

*Health Insurance (Section 3C General Medical Services – Specialist, Consultant Physician and Consultant Psychiatrist COVID-19 Telehealth Services) Determination 2020*

I, DAVID WEISS, delegate of the Minister for Health, make the following determination.

Dated 12 March 2020

David Weiss

First Assistant Secretary

Medical Benefits Division

Health Financing Group

Department of Health

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1. Name

This instrument is the *Health Insurance (Section 3C General Medical Services – Specialist, Consultant Physician and Consultant Psychiatrist COVID-19 Telehealth Services) Determination 2020*.

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. The whole of this instrument | 13 March 2020 |  |

Note: This table relates only to the provisions of this instrument as originally made.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. Cessation

Unless earlier revoked, this instrument ceases on 30 September 2020*.*

4. Authority

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

5. Definitions

(1) In this instrument:

***Act*** means the *Health Insurance Act 1973*.

***admitted patient*** means a patient who is receiving a service that is provided:

1. as part of an episode of hospital treatment; or
2. as part of an episode of hospital substitute treatment in respect of which the person to whom the treatment is provided chooses to receive a benefit from a private health insurer.

Note: hospital treatment and hospital-substitute treatment have the same meaning as defined in the *Health Insurance Act 1973.*

***bulk-billed:***  a medical service is ***bulk‑billed*** if:

1. a medicare benefit is payable to a person in relation to the service; and
2. under an agreement entered into under section 20A of the Act:
   1. the person assigns to the medical practitioner by whom, or on whose behalf, the service is provided, the person’s right to the payment of the medicare benefit; and
   2. the medical practitioner accepts the assignment as full payment of the medical practitioner’s fee for the service provided.

***consultant psychiatrist*** means a consultant physician in the practice of the consultant physician’s specialty of psychiatry.

***general medical services table*** means the table prescribed under subsection 4(1) of the Act.

***Health professional at risk of COVID-19 virus*** means a person that:

1. has been diagnosed with COVID-19 virus but who is not a patient of a hospital; or
2. has been required to isolate themselves in quarantine in accordance with home isolation guidance issued by Australian Health Protection Principal Committee.

***patient at risk of COVID-19 virus*** means a person that:

1. has been diagnosed with COVID-19 virus but who is not a patient of a hospital; or
2. has been required to isolate themselves in quarantine in accordance with home isolation guidance issued by Australian Health Protection Principal Committee; or
3. is considered more susceptible to the COVID-19 virus being a person who is:
4. at least 70 years old; or
5. at least 50 years old and is of Aboriginal or Torres Strait Islander descent; or
6. pregnant; or
7. a parent of a child under 12 months; or
8. already under treatment for chronic health conditions or is immune compromised.

***relevant provisions*** means all provisions, of the Act and regulations made under the Act, and the *National Health Act 1953* and regulations made under the *National Health Act 1953*, relating to medical services, professional services or items.

***relevant service***means a health service, as defined in subsection 3C(8) of the Act, that is specified in a Schedule.

***Schedule***means a Schedule to this instrument.

Note: The following terms are defined in subsection 3(1) of the Act:

* clinically relevant service;
* general medical services table;
* item;
* medical practitioner;
* professional service.

***telehealth attendance*** means a professional attendance by video conference where the health practitioner:

1. has the capacity to provide the full service through this means safely and in accordance with professional standards; and
2. is satisfied that it is clinically appropriate to provide the service to the patient; and
3. maintains a visual and audio link with the patient; and
4. is satisfied that the software and hardware used to deliver the service meets the applicable laws for security and privacy.

(2) Unless the contrary intention appears, a reference in this instrument to a provision of the Act or the *National Health Act 1953* or regulations made under the Act or under the *National Health Act 1953* as applied, adopted or incorporated in relation to specifying a matter is a reference to those provisions as in force from time to time and any other reference to provisions of an Act or regulations is a reference to those provisions as in force from time to time.

6. Treatment of relevant services

For subsection 3C(1) of the Act, a relevant service, provided in accordance with this instrument and as a clinically relevant service, is to be treated, for the relevant provisions, as if:

* + 1. it were both a professional service and a medical service; and
    2. there were an item in the general medical services table that:
    3. related to the service; and
    4. specified for the service a fee in relation to each State, being the fee specified in the Schedule in relation to the service.

7. Application of provisions of the general medical services table

1. Clause 1.1.5 of the general medical services table shall have effect as if items 91822 to 91826 of this Determination were specified in subclause 1.1.5(1) of the general medical services table.
2. Clause 1.2.2 of the general medical services table shall have effect as if items in Schedule 1 of this Determination were specified in clause 1.2.2.
3. Clause 1.2.4 of the general medical services table shall have effect as if items in Schedule 1 of this Determination were specified in subclause 1.2.4(1).

