



Health Insurance Legislation Amendment (2022 Measures No. 1) Determination 2022

I, Louise Riley, delegate of the Minister for Health and Aged Care, make the following Determination.

Dated 17 January 2022

Louise Riley
Acting First Assistant Secretary
Medical Benefits Division
Health Resourcing Groups
Department of Health

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1 Name

This instrument is the *Health Insurance Legislation Amendment (2022 Measures No. 1) Determination 2022*.

2 Commencement

- (1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

Commencement information		
Column 1	Column 2	Column 3
Provisions	Commencement	Date/Details
1. Sections 1 to 4	Immediately after registration of this instrument.	
2. Schedule 1	This Schedule is taken to have commenced on 1 January 2022.	
3. Schedule 2	The day after registration of this instrument.	

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

- (2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

This instrument is made under subsection 3C(1) of the *Health Insurance Act 1973*.

4 Schedules

Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1 – amendments to remote service options

Health Insurance (Section 3C General Medical Services – Telehealth and Telephone Attendances) Determination 2021

1. Section 4

Repeal the section, substitute:

4 Cessation

Unless earlier revoked:

- (a) Schedules 6 to 8 of this instrument cease as if revoked on 30 June 2022 at 11.59pm; and
- (b) Schedule 5 of this instrument ceases as if revoked on 30 June 2023 at 11.59pm.

2. Subsection 5(1)

Insert:

admitting dental practitioner means the dental practitioner responsible for the patient's treatment at the time the patient is admitted to hospital.

admitting medical practitioner means the medical practitioner responsible for the patient's treatment at the time the patient is admitted to hospital.

3. Subsection 5(1) (definition of *psychiatrist assessment and management plan*)

Omit "92435 or", substitute "92435, 92475 or".

4. After subsection 7(1)

Insert:

(1A) Subsection (1) does not apply to an item in Schedule 6 of this Determination.

5. Subsection 7(4)

Omit "92455 to 92457", substitute "92455 to 92457 and 92495 to 92497".

6. Schedule 2 (item 92624, cell at column 2)

Omit "92623", substitute "92623 or 92628" (wherever occurring).

7. Schedule 3 (clauses 3.1.2, 3.1.3 and 3.1.5)

Repeal the clauses, substitute:

3.1.2 Referrals by psychiatrists and paediatricians for pervasive developmental disorder services

- (1) This section applies to items in Subgroups 15 and 16 of Group M18.
- (2) For items 93032, 93033, 93040 and 93041 the referral by a consultant physician specialising in the practice of his or her field of psychiatry must be a referral for a service to which any of items 296 to 352 of the general medical services or to which any of items 91827, 91828, 91829, 91830, 91831, 91837, 91838, 91839, 91840, 91841, 92437, 92455, 92456, 92457, 92458, 92459, 92460, 92477, 92495, 92496, 92497, 92498, 92499 or 92500 applies.
- (3) For items 93032, 93033, 93040 and 93041 the referral by a consultant physician specialising in the practice of his or her field of paediatrics must be a referral for a service to which any of items 110 to 131 of the general medical services table or to which any of items 91824, 91825, 91826, 91834, 91835 or 91836 applies.
- (4) For items 93035, 93036, 93043 and 93044 the referral by a consultant physician specialising in the practice of his or her field of psychiatry must be a referral for a service to which item 289 of the general medical services table or to which item 92434 or 92474 applies.
- (5) If a child has previously been provided with a service mentioned in item 289 of the general medical services table or item 92434 or 92474, a consultant physician specialising in the practice of his or her field of psychiatry may only refer the child for a service to which any of items 296 to 352 of the general medical services table or to which any of items 91827, 91828, 91829, 91830, 91831, 91837, 91838, 91839, 91840, 91841, 92437, 92455, 92456, 92457, 92458, 92459 or 92460, 92474, 92477, 92495, 92496, 92497, 92498, 92499 or 92500 applies.
- (6) For items 93035, 93036, 93043 and 93044 the referral by a consultant physician specialising in the practice of his or her field of paediatrics must be a referral for a service to which item 135 of the general medical services table or to which item 92140 or 92143 applies.
- (7) If a child has previously been provided with a service mentioned in item 135 of the general medical services table or item 92140, a consultant physician specialising in the practice of his or her field of paediatrics may only refer the child for a service to which any of items 110 to 131 of the general medical services table or to which any of items 91824, 91825, 91826, 91834, 91835, 91836 or 92143 applies.
- (8) If a child has previously been provided with a service mentioned in item 137 or 139 of the general medical services table or item 92141, 92142, or 92145, the medical practitioner cannot refer the child for a service to which item 135 or 289 of the general medical services table or to which item 92140, 92434, 92474, 92143 or 92144 applies.

