

Health Insurance (Section 3C General Medical Services - Optometric Services) Determination 2020

I, Paul McBride, delegate of the Minister for Health, make the following determination.

Dated 10 June 2020

Paul McBride 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 - Optometric 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	1 July 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This table relates only to the provisions of this instrument as originally made.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. Authority

This instrument is made under the *Health Insurance Act 1973*.

4. Revocation

The Health Insurance (Optometric services) Determination 2016 is revoked.

5. Definitions

(1) In this instrument:

Act means the Health Insurance Act 1973.

bulk-billed for a relevant service, means:

- (a) a medicare benefit is payable to a person in relation to the service; and
- (b) under an agreement entered into under section 20A of the Act:
 - (i) the person assigns, to the person by whom the service is provided, his or her right to the payment of the medicare benefit; and
 - (ii) the second-mentioned person accepts the assignment in full payment of his or her fee for the service provided.

care recipient means a person receiving residential care under section 21-2 of the *Aged Care Act 1997*.

institution has the same meaning as in the general medical services table.

old item 10900 means item 10900 of the general medical services table as in force at any time before the repeal of the item by Part 1 of Schedule 1 to the Health Insurance Legislation Amendment (Optometric Services and Other Measures) Regulation 2014.

relevant provisions means all provisions, of the Act and regulations made under the Act, and the *National Health Act 1953* and regulations made under that Act, 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 the Schedule.

residential aged care facility means a facility where residential care (within the meaning given by section 41-3 of the *Aged Care Act 1997*) is provided.

Schedule means the Schedule to this instrument.

telehealth eligible area has the same meaning as in the general medical services table

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

- clinically relevant
- general medical services table
- optometrist
- (2) In this instrument, *Group A10* refers to the group of all the relevant services specified in items the Schedule, *Subgroup 1 of Group A10* refers to the group of relevant services specified in items 10905 to 10944 of the Schedule and *Subgroup 2 of Group A10* refers to the group of relevant services specified in items 10945 to 10948 of the Schedule.
- (3) 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) a relevant service, other than the service described in item 10944, provided in accordance with this instrument and as a clinically relevant service, is to be treated, for the relevant provisions, as if:
 - (i) it were both a professional service and a medical service; and
 - (ii) there were an item in the general medical services table that:
 - (A) related to the service; and
 - (B) specified for the service a fee in relation to each State, being the fee specified in the Schedule in relation to the service.

- (b) the relevant service described in item 10944, provided in accordance with this instrument and as a clinically relevant service, is to be treated, for the relevant provisions of the Act other than subsection 3(5), as if:
 - (i) it were both a professional service and a medical service; and
 - (ii) there were an item in the general medical services table that:
 - (A) related to the service; and
 - (B) 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 item 10929

Item 10929 does not apply to a service if the patient's requirement for contact lenses is only for any of the following reasons:

- (a) because the patient does not want to wear spectacles for reasons of appearance;
- (b) because the patient wants contact lenses for work or sporting purposes;
- (c) because the patient has difficulty in using, or cannot use, spectacles for psychological reasons.

8. Application of items 10931, 10932 and 10933

If item 10931, 10932 or 10933 applies to a service, the fee mentioned in that item applies in addition to the fee mentioned in another item in Subgroup 1 of Group A10 that applies to the service.

9. Application of items 10940 and 10941

- (1) For this section, the following are *perimetry services*:
 - (a) a service described in item 10940;
 - (b) a service described in item 10941.
- (2) For a particular patient, a maximum of two perimetry services apply in a 12 month period.

10. Limitation on item 10943

Item 10943 does not apply to a service used to assess learning difficulties or learning disabilities.

11. Limitation on items

- (1) Item 10943 may only apply to a service in respect of a particular patient once in a 12 month period.
- (2) Item 10942 may only apply to a service in respect of a particular patient twice in a 12 month period.

(3) Items 10921 to 10929 may only apply to a service in respect of a particular patient once in a 36 month period.

12. Limitation on item 10944

Item 10944 does not apply to a service on the same occasion as a service mentioned in any of items 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915, 10916 and 10918.

13. Application of items 10945 and 10946

Items 10945 and 10946 do not apply to a service if the patient or specialist travels to a place in order for the patient to satisfy the requirement in subparagraph (c)(i) of the item that, at the time of the attendance, the patient is at least 15 kilometres by road from the specialist.

