



Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health and Chronic Disease Management Services) Amendment Determination 2020

I, Liz Dowd, delegate of the Minister for Health, make the following Determination.

Dated 23 December 2020

Liz Dowd
A/g First Assistant Secretary
Medical Benefits Division
Health Resourcing Group
Department of Health

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1 Name

This instrument is the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health Services and Chronic Disease Management) 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 registration of this instrument	
2. Schedule 1	This Schedule is taken to have commenced immediately after the commencement of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health Services) Amendment (Care Recipient in a Residential Aged Care Facility) Determination 2020</i> .	

Note: This table relates only to the provisions of this instrument as originally made.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Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.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 – Expansion of GP and Allied Health Mental Health Services) Determination 2020

1 Subsection 5(1) (definition of *better access initial treatment service*)

Repeal the definition.

2 Subsection 5(1) (definition of *better access subsequent treatment service*)

Repeal the definition and substitute:

better access subsequent treatment service means a service to which an item in Schedule 1 or 2 (excluding Group A42) of this instrument applies.

care recipient has the meaning given by the general medical services table.

course of treatment, for items 93375, 93376, 93381, 93382, 93383, 93384, 93385 and 93386, has the meaning giving by paragraph 4(1)(a) of the definition in the Allied Health Services Determination.

3 Subsection 7(2)

Repeal the subsection and substitute:

An item in Group A41, M25 or M26 of this instrument does not apply if a person has received 10 **better access subsequent treatment services** for that calendar year.

4 Subsection 11(1)

Repeal the subsection and substitute:

(1) For the first patient attended during one attendance by a general practitioner at one residential aged care facility on one occasion, the fee for the medical service described in whichever of items 2733, 2735, 93400, 93401, 93402, 93403, 93421, 93287 and 93288 applies is the amount listed in the item plus \$66.75.

5 Subsection 11(2)

Repeal the subsection and substitute:

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- (2) For the first patient attended during one attendance by a medical practitioner at one residential aged care facility on one occasion, the fee for the medical service described in whichever of items 941, 942, 93431, 93432, 93433, 93434, 93451, 93291 and 93292 applies is the amount listed in the item plus \$48.55.

6 Schedule 3 (after item 93386)

Insert:

Schedule 4—Services and fees—initial focussed psychological strategies

1 Application of focussed psychological strategies items

- (1) Items 941, 942, 2733 and 2735 apply to a service which is provided by a medical practitioner:
- (a) whose name is entered in the register maintained by the Chief Executive Medicare under section 33 of the *Human Services (Medicare) Regulations 2017*; and
 - (b) who is identified in the register as a medical practitioner who can provide services to which Subgroup 2 of Group A20 of the general medical services table applies or items 283, 285, 286, 287, 371 and 372 of the Other Medical Practitioner Determination applies; and
 - (c) who meets any training and skills requirements, as determined by the General Practice Mental Health Standards Collaboration for providing services to which Subgroup 2 of Group A20 of the general medical services table applies or items 283, 285, 286, 287, 371 and 372 of the Other Medical Practitioner Determination applies.
- (2) Items 941, 942, 2733 and 2735 do not apply to:
- (a) a service which:
 - (i) is provided to a patient who, in a calendar year, has already been provided with 6 services to which any of items 941, 942, 2733 and 2735 or any of the items in Subgroup 2 of Group A20 of the general medical services table or items 283, 285, 286, 287, 371 and 372 of the Other Medical Practitioner Determination or items 91818, 91819, 91820, 91821, 91842, 91843, 91844, 91845 of the COVID-19 Determination applies; and
 - (ii) is provided before the medical practitioner managing the GP mental health treatment plan or the psychiatrist assessment and management plan has conducted a patient review and recorded in the patient's records a recommendation that the patient have additional sessions of focussed psychological strategies in the same calendar year; or
 - (b) a service which is provided to a patient who has already been provided, in the calendar year, with 10 other services to which any of items 941, 942,

2733 and 2735 or any of the items in Subgroup 2 of A20 of the general medical services table or items 283, 285, 286, 287, 371 and 372 of the Other Medical Practitioner Determination, or items 80000 to 80015, 80100 to 80115, 80125 to 80140 or 80150 to 80165, or items 91820, 91821, 91844, 91845, 91166, 91167, 91169, 91170, 91172, 91173, 91175, 91176, 91181, 91182, 91183, 91184, 91185, 91186, 91187, 91188, 91818, 91819, 91842 and 91843 of the COVID-19 Determination apply.

