

Primary Health Care MBS items: FAQs

March 2010

This is the first in a series of FAQs being developed by DoHA on this topic. More will follow in due course.

Question 1: How do I claim a health assessment for Aboriginal and Torres Strait Islander people and what is the time period between two consecutive health assessments?

The Aboriginal and Torres Strait Islander Persons Health Assessment (MBS item 715) is available to all people of Aboriginal and Torres Strait Islander descent and should be used for health assessments for the following age categories:

- *An Aboriginal or Torres Strait Islander child who is less than 15 years.*
- *An Aboriginal or Torres Strait Islander person who is aged between 15 years and 54 years.*
- *An Aboriginal or Torres Strait Islander older person who is aged 55 years and over.*

This health assessment is an annual service. The minimum time allowed between services is nine (9) months. This allows flexibility for very remote communities, where medical practitioner visits may be less frequent and may make it more difficult to follow a consistent schedule of health assessments.

Question 2: Is there any change to the way that GPs charge for their own services and the services of the practice nurse when providing health assessments?

No, there is no change to the way that GPs charge for their own services and the services of the practice nurse when providing health assessments. Practice nurses and registered Aboriginal health workers may assist medical practitioners in performing the health check, in accordance with accepted medical practice and under the supervision of the medical practitioner. This may include activities associated with:

- *information collection; and*
- *providing patients with information about recommended interventions at the direction of the medical practitioner.*

All other components of the health assessment must be undertaken by the medical practitioner and must include a personal attendance by a medical practitioner. The time take by the practice nurse to complete the above components of the health assessment can be included in the total time for GPs to claim these items. The exception is the Healthy Kids Check item (10986) provided by a practice nurse or registered Aboriginal health worker.

The MBS Healthy Kids Check can be provided by either a medical practitioner or a practice nurse/registered Aboriginal health worker. Both items are claimed by a general practitioner. If the Healthy Kids Check is provided by a practice nurse or registered Aboriginal health worker, it is undertaken for and on behalf of a medical practitioner. This item was previously MBS item 711. It has been retained but has been allocated a new MBS item number 10986 and the fee has been increased to align with the Brief Health Assessment provided by a GP.

Question 3: How can I claim for a health assessment?

From 1 May 2010, there will be four time-based health assessment items, consisting of brief, standard, long and prolonged consultations.

- **Brief Health Assessment (MBS Item 701)** *is used to undertake simple and straightforward health assessments. The health assessment should take less than 30 minutes to complete.*
- **Standard Health Assessment (MBS Item 703)** *is used for more complex consultations that last more than 30 minutes but take less than 45 minutes.*
- **Long Health Assessment (MBS Item 705)** *is used for extensive consultations that last more than 45 minutes but less than one hour.*
- **Prolonged Health Assessment (MBS Item 707)** *is used for complex consultations that require more than 60 minutes to complete.*

Medical practitioners may select one of the MBS health assessment items to provide a health assessment service to a member of any of the target groups listed in the table below. The health assessment item that is selected will depend on the time taken to complete the health assessment service. Factors that will affect the time taken include the complexity of the patient's presentation and the nature of the health assessment.

Target Groups	Frequency of Service
<i>Children aged at least 3 years and less than 5 years of age, who have received or who are receiving their 4 year old immunisation</i>	<i>Once only to an eligible patient</i>
<i>People aged 40-49 years (inclusive) with a high risk of developing type 2 diabetes as determined by the Australian Type 2 Diabetes Risk Assessment Tool</i>	<i>Once every three years to an eligible patient</i>
<i>People aged 45-49 years (inclusive) who are at risk of developing chronic disease</i>	<i>Once only to an eligible patient</i>
<i>People aged 75 years and older</i>	<i>Provided annually to an eligible patient</i>
<i>Permanent residents of residential aged care facilities</i>	<i>Provided annually to an eligible patient</i>
<i>People with an intellectual disability</i>	<i>Provided annually to an eligible patient</i>
<i>Refugees and other humanitarian entrants</i>	<i>Once only to an eligible patient</i>