# **Medicare Benefits Schedule**

**Summary of Changes** 

**Effective 1 August 2009** 

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#### Summary of Additions, Deletions, and Revisions undertaken since 1 November 2008

New Items are indicated as "New". Deleted items are indicated as "Del".

Amended items are indicated as "Amend" Within revised items, the deleted language appears with a double strikethrough while new text appears underlined. These changes will be highlighted in yellow.

**Note:** Revisions to the headings, notes, introductory paragraphs, and cross references are not included in this summary of changes.

#### **New Items (New)**

### 1 July 2009

30696 30710 63476

#### 1 May 2009

66660 66607 66900 73062 73063 73064 73065

#### 1 March 2009

11823 32220 32221

#### 1 February 2009

63464 63467

# **Deleted Items (Del)**

No deleted items.

#### **Amended Description (Amend)**

#### 1 December 2008

61541 61544 61553 61556 61565 61568

#### 1 January 2009

10992

#### 1 February 2009

61462 61484 61485

### 1 May 2009

106	109	22055	22060	22065	22070	22075	35321	45720
45723	45726	45729	45731	45732	45735	45738	45741	45744

45747	45752	45857	45877	46300	46303	46396	47501	47504
47507	47510	47933	47936	47954	47957	47966	48400	48403
48406	48409	48412	48415	48418	48421	48424	48427	48939
48942	49106	49118	49200	49203	49224	49306	49360	49363
49366	49509	49512	49536	49539	49542	49545	49564	49566
49703	49712	49815	49845	50109	50118	50218	50312	50450
50451	63464	66605	66659	71200	73049	73059	73060	73061
73300	73314	73315						
1 July 20	09							
2517	2620	2710	2712	12533	22055	22065	22070	22075
2517 30168	2620 30171	2710 30684	2712 30686	12533 40801	22055 40850	22065 40851	22070 40852	22075 40854
30168	30171	30684	30686	40801	40850	40851	40852	40854
30168 40856 73059	30171 40858 73060	30684 40860	30686 40862	40801 45557	40850	40851	40852	40854
30168 40856	30171 40858 73060	30684 40860	30686 40862	40801 45557	40850	40851	40852	40854
30168 40856 73059	30171 40858 73060	30684 40860	30686 40862	40801 45557	40850	40851	40852	40854

# Assist (Added)

# 1 May 2009

47465

# **Amended Fee**

# 1 July 2009

65060	65066	65070	65072	65075	65078	65079	65081	65082
65084	65087	65090	65093	65096	65099	65102	65105	65108
65109	65110	65111	65114	65117	65120	65123	65126	65129
65137	65142	65144	65147	65150	65153	65156	65157	65158
65159	65162	65165	65166	65171	65175	65176	65177	65178
65179	65180	65181	66517	66518	66519	66536	66539	66542
66545	66548	66551	66554	66557	66560	66563	66566	66569
66572	66575	66578	66581	66584	66587	66590	66593	66596

66599	66602	66605	66606	66608	66609	66623	66626	66629
66632	66635	66638	66639	66641	66642	66644	66647	66650
66651	66652	66653	66655	66656	66659	66662	66663	66665
66666	66667	66671	66674	66677	66680	66683	66686	66711
66712	66714	66715	66716	66719	66722	66723	66724	66725
66728	66731	66734	66743	66749	66750	66751	66752	66756
66757	66758	66761	66764	66767	66770	66773	66776	66779
66780	66782	66783	66785	66788	66789	66790	66791	66792
66800	66803	66804	66805	66806	66812	66815	66816	66817
66819	66820	66821	66822	66825	66826	66827	66828	66830
71057	71058	71059	71060	71062	71064	71066	71068	71069
71071	71072	71073	71074	71075	71076	71077	71079	71081
71083	71085	71087	71089	71090	71091	71092	71093	71095
71096	71097	71099	71101	71103	71106	71119	71121	71123
71125	71127	71129	71131	71133	71134	71135	71137	71139
71141	71143	71145	71146	71147	71148	71149	71151	71153
71154	71155	71156	71157	71159	71163	71164	71165	71166
71167	71168	71169	71170	71180	71183	71186	71189	71192
71195	71198	71200	71203	72830	72836	72838	72846	72847
72848	72849	72850	73287	73289	73300	73305	73308	73309
73311	73312	73314	73315	73317	73318	73320	73321	73323
73521	73523	73525	73527	73529				

# 1 May 2009

66638 73049

# CHANGES TO ALLIED HEALTH SERVICES - effective 1 January 2009

From 1 January 2009, the requirement to claim a rebate for chronic disease management care planning items before items 10950 - 10970 and 81100 - 81125 can be claimed will be removed. However, note that eligibility requirements for these items have not changed.

