

## MBS QUICK GUIDE MAY 2023

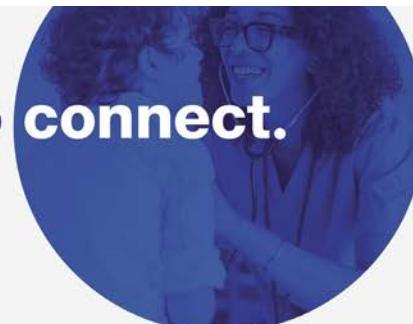
100% rebate for Medicare Benefits Schedule fee listed. 75% and/or 85% rebates apply to items marked \*

ROUTINE HOURS CONSULTATIONS			AFTER HOURS CONSULTATIONS – NON-URGENT		
IN THE SURGERY			IN THE SURGERY		
<b>Item no</b>			<b>Item no</b>		
<b>3</b>	\$18.20	(Level A) Brief	<b>5000</b>	\$30.65	Brief
<b>23</b>	\$39.75	(Level B) Standard < 20 mins	<b>5020</b>	\$51.80	Standard
<b>36</b>	\$76.95	(Level C) Long 20-40 mins	<b>5040</b>	\$88.80	Long
<b>44</b>	\$113.30	(Level D) Prolonged ≥ 40 mins	<b>5060</b>	\$124.50	Prolonged
<b>RESIDENTIAL AGED CARE FACILITY (RACF)</b>					
<b>90001</b>	\$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.	<b>RESIDENTIAL AGED CARE FACILITY (RACF)</b>		
<b>90020</b>	\$18.20	Brief (applicable to each patient seen)	<b>One patient seen</b>		
<b>90035</b>	\$39.75	Standard (applicable to each patient seen)	<b>5010</b>	\$80.05	Brief
<b>90043</b>	\$76.95	Long (applicable to each patient seen)	<b>5028</b>	\$101.20	Standard
<b>90051</b>	\$113.30	Prolonged (applicable to each patient seen)	<b>5049</b>	\$138.20	Long
<b>HOME/INSTITUTION/HOSPITAL VISITS (EXCLUDING RACF)</b>					
<b>One patient seen</b>			<b>One patient seen</b>		
<b>4</b>	\$46.05*	Brief	<b>5003</b>	\$58.10	Brief
<b>24</b>	\$67.60*	Standard	<b>5023</b>	\$79.25	Standard
<b>37</b>	\$104.80*	Long	<b>5043</b>	\$116.25	Long
<b>47</b>	\$141.15*	Prolonged	<b>5063</b>	\$151.95	Prolonged
<b>AFTER HOURS CONSULTATIONS – URGENT</b>					
<b>585</b>	\$137.25*	Urgent after hours (Mon-Fri: 7-8am, 6-11pm; Sat: 7-8am, 12noon-11pm; Sun/Public holiday: 7am-11pm)	<b>599</b>	\$161.75*	Urgent unsociable hours (between 11pm-7am)
<b>HEALTH ASSESSMENTS</b>					
<b>715</b>	\$224.40	Indigenous health assessment (every 9 months)	<b>699</b>	\$76.95	Heart health assessment (annually), ≥ 20mins, age ≥ 30yrs
<b>ELIGIBLE GROUPS</b>					
• 40-49-year-olds at high risk of diabetes (3 YEARLY)	• People aged ≥ 75 years (ANNUALLY)	disability (ANNUALLY)	• Moved to civilian life from 1 July 2019	• Served at least 1 day	• First 5 yrs after transition
• 45-49-year-olds at risk of developing chronic disease (ONCE ONLY)	• Permanent RACF residents (ANNUALLY)	• Refugees with Medicare access (ONCE ONLY)	• Have DVA card		
<b>701</b>	\$62.75	• People with intellectual	• Former serving members of the ADF (ONCE ONLY)		
<b>703</b>	\$145.80	Brief < 30 mins			
<b>705</b>	\$201.15	Standard 30-45 mins			
<b>707</b>	\$284.20	Long 45-60 mins			
		Prolonged ≥ 60 mins			
<b>DVA ANNUAL VETERANS HEALTH CHECK – ELIGIBLE GROUPS</b>					
• 40-49-year-olds at high risk of diabetes (3 YEARLY)	• People aged ≥ 75 years (ANNUALLY)	disability (ANNUALLY)	• Moved to civilian life from 1 July 2019	• Served at least 1 day	• First 5 yrs after transition
• 45-49-year-olds at risk of developing chronic disease (ONCE ONLY)	• Permanent RACF residents (ANNUALLY)	• Refugees with Medicare access (ONCE ONLY)	• Have DVA card		
<b>Item no</b>		<b>DVA fee</b>			
<b>MT701</b>		\$72.20	Brief < 30 mins		
<b>MT703</b>		\$167.70	Standard 30-45 mins		
<b>MT705</b>		\$231.35	Long 45-60mins		
<b>MT707</b>		\$326.28	Prolonged ≥ 60mins		

