



# **Health Insurance Amendment (Mental Health Case Conferencing Services and Indexation) Determination 2023**

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I, Daniel McCabe, delegate of the Minister for Health and Aged Care, make the following Determination.

Dated 16 March 2023

Daniel McCabe  
First Assistant Secretary  
Medicare Benefits and Digital Health Division  
Health Resourcing Group  
Department of Health and Aged Care

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## 1 Name

This instrument is the *Health Insurance Amendment (Mental Health Case Conferencing Services and Indexation) Determination 2023*.

## 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.

<b>Commencement information</b>		
<b>Column 1</b>	<b>Column 2</b>	<b>Column 3</b>
<b>Provisions</b>	<b>Commencement</b>	<b>Date/Details</b>
1. Sections 1 to 4 and anything in this instrument not elsewhere covered by this table	1 July 2023.	
2. Schedule 1	1 July 2023.	
3. Schedule 2	Immediately after the commencement of the provisions covered by table item 2.	

Note: This table relates only to the provisions of this instrument as originally made.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Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

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## Schedule 1—Indexation

### *Health Insurance (Allied Health Services) Determination 2014*

#### 1 Subsection 17(1)

Repeal the subsection, substitute:

- (1) At the start of 1 July 2023 (the *indexation day*), each amount covered by subclause (2) is replaced by the amount worked out using the following formula:

$1.036 \times$  the amount immediately before the indexation day

Note: The indexed fees could in 2023 be viewed on the Department of Health and Aged Care's MBS Online website (<http://www.health.gov.au>).

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

#### 2 Schedule 1, Division 1.1 (Table 1.1.1)

Repeal table, substitute:

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**Table 1.1.1—Amount under clause 1.1.1**

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Item	Column 1 Item/s of the table	Column 2 Fee	Column 3 Amount if not more than 6 patients (to be divided by the number of patients) (\$)	Column 4 Amount if more than 6 patients (\$)
1	181	The fee for item 179	\$23.10	\$1.85
2	187	The fee for item 185	\$23.10	\$1.85
3	191	The fee for item 189	\$23.10	\$1.85
4	206	The fee for item 203	\$23.10	\$1.85
5	761	The fee for item 733	\$22.75	\$1.80
6	763	The fee for item 737	\$22.75	\$1.80
7	766	The fee for item 741	\$22.75	\$1.80
8	769	The fee for item 745	\$22.75	\$1.80
9	772	The fee for item 733	\$40.95	\$2.90
10	776	The fee for item 737	\$40.95	\$2.90
11	788	The fee for item 741	\$40.95	\$2.90
12	789	The fee for item 745	\$40.95	\$2.90

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### 3 Amendments of listed provisions—Schedule 1

The items of the table in Schedule 1 listed in the following table are amended as set out in the table.

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<b>Amendments relating to fees</b>			
<b>Item</b>	<b>Table item</b>	<b>Omit</b>	<b>Substitute</b>
1	Item 179	14.55	15.10
2	Item 185	31.80	32.95
3	Item 189	61.55	63.75
4	Item 203	90.65	93.90
5	Item 214	187.35	194.10
6	Item 215	312.25	323.50
7	Item 218	436.90	452.65
8	Item 219	562.05	582.30
9	Item 220	624.50	646.95
10	Item 221	99.45	103.00
11	Item 222	104.75	108.50
12	Item 223	127.45	132.05
13	Item 224	50.20	52.00
14	Item 225	116.65	120.85
15	Item 226	160.90	166.70
16	Item 227	227.35	235.55
17	Item 228	179.50	186.00
18	Item 229	122.00	126.40
19	Item 230	96.70	100.15
20	Item 231	59.50	61.70
21	Item 232	59.50	61.70
22	Item 233	60.90	63.10
23	Item 235	59.80	61.95
24	Item 236	102.30	105.95
25	Item 237	170.50	176.65
26	Item 238	43.90	45.50
27	Item 239	75.30	78.00
28	Item 240	125.30	129.85

