

MBS QUICK GUIDE JULY 2022

100% rebate for Medicare Benefits Schedule fee listed. 75% and/or 85% rebates apply to items marked *

ROUTINE HOURS CONSULTATIONS

IN THE SURGERY

Item no		
3	\$18.20	(Level A) Brief
23	\$39.75	(Level B) Standard < 20 mins
36	\$76.95	(Level C) Long 20-40 mins
44	\$113.30	(Level D) Prolonged ≥ 40 mins

RESIDENTIAL AGED CARE FACILITY (RACF)

90001	\$58.15	Flag fall service for each visit, first patient seen only. Applies to return visits same day, except for continuation of earlier episode of care.
90020	\$18.20	Brief (applicable to each patient seen)
90035	\$39.75	Standard (applicable to each patient seen)
90043	\$76.95	Long (applicable to each patient seen)
90051	\$113.30	Prolonged (applicable to each patient seen)

HOME/INSTITUTION/HOSPITAL VISITS (EXCLUDING RACF)

	One patient seen	
4	\$46.05*	Brief
24	\$67.60*	Standard
37	\$104.80*	Long
47	\$141.15*	Prolonged

AFTER HOURS CONSULTATIONS – NON-URGENT

(Mon-Fri: before 8am/after 6 or 8pm*; Sat: before 8am/after noon or 1pm*; Sun/Public holiday: all day) * Later times apply to surgery consults

IN THE SURGERY

Item no		
5000	\$30.65	Brief
5020	\$51.80	Standard
5040	\$88.80	Long
5060	\$124.50	Prolonged

RESIDENTIAL AGED CARE FACILITY (RACF)

	One patient seen	
5010	\$80.05	Brief
5028	\$101.20	Standard
5049	\$138.20	Long
5067	\$173.90	Prolonged

HOME/INSTITUTION VISITS (EXCLUDING HOSPITAL/RACF)

	One patient seen	
5003	\$58.10	Brief
5023	\$79.25	Standard
5043	\$116.25	Long
5063	\$151.95	Prolonged

AFTER HOURS CONSULTATIONS – URGENT

585	\$137.25*	Urgent after hours (Mon-Fri: 7-8am, 6-11pm; Sat: 7-8am, 12noon-11pm; Sun/Public holiday: 7am-11pm)
599	\$161.75*	Urgent unsociable hours (between 11pm-7am)

HEALTH ASSESSMENTS

Item no			ELIGIBLE GROUPS
701	\$62.75	Brief < 30 mins	<ul style="list-style-type: none"> • 40-49-year-olds at high risk of diabetes (3 YEARLY) • 45-49-year-olds at risk of developing chronic disease (ONCE ONLY) • People aged ≥ 75 years (ANNUALLY) • Permanent RACF residents (ANNUALLY) • People with intellectual disability (ANNUALLY) • Refugees with Medicare access (ONCE ONLY) • Former serving members of the ADF (ONCE ONLY)
703	\$145.80	Standard 30-45 mins	
705	\$201.15	Long 45-60 mins	
707	\$284.20	Prolonged ≥ 60 mins	
715	\$224.40	Indigenous health assessment (every 9 months)	
699	\$76.95	Heart health assessment, lasting at least 20 mins (annually), available to people aged ≥ 30 years and older	

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CHRONIC DISEASE/ COMPLEX CARE MANAGEMENT

Item no		
721	\$152.50*	GP Management Plan (GPMP)
723	\$120.85*	Team Care Arrangement (TCA)
732	\$76.15*	Review of GPMP/TCA
10997	\$12.70	Service to patient with GPMP/TCA by practice nurse/ Aboriginal health practitioner (up to 5 per year)
10987	\$25.35	Service to an Indigenous patient, following health assessment, by practice nurse or Aboriginal health practitioner (up to 10 per year)
139	\$142.20	Assessment, diagnosis and management plan for a child under 13 with an eligible disability (see MBS)
729	\$74.40	Contribution/review of multidisciplinary care plan prepared by another provider, non-RACF resident
731	\$74.40	Contribution to/review of multidisciplinary care plan prepared by another provider, RACF resident
900	\$163.70	Domiciliary medication management review
903	\$112.05	Residential medication management review

MENTAL HEALTH

Item no		
GP mental health treatment plan, WITHOUT mental health skills training		
2700	\$75.80*	• 20-39 min consultation
2701	\$111.60*	• ≥ 40 min consultation
WITH mental health skills training		
2715	\$96.25*	• 20-39 min consultation
2717	\$141.80*	• ≥ 40 min consultation
2712	\$75.80*	Review of GP mental health treatment plan
2713	\$75.80	Mental health consultation lasting ≥ 20 mins
GP eating disorders treatment plan, WITHOUT mental health skills training		
90250	\$75.80	• 20-39 min consultation
90251	\$111.60	• ≥ 40 min consultation
WITH mental health skills training		
90252	\$96.25	• 20-39 min consultation
90253	\$141.80	• ≥ 40 min consultation
90264	\$75.80	GP review of eating disorders treatment and management plan

WOMEN'S HEALTH

Item no		
73806	\$10.15*	Urine pregnancy test
16500	\$49.85*	Routine antenatal attendance
16591	\$150.75*	Management of pregnancy >28/40 (including mental health assessment) by shared care GP who is not planning to perform the delivery
14206	\$37.65*	Administration of hormone implant by cannula (including Implanon)
30062	\$64.20*	Removal of Implanon
35503	\$84.75*	Insertion of IUD

DIAGNOSTIC PROCEDURES

Item no		
11505	\$43.50*	Diagnostic spirometry – pre and post bronchodilator (one annually)
11506	\$21.75*	Disease monitoring spirometry – pre and post bronchodilator
11707	\$19.45*	12-lead ECG tracing only, no report
11607	\$108.90*	24-hr BP for suspected hypertension (patient not treated), including report and treatment plan
73812	\$11.80*	Hba1c point-of-care (POC) test for established diabetes, done by or on behalf of GP at an accredited practice for POC testing
73826	\$11.80*	Hba1c POC test for established diabetes, done by nurse practitioner at an accredited practice for POC testing

MINOR PROCEDURES *

Item no		
30071	\$55.20*	Diagnostic biopsy of skin
30072	\$55.20*	Diagnostic biopsy of mucous membrane
30192	\$41.80*	Ablative treatment of 10 or more premalignant skin lesions
30196	\$133.45*	Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed), by serial curettage or laser excision/ablation
30202	\$51.10*	Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed) by cryotherapy using repeat freeze thaw cycles
30064	\$116.15*	Removal of subcutaneous foreign body, requiring incision and exploration +/- wound closure
30061	\$24.85*	Removal of superficial foreign body, including cornea/sclera
30216	\$28.90*	Aspiration of haematoma
30219	\$28.90*	Incision and drainage of abscess/haematoma (excluding aftercare)
41500	\$87.15*	Removal of foreign body from ear (other than by simple syringing)
		Wound repair, ≤ 7cm, superficial
30026	\$55.20*	• not face or neck
30032	\$87.15*	• face or neck
		Wound repair, ≤ 7cm, deep
30029	\$95.15*	• not face or neck
30035	\$124.30*	• face or neck
47904	\$59.70*	Toenail removal
47915	\$179.15*	Ingrown toenail (wedge resection)
47916	\$90.00*	Ingrown toenail (phenol/electrocautery/laser to nail bed)
32147	\$47.65*	Incision of perianal thrombosis
32072	\$50.60*	Sigmoidoscopic examination
30003	\$38.40*	Dressing of localised burns

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