



Health Insurance (Section 3C General Medical Services – Telehealth and Telephone Attendances) Amendment (General Practice) Determination 2023

I, Louise Riley, delegate of the Minister for Health and Aged Care, make the following determination.

Dated 14 September 2023

Louise Riley
Assistant Secretary
MBS Policy and Reviews Branch
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 (Section 3C General Medical Services – Telehealth and Telephone Attendances) Amendment (General Practice) 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.

Commencement information		
Column 1	Column 2	Column 3
Provisions	Commencement	Date/Details
1. Sections 1 to 4 and anything in this instrument not elsewhere covered by this table	1 November 2023.	
2. Schedule 1	1 November 2023.	
3. Schedule 2	Immediately after the commencement of the provisions covered by table item 2.	
4. Schedule 3	Immediately after the commencement of Schedule 5 of the <i>Health Insurance Legislation Amendment (2023 Measures No. 3) Regulations 2023</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Note: This table relates only to the provisions of this instrument as originally made.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Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.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—Indexation amendments

Health Insurance (Section 3C General Medical Services – Telehealth and Telephone Attendances) Determination 2021

1 Subsection 8(1)

Repeal the subsection, substitute:

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

$1.005 \times$ the amount of the fee immediately before the indexation time

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

2 Indexation amendments of listed provisions

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

Amendments relating to fees			
Item	Table item	Omit	Substitute
1	Item 91794	15.10	15.15
2	Item 91806	32.95	33.10
3	Item 91807	63.75	64.10
4	Item 91808	93.90	94.40
5	Item 91820	81.30	81.70
6	Item 91821	116.30	116.90
7	Item 91844	81.30	81.70
8	Item 91845	116.30	116.90
9	Item 92011	186.00	186.90
10	Item 92055	126.40	127.05
11	Item 92056	100.15	100.70
12	Item 92057	61.70	62.00
13	Item 92058	61.70	62.00
14	Item 92059	63.10	63.45
15	Item 92137	67.10	67.45
16	Item 92139	67.10	67.45
17	Item 92118	62.85	63.15
18	Item 92119	92.50	92.95
19	Item 92120	62.85	63.15

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20	Item 92121	62.85	63.15
21	Item 92122	79.75	80.15
22	Item 92123	117.50	118.10
23	Item 92132	62.85	63.15
24	Item 92133	62.85	63.15
25	Item 92150	62.85	63.15
26	Item 92151	92.50	92.95
27	Item 92152	79.75	80.15
28	Item 92153	117.50	118.10
29	Item 92171	62.85	63.15
30	Item 92177	62.85	63.15
31	Item 92186	81.30	81.70
32	Item 92188	116.30	116.90
33	Item 92198	81.30	81.70
34	Item 92200	116.30	116.90
35	Item 92211	133.95	134.60

3 Indexation amendments of listed provisions

The items of the table in Schedule 5 listed in the following table are amended as set out in the table.

Amendments relating to fees			
Item	Table item	Omit	Substitute
1	Item 92717	15.10	15.15
2	Item 92720	32.95	33.10
3	Item 92723	63.75	64.10
4	Item 92726	93.90	94.40
5	Item 92733	15.10	15.15
6	Item 92736	32.95	33.10
7	Item 92739	63.75	64.10
8	Item 92742	93.90	94.40

Schedule 2—General practice amendments

Health Insurance (Section 3C General Medical Services – Telehealth and Telephone Attendances) Determination 2021

1 Subsection 5(1)

Insert:

MyMedicare has the meaning given in clause 3.2.1 of the general medical services table.

2 Paragraph 8(2)(a)

Omit “92747”, substitute “91807, 91808, 91906, 91916 and 91926”.

3 Subclause 1.1.01(1) of Schedule 1

Omit “91807 and 91808”, substitute “91807, 91808, 91906, 91916 and 91926”.

4 Subclause 1.1.05(1) of Schedule 1

Repeal the subclause, substitute:

- (1) The following items do not apply to a service mentioned in the item that is provided by a general practitioner or medical practitioner, if the service is provided on the same day for the same patient for whom the practitioner provides a service mentioned in item 92024, 92025 or 92028:
 - (a) any items specified in paragraphs 2.16.11(a), (b), (c), (d) and (e) of the general medical services table; and
 - (b) items 91790, 91800, 91801, 91802, 91890, 91891, 91792, 91803, 91804, 91805, 91892, 91893, 91794, 91806, 91807, 91808, 91900, 91903, 91906, 91910, 91913, 91916, 91920, 91923, 91926, 92210 and 92211.

