

MBS QUICK GUIDE SEPTEMBER 2025

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

ROUTINE HOURS CONSULTATIONS			AFTER HOURS CONSULTATIONS – NON-URGENT		
IN THE SURGERY			IN THE SURGERY		
Item no			Item no		
3	\$20.05	Level A (Brief)	5000	\$33.80	Level A
23	\$43.90	Level B (Standard 6-19 minutes)	5020	\$57.15	Level B
36	\$84.90	Level C (Long 20-39 minutes)	5040	\$98.00	Level C
44	\$125.10	Level D (Prolonged 40-59 minutes)	5060	\$137.40	Level D
123	\$202.65	Level E (Prolonged ≥ 60minutes)	5071	\$233.40	Level E
RESIDENTIAL AGED CARE FACILITY (RACF)			RESIDENTIAL AGED CARE FACILITY (RACF)		
90001	\$64.15	Flag fall service for each visit, first patient seen only. Applies to return visits same day, except for continuation of earlier episode of care.	One patient seen		
90020	\$20.05	Level A (applicable to each patient seen)	5010	\$88.35	Level A
90035	\$43.90	Level B (applicable to each patient seen)	5028	\$111.70	Level B
90043	\$84.90	Level C (applicable to each patient seen)	5049	\$152.55	Level C
90051	\$125.10	Level D (applicable to each patient seen)	5067	\$191.95	Level D
90054	\$202.65	Level E (applicable to each patient seen)	5077	\$287.95	Level E
HOME/INSTITUTION/HOSPITAL VISITS (EXCLUDING RACF)			HOME/INSTITUTION VISITS (EXCLUDING HOSPITAL/RACF)		
One patient seen			One patient seen		
4	\$50.75*	Level A	5003	\$64.10	Level A
24	\$74.60*	Level B	5023	\$87.45	Level B
37	\$115.60*	Level C	5043	\$128.30	Level C
47	\$155.80*	Level D	5063	\$167.70	Level D
124	\$233.35*	Level E	5076	\$263.70	Level E
AFTER HOURS CONSULTATIONS – URGENT					
585	\$151.45*	Urgent after hours (Mon-Fri: 7-8am, 6-11pm; Sat: 7-8am, 12noon-11pm; Sun/Public holiday: 7am-11pm)	599	\$178.50*	Urgent unsociable hours (between 11pm-7am)
HEALTH ASSESSMENTS					
695	\$101.90	Menopause and perimenopause health assessment, ≥ 20mins	699	\$84.90	Heart health assessment (annually), ≥ 20mins, age ≥ 30yrs
			715	\$247.65	Indigenous health assessment (every 9 months)
ELIGIBLE GROUPS					
<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) 					
701	\$69.20	Brief < 30 mins	• Moved to civilian life from 1 July 2019	• Served at least 1 day	• First 5 yrs after transition
703	\$160.85	Standard 30-45 mins	• Have DVA card		
705	\$222.00	Long 45-60 mins			
707	\$313.60	Prolonged ≥ 60 mins			
DVA ANNUAL VETERANS HEALTH CHECK – ELIGIBLE GROUPS					
<ul style="list-style-type: none"> • Moved to civilian life from 1 July 2019 • Served at least 1 day • Have DVA card • First 5 yrs after transition 					
Item no			DVA fee		
MT701			\$77.75		Brief < 30 mins
MT703			\$180.70		Standard 30-45 mins
MT705			\$249.35		Long 45-60mins
MT707			\$352.20		Prolonged ≥ 60mins

Summary of bulk billing incentives: bit.ly/3QxnqgP



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CHRONIC DISEASE/COMPLEX CARE MANAGEMENT

Item no		
965	\$156.55*	Prepare a GP chronic condition management plan (GPCCMP)
967	\$156.55*	Review of GPCCMP
10997	\$14.00	Service to patient with GPMP/TCA by practice nurse/ Aboriginal health practitioner (up to 5 per year)
10987	\$27.95	Service to an Indigenous patient, following health assessment, by practice nurse or Aboriginal health practitioner (up to 10 per year)
139	\$156.95	Assessment, diagnosis and plan for patient aged <25 with an eligible disability (see MBS), lasting ≥ 45 mins
729	\$82.10	Contribution/review of multidisciplinary care plan prepared by another provider, non-RACF resident
731	\$82.10	Contribution to/review of multidisciplinary care plan prepared by another provider, RACF resident
900	\$180.65	Domiciliary medication management review
903	\$123.70	Residential medication management review

WOMEN'S HEALTH

Item no		
73806	\$10.15*	Urine pregnancy test
16500	\$55.00*	Routine antenatal attendance
16591	\$166.40*	Management of pregnancy >28/40 (including mental health assessment) by shared care GP who is not planning to perform the delivery
16407	\$83.65*	4-8 weeks postnatal attendance, > 20 min, including mental health and DV assessment
14206	\$41.50*	Administration of hormone implant by cannula (including Implanon)
30062	\$70.85*	Removal of Implanon
35503	\$93.55*	Insertion of IUD

DIAGNOSTIC PROCEDURES

Item no		
11505	\$48.05*	Diagnostic spirometry – pre and post bronchodilator (one annually)
11506	\$24.00*	Disease monitoring spirometry – pre and post bronchodilator
11707	\$21.45*	12-lead ECG tracing only, no report
11607	\$120.10*	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	\$60.95*	Diagnostic biopsy of skin
30072	\$60.95*	Diagnostic biopsy of mucous membrane
30192	\$46.10*	Ablative treatment of 10 or more premalignant skin lesions
30196	\$147.25*	Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed), by serial curettage or laser excision/ablation
30202	\$56.35*	Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed) by cryotherapy using repeat freeze thaw cycles
30064	\$128.20*	Removal of subcutaneous foreign body, requiring incision and exploration +/- wound closure
30061	\$27.45*	Removal of superficial foreign body, including cornea/sclera
30216	\$31.90*	Aspiration of haematoma
30219	\$31.90*	Incision and drainage of abscess/haematoma (excluding aftercare)
41500	\$96.20*	Removal of foreign body from ear (other than by simple syringing)
		Wound repair, ≤ 7cm, superficial
30026	\$60.95*	• not face or neck
30032	\$96.20*	• face or neck
		Wound repair, ≤ 7cm, deep
30029	\$105.00*	• not face or neck
30035	\$137.15*	• face or neck
47904	\$65.90*	Toenail removal
47915	\$197.75*	Ingrown toenail (wedge resection)
47916	\$99.35*	Ingrown toenail (phenol/electrocautery/laser to nail bed)
32147	\$52.60*	Incision of perianal thrombosis
32072	\$55.80*	Sigmoidoscopic examination
30003	\$42.40*	Dressing of localised burns



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