Group A20–Mental health care

Subgroup 2–Focussed psychological strategies

2733	Professional attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b) the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 30 minutes, but less than 40 minutes	112.50
2735	Professional attendance by a general practitioner, for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b) the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 40 minutes	161.00

Group A7 – Acupuncture and Non-Specialist Practitioner Items

Subgroup 9 – Non Specialist Practitioner mental health care

941	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for the purpose of providing focussed psychological strategies for assessed mental disorders if: (a) the person is a care recipient in a residential aged care facility (but not as an admitted patient of a hospital); and (b) the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and (c) the service lasts at least 30 minutes, but less than 40 minutes	90.00
942	Professional attendance by a medical practitioner (not including a general practitioner, specialist or a consultant physician), for	128.80

the purpose of providing focussed psychological strategies for assessed mental disorders if:

- (a) the person is a care recipient in a residential aged care facility (but not as an **admitted patient of a hospital**); and
 - (b) the service is clinically indicated under a GP mental health treatment plan or a psychiatrist assessment and management plan; and
 - (c) the service lasts at least 40 minutes
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Health Insurance (Allied Health Services) Determination 2014

7 Subsection 4(1) (definition of course of treatment, paragraph (a))

Repeal the paragraph and substitute:

course of treatment means:

- (a) for psychological therapy and focussed psychological strategies—up to 6 services to which any of items 80000, 80001, 80005, 80010, 80011, 80015, 80100, 80101, 80105, 80110, 80111, 80115, 80125, 80126, 80130, 80135, 80136, 80140, 80150, 80151, 80155, 80160, 80161, 80165 or items 91166, 91167, 91169, 91170, 91172, 91173, 91175, 91176, 91181, 91182, 91183, 91184, 91185, 91186, 91187, 91188 of the COVID 19 Determination or items 93375, 93376, 93381, 93382, 93383, 93384, 93385 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health Services) Determination 2020* applies, provided on referral by a medical practitioner, by any of the following persons:
 - (i) an eligible clinical psychologist;
 - (ii) an eligible psychologist;
 - (iii) an eligible occupational therapist;
 - (iv) an eligible social worker; or

8 Subsection 6(4)

Repeal the subsection and substitute:

- (4) In this section, **relevant service** means a service to which any of items 283 to 287 of the *Health Insurance (Section 3C General Medical Services – Other Medical Practitioner) Determination 2018* or 2721 to 2727 of the general medical services table, or items 80000 to 80015, 80100 to 80115, 80125 to 80140, or 80150 to 80165 in Schedule 2, or items 91166 91167, 91169, 91170, 91172, 91173, 91175, 91176, 91181, 91182, 91183, 91184, 91185, 91186, 91187, 91188, 91818, 91819, 91820, 91821, 91842, 91843, 91844 and 91845 of the COVID-19 Determination, or items 941, 942, 2733, 2735, 93375, 93376, 93381 to 93386 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health Services) Determination 2020*, apply.

9 Schedule 2, Part 1 (items 10950, 10951, 10952, 10953, 10954, 10956, 10958, 10960, 10962, 10964, 10966, 10968 and 10970, column 2, after subparagraph (iii))

After the words “COVID- 19 Determination”, insert “or items 93501 to 93513 or 93524 to 93538 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

10 Schedule 2, Part 6 (items 81300, 81305, 81310, 81315, 81320, 81325, 81330, 81335, 81340, 81345, 81350, 81355, 81360, column 2, after subparagraph (iii))

After the words “COVID- 19 Determination”, insert “or items 93546 to 93558 or 93579 to 93593 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

11 Part 4 of Schedule 2 (item 81100, column 2, after paragraph (g))

After the words “COVID- 19 Determination”, insert “or items 93606, 93607 and 93608 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

