

MEDICARE REBATES

EMERGENCY IMMINENT DANGER 1-2 HOURS

214	\$184.40	Time spent by the practitioner may not be continuous
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MANAGEMENT OF BULK BILLED SERVICES

10990	\$6.55	Urban Practices
10991	\$9.90	Rural Practices
74990	\$6.15	Pathology, Urban Practices
74991	\$9.30	Pathology, Rural Practices

IN HOURS CONSULTATIONS

IN THE SURGERY

52	\$11.00	Level A - ≤ 5 min
53	\$21.00	Level B - > 5 min - ≤ 25 min
54	\$38.00	Level C - > 25 min - ≤ 45 min
57	\$61.00	Level D - ≥ 45 min

AFTER HOURS CONSULTATIONS (Non-Urgent) Weekdays 8pm - 8am, Sat 1pm - Mon 8am, Sundays, public holidays

IN THE SURGERY

5200	\$21.00	Level A - ≤ 5 min
5203	\$31.00	Level B - > 5 min - ≤ 25 min
5207	\$48.00	Level C - > 25 min - ≤ 45 min
5208	\$71.00	Level D - ≥ 45 min

HOME / INSTITUTION / HOSPITAL VISITS IN HOURS

Fee depends on number of patients seen

58	Level A
59	Level B
60	Level C
65	Level D

NURSING HOME (RACF) VISITS IN HOURS

90002	\$41.60	Flag fall – charge with first patient seen at each RACF visit
90092	\$8.50	Level A
90093	\$16.00	Level B
90095	\$35.50	Level C
90096	\$57.50	Level D

DIAGNOSTIC PROCEDURES

11505	\$36.40	Diagnostic spirometry — pre and post bronchodilator (one annually)
11506	\$18.20	Monitoring spirometry — pre and post bronchodilator
11610	\$56.40	ABI and arterial waveform analysis Hard copy trace and report
11707	\$16.30	Twelve-lead electrocardiography, tracing only

HEALTH ASSESSMENTS

177	\$60.60	Heart Health Assessment ≥ 20min
224	\$49.40	Brief ≤ 30 min
225	\$114.80	Standard > 30 – < 45 min
226	\$158.40	Long > 45 min - < 60 min
227	\$223.75	Prolonged ≤ 60 min
228	\$176.70	ATSI health assessment (not more than 9 monthly)

WOMEN'S HEALTH

792	\$63.75	Non-directive pregnancy support. GP meets credentialing requirement, max 3 per patient per pregnancy - at least 20min. For pregnancy in the preceding 12 months or currently pregnant.
14206	\$31.50	Hormone implantation (Including Implanon)
16407	\$63.45	4-8 weeks Postnatal - at least 20min. Include screen for mental health issues, drug and alcohol use and domestic violence (only charge once per pregnancy)
16500	\$41.70	Antenatal attendance - Throughout pregnancy
16591	\$126.15	Management of pregnancy >28/40 (including mental health assessment) by shared care GP who is not planning to perform the delivery (only charge once per pregnancy).
30062	\$53.75	Implanon removal
35503	\$47.35	IUCD Insertion (Including Mirena)
73806	\$8.65	Urine pregnancy test

EATING DISORDER SERVICES (Treatment Management Plan)

90254	\$59.70	Preparation of a TMP 20 - < 40 min (without MHST)
90255	\$87.90	Preparation of a TMP ≥ 40 min (without MHST)
90256	\$75.80	Preparation of a TMP 20 - < 40 min (with MHST)
90257	\$111.65	Preparation of a TMP ≥ 40 min (with MHST)
90265	\$59.70	Review of a Treatment and Management Plan

MENTAL HEALTH

277	\$59.70	Mental Health Treatment Plan Review
279	\$59.70	Mental Health Consultation ≥ 20 min
Mental Health Treatment plan, WITHOUT Mental Health Skills Training		
272	\$59.70	20 - < 40 min
276	\$87.90	≥ 40 min
Mental Health Treatment plan, WITH Mental Health Skills Training		
281	\$75.80	20 - < 40 min
282	\$111.65	≥ 40 min
With FPS Training		
283	\$77.20	Focussed Psychological Strategies (FPS) ≥ 30 min
286	\$110.50	Focussed Psychological Strategies (FPS) ≥ 40 min
285	Depends on number of patients seen	Focussed Psychological Strategies ≥ 30min Out of surgery consultation
287		Focussed Psychological Strategies ≥ 40min Out of surgery consultation

