

RACF MBS billing guide for Non-VR GPs

For explanatory notes or for more information about **Extended Medicare Safety Cap** for some items, visit <http://www9.health.gov.au/mbs/search.cfm> and type in the relevant item number.

NAME	MBS NUMBERS	DETAIL
<u>CASE CONFERENCE</u>	235, 236, 237	<p>Fee \$58.85 Benefit 75% = \$44.15 100% = \$58.85</p> <p>235 \$58.85 > 15mins < 20 mins 236 \$100.70 > 20mins < 40mins 237 \$167.85 at least 40mins</p>
<u>ON ADMISSION HEALTH ASSESSMENT AND YEARLY THEREAFTER</u>	225, 226, 227	<p>225 \$114.80 > 30mins < 45 mins 226 \$158.40 > 45mins < 60mins 227 \$223.75 at least 60mins</p>
<u>CONTRIBUTION TO A MULTIDISCIPLINARY CARE PLAN</u>	232	<p>Fee \$58.10 Benefit 100% = \$58.10</p> <p>See para AN.7.1, AN.7.17 of explanatory notes to this category</p> <p><u>Extended Medicare Safety Net Cap</u> \$174.30</p>
<u>RESIDENTIAL MEDICATION MANAGEMENT REVIEW (RMMR)</u>	249	<p>Fee \$88.25 Benefit 100% = \$88.25</p> <p>See para AN.7.1, AN.7.18 of explanatory notes to this category</p> <p><u>Extended Medicare Safety Net Cap</u> \$264.75</p>
<u>PROFESSIONAL ATTENDANCE</u>	90188	<p>Fee \$31.30 Benefit 100% = \$31.30</p> <p>See para AN.7.1 AN.35.2 of explanatory notes to this category</p>

Attendance by a medical practitioner, as a member of a multidisciplinary case conference team, to organise and coordinate:

- (a) a community case conference; or
- (b) a multidisciplinary case conference in a residential aged care facility; or
- (c) a multidisciplinary discharge case conference;

if the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which items 721 to 732 or items 229 to 233 apply)

Professional attendance by a medical practitioner to perform a standard health assessment, lasting more than 30 minutes but less than 45 minutes, including:

- (a) detailed information collection, including taking a patient history; and
- (b) an extensive physical examination; and
- (c) initiating interventions and referrals as indicated; and
- (d) providing a preventive health care strategy for the patient

Contribution by a medical practitioner, 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 735 to 758 and items 235 to 240 apply)

A RMMR should generally be undertaken by the resident's 'usual medical practitioner'. This is the medical practitioner, or a medical practitioner working in the same medical practice, that has provided the majority of care to the resident over the previous 12 months and/or will be providing the majority of care to the resident over the next 12 months.

Professional attendance (other than a service to which any other item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex where the patient is accommodated in the residential aged care facility (that is not accommodation in a self contained unit) of more than 5 minutes in duration but not more than 25 minutes—an attendance on one or more patients at one residential aged care facility on one occasion—each patient, by a medical practitioner in an eligible area.