3.1.3 Referrals by specialists, consultant physicians and general practitioners for disability services

- (1) This section applies to items in Subgroups 15 and 16 of Group M18.

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- (2) For items 93032, 93033, 93040 and 93041 the referral by a specialist or consultant physician specialising in the practice of his or her field of speciality must be a referral for a service to which any of items 104 to 131 or 296 to 352 of the general medical services table or items 91822 to 91839, 91841, 92437, 92455, 92456, 92457 92458, 92459, 92460, 92477, 92495, 92496, 92497, 92498, 92499 or 92500 apply.
 - (3) For items 93032, 93033, 93040 and 93041, the referral by a general practitioner must be a referral for a service to which any of items 3 to 51 of the general medical services table or to which any of items 91790, 91800, 91801, 91802, 91890, 91891, 91892 or 91893 applies.
 - (4) For items 93035, 93036, 93043 and 93044 the referral by a specialist or consultant physician specialising in the practice of his or her field of speciality must be a referral for a service to which item 137 of the general medical services table or to which item 92141 or 92144 applies.
 - (5) For items 93035, 93036, 93043 and 93044 the referral by a general practitioner must be a referral for a service to which item 139 of the general medical services table or item 92142 or 92145 applies.
 - (6) If a child has previously been provided with a service mentioned in item 135 or 289 of the general medical services table or item 92140, or 92434 the medical practitioner cannot refer the child for a service to which item 137 or 139 of the general medical services table or item 92141, 92142, 92143, 92144, 92145 or 92474 applies.

3.1.5 Referrals by specialists, consultant physicians and general practitioners for psychological therapy and focussed psychological strategies therapy health services

- (1) For items 91166 to 91176 and 91181 to 91188:
 - (a) the referral by a consultant physician specialising in the practice of his or her field of psychiatry must be a referral for a service to which any of items 91827, 91828, 91829, 91830, 91831, 91837, 91838, 91839, 91840, 91841, 92436, 92437, 92458, 92459, 92460, 92476, 92477, 92498, 92499 or 92500 or items 293 to 352 of the general medical services table applies;
 - (b) the referral by a consultant physician specialising in the practice of his or her field of paediatrics must be a referral for a service to which any of items 110 to 133 of the general medical services table or to which any of items 91824, 91825, 91826, 91834, 91835, 91836, 92422, 92423, 92431 or 92432 applies;
 - (c) the referral by a specialist in the practice of his or her field of psychiatry or paediatrics must be a referral for a service to which any of items 104 to 109 of the general medical services table or items 91822, 91823, 91832 or 91833 applies.

8. Schedule 3 (subclause 3.1.7(6))

Repeal the subclause, substitute:

- (6) For any particular patient, items in Subgroups 19 to 22 of Group M18 do not apply unless the patient has been referred by:
- (a) a general practitioner or medical practitioner who issued the referral as part of a service to which an item in Subgroup 1 of Group 36 of the general medical services table or item 92146, 92147, 92148, 92149, 92150, 92151, 92152, 92153, 92154, 92155, 92156, 92157, 92158, 92159, 92160 or 92161 applies; or
 - (b) a consultant physician in the specialty of psychiatry or paediatrics who issued the referral as part of a service to which an item in Subgroup 2 of Group 36 of the general medical services table or item 92162, 92163, 92166 or 92167 applies; or
 - (c) a medical practitioner who issued the referral as part of a service to which an item in Subgroup 3 of Group 36 of the general medical services table or item 92170 to 92173, 92176, 92177 or 92179 applies.