14. Application of items 10945 to 10948

Items 10945 to 10948 only apply to a service if the video conferencing consultation in which the patient is participating is a service for which there is an item in the general medical services table, or treated as being in the table because of subsection 3C(1) of the Act.

15. Professional attendance items and services provided with nonmedicare services

- (1) Clause 1.2.5 of the general medical services table has effect as if items 10905 to 10929 were also specified in subclause 1.2.5(1).
- (2) Clauses 1.2.8 and 1.2.9 of the general medical services table have effect as if items 10905 to 10948 were also specified in those clauses.

Schedule – Relevant services

Item	10 - Optometric services provided by optometrist Service	Fee (\$)
Subgroup	1 – General	(17
10905	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has been referred by another optometrist who is not associated with the optometrist to whom the patient is referred	68.85
10907	Professional attendance of more than 15 minutes in duration, being the first in a course of attention if the patient has attended another optometrist for an attendance to which this item or item 10905, 10910, 10911, 10912, 10913, 10914 or 10915 applies, or to which old item 10900 applied:	34.50
	(a) for a patient who is less than 65 years of age—within the previous 36 months; or	
	(b) for a patient who is at least 65 years of age—within the previous 12 months	
10910	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if:	68.85
	(a) the patient is less than 65 years of age; and	
	(b) the patient has not, within the previous 36 months, received a service to which:	
	(i) this item or item 10905, 10907, 10912, 10913, 10914 or 10915 applies; or	
	(ii) old item 10900 applied	
10911	Professional attendance of more than 15 minutes in duration,	68.85
	being the first in a course of attention, if:	
	(a) the patient is at least 65 years of age; and	
	(b) the patient has not, within the previous 12 months,	
	received a service to which:	
	(i) this item, or item 10905, 10907, 10910, 10912,	
	10913, 10914 or 10915 applies; or	
	(ii) old item 10900 applied	

Item	Service	Fee (\$)
10912	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has suffered a significant change of visual function requiring comprehensive reassessment:	68.85
	(a) for a patient who is less than 65 years of age—within 36 months of an initial consultation to which:	
	(i) this item, or item 10905, 10907, 10910, 10913, 10914 or 10915 at the same practice applies; or	
	(ii) old item 10900 at the same practice applied; or	
	(b) for a patient who is at least 65 years of age—within 12 months of an initial consultation to which:	
	(i) this item, or item 10905, 10907, 10910, 10911, 10913, 10914 or 10915 at the same practice applies; or	
	(ii) old item 10900 at the same practice applied	
10913	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has new signs or symptoms, unrelated to the earlier course of attention, requiring comprehensive reassessment:	68.85
	(a) for a patient who is less than 65 years of age—within 36 months of an initial consultation to which:	
	(i) this item, or item 10905, 10907, 10910, 10912, 10914 or 10915 at the same practice applies; or	
	(ii) old item 10900 at the same practice applied; or	
	(b) for a patient who is at least 65 years of age—within 12 months of an initial consultation to which:	
	(i) this item, or item 10905, 10907, 10910, 10911, 10912, 10914 or 10915 at the same practice applies; or	
	(ii) old item 10900 at the same practice applied	
10914	Professional attendance of more than 15 minutes in duration, being the first in a course of attention, if the patient has a progressive disorder (excluding presbyopia) requiring comprehensive reassessment:	68.85
	(a) for a patient who is less than 65 years of age—within 36 months of an initial consultation to which:	
	(i) this item, or item 10905, 10907, 10910, 10912, 10913 or 10915 applies; or	
	(ii) old item 10900 applied; or	
	(b) for a patient who is at least 65 years of age—within 12 months of an initial consultation to which:	
	(i) this item, or item 10905, 10907, 10910, 10911, 10912, 10913 or 10915 applies; or	
	(ii) old item 10900 applied	