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29	Item 243	58.60	60.70
30	Item 244	27.30	28.30
31	Item 245	130.95	135.70
32	Item 249	89.65	92.90
33	Item 272	60.65	62.85
34	Item 276	89.30	92.50
35	Item 277	60.65	62.85
36	Item 279	60.65	62.85
37	Item 281	77.00	79.75
38	Item 282	113.45	117.50
39	Item 283	78.45	81.30
40	Item 286	112.25	116.30
41	Item 309	78.45	81.30
42	Item 313	112.25	116.30
43	Item 733	24.50	25.40
44	Item 737	41.45	42.90
45	Item 741	71.05	73.60
46	Item 745	99.60	103.20
47	Item 792	64.80	67.10
48	Item 90183	14.55	15.10
49	Item 90188	31.80	32.95
50	Item 90202	61.55	63.75
51	Item 90212	90.65	93.90

#### 4 Schedule 1, Division 1.9 (Table 1.9.2)

Repeal table, substitute:

<b>Column 1</b>	<b>Column 2</b>	<b>Column 3</b>	<b>Column 4</b>
<b>Item of the table</b>	<b>Fee</b>	<b>Amount if not more than 6 patients (to be divided by the number of patients) (\$)</b>	<b>Amount per patient if more than 6 patients (\$)</b>
285	The fee for item 283	22.75	1.80



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**Table 1.9.2—Amount under clause 1.9.2**

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<b>Column 1</b>	<b>Column 2</b>	<b>Column 3</b>	<b>Column 4</b>
<b>Item of the table</b>	<b>Fee</b>	<b>Amount if not more than 6 patients (to be divided by the number of patients) (\$)</b>	<b>Amount per patient if more than 6 patients (\$)</b>
287	The fee for item 286	22.75	1.80
311	The fee for item 309	22.75	1.80
315	The fee for item 313	22.75	1.80

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**6 Schedule 1, Division 1.14 (subclause 1.14.1(1))**

Omit “\$42.25”, substitute “\$43.75”.

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## Schedule 2—Mental health case conferencing services

### *Health Insurance (Allied Health Services) Determination 2014*

#### 1 Subsection 14(1)

Repeal the subsection, substitute:

- (1) This Section applies to items 10955, 10957, 10959, 80176, 80177, 80178, 82001, 82002 and 82003 in Schedule 2.

#### 2 Paragraphs 14(2)(c) and (d)

Repeal the paragraphs and substitute:

- (c) ***multidisciplinary case conference team*** has the meaning given by clause 1.1.5 of the general medical services table as if the items were also specified in subparagraph 1.1.5(1)(b)(i);
- (d) ***participate*** has the meaning given by clause 2.16.16 of the general medical services table; and
- (e) ***mental health case conference*** has the meaning given by clause 7.1.1 of the general medical services table.

#### 3 After subsection 15

Insert:

#### 15A Limitations on mental health case conferencing services

- (1) This Section applies to items 80176, 80177 and 80178 in Schedule 2.

##### *Eligible patients*

- (2) An item mentioned in subsection (1) only applies to a service for a patient, if the patient:
- (a) either:
- (i) is referred for a service to which an item in Subgroup 2 of Group A20; Subgroup 9 of Group A7; Subgroup 3 or 10 of Group A40; Group M6 or M7; or Subgroup 1, 2, 3, 4, 6, 7, 8 or 9 of Group M18 applies; or
- (ii) has an eating disorder treatment and management plan; and
- (b) is not an admitted patient of a hospital.

##### *Frequency limitations*

- (3) An item mentioned in subsection (1) does not apply to a service if the service has been performed in the last 3 months, unless in exceptional circumstances.
- (3A) For subsection (3), exceptional circumstances means there has been a significant change in the patient's clinical condition or care circumstances that necessitates the performance of the service.

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*Additional requirements on the multidisciplinary case conference team*

- (4) An item mentioned in subsection (1) only applies to a service if the patient requires ongoing care from a multidisciplinary case conference team which includes at least one medical practitioner (including a general practitioner, but not a specialist or consultant physician).