9. At the end of the instrument

Add:

Schedule 6 – Specialist in-hospital services

Division 6.1 – Services and fees – in-hospital specialist attendances

6.1.1 Application of in-hospital specialist, consultant physician and consultant psychiatrist telehealth and phone services

- (1) Clause 2.1.1 of the Determination shall have effect as if all items in Division 6.1 were specified in the clause.
- (2) An item in Division 6.1 of this Determination only applies to a service if:
 - (a) the medical practitioner who performs the service is:
 - (i) in COVID-19 isolation because of a State or Territory public health order; or
 - (ii) in COVID-19 quarantine because of a State or Territory public health order.
 - (b) the service is performed by the admitting medical practitioner for the patient.

Group A40 – Telehealth and phone attendance services		
Column 1	Column 2	Column 3
Item	Description	Fee (\$)
Subgroup 4 – Specialist attendances telehealth services		
91846	Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if: <ul style="list-style-type: none"> (a) the attendance follows referral of the patient to the specialist; and 	90.35

	(b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	
91847	Telehealth attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is after the first attendance as part of a single course of treatment	45.40
Subgroup 5 – Consultant physician telehealth services		
92471	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	159.35
92472	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is not a minor attendance after the first as part of a single course of treatment	79.75
92473	Telehealth attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is a minor attendance after the first as part of a single course of treatment	45.40
Subgroup 6 – Consultant psychiatrist telehealth services		
92461	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was not more than 15 minutes duration; and (c) the patient to whom the service is provided is admitted to hospital	45.75
92462	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 15 minutes, but not more than 30 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	91.30

92463	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 30 minutes, but not more than 45 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	140.55
92464	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 45 minutes, but not more than 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	194.00
92465	Telehealth attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	225.10
92466	Telehealth attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's speciality of psychiatry following referral of the patient to the consultant physician by a referring practitioner, if the patient to whom the service is provided: (a) either: (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months; and (b) is admitted to hospital	274.95
Subgroup 7 – Specialist attendances phone services		
91848	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	90.35
91849	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is after the first attendance as part of a single course of treatment	45.40
Subgroup 8 – Consultant physician phone services		
92425	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if:	159.35

	(a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance was other than a second or subsequent attendance as part of a single course of treatment	
92426	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is not a minor attendance after the first as part of a single course of treatment	79.75
92427	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital; where the attendance is a minor attendance after the first as part of a single course of treatment	45.40
Subgroup 9 – Consultant psychiatrist phone services		
92501	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was not more than 15 minutes duration; and (c) the patient to whom the service is provided is admitted to hospital	45.75
92502	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner and (b) the attendance was at least 15 minutes, but not more than 30 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	91.30
92503	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 30 minutes, but not more than 45 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	140.55
92504	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 45 minutes, but not more than 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	194.00

92505	Phone attendance for a person by a consultant psychiatrist; if: (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 75 minutes in duration; and (c) the patient to whom the service is provided is admitted to hospital	225.10
92506	Phone attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's speciality of psychiatry following referral of the patient to the consultant physician by a referring practitioner if the patient to whom the service is provided: (a) either: (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months; and (b) is admitted to hospital	274.95
Subgroup 33— Public health physician – Telehealth Services		
92517	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management: (a) if the patient to whom the service is provided is admitted to hospital	20.65
92518	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	45.15
92519	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	87.35
92520	Telehealth attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant:	128.60

	(a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	
Subgroup 34— Public health physician – Phone Services		
92525	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine—attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited management: (a) if the patient to whom the service is provided is admitted to hospital	20.65
92526	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	45.15
92527	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	87.35
92528	Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation; where the patient to whom the service is provided is admitted to hospital	128.60
Subgroup 35— Neurosurgery attendances – Telehealth Services		
92615	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment): (a) if the patient to whom the service is provided is admitted to hospital	136.85