Item	Service	Fee (\$)
10915	Professional attendance of more than 15 minutes in duration, being the first in a course of attention involving the examination of the eyes, with the instillation of a mydriatic, of a patient with diabetes mellitus, requiring comprehensive reassessment	68.85
10916	Professional attendance, being the first in a course of attention, of not more than 15 minutes in duration (other than a service associated with a service to which item 10931, 10932, 10933, 10940, 10941, 10942 or 10943 applies)	34.50
10918	Professional attendance, being the second or subsequent in a course of attention and being unrelated to the prescription and fitting of contact lenses (other than a service associated with a service to which item 10940 or 10941 applies)	34.50
10921	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	171.00
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients with myopia of 5.0 dioptres or greater (spherical equivalent) in one eye	
10922	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	171.00
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients with manifest hyperopia of 5.0 dioptres or greater (spherical equivalent) in one eye	
10923	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	171.00
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients with astigmatism of 3.0 dioptres or greater in one eye	

Item	Service	Fee (\$)
10924	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	215.75
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients with irregular astigmatism in either eye, being a condition the existence of which has been confirmed by keratometric observation, if the maximum visual acuity obtainable with spectacle correction is worse than 0.3 logMAR (6/12) and if that corrected acuity would be improved by an additional 0.1 logMAR by the use of a contact lens	
10925	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	171.00
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients with anisometropia of 3.0 dioptres or greater (difference between spherical equivalents)	
10926	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	171.00
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients with corrected visual acuity of 0.7 logMAR (6/30) or worse in both eyes, being patients for whom a contact lens is prescribed as part of a telescopic system	
10927	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	215.75
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients for whom a wholly or segmentally opaque contact lens is prescribed for the alleviation of dazzle, distortion or diplopia caused by pathological mydriasis, aniridia, coloboma of the iris, pupillary malformation or distortion, significant ocular deformity or corneal opacity—whether congenital, traumatic or surgical in origin	

Item	Service	Fee (\$)
10928	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	171.00
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients who, because of physical deformity, are unable to wear spectacles	
10929	All professional attendances after the first, being those attendances regarded as a single service, in a single course of attention involving the prescription and fitting of contact lenses, being a course of attention for which the first attendance is a service to which:	215.75
	(a) item 10905, 10907, 10910, 10911, 10912, 10913, 10914, 10915 or 10916 applies; or	
	(b) old item 10900 applied	
	For patients who have a medical or optical condition (other than myopia, hyperopia, astigmatism, anisometropia or a condition to which item 10926, 10927 or 10928 applies) requiring the use of a contact lens for correction, if the condition is specified on the patient's account	
10930	All professional attendances regarded as a single service in a single course of attention involving the prescription and fitting of contact lenses if the patient meets the requirements of an item in the series 10921 to 10929 and requires a change in contact lens material or basic lens parameters, other than a simple power change, because of a structural or functional change in the eye or an allergic response within 36 months of the fitting of a contact lens covered by items 10921 to 10929	171.00
10931	A service to which an item in Subgroup 1 of Group A10 applies (other than this item or item 10916, 10932, 10933, 10940 or 10941), if the service:	24.00
	(a) is provided:	
	(i) during a home visit to a person; or	
	(ii) in a residential aged care facility; or	
	(iii) in an institution; and	
	(b) is provided to a single patient at a single location on a single occasion; and	
	(c) is:	
	(i) bulk-billed for the fees for this item and another item in the table applying to the service; or	
	(ii) not bulk-billed for the fees for this item and another item in the table applying to the service	

Item	Service	Fee (\$)
10932	A service to which an item in Subgroup 1 of Group A10 applies (other than this item or item 10916, 10931, 10933, 10940 or 10941), if the service:	12.00
	(a) is provided:	
	(i) during a home visit to a person; or	
	(ii) in a residential aged care facility; or	
	(iii) in an institution; and	
	(b) is provided to each of 2 patients at a single location on a single occasion; and	
	(c) is:	
	(i) bulk-billed for the fees for this item and another item in the table applying to the service; or	
	(ii) not bulk-billed for the fees for this item and another item in the table applying to the service	
10933	A service to which an item in Subgroup 1 of Group A10 applies (other than this item or item 10916, 10931, 10932, 10940 or 10941), if the service:	7.90
	(a) is provided:	
	(i) during a home visit to a person; or	
	(ii) in a residential aged care facility; or	
	(iii) in an institution; and	
	(b) is provided to each of 3 patients at a single location on a single occasion; and	
	(c) is:	
	(i) bulk-billed for the fees for this item and another item in the table applying to the service; or	
	(ii) not bulk-billed for the fees for this item and another item in the table applying to the service	
10940	Full quantitative computerised perimetry (automated absolute static threshold), with bilateral assessment and report, if indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain that:	65.70
	(a) is not a service involving multifocal multichannel objective perimetry; and	
	(b) is performed by an optometrist;	
	other than a service associated with a service to which item 10916, 10918, 10931, 10932 or 10933 applies	