12 Part 4 of Schedule 2 (item 81105, column 2, paragraph (a))

After the words “COVID-19 Determination”, insert “or items 93606, 93607 and 93608 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

13 Part 4 of Schedule 2 (item 81105, column 2, paragraph (f))

After the words “COVID-19 Determination”, insert “or items 93613, 93614 and 93615 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

14 Part 4 of Schedule 2 (item 81105, column 2, after paragraph (g))

After the words “COVID-19 Determination”, insert “or items 93613, 93614 and 93615 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

15 Part 4 of Schedule 2 (item 81110, column 2, after paragraph (g))

After the words “COVID- 19 Determination”, insert “or items 93606, 93607 and 93608 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

16 Part 4 of Schedule 2 (item 81115, column 2, paragraph (a))

After the words “COVID-19 Determination”, insert “or items 93606, 93607 and 93608 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

17 Part 4 of Schedule 2 (item 81115, column 2, paragraph (f))

After the words “COVID-19 Determination”, insert “or items 93613, 93614 and 93615 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

18 Part 4 of Schedule 2 (item 81115, column 2, after paragraph (g))

After the words “COVID-19 Determination”, insert “or items 93613, 93614 and 93615 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

19 Part 4 of Schedule 2 (item 81120, column 2, after paragraph (g))

After the words “COVID- 19 Determination”, insert “or items 93606, 93607 and 93608 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

20 Part 4 of Schedule 2 (item 81125, column 2, paragraph (a))

After the words “COVID-19 Determination”, insert “or items 93606, 93607 and 93608 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

21 Part 4 of Schedule 2 (item 81125, column 2, paragraph (f))

After the words “COVID-19 Determination”, insert “or items 93613, 93614 and 93615 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

22 Part 4 of Schedule 2 (item 81125, column 2, after paragraph (g))

After the words “COVID-19 Determination”, insert “or items 93613, 93614 and 93615 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

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

23 Subsection 8(3)

Repeal the subsection and substitute:

- (3) An item in Subgroup 3 or 10 of Group A40, Subgroups 1 to 4 of Group M18 or Subgroups 6 to 9 of Group M18 of the Schedules does not apply to a service provided to a patient who has already been provided, in the calendar year, with 10 services to which any of those items or the following items apply:
- (a) an item in Subgroup 2 of Group A20 of the general medical services table;
 - (b) items 283, 285, 286, 287, 371 and 372 of the Other Medical Practitioner Determination; or
 - (c) items 80000 to 80015, 80100 to 80115, 80125 to 80140 or 80150 to 80165 of the Allied Health Determination; or
 - (d) items 941, 942, 2733, 2735, 93375, 93376, 93381, 93382, 93383, 93374, 93385 and 93386 apply.

24 Schedule 1, Division 1.1, Table 1.1.6

Repeal the table, substitute:

Limitation on items 92024 to 92028 and 92068 to 92072

Item	Column 1 Item of the table	Column 2 Circumstances
1	92024 and 92068	(a) In the 3 months before performance of the service, being a service to which item 729, 731, 732, 231, 731, 233, 92026, 92027, 92028, 92070, 92071, 92072, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies (for reviewing a GP management plan) applies but had not been performed for the patient; and (b) the service is not performed more than once in a 12 month period; and

Limitation on items 92024 to 92028 and 92068 to 92072

Item	Column 1 Item of the table	Column 2 Circumstances
		(c) the service is not performed by a general practitioner: (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the general practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 applies because of the treatment of the palliative patient by the general practitioner
2	92025 and 92069	(a) In the 3 months before performance of the service, being a service to which item 732, 233, 92028, 92072, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies (for coordinating a review of team care arrangements, a multi-disciplinary community care plan or a multi-disciplinary discharge care plan) applies but had not been performed for the patient; and (b) the service is performed not more than once in a 12 month period; and (c) the service is not performed by a general practitioner: (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the general practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 applies because of the treatment of the palliative patient by the general practitioner
3	92026 and 92070	(a) either: (i) in the 3 months before performance of the service, being a service to which item 731, 732, 232, 233, 92027, 92028, 92071, 92072, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies but had not been performed for the patient; or (ii) in the 12 months before performance of the service, being a service that has not been performed for the patient: (A) by the general practitioner who performs the service to which item 729, 92026 or 92070 would, but for this item, apply; and