92616	Telehealth attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment: (a) if the patient to whom the service is provided is admitted to hospital	45.40
Subgroup 36—Neurosurgery attendances – Phone Services		
92625	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment): (a) if the patient to whom the service is provided is admitted to hospital	136.85
92626	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—a minor attendance after the first in a single course of treatment: (a) if the patient to whom the service is provided is admitted to hospital	45.40
Subgroup 37 —Specialist, anaesthesia telehealth services		
92702	Telehealth attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply) : (a) if the patient to whom the service is provided is admitted to hospital	90.35
Subgroup 38 —Specialist, anaesthesia phone services		
92713	Phone attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply): (a) if the patient to whom the service is provided is admitted to hospital	90.35

Division 6.2 – Services and fees – in-hospital dental practitioner attendances

6.2.1 – Application of in-hospital dental practitioner telehealth and phone services

- (1) Clause 4.3.1 of this Determination shall have effect as if all items in Division 6.2 were specified in the clause.
- (2) An item in Division 6.2 of this Determination only applies to a service if:
 - (a) the dental practitioner who performs the service is:
 - (i) in COVID-19 isolation because of a State or Territory public health order; or
 - (ii) in COVID-19 quarantine because of a State or Territory public health order; and
 - (b) the service is performed by the admitting dental practitioner for the patient.

Group O1—Consultations		
Column 1	Column 2	Column 3
Item	Description	Fee (\$)
Subgroup 1—dental practitioner telehealth services		
54006	Telehealth attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	89.00
54007	Telehealth attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	44.75
Subgroup 2—dental practitioner phone services		
54011	Phone attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	89.00
54012	Phone attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient to whom the service is provided is: (a) referred to the approved dental practitioner; and (b) admitted to hospital	44.75

Schedule 7 – Specialist initial Phone Services

Division 7.1 – Services and fees – initial specialist phone attendances

7.1.1 – Application of specialist, consultant physician and consultant psychiatrist initial phone services

- (1) Clause 2.1.1 of this Determination shall have effect as if all items in Division 7.1 (other than items in Subgroups 34 and 38) were specified in the clause.
- (2) Clause 2.1.2 of this Determination shall have effect as if item 92474 were specified in the clause.

Group A40 – Telehealth and phone attendance services		
Column 1	Column 2	Column 3
Item	Description	Fee (\$)
Subgroup 7 – Specialist attendances phone services		
91832	Phone attendance for a person by a specialist in the practice of the specialist's specialty if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; Where the attendance was other than a second or subsequent attendance as part of a single course of treatment.	90.35
Subgroup 8 – Consultant physician phone services		
91834	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; Where the attendance was other than a second or subsequent attendance as part of a single course of treatment.	159.35
91835	Phone attendance for a person by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) if: (a) the attendance follows referral of the patient to the specialist; and (b) the attendance was of more than 5 minutes in duration; Where the attendance is not a minor attendance after the first as part of a single course of treatment.	79.75
92431	Phone attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 45 minutes in duration for an initial assessment of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) following referral of the patient to the consultant physician by a referring practitioner, if:	278.75

	<ul style="list-style-type: none"> (a) an assessment is undertaken that covers: <ul style="list-style-type: none"> (i) a comprehensive history, including psychosocial history and medication review; and (ii) comprehensive multi or detailed single organ system assessment; and (iii) the formulation of differential diagnoses; and (b) a consultant physician treatment and management plan of significant complexity is prepared and provided to the referring practitioner, which involves: <ul style="list-style-type: none"> (i) an opinion on diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) medication recommendations 	
92432	<p>Phone attendance by a consultant physician in the practice of the consultant physician's specialty (other than psychiatry) of at least 20 minutes in duration after the first attendance in a single course of treatment for a review of a patient with at least 2 morbidities (which may include complex congenital, developmental and behavioural disorders) if:</p> <ul style="list-style-type: none"> (a) a review is undertaken that covers: <ul style="list-style-type: none"> (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (b) the modified consultant physician treatment and management plan is provided to the referring practitioner, which involves, if appropriate: <ul style="list-style-type: none"> (i) a revised opinion on the diagnosis and risk assessment; and (ii) treatment options and decisions; and (iii) revised medication recommendations; and 	139.55
Subgroup 9 – Consultant psychiatrist phone services		
91840	<p>Phone attendance for a person by a consultant psychiatrist; if:</p> <ul style="list-style-type: none"> (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 45 minutes, but not more than 75 minutes in duration. 	194.00
91841	<p>Phone attendance for a person by a consultant psychiatrist; if:</p> <ul style="list-style-type: none"> (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and (b) the attendance was at least 75 minutes in duration. 	225.10
92474	<p>Phone attendance of at least 45 minutes in duration, by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with</p>	278.75