5 Subclause 1.1.08(1) of Schedule 1

Repeal the subclause, substitute:

- (1) Items 92055, 92056 or 92059 do not apply to a service mentioned in those items that is provided by a medical practitioner, if the service is provided on the same day for the same patient for whom the practitioner provides a service mentioned in the following items:
 - (a) any items specified in paragraphs 2.16.11(a), (b), (c), (d) and (e) of the general medical services table; and
 - (b) items 91790, 91800, 91801, 91802, 91890, 91891, 91792, 91803, 91804, 91805, 91892, 91893, 91794, 91806, 91807, 91808, 91900, 91903, 91906, 91910, 91913, 91916, 91920, 91923, 91926, 92210 and 92211.

6 Schedule 1 (item 91800, column 2)

After “lasting”, insert “at least 6 minutes but”.

7 Schedule 1 (item 91805, column 2)

Omit “at least 45 minutes in duration”, substitute “more than 45 minutes in duration but not more than 60 minutes”.

8 Schedule 1 (item 91808, column 2)

Omit “at least 45 minutes in duration”, substitute “more than 45 minutes in duration but not more than 60 minutes”.

9 Schedule 1 (after item 91808)

Insert:

91920	Telehealth attendance by a general practitioner, lasting at least 60 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation	191.20
91923	Telehealth attendance by a medical practitioner (not including a general practitioner), of more than 60 minutes in duration and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health related issues, with appropriate documentation	98.40
91926	Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, of more than 60 minutes in duration and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation	152.95

10 Schedule 1 (after item 91893)

Insert:

91900	Phone attendance by a general practitioner to a patient registered under MyMedicare with the billing practice, lasting at least 20 minutes, if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care; for one or more health related issues, with appropriate documentation	80.10
91903	Phone attendance by a medical practitioner (not including a general practitioner) to a patient registered under MyMedicare with the billing practice, of more than 25 minutes in duration but not more than 45 minutes, if the attendance includes any of the following that are clinically relevant: (a) taking a short patient history;	38.00

	(b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care; for one or more health related issues, with appropriate documentation	
91906	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, to a patient registered under MyMedicare with the billing practice, of more than 25 minutes in duration but not more than 45 minutes, if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health related issues, with appropriate documentation	64.10
91910	Phone attendance by a general practitioner, to a patient registered under MyMedicare with the billing practice, lasting at least 40 minutes, if the attendance includes any of the following that are clinically relevant: (a) taking an extensive patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventive health care; for one or more health related issues, with appropriate documentation	118.00
91913	Phone attendance by a medical practitioner, to a patient registered under MyMedicare with the billing practice, of more than 45 minutes in duration but not more than 60 minutes, if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care; for one or more health related issues, with appropriate documentation	61.00
91916	Phone attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), in an eligible area, to a patient registered under MyMedicare with the billing practice, of more than 45 minutes in duration but not more than 60 minutes, if the attendance includes any of the following that are clinically relevant: (a) taking a detailed patient history; (b) arranging any necessary investigation; (c) implementing a management plan; (d) providing appropriate preventative health care; for one or more health related issues, with appropriate documentation	94.40

11 Schedule 1 (items 91894 and 91895)

Repeal the items.

Schedule 3—Consequential amendments

Health Insurance (Section 3C General Medical Services – Telehealth and Telephone Attendances) Determination 2021

1 Paragraph 7(2)(b)

Omit “Other Medical Practitioner Determination”, substitute “general medical services table”.

2 Subclause 1.1.01(1) of Schedule 1

Omit “has the meaning given by section 4 of the Other Medical Practitioner Determination”, substitute “means an area that is a Modified Monash 2 area, Modified Monash 3 area, Modified Monash 4 area, Modified Monash 5 area, Modified Monash 6 area or Modified Monash 7 area”.

3 Paragraph 1.1.02(1)(b) of Schedule 1

Omit “Other Medical Practitioner Determination”, substitute “general medical services table”.

4 Paragraph 1.1.03(1)(a) of Schedule 1

Omit “under item 715 of the general medical services table or item 228 of the Other Medical Practitioner Determination”, substitute “under item 228 or 715 of the general medical services table”.