Limitation on items 92024 to 92028 and 92068 to 92072

Item	Column 1 Item of the table	Column 2 Circumstances
		(B) for which a payment has been made under item 721 or 723 of the general medical services table or 92024, 92025, 92068, 92069; and (b) the service is performed not more than once in a 3 month period
4	92027 and 92071	(a) In the 3 months before performance of the service, being a service to which item 721, 723, 729, 732, 229, 230, 231, 233, 92024, 92025, 92026, 92028, 92068, 92069, 92070, 92070, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies but had not been performed for the patient; and (b) the service is performed not more than once in a 3 month period
5	92028 and 92072	(a) In the 3 months before performance of the service, being a service to which item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies but had not been performed for the patient; and (b) once in a 3 month period; and (c) on the same day; but (d) may not be performed by a general practitioner: (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the general practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 applies because of the treatment of the palliative patient by the general practitioner

25 Schedule 1, Division 1.1, Table 1.1.9

Repeal the table, substitute:

Limitation on items 92055 to 92059 and 92099 to 92103

10 *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health and Chronic Disease Management Services) Amendment Determination 2020*

Item	Column 1 Item of the table	Column 2 Circumstances
1	92055 and 92099	<p>(a) In the 3 months before performance of the service, being a service to which item 729, 731 or 732 of the general medical services table, item 231, 232 or 233 of the Other Medical Practitioner Determination, item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> or item 92026, 92027, 92028, 92057, 92058, 92059, 92070, 92071, 92072, 92101, 92102 or 92103 applies (for reviewing a GP management plan) but had not been performed for the patient; and</p> <p>(b) a service to which item 721 of the general medical services table or 229 of the Other Medical Practitioner Determination or items 92024, 92055, 92068 or 92099 applies has not been performed in the past 12 months; and</p> <p>(c) the service is not performed more than once in a 12 month period; and</p> <p>(d) the service is not performed by a person:</p> <ul style="list-style-type: none"> (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the medical practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 of the Other Medical Practitioner Determination applies because of the treatment of the palliative patient by the medical practitioner

Limitation on items 92055 to 92059 and 92099 to 92103

Item	Column 1 Item of the table	Column 2 Circumstances
2	92056 and 92100	<p>(a) In the 3 months before performance of the service, being a service to which item 732 of the general medical services table or item 233 of the Other Medical Practitioner Determination, item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> or item 92028, 92059, 92072 or 92103 applies (for coordinating a review of team care arrangements, a multi-disciplinary community care plan or a multi-disciplinary discharge care plan) but had not been performed for the patient; and</p> <p>(b) a service to which item 723 of the general medical services table or 230 of the Other Medical Practitioner Determination or items 92025, 92026, 92069 or 92100 applies is performed not more than once in a 12 months; and</p> <p>(c) the service is performed not more than once in a 12 month period; and</p> <p>(d) the service is not performed by a person:</p> <ul style="list-style-type: none"> (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the medical practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 of the Other Medical Practitioner Determination applies because of the treatment of the palliative patient by the general practitioner
3	92057 and 92101	<p>(a) either:</p> <ul style="list-style-type: none"> (i) in the 3 months before performance of the service, being a service to which item 731 or 732 of the general medical services table or item 232 or 233 of the Other Medical Practitioner Determination, item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> or item 92027, 92028, 92058, 92059, 92071, 92072, 92102 or 92103 applies but had not been performed for the patient; or (ii) in the 12 months before performance of the service, being a service that has not been performed for the patient: <ul style="list-style-type: none"> (A) by the medical practitioner who performs the service to which item 729 of the general medical services table or item 231 of the Other Medical Practitioner Determination or item 92026, 92057, 92070 or 92101 would, but for this item, apply; and (B) for which a payment has been made under item 721 or

