



Continuing MBS Telehealth Services

Allied Health Providers

Last updated: 8 March 2023

- Medicare Benefit Schedule (MBS) telehealth services introduced on a temporary basis in response to the COVID-19 pandemic will now be permanent. Telehealth services provided by GPs, medical practitioners, nurse practitioners, participating midwives, allied health providers and dental practitioners in the practice of oral and maxillofacial surgery services will continue.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- The MBS telehealth items are for out-of-hospital patients.
- Providers are expected to obtain informed financial consent from patients prior to providing the service; providing details regarding their fees, including any out-of-pocket costs.

What are the changes?

From 1 January 2022 the COVID-19 allied health telehealth services introduced in response to the pandemic will continue to be available, this will include:

- 4 items for Allied Health Services for Chronic Disease Management;
- 4 follow-up allied health items for patients of Aboriginal and Torres Strait Islander descent;
- 2 allied health items for pregnancy support counselling;
- 8 allied health items for the assessment and treatment of patients with a suspected or diagnosed complex neurodevelopmental disorder (such as autism spectrum disorder) or eligible disability;
- 3 allied health items for Pre-COVID telehealth items retained.

As the Government progresses MBS modernisation, telehealth items will be consolidated into a single national program. This means that the now-obsolete items introduced in 2011 will be removed along with linked patient-end support items, excluding patient-end-support by practice nurses, Aboriginal health workers, Aboriginal and Torres Strait Islander health practitioners and optometrists.

Why are the changes being made?

The Australian Government committed on 13 December 2021 to make telehealth services that were introduced in response to COVID-19 a permanent part of Medicare. The introduction of these telehealth services has been a critical part of the COVID-19 National

Health Plan and transformational to Australia's universal health care program. Telehealth will continue to offer greater flexibility to patients and health care providers.

What does this mean for providers?

The MBS telehealth items allow providers to continue to deliver essential health care services to patients within their care.

Providers do not need to be in their regular practice to provide telehealth services. Providers 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 where it's clinically appropriate and safe to do so. The MBS telehealth items have the same clinical requirements as the corresponding face-to-face consultation items.

All MBS items for allied health services require a valid referral to the relevant allied health professional. A patient must be referred by an eligible medical practitioner, and services can form part of an eligible treatment, management or care plan, including:

- Chronic Disease Management Plans
- GP Management Plans
- Team Care Plans
- Multidisciplinary Care Plans
- Complex Neurodevelopmental Disorder Treatment Plan
- Disability Treatment Plan

Consolidation of the MBS telehealth program will result in the pre-COVID telehealth items and some linked services being removed or amended over time. Providers are encouraged to stay up to date with changes to these telehealth supportive services, and additional information will be made available ahead of future MBS updates.

Providers are also reminded of the November 2021 introduction of MBS items that better recognise allied participation in case conferencing, including by telehealth. More information can be found on [Allied Health Case Conferencing - Factsheet](#).

How will these changes affect patients?

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

Who was consulted on the changes?

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

How will the changes be monitored and reviewed?

The Department of Health and Aged Care continues to monitor the use of the MBS 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?

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. 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.

Allied Health Services

Table 1: Chronic Disease Management (CDM) items introduced on 30 March 2020

Service	Existing Items	Telehealth
	Face to Face (F2F) Only	Video – V Phone – P
Aboriginal or Torres Strait Islander health service	10950	93000 – Video 93013 – Phone
Diabetes education health service	10951	93000 – Video 93013 – Phone
Audiology health service	10952	93000 – Video 93013 – Phone
Exercise physiology service	10953	93000 – Video 93013 – Phone
Dietetics health service	10954	93000 – Video 93013 – Phone
Mental health service	10956	93000 – Video 93013 – Phone
Occupational therapy health service	10958	93000 – Video 93013 – Phone
Physiotherapy health service	10960	93000 – Video 93013 – Phone
Podiatry health service	10962	93000 – Video 93013 – Phone
Chiropractic health service	10964	93000 – Video 93013 – Phone
Osteopathy health service	10966	93000 – Video 93013 – Phone
Psychology health service	10968	93000 – Video

		93013 – Phone
Speech pathology health service	10970	93000 – Video 93013 – Phone

Table 2: Chronic Disease Management items introduced on 20 April 2020

Service	Existing Items face to face	Telehealth items via video-conference	Telephone items
CDM service provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner	10997	93201	93203

Table 3: Allied Health follow-up services for People of Aboriginal or Torres Strait Islander Descent introduced on 30 March 2020

Service	Existing Items Face to Face (F2F) Only	Telehealth Video – V Phone – P
Aboriginal or Torres Strait Islander health service	81300	93048 – Video 93061 – Phone
Diabetes education health service	81305	93048 – Video 93061 – Phone
Audiology health service	81310	93048 – Video 93061 – Phone
Exercise physiology service	81315	93048 – Video 93061 – Phone
Dietetics health service	81320	93048 – Video 93061 – Phone
Mental health service	81325	93048 – Video 93061 – Phone
Occupational therapy health service	81330	93048 – Video 93061 – Phone

Physiotherapy health service	81335	93048 – Video 93061 – Phone
Podiatry health service	81340	93048 – Video 93061 – Phone
Chiropractic health service	81345	93048 – Video 93061 – Phone
Osteopathy health service	81350	93048 – Video 93061 – Phone
Psychology health service	81355	93048 – Video 93061 – Phone
Speech pathology health service	81360	93048 – Video 93061 – Phone

Table 4: Allied Health follow-up services for People of Aboriginal or Torres Strait Islander Descent introduced on 20 April 2020

Service	Existing Items face to face	Telehealth items via video-conference	Telephone items
Follow up services provided by a practice nurse or Aboriginal and Torres Strait Islander health practitioner	10987	93200	93202

Table 5: Non-directive Pregnancy Support Counselling items introduced on 30 March 2020

Service	Existing Items face-to-face	Telehealth items via video-conference	Telephone items
Non-directive pregnancy support counselling by eligible psychologist, social worker or mental health nurse	81000, 81005, 81010	93026	93029

Table 6: Complex Neurodevelopmental Disorder (such as autism spectrum disorder) and Disability Services items introduced on 30 March 2020

Service	Existing Items face to face	Telehealth items via video-conference	Telephone items
Psychology assessment health service	82000	93032	93040
Speech pathology, occupational therapy, audiology, optometry, orthoptic or physiotherapy	82005, 82010, 82030	93033	93041
Psychology treatment health service	82015	93035	93043
Speech pathology, occupational therapy, audiology, optometry, orthoptic or physiotherapy treatment health service	82020, 82025, 82035	93036	93044

Table 7: Patient end support linked to Pre-COVID telehealth items retained from 1 January 2022

Service	Telehealth MBS Item
A professional attendance not being a service to which any other item applies) of less than 15 minutes by an attending optometrist that requires the provision of clinical support to a patient	10945
A professional attendance (not being a service to which any other item applies) of at least 15 minutes by an attending optometrist that requires the provision of clinical support to a patient	10946
Service by a practice nurse or Aboriginal health worker or Aboriginal and Torres Strait Islander health practitioner provided on behalf of, and under the supervision of, a medical practitioner that requires the provision of clinical support to a patient	10983

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