Schedule 1 – relevant services

Division 1.1 – Services and fees – specialist attendances via video conference

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| **Group A40 – COVID-19 – medical practitioner telehealth services** | | |
| **Subgroup 4 – COVID-19 – specialist attendances telehealth services** | | |
| **Item** | **Description** | **Fee ($)** |
| 91822 | Telehealth attendance for a person by a specialist in the practice of the specialist’s specialty if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the specialist is a health professional at risk of COVID-19 virus; and 2. the attendance follows referral of the patient to the specialist; and 3. the attendance was of more than 5 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed.   Where the attendance was other than a second or subsequent attendance as part of a single course of treatment. | 88.25 |
| 91823 | Telehealth attendance for a person by a specialist in the practice of the specialist’s specialty if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the specialist is a health professional at risk of COVID-19 virus; and 2. the attendance follows referral of the patient to the specialist; and 3. the attendance was of more than 5 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed.     Where the attendance is after the first attendance as part of a single course of treatment. | 44.35 |

Division 1.2 – Services and fees – consultant physician (other than psychiatry) attendances via video conference

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| **Group A40 – COVID-19 – medical practitioner telehealth services** | | | | | | | | |
| **Subgroup 5 – COVID-19 – consultant physician telehealth services** | | | | | | | | | | |
| **Item** | | | | **Description** | | | | **Fee ($)** | | |
| 91824 | | Telehealth attendance for a person by a consultant physician in the practice of the consultant physician’s specialty (other than psychiatry) if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant physician is a health professional at risk of COVID-19 virus; and 2. the attendance follows referral of the patient to the specialist; and 3. the attendance was of more than 5 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed.     Where the attendance was other than a second or subsequent attendance as part of a single course of treatment. | | | 155.60 | | | |
| 91825 | | | | Telehealth attendance for a person by a consultant physician in the practice of the consultant physician’s specialty (other than psychiatry) if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant physician is a health professional at risk of COVID-19 virus; and 2. the attendance follows referral of the patient to the specialist; and 3. the attendance was of more than 5 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed.   Where the attendance is not a minor attendance after the first as part of a single course of treatment. | | | 77.90 | | | |
| 91826 | | | | | Telehealth attendance for a person by a consultant physician in the practice of the consultant physician’s specialty (other than psychiatry) if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the specialist is a health professional at risk of COVID-19 virus; and 2. the attendance follows referral of the patient to the specialist; and 3. the attendance was of more than 5 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed.   Where the attendance is a minor attendance after the first as part of a single course of treatment. | | | 44.35 | | | |

Division 1.3 – Services and fees – Consultant psychiatrist attendances via video conference

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| **Group A40 – COVID-19 – medical practitioner telehealth services** | | | | | | |
| **Subgroup 6 – COVID-19 – consultant psychiatrist telehealth services** | | | | | | |
| **Item** | | **Description** | | | | **Fee($)** |
| 91827 | | Telehealth attendance for a person by a consultant psychiatrist; if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant psychiatrist is a health professional at risk of COVID-19 virus; and 2. the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and 3. the attendance was not more than 15 minutes duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed. | | 44.70 | |
| 91828 | | Telehealth attendance for a person by a consultant psychiatrist; if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant psychiatrist is a health professional at risk of COVID-19 virus; and 2. the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and 3. the attendance was of more than 15 minutes, but not more than 30 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed. | 89.15 | | |
| 91829 | | Telehealth attendance for a person by a consultant psychiatrist; if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant psychiatrist is a health professional at risk of COVID-19 virus; and 2. the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and 3. the attendance was of more than 30 minutes, but not more than 45 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed. | 137.25 | | |
| 91830 | | Telehealth attendance for a person by a consultant psychiatrist; if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant psychiatrist is a health professional at risk of COVID-19 virus; and 2. the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and 3. the attendance was of more than 45 minutes, but not more than 75 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed. | 189.40 | | |
| 91831 | | Telehealth attendance for a person by a consultant psychiatrist; if:   1. the attendance is where:    * 1. the person is a patient at risk of COVID-19 virus; or      2. the consultant psychiatrist is a health professional at risk of COVID-19 virus; and 2. the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner; and 3. the attendance was of more than 75 minutes in duration; and 4. the patient is not an admitted patient; and 5. the service is bulk-billed. | 219.80 | | |