



Gold Coast Primary Health Network

RACF MBS ITEM NUMBERS
FOR VR GPS

phn
GOLD COAST

An Australian Government Initiative

RACF MBS ITEM NUMBERS FOR VR GPS

RACF Applicable MBS

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<http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Home>

CONSULTATION AT A RESIDENTIAL AGED CARE FACILITY

Professional attendance on 1 or more patients in 1 residential aged care facility (but excluding a professional attendance at a self-contained unit) or attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (excluding accommodation in a self-contained unit) on 1 occasion each patient.

20	LEVEL A	Professional attendance for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management.
35	LEVEL B	Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting less than 20 minutes, including any of the following that are clinically relevant: a) taking a patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation.
43	LEVEL C	Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 20 minutes , including any of the following that are clinically relevant: a) taking a detailed patient history;

		<ul style="list-style-type: none"> b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; <p>in relation to 1 or more health-related issues, with appropriate documentation.</p>
51	LEVEL D	<p>Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 40 minutes, including any of the following that are clinically relevant:</p> <ul style="list-style-type: none"> a) taking an extensive patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; <p>in relation to 1 or more health-related issues, with appropriate documentation.</p>
5010	LEVEL A	<p>Professional attendance by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management.</p> <p>Professional attendance on 1 or more patients in 1 residential aged care facility (but excluding a professional attendance at a self-contained unit) or attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (excluding accommodation in a self-contained unit) on 1 occasion) each patient. The attendance must be initiated either on a public holiday, on a Sunday, before 8am or after 12noon on a Saturday, or before 8am or after 6 pm on any other day.</p>

5028	LEVEL B	<p>Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting less than 20 minutes, including any of the following that are clinically relevant:</p> <ul style="list-style-type: none"> a) taking a patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; <p>in relation to 1 or more health-related issues, with appropriate documentation.</p> <p>Professional attendance on 1 or more patients in 1 residential aged care facility (but excluding a professional attendance at a self-contained unit) or attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (excluding accommodation in a self-contained unit) on 1 occasion) each patient The attendance must be initiated either on a public holiday, on a Sunday, before 8am or after 12noon on a Saturday, or before 8am or after 6pm on any other day</p>
5049	LEVEL C	<p>Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 20 minutes, including any of the following that are clinically relevant:</p> <ul style="list-style-type: none"> a) taking a detailed patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care;

		<p>in relation to 1 or more health-related issues, with appropriate documentation.</p> <p>Professional attendance on 1 or more patients in 1 residential aged care facility (but excluding a professional attendance at a self-contained unit) or attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (excluding accommodation in a self-contained unit) on 1 occasion) each patient. The attendance must be initiated either on a public holiday, on a Sunday, before 8am or after 12noon on a Saturday, or before 8am or after 6pm on any other day</p>
5067	LEVEL D	<p>Professional attendance by a general practitioner (not being a service to which any other item in this table applies) lasting at least 40 minutes, including any of the following that are clinically relevant:</p> <ul style="list-style-type: none"> a) taking an extensive patient history; b) performing a clinical examination; c) arranging any necessary investigation; d) implementing a management plan; e) providing appropriate preventive health care; <p>in relation to 1 or more health-related issues, with appropriate documentation.</p> <p>Professional attendance on 1 or more patients in 1 residential aged care facility (but excluding a professional attendance at a self-contained unit) or attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (excluding accommodation in a self-contained unit) on 1 occasion) each patient. The attendance must be initiated either on a public holiday, on a Sunday, before 8am or after 12noon on a Saturday, or before 8am or after 6pm on any other day.</p>
597-600	Please note	Eligibility Criteria:

		<ul style="list-style-type: none"> - listed on the Vocational Register of General Practitioners maintained by the Department of Human Services; - holders of the Fellowship of the Royal Australian College of General Practitioners (FRACGP) who participate in, and meet the requirements of the RACGP for continuing medical education and quality assurance as defined in the RACGP Quality Assurance and Continuing Medical Education program; or - holders of the Fellowship of the Australian College of Rural and Remote Medicine (FACRRM) who participate in, and meet the requirements of the Australian College of Rural and Remote Medicine (ACRRM) for continuing medical education and quality assurance as defined in ACRRM's Professional Development Program; - undertaking an approved placement in general practice as part of a training program for general practice leading to the award of the FRACGP or training recognised by the RACGP as being of an equivalent standard; or - undertaking an approved placement in general practice as part of a training program for general practice leading to the award of the FACRRM or training recognised by ACRRM as being of an equivalent standard. <p>NON VR GPS PLEASE CHECK ELIGIBILITY WITH MBS ONLINE PRIOR TO BILLING THESE ITEM NUMBERS</p>
<p>597</p>	<p>URGENT ATTENDANCE AFTER HOURS LEVEL A</p>	<p>A Level A item will be used for obvious and straightforward cases and this should be reflected in the practitioner's records. In this context, the practitioner should undertake the necessary examination of the affected part if required, and note the action taken.</p> <p>Professional attendance by a general practitioner on not more than 1 patient on the 1 occasion - each attendance <i>(other than an attendance between 11pm and 7am)</i> in an after-hours period if:</p> <ul style="list-style-type: none"> a) the attendance is requested by the patient or a responsible person in, or not more than 2 hours before the start of, the

