

MEDICARE FOLLOW-UP ALLIED HEALTH SERVICES FOR PEOPLE OF ABORIGINAL AND TORRES STRAIT ISLANDER DESCENT (MBS ITEMS 81300-81360) Fact Sheet

This fact sheet must be read in conjunction with the item descriptors and explanatory notes for items 81300-81360 (as set out in the Medicare Benefits Schedule).

MBS Allied health items 81300 to 81360 are available to people of Aboriginal and Torres Strait Islander descent, on referral from their GP following a health assessment.

Components of follow-up items

A maximum of five (5) allied health services are available per patient each calendar year. This is in addition to allied health services available to eligible patients with chronic disease under MBS items 10950-10970.

The five services can be provided by one eligible allied health professional (e.g. five physiotherapy services) or a combination of allied health professionals (e.g. one dietetic, two podiatry and two physiotherapy services). Services must be of at least 20 minutes duration and must be provided individually to the patient, in person, by the eligible health professional. A written report must be provided to the referring GP after the first and last service, or more often if required.

Referral arrangements

To access follow-up allied health services, patients must be referred by their GP to the relevant eligible allied health professional(s) using a Referral form for follow-up allied health services under Medicare for people of Aboriginal and Torres Strait Islander descent. The GP is responsible for identifying which allied health services are appropriate for the patient.

Eligible allied health professionals

Allied Health Area	Item	Allied Health Area	Item
Aboriginal Health Worker	81300	Physiotherapist	81335
Diabetes Educator	81305	Podiatrist	81340
Audiologist	81310	Chiropractor	81345
Exercise Physiologist	81315	Osteopath	81350
Dietitian	81320	Psychologist	81355
Mental Health Worker*	81325	Speech Pathologist	81360
Occupational Therapist	81330		

^{*}including mental health nurses and some social workers

Restrictions on providing the MBS follow-up allied health items

- Allied health professionals must meet certain eligibility criteria and be registered with the Department of Human Services (Medicare) phone 132 150.
- The patient must not be an admitted patient of a hospital.
- Services cannot be claimed where the service is already funded by State or Commonwealth governments unless an exemption under subsection 19(2) of the Health Insurance Act 1973 has been granted.
- It is not necessary for the medical practitioner to claim their health assessment on Medicare but must indicate on the referral form that a health assessment has been undertaken.

Guidelines and Resources

For more detailed information about MBS item descriptors and explanatory notes visit the Department of Health website at www.mbsonline.gov.au

Further information, including referral forms, is available on the Department of Health website at http://www.health.gov.au/mbsprimarycareitems