5 Subclause 1.1.06(2) of Schedule 1 (table)

Repeal the table, substitute:

Limitation on items 92024 to 92028

Item	Column 1 Item of the table	Column 2 Circumstances
1	92024	(a) In the 3 months before performance of the service, being a service to which items 231, 232, 233, 729, 731 or 732 of the general medical services table, or items 92026, 92027 or 92028 of this instrument applies (for reviewing a GP management plan) but had not been performed for the patient; and (b) the service is not performed 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
2	92025	(a) In the 3 months before performance of the service, being a service to which items 233 or 732 of the general medical services table, or items 92028 or 93469 of this instrument 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

Limitation on items 92024 to 92028

Item	Column 1 Item of the table	Column 2 Circumstances
		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 of the general medical services table applies because of the treatment of the palliative patient by the general practitioner
3	92026	(a) either: (i) in the 3 months before performance of the service, being a service to which items 232, 233, 731 or 732 of the general medical services table, or items 92027 or 92028 of this instrument, 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 or 92026 would, but for this item, apply; and (B) for which a payment has been made under item 721 or 723 of the general medical services table or 92024 or 92025; and (b) the service is performed not more than once in a 3 month period
4	92027	(a) In the 3 months before performance of the service, being a service to which items 229, 230, 231, 233, 721, 723, 729 or 732 general medical services table, or items 92024, 92025, 92026 or 92028 of this instrument, 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	(a) Once in a 3 month period; and (b) on the same day; but (c) 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 of the general medical services table applies because of the treatment of the palliative patient by the general practitioner

6 Subclause 1.1.09(3) of Schedule 1 (table)

Repeat the table, substitute:

Limitation on items 92055 to 92059

Item	Column 1 Item of the table	Column 2 Circumstances
1	92055	(a) In the 3 months before performance of the service, being a service to which item 231, 232, 233, 729, 731 or 732 of the general medical

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Limitation on items 92055 to 92059

Item	Column 1 Item of the table	Column 2 Circumstances
		services table, or items 92026, 92027, 92028, 92057, 92058 or 92059 of this instrument, applies (for reviewing a GP management plan) but had not been performed for the patient; and
		(b) a service to which items 229 or 721 of the general medical services table or items 92024 or 92055 of this instrument, applies has not been performed in the past 12 months; and
		(c) the service is not performed more than once in a 12 month period; and
		(d) the service is not performed by a person: <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 general medical services table applies because of the treatment of the palliative patient by the medical practitioner
2	92056	(a) In the 3 months before performance of the service, being a service to which item 233 or 732 of the general medical services table, or items 92028 or 92059, 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 230 or 723 of the general medical services table, or item 92025 or 92026 of this instrument, applies is performed not more than once in a 12 month period; and
		(c) the service is performed not more than once in a 12 month period; and
		(d) the service is not performed by a person: <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 general medical services table applies because of the treatment of the palliative patient by the general practitioner
3	92057	(a) Either: <ul style="list-style-type: none">(i) in the 3 months before performance of the service, being a service to which item 232, 233, 731 or 732 of the general medical services table, or items 92027, 92028, 92058, 92059 of this instrument, 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 items 231 or 729 of the general medical services table, or items 92026 or 92057 of this instrument, would, but for this item, apply; and(B) for which a payment has been made under items 229, 230, 721, or 723 of the general medical services table, or items 92024, 92025 of this instrument; and
		(b) a service to which item 231 or 729 of the general medical services table,

Limitation on items 92055 to 92059

Item	Column 1 Item of the table	Column 2 Circumstances
		or items 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	(a) In the 3 months before performance of the service, being a service to which item 229, 230, 231, 233, 721, 723, 729 or 732 of the general medical services table, or items 92024, 92025, 92026, 92028, 92055, 92056, 92057 or 92059, 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 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	Each service may be performed if a service to which item 732 of the general medical services table, or item 92028 of this instrument 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 general medical services table applies because of the treatment of the palliative patient by the general practitioner.

7 Paragraph 1.1.10(2)(b) of Schedule 1

Omit “item 792 of the Other Medical Practitioner Determination, item 4001 of the general medical services table”, substitute “item 791 or 4001 of the general medical services table”.

8 Paragraph 1.1.12(3)(d) of Schedule 1

Repeal the paragraph, substitute:

- (d) focused psychological strategies services provided to the patient, or to a person other than the patient as part of the patient’s treatment, by a medical practitioner (other than a general practitioner, specialist or consultant physician), to provide those services (items 283, 285, 286, 287, 309, 311, 313, 315, 91820, 91821, 91844, 91845, 91862, 91863, 91866 and 91867).

