



Health Insurance (Section 3C General Medical Services – COVID-19 Telehealth and Telephone Attendances) Amendment Determination 2020

I, David Weiss, delegate of the Minister for Health, make the following Determination.

Dated 3 April 2020

David Weiss
First Assistant Secretary
Medical Benefits Division
Department of Health

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1 Name

This instrument is the *Health Insurance (Section 3C General Medical Services – COVID-19 Telehealth and Telephone Attendances) Amendment 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. Sections 1 to 4	Immediately after the commencement of the <i>Health Insurance (Section 3C General Medical Services – COVID-19 Telehealth and Telephone Attendances) Determination 2020</i> .	
2. Schedule 1	Immediately after the commencement of the <i>Health Insurance (Section 3C General Medical Services – COVID-19 Telehealth and Telephone Attendances) Determination 2020</i> .	
3. Schedule 2	The day after this instrument is registered.	

Note: This table relates only to the provisions of this instrument as originally made.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

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

4 Schedules

Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1— Amendments

Health Insurance (Section 3C General Medical Services – COVID-19 Telehealth and Telephone Attendances) Determination 2020

- 1. Subsection 5(1) (definition of *admitted patient*, paragraph (b))**
Omit “choses”, substitute “chooses”.
- 2. Subsection 5(1) (definition of *eating disorder psychological treatment service*, paragraphs (d) and (e))**
Omit “and” (wherever appearing), substitute “or”.
- 3. Subsection 5(1) (after the definition of *eligible speech pathologist*)**
Insert:
focussed psychological strategies has the meaning given by clause 2.22.1 of the general medical services table.
- 4. Paragraph 8(3)(b)**
Omit “of the general medical services table”, substitute “of the Other Medical Practitioner Determination”.
- 5. Schedule 1 (subclause 1.1.1(2))**
Omit subclause.
- 6. Schedule 1 (subclause 1.1.1(3))**
Re-number as subclause (2).
- 7. Schedule 1 (paragraph 1.1.3(1)(b))**
Omit “11 of 12”, substitute “11 or 12”.
- 8. Schedule 1 (heading of subclause 1.1.3A(1))**
Omit “92101, 92102, 92026 and 92027”, substitute “92026, 92027, 92057, 92058, 92070, 92071, 92101 and 92102”.
- 9. Schedule 1 (subclause 1.1.3A(1))**
Omit “92101 and 92102”, substitute “92026, 92027, 92057, 92058, 92070, 92071, 92101 and 92102”.
- 10. Schedule 1 (subparagraph 1.1.3A(1)(c))**
After “for items” insert “92070, 92071,”.
- 11. Schedule 1 (subparagraph 1.1.3A(1)(d))**
Omit “92026 and 92027”, substitute “92026, 92027, 92057 and 92058”.

12. Schedule 1 (subclause 1.1.4(1))

Repeal subclause, substitute:

- (1) Items 92024 and 92068 apply only to a service for a patient who suffers from at least one medical condition that has been (or is likely to be) present for at least 6 months or is terminal.
- (2) Items 92025 to 92028 and 92069 to 92072 apply only to a service for a patient who suffers from at least one medical condition that:
 - (a) has been (or is likely to be) present for at least 6 months or is terminal; and
 - (b) requires ongoing care from at least 3 persons who provide treatment or a service to the patient but who are not family carers of the patient, each of whom provides a different kind of treatment or service to the patient, and at least one of whom is a medical practitioner.

13. Schedule 1 (table at subclause 1.1.6(2), item 1, column 2)

Omit “231, 731, 233”, substitute “231, 232, 233”.

14. Schedule 1 (table at subclause 1.1.6(2), item 4, column 2)

Omit “92068, 92069, 92070 or 92070”, substitute “92056, 92057, 92068, 92069, 92070, 92072, 92100 or 92101”.

15. Schedule 1 (subclause 1.1.8(1))

Omit “29055”, substitute “92055”.