	<p>autism or another pervasive developmental disorder, if the consultant physician does all of the following:</p> <p>(a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider);</p> <p>(b) develops a treatment and management plan which must include the following:</p> <p>(i) an assessment and diagnosis of the patient's condition;</p> <p>(ii) a risk assessment;</p> <p>(iii) treatment options and decisions;</p> <p>(iv) if necessary—medication recommendations;</p> <p>(c) provides a copy of the treatment and management plan to the referring practitioner;</p> <p>(d) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient</p>	
92475	<p>Phone attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if:</p> <p>(a) the attendance follows referral of the patient to the consultant for an assessment or management by a medical practitioner in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and</p> <p>(b) during the attendance, the consultant:</p> <p>(i) uses an outcome tool (if clinically appropriate); and</p> <p>(ii) carries out a mental state examination; and</p> <p>(iii) makes a psychiatric diagnosis; and</p> <p>(c) the consultant decides that it is clinically appropriate for the patient to be managed by the referring practitioner without ongoing treatment by the consultant; and</p> <p>(d) within 2 weeks after the attendance, the consultant:</p> <p>(i) prepares a written diagnosis of the patient; and</p> <p>(ii) prepares a written management plan for the patient that:</p> <p>(A) covers the next 12 months; and</p> <p>(B) is appropriate to the patient's diagnosis; and</p> <p>(C) comprehensively evaluates the patient's biological, psychological and social issues; and</p> <p>(D) addresses the patient's diagnostic psychiatric issues; and</p> <p>(E) makes management recommendations addressing the patient's biological, psychological and social issues; and</p> <p>(iii) gives the referring practitioner a copy of the diagnosis and the management plan; and</p> <p>(iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:</p> <p>(A) the patient; and</p> <p>(B) the patient's carer (if any), if the patient agrees</p>	478.05
92476	<p>Phone attendance of more than 30 minutes but not more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry, if:</p> <p>(a) the patient is being managed by a medical practitioner or a</p>	298.85

	<p>participating nurse practitioner in accordance with a management plan prepared by the consultant in accordance with item 291, 92435, 92475; and</p> <p>(b) the attendance follows referral of the patient to the consultant for review of the management plan by the medical practitioner or a participating nurse practitioner managing the patient; and</p> <p>(c) during the attendance, the consultant:</p> <ul style="list-style-type: none"> (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the management plan; and <p>(d) within 2 weeks after the attendance, the consultant:</p> <ul style="list-style-type: none"> (i) prepares a written diagnosis of the patient; and (ii) revises the management plan; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: <ul style="list-style-type: none"> (A) the patient; and (B) the patient's carer (if any), if the patient agrees 	
92477	<p>Phone attendance of more than 45 minutes in duration by a consultant physician in the practice of the consultant physician's speciality of psychiatry following referral of the patient to the consultant physician by a referring practitioner:</p> <p>(a) if the patient:</p> <ul style="list-style-type: none"> (i) is a new patient for this consultant physician; or (ii) has not received an attendance from this consultant physician in the preceding 24 months 	274.95
92495	<p>Phone attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted):</p> <p>(a) of not less than 1 hour in duration; and</p> <p>(b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and</p> <p>(c) involving a group of 2 to 9 unrelated patients or a family group of more than 3 patients, each of whom is referred to the consultant physician by a referring practitioner;</p> <p>—each patient</p>	52.05