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## CHRONIC DISEASE/COMPLEX CARE MANAGEMENT

Item no		
<b>721</b>	\$152.50*	GP Management Plan (GPMP)
<b>723</b>	\$120.85*	Team Care Arrangement (TCA)
<b>732</b>	\$76.15*	Review of GPMP/TCA
<b>10997</b>	\$12.70	Service to patient with GPMP/TCA by practice nurse/ Aboriginal health practitioner (up to 5 per year)
<b>10987</b>	\$25.35	Service to an Indigenous patient, following health assessment, by practice nurse or Aboriginal health practitioner (up to 10 per year)
<b>139</b>	\$142.20	Assessment, diagnosis and plan for patient aged <25 with an eligible disability (see MBS), lasting ≥ 45 mins
<b>729</b>	\$74.40	Contribution/review of multidisciplinary care plan prepared by another provider, non-RACF resident
<b>731</b>	\$74.40	Contribution to/review of multidisciplinary care plan prepared by another provider, RACF resident
<b>900</b>	\$163.70	Domiciliary medication management review
<b>903</b>	\$112.05	Residential medication management review

## MENTAL HEALTH

		<b>GP mental health treatment plan, WITHOUT mental health skills training</b>
<b>2700</b>	\$75.80*	• 20-39 min consultation
<b>2701</b>	\$111.60*	• ≥ 40 min consultation
		<b>WITH mental health skills training</b>
<b>2715</b>	\$96.25*	• 20-39 min consultation
<b>2717</b>	\$141.80*	• ≥ 40 min consultation
<b>2712</b>	\$75.80*	Review of GP mental health treatment plan
<b>2713</b>	\$75.80	Mental health consultation lasting ≥ 20 mins
		<b>GP eating disorders treatment plan, WITHOUT mental health skills training</b>
<b>90250</b>	\$75.80	• 20-39 min consultation
<b>90251</b>	\$111.60	• ≥ 40 min consultation
		<b>WITH mental health skills training</b>
<b>90252</b>	\$96.25	• 20-39 min consultation
<b>90253</b>	\$141.80	• ≥ 40 min consultation
<b>90264</b>	\$75.80	GP review of eating disorders treatment and management plan

## WOMEN'S HEALTH

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

## DIAGNOSTIC PROCEDURES

Item no		
<b>11505</b>	\$43.50*	Diagnostic spirometry – pre and post bronchodilator (one annually)
<b>11506</b>	\$21.75*	Disease monitoring spirometry – pre and post bronchodilator
<b>11707</b>	\$19.45*	12-lead ECG tracing only, no report
<b>11607</b>	\$108.90*	24-hr BP for suspected hypertension (patient not treated), including report and treatment plan
<b>73812</b>	\$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
<b>73826</b>	\$11.80*	HbA1c POC test for established diabetes, done by nurse practitioner at an accredited practice for POC testing

## MINOR PROCEDURES

Item no		
<b>30071</b>	\$55.20*	Diagnostic biopsy of skin
<b>30072</b>	\$55.20*	Diagnostic biopsy of mucous membrane
<b>30192</b>	\$41.80*	Ablative treatment of 10 or more premalignant skin lesions
<b>30196</b>	\$133.45*	Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed), by serial curettage or laser excision/ablation
<b>30202</b>	\$51.10*	Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed) by cryotherapy using repeat freeze thaw cycles
<b>30064</b>	\$116.15*	Removal of subcutaneous foreign body, requiring incision and exploration +/- wound closure
<b>30061</b>	\$24.85*	Removal of superficial foreign body, including cornea/sclera
<b>30216</b>	\$28.90*	Aspiration of haematoma
<b>30219</b>	\$28.90*	Incision and drainage of abscess/haematoma (excluding aftercare)
<b>41500</b>	\$87.15*	Removal of foreign body from ear (other than by simple syringing)
<b>30026</b>	\$55.20*	Wound repair, ≤ 7cm, superficial <ul style="list-style-type: none"> <li>• not face or neck</li> </ul>
<b>30032</b>	\$87.15*	<ul style="list-style-type: none"> <li>• face or neck</li> </ul>
<b>30029</b>	\$95.15*	Wound repair, ≤ 7cm, deep <ul style="list-style-type: none"> <li>• not face or neck</li> </ul>
<b>30035</b>	\$124.30*	<ul style="list-style-type: none"> <li>• face or neck</li> </ul>
<b>47904</b>	\$59.70*	Toenail removal
<b>47915</b>	\$179.15*	Ingrown toenail (wedge resection)
<b>47916</b>	\$90.00*	Ingrown toenail (phenol/electrocautery/laser to nail bed)
<b>32147</b>	\$47.65*	Incision of perianal thrombosis
<b>32072</b>	\$50.60*	Sigmoidoscopic examination
<b>30003</b>	\$38.40*	Dressing of localised burns

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