16. Schedule 1 (subclause 1.1.8(2))

Omit subclause, substitute:

- (2) Items 92055 and 92099 apply only to a service for a patient who suffers from at least one medical condition that has been (or is likely to be) present for at least 6 months or is terminal.
- (3) Items 92056 to 92059 and 92100 to 92103 apply only to a service for a patient who suffers from at least one medical condition that:
 - (a) has been (or is likely to be) present for at least 6 months or is terminal; and
 - (b) requires ongoing care from at least 3 persons who provide treatment or a service to the patient but who are not family carers of the patient, each of whom provides a different kind of treatment or service to the patient, and at least one of whom is a medical practitioner.

17. Schedule 1 (table at subclause 1.1.9(3), item 1, column 2)

Omit “92024 or 92026 apply”, substitute “92024, 92055, 92068 or 92099 applies”.

18. Schedule 1 (table at subclause 1.1.9(3), item 2, column 2)

Omit “92025 or 92069”, substitute “92025, 92026, 92069 or 92100”.

19. Schedule 1 (table at subclause 1.1.9(3), item 3, column 2)

Omit “92026 or 92070”, substitute “92026, 92057, 92070 or 92101”.

20. Schedule 1 (subclauses 1.1.11(6) and 1.1.11(8))

Omit “items 92073 to 92078, 92029 to 92034, 92060 to 92065, 92104 to 92109 or item 92133”, substitute “items 92133”.

21. Schedule 1 (subclause 1.1.11(9))

Omit subclause.

22. Schedule 1 (subclause 1.1.11(10))

Re-number as subclause (9).

23. Schedule 1 (subclause 1.1.11(11))

Re-number as subclause (10).

24. Schedule 1 (subclause 1.1.11(12))

Re-number as subclause (11).

25. Schedule 1 (title of table at subclause 1.1.12(2))

Omit “general practice telehealth”.

26. Schedule 1 (Group A40, Subgroup 13, item 92028 column 2)

Omit “or items applies”, substitute “applies”.

27. Schedule 1 (Group A40, Subgroup 13, items 92024, 92025, 92026 and 92027, column 2)

Omit “or items 92074 to 92078 or 92030 to 92034”.

28. Schedule 1 (Group A40, Subgroup 13, items 92055, 92056, 92057 and 92058, column 2)

Omit “, items 92074 to 92078 or 92030 to 92034,”.

29. Schedule 1 (Group A40, Subgroup 13, item 92057, column 2)

Omit “Telehealth contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician), to”, substitute “Contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician) by telehealth to”.

30. Schedule 1 (Group A40, Subgroup 13, item 92058, column 2)

Omit “Telehealth contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician) to”, substitute “Contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician) by telehealth to”.

31. Schedule 1 (Group A40, Subgroup 13, item 92059, column 3)

Omit “68.55”, substitute “68.85”.

32. Schedule 1 (Group A40, Subgroup 14, items 92068, 92069, 92070 or 92071, column 2)

Omit “, items 235 to 240, or items 92074 to 92078 or 92030 to 92034”, substitute “or items 235 to 240”.

33. Schedule 1 (Group A40, Subgroup 14, item 92072, column 2)

Omit “, item 229, or items 92074 to 92078 or 92030 to 92034, or items 92024 or 92068”, substitute “or item 229”.

34. Schedule 1 (Group A40, Subgroup 14, items 92072 column 2)

Omit “or items applies”, substitute “applies”.

35. Schedule 1 (Group A40, Subgroup 14, items 92099, 92100, 92101 and 92102 , column 2)

Omit “, items 92074 to 92078 or 92030 to 92034,”.

36. Schedule 1 (Group A40, Subgroup 14, item 92103, column 3)

Omit “68.55”, substitute “68.85”.

37. Schedule 2 (title of table at subclause 2.1.1(1))

Omit “– medical practitioner telehealth”.

38. Schedule 2 (Group A40, Subgroup 9, item 91838, column 2)

Omit the contents of the cell, substitute:

Phone attendance for a person by a consultant psychiatrist; if:

- (a) the attendance follows a referral of the patient to the consultant psychiatrist by a referring practitioner and
- (b) the attendance was at least 15 minutes, but not more than 30 minutes in duration.

