



# Australian Government

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## Department of Health

### Medicare Benefits Schedule (MBS)

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#### Health assessment for refugees and other humanitarian entrants Fact Sheet

A medical practitioner may select MBS Item **701 (brief)**, **703 (standard)**, **705 (long)** or **707 (prolonged)** to undertake a health assessment for a refugee or other humanitarian entrant, depending on the length of the consultation which will be determined by the complexity of the patient's presentation.

This health assessment is for refugees and other humanitarian entrants who arrive in Australia with complex and unusual medical conditions. This assessment is separate from, and in addition to, a medical assessment specifically for the grant of a Refugee or Humanitarian visa.

Some refugees or other humanitarian entrants will have little experience of western health care systems and this health assessment provides an opportunity to introduce these patients to preventive health care in Australia, in particular immunisation, maternal and child health care, and breast and cervical screening. Many will have been exposed to war, famine, repression, torture and/or extreme poverty. The health assessment should be undertaken in a manner that is sensitive to the needs of the patient.

#### Components of the health assessment for refugees and other humanitarian entrants

The health assessment must include the assessment of the patient's physical, psychological and social functioning and whether preventive health care and education should be offered to the patient to improve their health. Psychological history should take into account possible long term effects of torture and other forms of trauma. Clinical investigations will vary with country of origin, age, gender and any previous tests. Consider the following based on clinical need: FBC, iron studies; malaria Ag+/- film, Schistosomiasis and Strongyloides serology; Hepatitis B & C; serum vitamin D; faecal examination for parasites; STI screen, further TB (ie. latent infection) and HIV assessment; catch-up immunisation and relevant preventative health checks.

The medical practitioner should keep a record of the health assessment and offer to provide the patient with a written report about the health assessment. Patient consent to the health assessment should be documented in the patient's record.

In addition to the general requirements for health assessments, this assessment should include the development of a management plan to address any issues and/or conditions, including arranging for any necessary interventions or referrals to other health care providers. This plan should be developed in collaboration with the patient, and documented in a written report that is offered to the patient.

**The management plan should include:**

- planned follow-up of issues and/or conditions found in history, examination and investigations, including initiating management to meet identified needs of the patient;
- initial recommendation concerning immunisation, nutrition, vitamin supplementation and medications;
- consideration of referrals to allied health professionals, approved professionals and/or specialist clinics to address issues of torture and trauma; and
- consideration of contraception advice and review of pap smear/sexually transmitted disease screening.

Most refugees arrive in Australia with medical records. For those who have, it may be useful to obtain a copy, such as those of previous health assessments that may have been undertaken pre-departure.

A patient with a “health undertaking” has been assessed as having specific health issues such as hepatitis or inactive tuberculosis that needs to be addressed or monitored in Australia. By signing the undertaking, the refugee agrees to report to the Health Undertaking Service and for follow-up with their respective State or Territory health authority.

**Restrictions**

The health assessment is a voluntary one-off service and must be provided within twelve months of the person’s arrival in Australia or grant of visa. The medical practitioner should not conduct a separate consultation in conjunction with the health assessment on the same day, except where it is clinically required (ie. the patient has an acute problem that needs to be managed separately from the assessment).

**Patient Eligibility**

The health assessment is available to people with the following visas:

- Subclass 200 (Refugee) visa
- Subclass 201 (In-country Special Humanitarian) visa
- Subclass 202 (Global Special Humanitarian) visa
- Subclass 203 (Emergency Rescue) visa
- Subclass 204 (Women at Risk) visa
- Subclass 070 (Refugee Pending Bridging) visa
- Subclass 695 (Return Pending) visa
- Subclass 786 (Temporary (Humanitarian Concern)) visa
- Subclass 866 (Protection) visa.

A humanitarian entrant should be able to provide proof of their visa status and date of arrival or residence (date of visa granted) by one of the following documents:

- a travel card known as a Document for Travel to Australia (DFTTA);
- a travel document including a Passport, a Titre de Voyage or a Certificate of Identity;

- a Visa Evidence Card identified by the numbers PLO56 or M56 or
- a Permanent Resident Evidence ImmiCard

Medical practitioners may telephone the Department of Human Services (Medicare) on 132 011, with the patient present, to check eligibility.

### **Interpreting and Translating Assistance Proposer Assistance**

The Australian Government provides a [Free Interpreting Service](#) to eligible medical practitioners providing Medicare-rebateable services in private practice to assist them communicate with anyone in Australia who is eligible for Medicare. Interpreting services are provided through the Translating and Interpreting Service (TIS National). To access this free service, medical practitioners can complete the online client registration form on the [TIS National website](#), or contact TIS National on 1300 575 847. Once registered, free phone interpreting is available 24 hours a day, 7 days a week and on-site (face-to-face) interpreting is available during business hours.

The Free Translating Service is provided by the Australian Government for people settling permanently in Australia, to support participation in employment, education and community engagement. Permanent residents and select temporary or provisional visa holders can have up to ten eligible documents translated, into English, within the first two years of their eligible visa grant date. Documents that can be translated into English include patient medical reports or vaccination certificates. For more information go to the [Free Translating Service](#) website.

### **Proposer Assistance**

A proposer is a friend, relative or community organisation who has agreed to assist the person to settle in Australia. Proposers only apply to visa class 202, Global Special Humanitarian. A proposer may be able to provide useful information about the patient on matters such as physical, psychological and social functioning but should not be used as an interpreter.

### **Guidelines and Resources**

Medical practitioners are encouraged to utilise relevant guidelines and resources, such as:

- Item descriptors and explanatory notes from MBS Online;
- Information about MBS primary care items at the MBS Primary Care Items page or phone the Department of Human Services (Medicare) provider enquiry line on 132 150;
- Telephone interpreter service: Telephone 131 450;
- Information regarding the 'Health Undertaking Service' from the Department of Immigration and Border Protection website or phone the national telephone service enquiry line 131 881;
- Royal Australian College of General Practitioners' Cultural and linguistic diversity clinical resources;
- Australasian Society for Infectious Diseases (ASID) Diagnosis, management and prevention of infections in recently arrived refugees - 2009;
- Desktop guide to caring for refugee patients in general practice (2007).