92496	Phone attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient	69.10
92497	Phone attendance for group psychotherapy (including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted): (a) of not less than 1 hour in duration; and (b) given under the continuous direct supervision of a consultant physician in the practice of the consultant physician's specialty of psychiatry; and (c) involving a family group of 2 patients, each of whom is referred to the consultant physician by a referring practitioner; —each patient	102.20
92498	Phone attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes, but less than 45 minutes, in duration, in the course of initial diagnostic evaluation of a patient	133.85
92499	Phone attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 45 minutes in duration, in the course of initial diagnostic evaluation of a patient	184.80
92500	Phone attendance by a consultant physician in the practice of the consultant physician's specialty of psychiatry, following referral of the patient to the consultant physician by a referring practitioner, involving an interview of a person other than the patient of not less than 20 minutes in duration, in the course of continuing management of a patient	133.85
Subgroup 18 - GP, Specialist and Consultant Physician Autism Service - Phone Service		
92143	Phone attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics, following referral of the patient to the consultant by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient aged under 13 years with autism or another pervasive developmental disorder, if the consultant paediatrician does all of the following: (a) undertakes a comprehensive assessment and makes a diagnosis (if	278.75

	<p>appropriate, using information provided by an eligible allied health provider);</p> <p>(b) develops a treatment and management plan, which must include the following:</p> <ul style="list-style-type: none"> (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medical recommendations; <p>(c) provides a copy of the treatment and management plan to:</p> <ul style="list-style-type: none"> (i) the referring practitioner; and (ii) one or more allied health providers, if appropriate, for the treatment of the patient. 	
92144	<p>Phone attendance of at least 45 minutes in duration by a specialist or consultant physician following referral of the patient to the specialist or consultant physician by a referring practitioner, for assessment, diagnosis and preparation of a treatment and management plan for a patient under 13 years with an eligible disability if the specialist or consultant physician does all of the following:</p> <p>(a) undertakes a comprehensive assessment and makes a diagnosis (if appropriate, using information provided by an eligible allied health provider);</p> <p>(b) develops a treatment and management plan, which must include the following:</p> <ul style="list-style-type: none"> (i) an assessment and diagnosis of the patient's condition; (ii) a risk assessment; (iii) treatment options and decisions; (iv) if necessary—medication recommendations; <p>(c) provides a copy of the treatment and management plan to one or more allied health providers, if appropriate, for the treatment of the patient.</p>	278.75
Subgroup 24— Consultant Physician and Psychiatrist - Eating Disorder Treatment and Management Plan – Phone Service		
92166	<p>Phone attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for the preparation of an eating disorder treatment and management plan for an eligible patient, if:</p> <p>(a) the patient has been referred by a referring practitioner; and</p> <p>(b) during the attendance, the consultant psychiatrist:</p> <ul style="list-style-type: none"> (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and <p>(c) within 2 weeks after the attendance, the consultant psychiatrist:</p> <ul style="list-style-type: none"> (i) prepares a written diagnosis of the patient; and (ii) prepares a written management plan for the patient that: <ul style="list-style-type: none"> (A) covers the next 12 months; and (B) is appropriate to the patient's diagnosis; and (C) comprehensively evaluates the patient's biological, psychological and social issues; and (D) addresses the patient's diagnostic psychiatric issues; and 	478.05

	<p>(E) makes management recommendations addressing the patient's biological, psychological and social issues; and</p> <p>(iii) gives the referring practitioner a copy of the diagnosis and the management plan; and</p> <p>(iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:</p> <p>(A) the patient; and</p> <p>(B) the patient's carer (if any), if the patient agrees.</p>	
92167	<p>Phone attendance of at least 45 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for the preparation of an eating disorder treatment and management plan for an eligible patient, if:</p> <p>(a) the patient has been referred by a referring practitioner; and</p> <p>(b) during the attendance, the consultant paediatrician undertakes an assessment that covers:</p> <p>(i) a comprehensive history, including psychosocial history and medication review; and</p> <p>(ii) comprehensive multi or detailed single organ system assessment; and</p> <p>(iii) the formulation of diagnoses; and</p> <p>(c) within 2 weeks after the attendance, the consultant paediatrician:</p> <p>(i) prepares a written diagnosis of the patient; and</p> <p>(ii) prepares a written management plan for the patient that involves:</p> <p>(A) an opinion on diagnosis and risk assessment; and</p> <p>(B) treatment options and decisions; and</p> <p>(C) medication recommendations; and</p> <p>(iii) gives the referring practitioner a copy of the diagnosis and the management plan; and</p> <p>(iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:</p> <p>(A) the patient; and</p> <p>(B) the patient's carer (if any), if the patient agrees.</p>	278.75
Subgroup 26—Review of an Eating Disorder Plan – Phone Service		