39. Schedule 2 (Group A40, Subgroup 26, item 92179, column 2)

Omit “at consulting rooms”.

40. Schedule 2 (Group T4, Subgroup 1, item 91850, column 2)

Omit “telehealth service”, substitute “telehealth attendance”.

41. Schedule 2 (Group T4, Subgroup 1, item 91852, column 2)

Omit “attendance at consulting rooms, a hospital or a residential aged care facility or”.

42. Schedule 2 (Group T4, Subgroup 2, item 91855, column 2)

Omit “phone service”, substitute “phone attendance”.

43. Schedule 2 (Group T4, Subgroup 2, item 91857, column 2)

Omit “other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which any other item applies”, substitute “(other than a service to which any other item applies)”.

44. Schedule 3 (Group M18, heading of Subgroup 12)

Omit “telephone allied health services”, substitute “general allied health phone services”.

45. Schedule 3 (Group M18, Subgroup 13, item 93026, column 2)

Omit “,(but not as an admitted patient of a hospital)”.

46. Schedule 3 (Group M18, Subgroup 14, item 93029, column 2)

Omit “,(but not as an admitted patient of a hospital)”.

47. Schedule 3 (Group M18, Subgroup 15, items 93033 and 93036, column 2)

After “audiologist,” (wherever occurring) insert “optometrist,”.

48. Schedule 3 (Group M18, Subgroup 16, items 93041 and 93044, column 2)

After “audiologist,” (wherever occurring) insert “optometrist,”.

49. Schedule 3 (Group M18, heading of Subgroup 18)

Omit “telephone”, substitute “phone”

Schedule 2— Amendments

Health Insurance (Section 3C General Medical Services – COVID-19 Telehealth and Telephone Attendances) Determination 2020

1. Schedule 1 (subclause 1.1.5(1))

Omit paragraphs (a) and (b), substitute:

- (a) any items specified in paragraphs 2.18.11(a), (b), (c), and (d) of the general medical services table;
- (b) any items in Division 1.2 or Division 1.10 of the Other Medical Practitioner Determination; and
- (c) items 91790, 91800, 91801, 91802, 91795, 91809, 91810, 91811, 91792, 91803, 91804, 91805, 91797, 91812, 91813, 91814, 91794, 91806, 91807, 91808, 91799, 91815, 91816, 91817, 92210, 92216, 92211 and 92217.

2. Schedule 1 (subclause 1.1.8(1))

Omit paragraph (c), substitute:

- (c) items 91790, 91800, 91801, 91802, 91795, 91809, 91810, 91811, 91792, 91803, 91804, 91805, 91797, 91812, 91813, 91814, 91794, 91806, 91807, 91808, 91799, 91815, 91816, 91817, 92210, 92216, 92211 and 92217.

3. Schedule 1 (Group A40, Subgroup 1, items 91792, 91803, 91804 and 91805, column 2)

Omit “medical practitioner” (wherever occurring), substitute “medical practitioner (not including a general practitioner, specialist or consultant physician)”.

4. Schedule 1 (Group A40, Subgroup 2, items 91797, 91812, 91813 and 91814, column 2)

Omit “medical practitioner” (wherever occurring), substitute “medical practitioner (not including a general practitioner, specialist or consultant physician)”.

5. Schedule 2 (Group T4, Subgroup 1, item 91850, column 2)

Repeal contents of cell, substitute:

Antenatal telehealth service provided by a midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner, to a maximum of 10 services per pregnancy, if:

- (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and
- (b) the service is not performed in conjunction with another antenatal attendance item in Group T4 for the same patient on the same day by the same practitioner.

6. Schedule 2 (Group T4, Subgroup 2, item 91855, column 2)

Repeal contents of cell, substitute:

Antenatal phone service provided by a midwife, nurse or an Aboriginal and Torres Strait Islander health practitioner, to a maximum of 10 services per pregnancy, if:

- (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and
- (b) the service is not performed in conjunction with another antenatal attendance item in Group T4 for the same patient on the same day by the same practitioner.