*Eligible allied health practitioners*

- (5) For the purposes of the items mentioned in subsection (1), **eligible allied health practitioner** means an allied health professional who meets the qualification requirements outlined in Schedule 1 in relation to the provision of a:
- (a) psychological therapy health service;
  - (b) focussed psychological strategies health service; or
  - (c) dietetics health service.

#### **4 Schedule 2 (after table item 80175)**

Insert:

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**Subgroup 2 – Psychological therapy health, focussed psychological strategies health and eating disorder case conference services**

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80176	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a mental health case conference if the conference lasts for at least 15 minutes, but for less than 20 minutes	53.50
80177	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a mental health case conference if the conference lasts for at least 20 minutes, but for less than 40 minutes	91.75
80178	Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in a mental health case conference if the conference lasts for at least 40 minutes	152.70

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

#### **5 Subsection 4(1)**

Insert:

***eating disorder treatment and management plan*** has the meaning given by clause 7.1.1 of the general medical services table.

#### **6 Schedule 1 (subclause 1.6.1(9))**

Omit “238, 239, 237 and 240”, substitute “235, 236, 237, 969, 971 and 972”.

#### **7 Schedule 1 (subclause 1.6.1(10))**

Omit “238, 239 and 240”, substitute “238, 239, 240, 973, 975 and 986”.

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## 8 Schedule 1 (after subclause 1.6.1(10))

Insert:

- (11) For items 235, 236, 237, 238, 239 and 240, **multidisciplinary case conference** has the meaning given by clause 1.1.4 of the general medical services table.
- (12) For items 235, 236, 237, 238, 239, 240, 969, 971, 972, 973, 975 and 986, **multidisciplinary case conference team** has the meaning given by clause 1.1.5 of the general medical services table as if the items were specified in subparagraph 1.1.5(1)(b)(i).
- (13) For items 969, 971, 972, 973, 975 and 986, **mental health case conference** has the meaning given by clause 7.1.1 of the general medical services table.

## 9 Schedule 2 (subclause 1.6.2(5))

Repeal the subclause, substitute:

- (5) Clause 2.16.9 of the general medical services table shall have effect as if:
  - (a) items 229, 230, 231, 232 and 233 were specified in subclause 2.16.9(1);
  - (b) items 230 and 233 were specified in subclause 2.16.9(1A);
  - (c) items 229 and 233 were specified in item 1 of table 2.16.9;
  - (d) items 230 and 233 were specified in item 2 of table 2.16.9;
  - (e) item 231 was specified in item 3 of table 2.16.9 and the reference to the term “medical practitioner” were a reference to the term “medical practitioner” as defined in this Determination.
  - (f) item 232 was specified in item 4 of table 2.16.9 and the reference to the term “medical practitioner” were a reference to the term “medical practitioner” as defined in this Determination.

## 10 Schedule 2 (table at clause 1.6.3)

Repeal table, substitute:

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

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<b>Item</b>	<b>Column 1 Item of the table</b>	<b>Column 2 Circumstances</b>
1	229	<ul style="list-style-type: none"><li>(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, or item 92026, 92027, 92028, 92057, 92058, 92059, 92070, 92071, 92072, 92101, 92102 or 92103 of the COVID-19 Determination applies (for reviewing a GP management plan) but had not been performed for the patient; and</li><li>(b) a service to which item 721 of the general medical services table or items 92024, 92026, 92055 or 92099 of the COVID-19</li></ul>

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

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<b>Item</b>	<b>Column 1 Item of the table</b>	<b>Column 2 Circumstances</b>
		Determination apply has not been performed in the past 12 months (c) the service is not performed more than once in a 12 month period; and (d) the service is not 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 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 medical practitioner
2	230 (if subclause 2.16.9(1) of the general medical services table applies to the item)	(a) In the 3 months before performance of the service, being a service to which item 732 of the general medical services table (in accordance with subclause 2.16.9(1) of the general medical services table), or item 233 (in accordance with subclause 2.16.9(1) of the general medical services table), or item 92028, 92059, 92072 or 92103 of the COVID-19 Determination 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 (b) a service to which item 723 of the general medical services table (performed in accordance with subclause 2.16.9(1) of the general medical 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; (c) the service is performed not more than once in a 12 month period; and (d) the service is not 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 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

