

Focusing on MBS Item Numbers to Keep People Well

This is a summary of General Practice Medicare Benefits Schedule Items. Refer to [MBS Online](#) for complexity of care requirements for each item number.

Where will this patient be in one year? Five years?

EACH VISIT: Quality Records - Demographics; Medications; Allergies; Family and Social History; Manage recalls, Mark correspondence as given

Consultation	Prevention	First Nations Patients	Chronic Condition Management	Mental Health	My Health Record
<u>Item Numbers:</u>	Health Assessment Items 701,703,705,707				
Level A (3): Brief Telehealth: 91790 Telephone: 91890	<ul style="list-style-type: none"> ➤ Over 75 (annually) ➤ RACF Residents (annually) ➤ Intellectual disability (annually) ➤ 40-49 year olds at high risk of diabetes (3 yearly) 	<ul style="list-style-type: none"> ➤ Register patient for Close the Gap (CTG) ➤ At risk – CTG Pharmaceutical benefits program <p>Health Assessment – All Ages</p> <ul style="list-style-type: none"> ➤ <u>Face to Face: Item 715</u> <u>Telehealth: 92004</u> Annually with a Minimum period of 9 months. 	<ul style="list-style-type: none"> ➤ A chronic medical condition which has been present or likely to be present for six months or longer 	<ul style="list-style-type: none"> ➤ GP Mental Health treatment Plans <p><u>Item 2713 > 20 mins</u> <u>Telehealth: 92115</u> <u>Telephone: 92127</u></p>	<ul style="list-style-type: none"> ➤ <u>Item 3/23</u> Can be claimed for preparation and uploading of My Health Record summary.
Level B (23): < 20 min Telehealth: 91800 Telephone: 91891	<ul style="list-style-type: none"> ➤ 40-49 year at risk of chronic condition (once-only) ➤ Refugees (once-only) ➤ Veterans (once-only) <p>Item 699</p> <ul style="list-style-type: none"> ➤ Heart Health Assessment Cardiovascular Risk calculator 	<p>Follow-up visit with Practice Nurse (PN)/Aboriginal Health Worker (AHW) on completion of 715.</p> <ul style="list-style-type: none"> 10 visits per year <p>Item 10987 <u>Telephone: 93202</u> <u>Telehealth: 93200</u></p>	<p>Item 965: Face to Face GP Chronic Condition Management Plan (GPCCMP)</p> <p>Follow-up visit with PN/AHW on completion of 965.</p> <ul style="list-style-type: none"> 5 visits per year. <p>Item 967: Review GP Chronic Condition Management Plan <u>Video Telehealth: 92029</u></p> <p>Item 10997 Follow-up visit with PN/AHW on completion of 965.</p> <ul style="list-style-type: none"> 5 visits per year. <p>Item 965, 967 for patients with chronic disease Follow-up:</p> <ul style="list-style-type: none"> ➤ <u>Telephone: 93203</u> ➤ <u>Video Telehealth: 93201</u> 	<p><u>Item 2700 (no training)</u> <u>Telehealth: 92112</u> <u>Item 2701 (no training)</u> <u>Telehealth: 92113</u> <u>Item 2715 (with mental health skills training)</u> <u>Telehealth: 92116</u> <u>Item 2717 (with mental health skills training)</u> <u>Telehealth: 92117</u></p> <ul style="list-style-type: none"> ➤ Review GP Mental Health Treatment Plan <p>Item 2712 <u>Telehealth: 92114</u> <u>Telephone: 92126</u></p>	<ul style="list-style-type: none"> ➤ Focus on: <ul style="list-style-type: none"> • First Nations patients • Patients with a chronic condition • Children • Pregnant women • Older Persons/RACF patients
<u>Item 123* ≥ 60 min</u> Bulk billing incentive Medicare co-payment for DVA, under 16 and Commonwealth Concession Card holders: <u>Item 10990 & 10991:</u>	<p>Item 139</p> <ul style="list-style-type: none"> ➤ Disability - early intervention <p>Item 715</p> <ul style="list-style-type: none"> ➤ Indigenous (9 months) <p>Item 900</p> <ul style="list-style-type: none"> ➤ Domiciliary Medication Review <p>-----</p> <ul style="list-style-type: none"> ▪ Family and social history ▪ Lifestyle ▪ Height, weight, blood pressure ▪ Screening – Bowel, breast, cervical, skin, prostate 	<p>GP Chronic Condition Management Plan (GPCCMP)</p>	<p>Follow-up visit with PN/AHW on completion of 965.</p> <ul style="list-style-type: none"> 5 visits per year. <p>Telephone: 93203 Video Telehealth: 93201</p>		