



## COVID-19 Temporary MBS Telehealth Services

### Participating Midwives

Last updated: 25 June 2021

- Commencing 13 March 2020 and extending until 31 December 2021, 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.
- The temporary MBS telehealth items are available to participating midwives.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- The temporary MBS telehealth items are for out-of-hospital patients.
- All providers are expected to obtain informed financial consent from patients prior to charging private fees for COVID-19 telehealth services.

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### What are the changes?

As part of the Australian Government's response to COVID-19, eight (8) temporary MBS telehealth items have been introduced to ensure continued access to essential Medicare rebated consultation services.

The telehealth items are:

Group M19, sub-groups 1-2:

- MBS items 91211-91222.

A list of the telehealth items is provided later in this fact sheet.

### Why are the changes being made?

The temporary MBS telehealth items allow people to access essential Medicare funded health services in their homes and reduce their risk of exposure to COVID-19 within the community.

As part of the 2021–22 Budget, the Government is investing an additional \$204.6 million to support continued access to MBS COVID-19 telehealth services until 31 December 2021, building on previous investment of \$3.6 billion since March 2020.

### Who is eligible?

The new temporary MBS telehealth items are available to providers of telehealth services for a wide range of consultations. All Medicare eligible Australians can now receive these services.

Bulk billing is at the discretion of the midwife, so long as informed financial consent is obtained prior to the provision of the service.



## What telehealth options are available?

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.

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 MBSOnline: <http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist>. Further information can be found on the [Australian Cyber Security Centre website](#).

## What does this mean for providers?

The temporary MBS telehealth items allow midwives to continue to provide essential health care services to patients within their care.

Midwives do not need to be in their regular practice to provide telehealth services. They should use their provider number for their primary location, and must provide safe services in accordance with normal professional standards.

The telehealth MBS items can substitute for current face-to-face consultations that are available under the MBS when the service/s cannot be provided due to COVID-19 considerations. The telehealth items have the same clinical requirements as the corresponding face-to-face consultation items.

For additional information on the use of telehealth items, please refer to the [Provider Frequently Asked Questions](#) document available on MBSOnline.

## How will these changes affect patients?

Patients should ask their service providers about their telehealth options, where clinically appropriate.

The midwifery telehealth items do not need to be bulk billed, however the provider must ensure informed financial consent is obtained prior to the provision of the service.

A [consumer factsheet](#) is available on MBSOnline which provides further information on how these changes will affect patients.

## Who was consulted on the changes?

Targeted consultation with stakeholders has informed the temporary MBS telehealth items. Due to the nature of the COVID-19 emergency, it was not reasonably possible to undertake normal, broad consultations prior to implementation.

The extension of the temporary COVID-19 telehealth measures was a recommendation of the Australian Health Protection Principal Committee and is supported by health experts and key stakeholders within the health care sector.



## How will the changes be monitored and reviewed?

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

## Where can I find more information?

COVID-19 National Health Plan resources for the general public, health professionals and industry are available from the [Australian Government Department of Health website](#).

The full item descriptors 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 advice service for providers seeking advice on interpretation of the MBS items and rules and the Health Insurance Act 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).

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 Services Australia on the Provider Enquiry Line – 13 21 50.

*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.*



Table 1: Midwife telehealth items introduced on 13 March 2020

Service	Existing Items face to face	Telehealth items via video-conference	Telephone items – for when video- conferencing is not available
Short antenatal attendance lasting up to 40 minutes	82105	91211	91218
Long antenatal attendance lasting at least 40 minutes	82110	91212	91219
Short postnatal attendance lasting up to 40 minutes	82130	91214	91221
Long postnatal attendance lasting at least 40 minutes	82135	91215	91222