Limitation on items 92055 to 92059 and 92099 to 92103

Item	Column 1 Item of the table	Column 2 Circumstances
		723 of the general medical services table or item 229 or 230 of the Other Medical Practitioner Determination or item 92024, 92025, 92055, 92066, 92068, 92069, 92099 or 92100; and (b) a service to which item 729 of the general medical services table or 231 of the Other Medical Practitioner Determination or item 92026, 92057, 92070 or 92101 applies is performed not more than once in a 3 month period; and (c) the service is performed not more than once in a 3 month period.
4	92058 and 92102	(a) In the 3 months before performance of the service, being a service to which item 721, 723, 729 or 732 of the general medical services table or item 229, 230, 231 or 233 of the Other Medical Practitioner Determination, item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> or item 92024, 92025, 92026, 92028, 92055, 92056, 92057, 92059, 92068, 92069, 92070, 92072, 92099, 92100, 92101, 92103 applies but had not been performed for the patient; and (b) a service to which item 731 of the general medical services table or item 92027 or 92071 applies is performed not more than once in a 3 month period; and (c) the service is performed not more than once in a 3 month period.
5	92059 and 92103	Each service may be performed if a service to which item 732 of the general medical services table, item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> or item 92028 or 92072 has not been claimed in the past three months; (a) once in a 3 month period; and (b) on the same day; but (c) may not be performed by a person: (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the general practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 of the Other Medical Practitioner Determination applies because of the treatment of the palliative patient by the general practitioner

26 Schedule 1, Division 1.1 (items 92004, 92011, 92016 and 92023, column 2)

At the end of the cell insert:

Only if items 93470 or 93479 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020* is also not applicable within that same 9 month period.

Health Insurance (Section 3C General Medical Services – Other Medical Practitioner) Determination 2018

27 Schedule 1, Division 1.5 (item 228, column 2)

After the words “general medical services table”, insert “or items 93470 or 93479 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

28 Schedule 1, Division 1.6, Table 1.6.3

Repeat the table, substitute:

Table 1.6.3—Limitation on items 229, 230, 231, 232 and 233

Item	Column 1 Item of the table	Column 2 Circumstances
1	229	<p>(a) In the 3 months before performance of the service, being a service to which item 729, 731 or 732 of the general services table, item 231, 232 or 233, item 92026, 92027, 92028, 92057, 92058, 92059, 92070, 92071, 92072, 92101, 92102 or 92103 of the COVID-19 Determination, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies (for reviewing a GP management plan) but had not been performed for the patient; and</p> <p>(b) a service to which item 721 of the general services table or items 92024, 92026, 92055 or 92099 of the COVID-19 Determination apply has not been performed in the past 12 months</p> <p>(c) the service is not performed more than once in a 12 month period; and</p> <p>(d) the service is not performed by a person:</p> <ul style="list-style-type: none">(i) who is a recognised specialist in palliative medicine; and(ii) who is treating a palliative patient that has been referred to the medical practitioner; and

Table 1.6.3—Limitation on items 229, 230, 231, 232 and 233

Item	Column 1 Item of the table	Column 2 Circumstances
		(iii) to which an item in Subgroup 3 or 4 of Group A24 applies because of the treatment of the palliative patient by the medical practitioner
2	230	<p>(a) In the 3 months before performance of the service, being a service to which item 732 of the general services table or item 233 or item 92028, 92059, 92072 or 92103 of the COVID-19 Determination, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies (for coordinating a review of team care arrangements, a multi-disciplinary community care plan or a multi-disciplinary discharge care plan) but had not been performed for the patient; and</p> <p>(b) a service to which item 723 of the general services table or items 92025, 92056, 92069 or 92100 of the COVID-19 Determination applies is performed not more than once in a 12 months</p> <p>(c) the service is performed not more than once in a 12 month period; and</p> <p>(d) the service is not performed by a person:</p> <ul style="list-style-type: none">(i) who is a recognised specialist in palliative medicine; and(ii) who is treating a palliative patient that has been referred to the medical practitioner; and(iii) to which an item in Subgroup 3 or 4 of Group A24 applies because of the treatment of the palliative patient by the general practitioner
3	231	<p>(a) either:</p> <ul style="list-style-type: none">(i) in the 3 months before performance of the service, being a service to which item 731 or 732 of the general services table or item 232 or 233 or item 92027, 92028, 92058, 92059, 92071, 92072, 92102 or 92103 of the COVID-19 Determination, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies but had not been performed for the patient; or(ii) in the 12 months before performance of the service, being a service that has not been performed for the patient:<ul style="list-style-type: none">(A) by the medical practitioner who performs the service to which item 729 of the general services table or item 231 or item 92026, 92057, 92070 or 92101 of the COVID-19 Determination would, but for this item, apply; and(B) for which a payment has been made under item 721 or 723