92178	<p>Phone attendance of at least 30 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of psychiatry for an eligible patient, if:</p> <ul style="list-style-type: none"> (a) the consultant psychiatrist reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) the patient has been referred by a referring practitioner; and (c) during the attendance, the consultant psychiatrist: <ul style="list-style-type: none"> (i) uses an outcome tool (if clinically appropriate); and (ii) carries out a mental state examination; and (iii) makes a psychiatric diagnosis; and (iv) reviews the eating disorder treatment and management plan; and (d) within 2 weeks after the attendance, the consultant psychiatrist: <ul style="list-style-type: none"> (i) prepares a written diagnosis of the patient; and (ii) revises the eating disorder treatment and management; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: <ul style="list-style-type: none"> (A) the patient; and (B) the patient's carer (if any), if the patient agrees 	298.85
92179	<p>Phone attendance of at least 20 minutes in duration by a consultant physician in the practice of the consultant physician's specialty of paediatrics for an eligible patient, if:</p> <ul style="list-style-type: none"> (a) the consultant paediatrician reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and (b) the patient has been referred by a referring practitioner; and (c) during the attendance, the consultant paediatrician reviews the eating disorder treatment and management plan, including a: <ul style="list-style-type: none"> (i) review of initial presenting problems and results of diagnostic investigations; and (ii) review of responses to treatment and medication plans initiated at time of initial consultation; and (iii) comprehensive multi or detailed single organ system assessment; and (iv) review of original and differential diagnoses; and (d) within 2 weeks after the attendance, the consultant paediatrician: <ul style="list-style-type: none"> (i) prepares a written diagnosis of the patient; and (ii) revises the eating disorder treatment and management; and (iii) gives the referring practitioner a copy of the diagnosis and the revised management plan; and (iv) if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to: <ul style="list-style-type: none"> (A) the patient; and (B) the patient's carer (if any), if the patient agrees. 	139.55

Subgroup 32—Geriatric Medicine—Phone Services

92628	<p>Phone attendance of more than 60 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine, if:</p> <p>(a) the patient is at least 65 years old and referred by a medical practitioner practising in general practice (not including a specialist or consultant physician) or a participating nurse practitioner; and</p> <p>(b) the attendance is initiated by the referring practitioner for the provision of a comprehensive assessment and management plan; and</p> <p>(c) during the attendance:</p> <p>(i) all relevant aspects of the patient's health are evaluated in detail using appropriately validated assessment tools if indicated (the assessment); and</p> <p>(ii) the patient's various health problems and care needs are identified and prioritised (the formulation); and</p> <p>(iii) a detailed management plan is prepared (the management plan) setting out:</p> <p>(A) the prioritised list of health problems and care needs; and</p> <p>(B) short and longer term management goals; and</p> <p>(C) recommended actions or intervention strategies to be undertaken by the patient's general practitioner or another relevant health care provider that are likely to improve or maintain health status and are readily available and acceptable to the patient and the patient's family and carers; and</p> <p>(iv) the management plan is explained and discussed with the patient and, if appropriate, the patient's family and any carers; and</p> <p>(v) the management plan is communicated in writing to the referring practitioner</p>	478.05
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92629	<p>Phone attendance of more than 30 minutes in duration by a consultant physician or specialist in the practice of the consultant physician's or specialist's specialty of geriatric medicine to review a management plan previously prepared by that consultant physician or specialist under item 141, 92623, 92628 or 145, if:</p> <p>(a) the review is initiated by the referring medical practitioner practising in general practice or a participating nurse practitioner; and</p> <p>(b) during the attendance:</p> <p>(i) the patient's health status is reassessed; and</p> <p>(ii) a management plan prepared under item 141, 92623, 92628 or 145 is reviewed and revised; and</p> <p>(iii) the revised management plan is explained to the patient and (if appropriate) the patient's family and any carers and communicated in writing to the referring practitioner; and</p> <p>(c) an attendance to which item 104, 105, 107, 108, 110, 116 or 119 of the general medical services table or item 91822, 91832, 91823, 91833, 91824, 91834, 91825, 91835, 91826 or 91836 applies was not provided to the patient on the same day by the same practitioner; and</p> <p>(d) an attendance to which item 141 or 145 of the general medical services table, or item 92623 or 92628 applies has been provided to the patient by the same practitioner in the preceding 12 months; and</p> <p>(e) an attendance to which this item, item 92624 or item 147 of the general medical services table applies has not been provided to the patient in the preceding 12 months, unless there has been a significant change in the patient's clinical condition or care circumstances that requires a further review</p>	298.85
Subgroup 34— Public health physician – Phone Services		
92523	<p>Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 20 minutes and including any of the following that are clinically relevant:</p> <p>(a) taking a detailed patient history;</p> <p>(b) arranging any necessary investigation;</p> <p>(c) implementing a management plan;</p> <p>(d) providing appropriate preventive health care;</p> <p>for one or more health-related issues, with appropriate documentation</p>	87.35
92524	<p>Phone attendance by a public health physician in the practice of the public health physician's specialty of public health medicine, lasting at least 40 minutes and including any of the following that are clinically relevant:</p> <p>(a) taking an extensive patient history;</p> <p>(b) arranging any necessary investigation;</p> <p>(c) implementing a management plan;</p> <p>(d) providing appropriate preventive health care;</p> <p>for one or more health-related issues, with appropriate documentation</p>	128.60