		<p>same unbroken urgent after-hours period;</p> <p>b) the patient's condition requires urgent medical treatment; and</p> <p>c) if the attendance is undertaken at consulting rooms, it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance.</p>
598	URGENT ATTENDANCE AFTER HOURS LEVEL B	<p>A Level B item will be used for a consultation lasting less than 20 minutes for cases that are not obvious or straightforward in relation to one or more health related issues. The medical practitioner may undertake all or some of the tasks set out in the item descriptor as clinically relevant, and this should be reflected in the practitioner's record. In the item descriptor singular also means plural and vice versa.</p> <p>Professional attendance by a medical practitioner (other than a general practitioner) on not more than 1 patient on the 1 occasion - each attendance (<i>other than an attendance between 11pm and 7am</i>) in an after-hours period if:</p> <p>a) the attendance is requested by the patient or a responsible person in, or not more than 2 hours before the start of, the same unbroken urgent after-hours period;</p> <p>b) the patient's condition requires urgent medical treatment; and</p> <p>c) if the attendance is undertaken at consulting rooms, it is necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance.</p>
599	URGENT ATTENDANCE AFTER HOURS LEVEL C	<p>Level C item will be used for a consultation lasting at least 20 minutes for cases in relation to one or more health related issues. The medical practitioner may undertake all or some of the tasks set out in the item descriptor as clinically relevant, and this should be reflected in the practitioner's record. In the item descriptor singular also means plural and vice versa.</p> <p>Professional attendance, by a general practitioner on not more</p>

		<p>than 1 patient on the 1 occasion - each attendance between 11pm and 7am, if:</p> <ul style="list-style-type: none"> a) the attendance is requested by the patient or a responsible person in, or not more than 2 hours before the start of, the same unbroken after-hours period; and b) the patient's condition requires urgent medical treatment; and c) if the attendance is undertaken at consulting rooms, it is necessary for the practitioner to return to and specially open, the consulting rooms for the attendance.
600	URGENT ATTENDANCE AFTER HOURS LEVEL D	<p>A Level D item will be used for a consultation lasting at least 40 minutes for cases in relation to one or more health related issues. The medical practitioner may undertake all or some of the tasks set out in the item descriptor as clinically relevant, and this should be reflected in the practitioner's record. In the item descriptor singular also means plural and vice versa.</p> <p>Professional attendance, by a medical practitioner, (other than a general practitioner) on not more than 1 patient on the 1 occasion - each attendance between 11pm and 7am, if:</p> <ul style="list-style-type: none"> a) the attendance is requested by the patient or a responsible person in, or not more than 2 hours before the start of, the same unbroken after-hours period; and b) the patient's condition requires urgent medical treatment; and c) if the attendance is undertaken at consulting rooms, it is necessary for the practitioner to return to and specially open, the consulting rooms for the attendance.

CMA – Comprehensive Medical Assessment, involves the GP reviewing all of the Residents medical conditions. Full examination and investigations, making referrals where necessary (Consider Allied Health referrals to be actioned when the 731 has been performed). The CMA is filed with the RACF as a source of comprehensive reference for nursing staff and after hours medical practitioners or sent with the resident when admitted to hospital.

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701	<30 min
703	30 – 45 min
705	45 – 60 min
707	>60 min

Care Plan contribution/review – The RACF staff routinely develop and follow a Care Plan that describes interventions and cares required by the Resident. The GP can contribute to the care plan by making written comments or additions.

731	Not time based, however only available to bill every 3 months (Allowed more frequently only if exceptional circumstances exist for a resident and if there has been a significant change in the resident’s clinical condition or care requirements which necessitates the performance of the service.)
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Following a 731, the GP can refer to Allied Health (Please use the referral form “Referral form for Individual Allied Health Services under Medicare for patients with a chronic medical condition and complex care needs” Please note that there is a maximum of 5 visits per calendar year 5 visits in total, not for each discipline).

Case Conference – A meeting held between the GP and at least two other health care providers who are involved in the care. The aim is to jointly agree on the types of care the resident needs. The case conference allows the opportunity to plan for health care needs in a co-ordinated fashion. *(Suggest performing a case conference prior to performing the subsequent 731 contribution to care plan service to ensure that the resident or substitute decision maker, others involved in the care of the resident have a co-ordinated plan)*

735	At least 15 mins and less than 20 mins (GP led)
739	At least 20 mins and less than 40 mins (GP led)
743	At least 40 mins (GP led)
747	At least 15 mins and less than 20 mins (GP participates)
750	At least 20 mins and less than 40 mins (GP participates)
758	At least 40 mins (GP participates)

GP Led = GP is responsible for co-ordinating and arranging the Case Conference

GP participates – GP attends but has not co-ordinated the Case Conference

Residential Medication Management Review – A residential medication management review is collaboration between the GP and the Pharmacist providing services to the RACF. The aim of an RRMR is to address any medication issues to reduce the risk of harmful side effects. These reviews can be initiated by the GP yearly, however the Pharmacy can only be remunerated 2 yearly unless the GP refers with “significant change in resident condition or medication regimen warranting RRMR”

903	Yearly referral (Please see above)
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(Suggest referral for RRMR prior to the yearly CMA, and then reviewing the recommendations and discussing with the resident under the 903 item number)