Item	Service	Fee (\$)
10941	Full quantitative computerised perimetry (automated absolute static threshold) with unilateral assessment and report, if indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain that:	39.65
	(a) is not a service involving multifocal multichannel objective perimetry; and	
	(b) is performed by an optometrist;	
	other than a service associated with a service to which item 10916, 10918 10931, 10932 or 10933 applies	
0942	Testing of residual vision to provide optimum visual performance for a patient who has best corrected visual acuity of 6/15 or N.12 or worse in the better eye or a horizontal visual field of less than 120 degrees and within 10 degrees above and below the horizontal midline, involving one or more of the following:	34.50
	(a) spectacle correction;	
	(b) determination of contrast sensitivity;	
	(c) determination of glare sensitivity;	
	(d) prescription of magnification aids;	
	other than a service associated with a service to which item 10916, 10921, 10922, 10923, 10924, 10925, 10926, 10927, 10928, 10929 or 10930 applies	
10943	Additional testing to confirm diagnosis of, or establish a treatment regime for, a significant binocular or accommodative dysfunction, in a patient aged 3 to 14 years, including assessment of one or more of the following:	34.50
	(a) accommodation;	
	(b) ocular motility;	
	(c) vergences;	
	(d) fusional reserves;	
	(e) cycloplegic refraction;	
	other than a service to which item 10916, 10921, 10922, 10923, 10924, 10925, 10926, 10927, 10928, 10929 or 10930 applies	
0944	Cornea, complete removal of embedded foreign body from—not more than once on the same day by the same optometrist (excluding aftercare)	74.40

Group A10	Optometric services provided by optometrist	
Item	Service	Fee (\$)
Subgroup 2 -	- Telehealth attendance	
10945	A professional attendance of less than 15 minutes (whether or not continuous) by an optometrist providing clinical support to a patient who:	34.50
	(a) is participating in a video conferencing consultation with a specialist practising in the speciality of ophthalmology; and	
	(b) is not an admitted patient; and	
	(c) either:	
	(i) is located within a telehealth eligible area and, at the time of the attendance, is at least 15 kilometres by road from the specialist mentioned in paragraph (a); or	
	(ii) is a patient of an Aboriginal Medical Service, or an Aboriginal Community Controlled Health Service, for which a direction under subsection 19(2) of the Act applies	
10946	A professional attendance of at least 15 minutes (whether or not continuous) by an optometrist providing clinical support to a patient who:	68.85
	(a) is participating in a video conferencing consultation with a specialist practising in the speciality of ophthalmology; and	
	(b) is not an admitted patient; and	
	(c) either:	
	(i) is located within a telehealth eligible area and, at the time of the attendance, is at least 15 kilometres by road from the specialist mentioned in paragraph (a); or	
	(ii) is a patient of an Aboriginal Medical Service, or an Aboriginal Community Controlled Health Service, for which a direction under subsection 19(2) of the Act applies	
10947	A professional attendance (not being a service to which any other item applies) of less than 15 minutes (whether or not continuous) by an optometrist providing clinical support to a patient who:	34.50
	(a) is participating in a video conferencing consultation with a specialist practising in the speciality of ophthalmology; and	
	(b) at the time of the attendance, is located at a residential aged care facility (whether or not at consulting rooms situated within the facility); and	
	(c) is a care recipient in the facility; and	
	(d) is not a resident of a self-contained unit;	
	for an attendance on one occasion—each patient	

Group A10 – Optometric services provided by optometrist		-
Item	Service	Fee (\$)
10948	A professional attendance (not being a service to which any other item applies) of at least 15 minutes (whether or not continuous) by an optometrist providing clinical support to a patient who:	68.85
	(a) is participating in a video conferencing consultation with a specialist practising in the speciality of ophthalmology; and	
	(b) at the time of the attendance, is located at a residential aged care facility (whether or not at consulting rooms situated within the facility); and	
	(c) is a care recipient in the facility; and	
	(d) is not a resident of a self-contained unit;	
	for an attendance on one occasion—each patient	