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SUMMARY OF ADDITIONS, DELETIONS, AND REVISIONS UNDERTAKEN SINCE 1 NOVEMBER 2008	
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90170	

# **Allied Health Services**

	GROUP M7 - FOCUSSED PSYCHOLOGICAL STRATEGIES
	(ALLIED MENTAL HEALTH)
	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a <b>psychologist</b> registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.
‡	These services are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 and the Better Outcomes in Mental Health Care Program Access To Allied Psychological Services apply). Claims for this service may exceed this maximum session limit, however, where exceptional circumstances apply.
80100 Amend 1 August 2009	(Professional attendance at consulting rooms) (See para M7.1 of explanatory notes to this Category)  Fee: \$65.30  Benefit: 85% = \$55.55
	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a <b>psychologist</b> registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.
‡ 80110	These services are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 and the Better Outcomes in Mental Health Care Program Access To Allied Psychological Services apply). Claims for this service may exceed this maximum session limit, however, where exceptional circumstances apply.
Amend 1 August 2009	(Professional attendance at consulting rooms) (See para M7.1 of explanatory notes to this Category)  Fee: \$92.20  Benefit: 85% = \$78.40
	Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a <b>psychologist</b> registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics.
‡ 80120	These therapies are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 80020, 80145 and 80170 apply).
Amend 1 August 2009	GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT  (See para M7.1 of explanatory notes to this Category)  Fee: \$23.50  Benefit: 85% = \$20.00

Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These services are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 and the Better Outcomes in Mental Health Care Program Access To Allied Psychological Services apply). Claims for this service may exceed this maximum session limit, however, where exceptional circumstances apply. 80125 Amend (Professional services at consulting rooms) 1 August (See para M7.1 of explanatory notes to this Category) 2009 **Fee:** \$57.55 **Benefit:** 85% = \$48.95 Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service - lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These services are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 and the Better Outcomes in Mental Health Care Program Access To Allied Psychological Services apply). Claims for this service may exceed this maximum session limit, however, where exceptional circumstances apply. 80135 Amend (Professional attendance at consulting rooms) 1 August (See para M7.1 of explanatory notes to this Category) 2009 **Fee:** \$81.25 **Benefit:** 85% = \$69.10 Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by an occupational therapist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 80020, 80120 and 80170 apply). 80145 Amend GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT 1 August (See para M7.1 of explanatory notes to this Category) 2009 Fee: \$20.65 **Benefit:** 85% = \$17.60

Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service lasting more than 20 minutes, but not more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These services are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 and the Better Outcomes in Mental Health Care Program Access To Allied Psychological Services apply). Claims for this service may exceed this maximum session limit, however, where exceptional circumstances apply. 80150 Amend (Professional attendance at consulting rooms) 1 August (See para M7.1 of explanatory notes to this Category) 2009 **Benefit:** 85% = \$48.95 **Fee:** \$57.55 Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service lasting more than 50 minutes - where the patient is referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These services are time limited, being deliverable, in general, in up to 12 planned sessions in a calendar year (including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 and the Better Outcomes in Mental Health Care Program Access To Allied Psychological Services apply). Claims for this service may exceed this maximum session limit, however, where exceptional circumstances apply. 80160 (Professional attendance at consulting rooms) Amend (See para M7.1 of explanatory notes to this Category) 1 August 2009 **Fee:** \$81.25 **Benefit:** 85% = \$69.10Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a social worker registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Care Treatment Plan; or a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable, in general, in up to 12 planned ‡ sessions in a calendar year (including services to which items 80020, 80120 and 80145 apply). 80170 Amend GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT 1 August (See para M7.1 of explanatory notes to this Category) 2009 **Benefit:** 85% = \$17.60 **Fee:** \$20.65