Table 1.6.3—Limitation on items 229, 230, 231, 232 and 233

Item	Column 1 Item of the table	Column 2 Circumstances
		of the general medical services table or item 229 or 230 or item 92024, 92025, 92055, 92056, 92068, 92069, 92099 or 92100 of the COVID-19 Determination; and (b) a service to which item 729 of the general medical services table or item 92026, 92057, 92070 or 92101 of the COVID-19 Determination applies is performed not more than once in a 3 month period; and (c) the service is performed not more than once in a 3 month period
4	232	(a) In the 3 months before performance of the service, being a service to which item 721, 723, 729 or 732 of the general services table or item 229, 230, 231 or 233 or item 92024, 92025, 92026, 92028, 92055, 92056, 92057, 92059, 92068, 92069, 92070, 92072, 92099, 92100, 92101 or 92103 of the COVID-19 Determination, or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> applies but had not been performed for the patient; and (b) a service to which item 731 of the general services table or item 92027, 92058, 92071 or 92102 of the COVID-19 Determination applies is performed not more than once in a 3 month period; and (c) the service is performed not more than once in a 3 month period
5	233	Each service may be performed if a service to which item 732 of the general services table, item 92028, 92059, 92072 or 92103 of the COVID-19 Determination or item 93469 or 93475 of the <i>Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020</i> has not been claimed in the past three months; (a) once in a 3 month period; and (b) on the same day; but (c) may not be performed by a person: (i) who is a recognised specialist in palliative medicine; and (ii) who is treating a palliative patient that has been referred to the general practitioner; and (iii) to which an item in Subgroup 3 or 4 of Group A24 applies because of the treatment of the palliative patient by the general practitioner

29 Schedule 1, Division 1.6 (items 235, 236, 237, 238, 239 and 240, column 2, after paragraph (c))

After the words “general medical services table”, insert “, items 93469 or 93475 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Chronic Disease Management Services for Care Recipients of a Residential Aged Care Facility) Determination 2020*”.

30 Schedule 1, Division 1.9, Subdivision 1.9.4(2)

Repeal the subdivision and substitute:

- (2) Items 283, 285, 286, 287, 371 and 372 do not apply to:
- (a) a service which:
 - (i) is provided to a patient who, in a calendar year, has already been provided with 6 services to which any of the items in Subgroup 2 of Group A20 of the general medical services table or items 283, 285, 286, 287, 371 and 372 applies or items 91818, 91819, 91820, 91821, 91842, 91843, 91844, 91845 of the COVID-19 Determination applies or items 941, 942, 2733, 2735 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health Services) Determination 2020* applies; and
 - (ii) is provided before the medical practitioner managing the GP mental health treatment plan or the psychiatrist assessment and management plan has conducted a patient review and recorded in the patient’s records a recommendation that the patient have additional sessions of focussed psychological strategies in the same calendar year; or
 - (b) a service which is provided to a patient who has already been provided, in the calendar year, with 10 other services to which any of the items in Subgroup 2 of A20 of the general medical services table, items 283, 285, 286, 287, 371 and 372, or items 80000 to 80015, 80100 to 80115, 80125 to 80140 or 80150 to 80165, or items 91820, 91821, 91844, 91845, 91166, 91167, 91169, 91170, 91172, 91173, 91175, 91176, 91181, 91182, 91183, 91184, 91185, 91186, 91187, 91188, 91818, 91819, 91842 and 91843 of the COVID-19 Determination or items 941, 942, 2733, 2735, 93375, 93376, 93381 to 93386 of the *Health Insurance (Section 3C General Medical – Expansion of GP and Allied Health Mental Health Services) Determination 2020* apply.