Subgroup 36—Neurosurgery attendances – Phone Services		
92617	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist (other than a second or subsequent attendance in a single course of treatment)	136.85
92619	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 15 minutes in duration but not more than 30 minutes in duration	90.35
92620	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 30 minutes in duration but not more than 45 minutes in duration	125.15
92621	Phone attendance by a specialist in the practice of neurosurgery following referral of the patient to the specialist—an attendance after the first in a single course of treatment, involving arranging any necessary investigations in relation to one or more complex problems and of more than 45 minutes in duration	159.35
Subgroup 38—Specialist, anaesthesia phone services		
92712	Phone attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes	90.35

Division 7.2 – Services and fees – initial dental practitioner attendances

7.2.1 – Application of dental practitioner initial phone services

- (1) Clause 4.3.1 of this Determination shall have effect as if the item in Division 7.2 was specified in the clause.

Group O1—Consultations		
Column 1	Column 2	Column 3
Item	Description	Fee (\$)
Subgroup 2—dental practitioner phone services		
54003	Phone attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient is referred to the approved dental practitioner	89.00

Schedule 8 – COVID-19 impacted GP phone services

Division 8.1 – Services and fees – COVID-19 impacted GP phone attendances

Group A40 – Telehealth and phone attendance services		
Column 1	Column 2	Column 3
Item	Description	Fee (\$)
Subgroup 41 – COVID-19 impacted general practice phone services		
92746	Phone attendance by a general practitioner lasting at least 20 minutes in duration, if; (a) the attendance includes any of the following that are clinically relevant: (i) taking a detailed patient history; (ii) arranging any necessary investigation; (iii) implementing a management plan; (iv) providing appropriate preventative health care	89.10
92747	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) lasting at least 20 minutes in duration, if: (a) the attendance includes any of the following that are clinically relevant: (i) taking a detailed patient history; (ii) arranging any necessary investigation; (iii) implementing a management plan; (iv) providing appropriate preventative health care	44.70

Schedule 2 – amendments to vaccine suitability service

Health Insurance (Section 3C General Medical Services – General Practice Attendance for Assessing Patient Suitability for a COVID-19 Vaccine) Determination 2021

1. Subsection 8(2)

Repeal the subsection, substitute:

Restrictions on co-claiming with item 10988 or the bulk-billing incentive items

- (2) An item in the Schedule does not apply to a service if the service is associated with a service to which any of items 10988, 10990, 10991, 10992, 75855, 75856, 75857 or 75858 in the general medical services table applies.