



COVID-19 Bulk Billed MBS Psychiatry Telehealth Services Frequently Asked Questions

Last updated: 30 March 2020

- From 13 March 2020 to 30 September 2020 (inclusive), new temporary MBS telehealth items have been made available to help reduce the risk of community transmission of COVID-19 and provide protection for patients and health care providers.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- The temporary services must be bulk billed and are for non-admitted patients.
- Please refer to the 'Provider Frequently Asked Questions' on [MBS Online](#) for general information on eligibility, telehealth arrangements, referrals, bulk-billing and claiming, and assignment of benefits.
- Please note that this information is accurate as of this date. This is an evolving situation and it is possible that some of this information could change in response to the circumstances. Please continue to check MBS Online (www.mbsonline.gov.au) regularly for any further announcements.

Why are the changes being made?

- As part of the Australian Government's response to COVID-19, fourteen (14) new telehealth items for consultant psychiatrists have been introduced to ensure continued access to essential health services for all Australians. The temporary telehealth MBS services have been introduced as a short-term measure to allow people to access essential health services in their homes and reduce their risk of exposure to COVID-19.
- Videoconference services are the preferred approach for substituting a face-to-face consultation. However, in response to the COVID-19 pandemic, providers will also be able to offer audio-only services via telephone if video is not available. There are separate items available for the audio-only services.

Which new temporary MBS telehealth items can psychiatrists access?

The new temporary MBS telehealth and telephone items for psychiatry attendances are:

- Group A40:
 - 5 new videoconference items for psychiatric services – MBS items 91827, 91828, 91829, 91830 and 91831.
 - 5 new telephone items for psychiatric services – MBS items 91837, 91838, 91839, 91840 and 91841.
 - 1 new videoconference item for psychiatric services to prepare eating disorder treatment and management plans – MBS item 92162
 - 1 new telephone item for psychiatric services to prepare eating disorder treatment and management plans – MBS item 92166
 - 1 new videoconference item for psychiatric services to review eating disorder treatment and management plans – MBS item 92172
 - 1 new telephone item for psychiatric services to prepare eating disorder treatment and management plans – MBS item 92178



PSYCHIATRIST ATTENDANCES

These services must be bulk-billed, and are for non-admitted patients

Service	Existing Items <i>Face-to-face</i>	COVID-19 Telehealth items <i>via video-conference</i>	COVID-19 Telephone items – <i>for when video-conferencing is not available</i>
Consultant psychiatrist. Consultation, not more than 15 minutes, fewer than 50 attendances	300	91827	91837
Consultant psychiatrist. Consultation, 15 to 30 minutes, fewer than 50 attendances	302	91828	91838
Consultant psychiatrist. Consultation, 30 to 45 minutes, fewer than 50 attendances	304	91829	91839
Consultant psychiatrist. Consultation, 45 to 75 minutes, fewer than 50 attendances	306	91830	91840
Consultant psychiatrist. Consultation, more than 75 minutes, fewer than 50 attendances	308	91831	91841
Consultant psychiatrist, prepare an eating disorder treatment and management plan, more than 45 minutes	90260	92162	92166
Consultant psychiatrist, to review an eating disorder plan, more than 30 minutes	90266	92172	92178

Can I use the new temporary MBS telehealth psychiatry attendance items in place of existing psychiatry MBS items?

- Yes. The new temporary telehealth MBS items mirror existing time-tiered psychiatry face-to-face attendance items available under the MBS.
- Providers should claim the new MBS item which best describes the service that they have rendered. If the requirements of the item have been met, practitioners are able to bill the new MBS items.
- Providers should use their clinical judgement to determine if a service is clinically relevant. A clinically relevant service is one that is generally accepted by the relevant profession as necessary for the appropriate treatment of the patient.



Can psychiatrists use the new temporary MBS telehealth psychiatry items for patients who have had more than 50 sessions per calendar year (e.g. in place of items 310, 312, 314, 316, 318)?

- Yes. To support patients, the service limits that apply to existing psychiatry services do not currently apply to the new temporary telehealth psychiatry services. Patients who have received more than 50 attendances under existing standard psychiatry attendance items are eligible to receive services under the new telehealth psychiatry items, provided they meet the item descriptor requirements.

Are patients receiving treatment under existing MBS item 319 eligible to receive services under the new temporary MBS telehealth psychiatry items if they have exceeded 50 sessions per calendar year?

- Yes. To support patients, the new temporary MBS telehealth psychiatry items do not have a limit on the number of services provided. Patients who have received more than 50 attendances under MBS item 319 are eligible to receive services under the new telehealth psychiatry items, provided they meet the item descriptor requirements.

Can I co-claim the existing telehealth incentive item 288 in conjunction with an attendance for a new temporary MBS telehealth item?

- No. The new temporary MBS telehealth MBS items are stand-alone items. The new temporary items are to be used where services are provided via videoconference or telephone.

Can I co-claim the new temporary MBS telehealth items with existing telepsychiatry items?

- No. The new temporary MBS telehealth items are stand-alone items. Existing telepsychiatry items may not be co-claimed with the new temporary items.

What are the claiming requirements for the new temporary MBS telehealth eating disorder treatment and management plan services?

- The new MBS telehealth eating disorder treatment and management plan items have the same patient eligibility, model of care and record-keeping requirements as the existing face-to-face MBS items. Please refer to MBS Explanatory Notes AN.36.1 and AN.36.2 for further information.

Can I use the new temporary MBS telehealth items to treat patients who are admitted to a hospital?

- No. Admitted patients (whether as part of an episode of hospital treatment or hospital substitute treatment) are not eligible for services under the new MBS items.

Can I use the new temporary MBS telehealth items to treat patients if I am a practitioner who is admitted to hospital?

- No. Admitted patients (whether as part of an episode of hospital treatment or hospital substitute treatment) are not eligible for services under the new temporary MBS items. Medicare rebates are not payable for video or telephone attendances if the practitioner is an admitted patient.



Further Information

A list of the COVID-19 items is available at

<http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/news-2020-03-01-latest-news-March>

A series of fact sheets has been developed to support the introduction of these items, which are available at:

<http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/factsheet->

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 to the COVID-19 telehealth items, please email COVIDResponse@health.gov.au. For all other queries relating to all other items in the Schedule, please email askMBS@health.gov.au.

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.