth items via video | 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 introduced 30 March 2020

| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Telehealth items via video | 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 | 282 | 92123 | |

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| GP mental health treatment plan, at least 40 minutes | | | |
|------------------------------------------------------|--|--|--|

Table 20: Urgent After-Hours Attendance items introduced 30 March 2020

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

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

| Service by a Medical Practitioner (not including GP, specialist, or consultant physician) | Equivalent face-to-face Items | Telehealth items via video | 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 | | 92725 | 92741 |

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|-------|
| 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 | | | |
| 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 |

Medicare Benefits Schedule

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