9 Paragraph 1.1.12(6)(a) of Schedule 1

Repeal the paragraph, substitute:

- (a) with a service to which the following items apply:

-
- (i) items 235 to 240, 279, 735 to 758, or 2713 of the general medical services table; or
 - (ii) items 92115, 92121, 92127 or 92133; or

10 Paragraph 1.1.12(7)(a) of Schedule 1

Repeal the paragraph, substitute:

- (a) the preparation of a GP mental health treatment plan under:
 - (i) items 272, 276, 281, 282, 2700, 2701, 2715 or 2717 of the general medical services table; or
 - (ii) items 92112, 92113, 92116, 92117, 92118, 92119, 92122, or 92123; or

11 Paragraph 1.1.12(8)(a) of Schedule 1

Repeal the paragraph, substitute:

- (a) to a service to which the following items apply:
 - (i) items 235 to 240, 279, or 735 to 758 of the general medical services table; or
 - (ii) items 92133 or 92121; or
 - (iii) items 92115, 92127, 92121 and 92133.

12 Paragraph 1.1.12(8)(b) of Schedule 1

Repeal the paragraph, substitute:

- (b) unless exceptional circumstances exist for the provision of the service:
 - (i) more than once in a 3 month period; or
 - (ii) within 4 weeks following the preparation of a GP mental health treatment plan under:
 - (A) items 272, 276, 281, 282, 2700, 2701, 2715 or 2717 of the general medical services table; or
 - (B) items 92112, 92113, 92116, 92117, 92118, 92119, 92122 or 92123; or
 - (iii) within 3 months following the provision of a service under items 277 or 2712 of the general medical services table, or items 92114, 92126, 92120 or 92132.

13 Subclause 1.1.12(9) of Schedule 1

Repeal the subclause, substitute:

- (9) Items 92115, 92127, 92121 and 92133 do not apply in association with a service to which the following items apply:
 - (a) items 272, 276, 277, 281, 282, 2700, 2701, 2712, 2715 or 2717 of the general medical service table; or
 - (b) items 92112, 92113, 92114, 92116, 92117, 92132, 92118, 92119, 92120, 92122 or 92123.

14 Subclause 1.1.13(1) of Schedule 1

Omit “of the Other Medical Practitioner Determination,” substitute “or”.

15 Subclause 1.1.14(1) of Schedule 1

Repeal the subclause, substitute:

- (1) For any particular patient, items in Subgroup 21 of Group A40 do not apply in association with a service to which items 235 to 244, or 735 to 758 of the general medical services table apply.

16 Subclause 1.1.17(2) of Schedule 1

Omit “Other Medical Practitioner” wherever occurring, substitute “general medical services table”.

17 Schedule 1 (cell at item 92024, column 2)

Repeal the cell, substitute:

Telehealth attendance by a general practitioner, for preparation of a GP management plan for a patient (other than a service associated with a service to which any of items 235 to 340 or 735 to 758 of the general medical services table apply)

18 Schedule 1 (cell at item 92025, column 2)

Repeal the cell, substitute:

Telehealth attendance by a general practitioner, to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of items 235 to 240 or 735 to 758 of the general medical services table apply)

19 Schedule 1 (cell at item 92026, column 2)

Repeal the cell, substitute:

Contribution by a general practitioner by telehealth, to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of items 235 to 240 or 735 to 758 of the general medical services table apply)

20 Schedule 1 (cell at item 92027, column 2)

Repeal the cell, substitute:

Contribution by a general practitioner by telehealth to:

- (a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or
- (b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider.

(other than a service associated with a service to which items 235 to 240 or 735 to 758 of the general medical services table apply)

21 Schedule 1 (cell at item 92028, column 2)

Repeal the cell, substitute:

Telehealth attendance by a general practitioner to review or coordinate a review of:

-
- (a) a GP management plan prepared by a general practitioner (or an associated general practitioner) to which items 229 or 721 of the general medical services table, or item 92024, 92055, 92068 or 92099 applies;
 - (b) team care arrangements which have been coordinated by the general practitioner (or an associated general practitioner) to which items 230 or 723 of the general medical services table, or item 92025 or 92069 applies

22 Schedule 1 (cell at item 92055, column 2)

Repeal the cell, substitute:

Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), for preparation of a GP management plan for a patient (other than a service associated with a service to which any of items 235 to 240 or 735 to 758 of the general medical services table apply)

23 Schedule 1 (cell at item 92056, column 2)

Repeal the cell, substitute:

Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician), to coordinate the development of team care arrangements for a patient (other than a service associated with a service to which any of items 235 to 240 or 735 to 758 of the general medical services table apply)

24 Schedule 1 (cell at item 92057, column 2)

Repeal the cell, substitute:

Contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician) by telehealth to a multidisciplinary care plan prepared by another provider or a review of a multidisciplinary care plan prepared by another provider (other than a service associated with a service to which any of items 235 to 240 or 735 to 758 of the general medical services table apply)

25 Schedule 1 (cell at item 92058, column 2)

Repeal the cell, substitute:

Contribution by a medical practitioner (not including a general practitioner, specialist or consultant physician) by telehealth to:

- (a) a multidisciplinary care plan for a patient in a residential aged care facility, prepared by that facility, or to a review of such a plan prepared by such a facility; or
- (b) a multidisciplinary care plan prepared for a patient by another provider before the patient is discharged from a hospital, or to a review of such a plan prepared by another provider

(other than a service associated with a service to which items 235 to 240 or 735 to 758 of the general medical services table apply)

26 Schedule 1 (cell at item 92059, column 2)

Repeal the cell, substitute:

Telehealth attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) to review or coordinate a review of:

- (a) a GP management plan prepared by a medical practitioner (or an associated medical practitioner) to which item 721 or item 229 of the general medical services table or item 92024, 92055, 92068 or 92099 applies; or
- (b) team care arrangements which have been coordinated by the medical practitioner (or an associated medical practitioner) to which items 230 or 723 of the general medical services table or item 92025, 92056, 92069 or 92100 applies

27 Schedule 1 (cell at item 92136, column 2)

Repeal the cell, substitute:

Telehealth attendance of at least 20 minutes in duration by a general practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who:

- (a) is currently pregnant; or
- (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or items 792 or 4001 of the general medical services table, or item 81000, 81005 or 81010 of the Allied Health Determination, or item 92137, 92138, 92139, 93026 or 93029 applies in relation to that pregnancy

28 Schedule 1 (cell at item 92137, column 2)

Repeal the cell, substitute:

Telehealth attendance of at least 20 minutes in duration by a medical practitioner (not including a general practitioner, specialist or consultant physician) who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who:

- (a) is currently pregnant; or
- (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or items 792 or 4001 of the general medical services table, or item 81000, 81005 or 81010 of the Allied Health Determination, or item 92136, 92138, 92139, 93026 or 93029 applies in relation to that pregnancy

29 Schedule 1 (cell at item 92138, column 2)

Repeal the cell, substitute:

Phone attendance of at least 20 minutes in duration by a general practitioner who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who:

- (a) is currently pregnant; or
- (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or item 792 or 4001 of the

general medical services table, or item 81000, 81005 or 81010 of the Allied Health Determination, or item 92136, 92137, 92139, 93026 or 93029 applies in relation to that pregnancy

29 Schedule 1 (cell at item 92139, column 2)

Repeal the cell, substitute:

Phone attendance of at least 20 minutes in duration by a medical practitioner (not including a general practitioner, specialist or consultant physician) who is registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service for the purpose of providing non-directive pregnancy support counselling to a person who:

- (a) is currently pregnant; or
- (b) has been pregnant in the 12 months preceding the provision of the first service to which this item or item 792 or 4001 of the general medical services table, or item 81000, 81005 or 81010 of the Allied Health Determination or item 92136, 92137, 92138, 93026 or 93029 applies in relation to that pregnancy

30 Subclause 4.1.1(1) of Schedule 4

Repeal the subclause, substitute:

- (1) In items 93201, 93203, 93284, and 93286:

GP management plan means a plan under:

- (a) item 721 or 732 of the general medical services table (for coordination of a review of a GP management plan under item 721); or
- (b) item 229 or 233 of the general medical services table (for coordination of a review of a GP management plan under item 229); or
- (c) item 92024, 92028, 92055, 92059, 92068, 92072, 92099 or 92103 (for coordination of a review of a GP management plan under item 92024, 92055, 92068 or 92099);

multidisciplinary care plan means a plan under:

- (a) item 231, 232, 729 or 731 of the general medical services table; or
- (b) item 92026, 92027, 92057, 92058, 92070, 92071, 92101 or 92102;

person with a chronic disease means a person who has a care plan under:

- (a) item 229, 230, 231, 232, 233, 721, 723, 729, 731 or 732 of the general medical services table; or
- (b) item 92024 to 92028, 92055 to 92059, 92068 to 92072 or 92099 to 92103.

31 Subclause 5.1.1(1) of Schedule 5

Repeal the subclause, substitute:

- (1) For items 92717, 92720, 92723, 92726, 92733, 92736, 92739 and 92742 **eligible area** means an area that is a Modified Monash 2 area, Modified Monash 3 area, Modified Monash 4 area, Modified Monash 5 area, Modified Monash 6 area or Modified Monash 7 area.