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

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<b>Item</b>	<b>Column 1 Item of the table</b>	<b>Column 2 Circumstances</b>
2A	230 (if subclause 2.16.9(1A) of the general medical services table applies to the item)	<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 applies (for coordinating a review of team care arrangements in accordance with subclause 2.16.9(1A) of the general medical services table) but had not been performed for the patient; and</p> <p>(b) a service to which item 723 of the general medical services table (performed in accordance with subclause 2.16.9(1A) of the general medical services table) 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"><li>(i) who is a recognised specialist in palliative medicine; and</li><li>(ii) who is treating a palliative patient that has been referred to the medical practitioner; and</li><li>(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</li></ul>
3	231	<p>(a) either:</p> <ul style="list-style-type: none"><li>(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 or item 92027, 92028, 92058, 92059, 92071, 92072, 92102 or 92103 of the COVID-19 Determination applies but had not been performed for the patient; or</li><li>(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"><li>(A) by the medical practitioner who performs the service to which item 729 of the general medical services table or item 231 or item 92026, 92057, 92070 or 92101 of the COVID-19 Determination would, but for this item, apply; and</li><li>(B) for which a payment has been made under item 721 or 723 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</li></ul></li></ul> <p>(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</p> <p>(c) the service is performed not more than once in a 3 month period</p>
4	232	<p>(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 or item 92024, 92025, 92026, 92028, 92055, 92056, 92057, 92059, 92068, 92069, 92070, 92072, 92099,</p>

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

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<b>Item</b>	<b>Column 1 Item of the table</b>	<b>Column 2 Circumstances</b>
		92100, 92101 or 92103 of the COVID-19 Determination 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, 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 (if subclause 2.16.9(1) applies of the general medical services table to the item)	Each service may be performed, if a service to which item 732 of the general medical services table (performed in accordance with subclause 2.16.9(1) of the general medical services table), or item 92028, 92059, 92072 or 92103 of the COVID-19 Determination applies 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
5A	233 (if subclause 2.16.9(1A) of the general medical services table applies to the item)	The service, being a service to which item 233 (for coordinating the review of team care arrangements in accordance with 2.16.9(1A) of the general medical services table) applies, may be performed, if a service to which item 732 of the general medical services table (performed in accordance with subclause 2.16.9(1A) of the general medical services table) applies has not been claimed in the past three months: (a) once in a 3 month period; and (b) 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

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**11 Schedule 2 (after clause 1.6.3)**

Insert:

**1.6.4 Application of items 969, 971, 972, 973, 975 and 986**

- (1) A service described in item 969, 971, 972, 973, 975 or 986 only applies to the service if the patient:

- 
- (a) is referred for a service to which any of the following items apply:
- (i) an item in Subgroup 2 of Group A20;
  - (ii) an item in Subgroup 9 of Group A7;
  - (iii) an item in Subgroup 3 or 10 of Group A40;
  - (iv) an item in Group M6 or M7;
  - (v) an item in Subgroup 1, 2, 3, 4, 6, 7, 8 or 9 of Group M18; or
- (b) has an eating disorder treatment and management plan in accordance with the requirements in clause 2.31.3 of the general medical services.

## 12 Schedule 2 (after table item 244)

Insert:

969	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate a mental health case conference if the conference lasts for at least 15 minutes, but for less than 20 minutes	61.95
971	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate a mental health case conference if the conference lasts for at least 20 minutes, but for less than 40 minutes	105.95
972	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate a mental health case conference if the conference lasts for at least 40 minutes	176.65
973	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in a mental health case conference if the conference lasts for at least 15 minutes, but for less than 20 minutes	45.50
975	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in a mental health case conference if the conference lasts for at least 20 minutes, but for less than 40 minutes	78.00
986	Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to participate in a mental health case conference if the conference lasts for at least 40 minutes	129.85

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