CHRONIC DISEASE MANAGEMENT

229	\$120.10	GP Management Plan (GPMP)
230	\$95.15	Team Care Arrangement (TCA)
231	\$58.60	Contribution to/review of multidisciplinary care plan prepared by another provider
232	\$58.60	Contribution to/review of multidisciplinary care plan prepared by another provider, for RACF resident.
233	\$59.95	Review of GPMP/TCA (Not claim within 3 mths of plan)
235	\$58.85	Organise case conference - At least 15 min, < 20 min
236	\$100.70	Organise case conference - At least 20 min, < 40 min
237	\$167.85	Organise case conference - At least 40 min
238	\$43.25	Participate in case conference - At least 15 min, < 20 min
239	\$74.10	Participate in case conference - At least 20 min, < 40 min
240	\$123.35	Participate in case conference - At least 40 min
245	\$128.90	Domiciliary medication management review (DMMR)
249	\$88.25	Residential medication management review (RMMR)
10987	\$24.95	Practice Nurse for Indigenous People - 10 per year
10997	\$12.50	Practice Nurse GPMP or TCA x 5 per calendar year

CERVICAL SCREENING IN UNDERSCREENED WOMEN AGED 25-74

2600	\$21.00	Level B
2603	\$38.00	Level C
2606	\$61.00	Level D

DIABETES CYCLE OF CARE COMPLETION

2620	\$21.00	Level B
2622	\$38.00	Level C
2624	\$61.00	Level D

ASTHMA CYCLE OF CARE COMPLETION

2664	\$21.00	Level B
2666	\$38.00	Level C
2668	\$61.00	Level D

MEDICARE REBATES

REMOVAL OF FOREIGN BODY			EXCISION OF NON-MALIGNANT LESIONS (TUMOUR, CYST OR SCAR): SPECIMEN MUST BE SENT FOR PATHOLOGICAL EXAMINATION; BASED ON DIAMETER OF EXCISION		
30061	\$20.80	Superficial – Includes cornea and sclera	Removal of multiple lesions (not wart or seborrheic keratosis, < 10 mm diameter. Surgical excision and not shave. Each must be sent for histology).		
30064	\$97.20	Subcutaneous with exploration	31220	\$189.80	4 – 10 skin lesions
30068	\$244.80	Deep – In muscle or tendon	31225	\$337.25	> 10 skin lesions
41500	\$72.95	Ear – not syringing	Nose, eyelid, eyebrow, lip, ear, digit, genitalia or contiguous area		
41659	\$68.60	Nose - not simple probing	31357	\$97.00	< 6 mm
42644	\$63.80	Embedded – In Sclera and cornea	31360	\$148.65	≥ 6 mm
WOUND REPAIR NOT ON FACE AND NECK			Face, neck, scalp, nipple-areola, distal lower limb (knee or below) or distal upper limb		
30026	\$46.20	Superficial ≤ 7cm - subcutaneous tissue only	31362	\$118.45	< 14 mm
30029	\$79.65	Deep ≤ 7cm - Involves tissues deep to subcutaneous e.g. fascia or muscle	31364	\$148.65	≥ 14 mm
30038	\$79.65	Superficial > 7cm - subcutaneous tissue only	Other site		
30042	\$164.15	Deep > 7cm - Involves tissues deep to subcutaneous e.g. fascia or muscle	31366	\$84.45	< 15 mm
WOUND REPAIR ON FACE AND NECK			31368	\$111.05	15 – 30 mm
30032	\$72.95	Superficial ≤ 7cm - subcutaneous tissue only	31370	\$127.00	> 30 mm
30035	\$104.00	Deep ≤ 7cm - Involves tissues deep to subcutaneous e.g. fascia or muscle	EXCISION OF BCC, SCC, KA: SPECIMEN MUST BE SENT FOR PATHOLOGICAL EXAMINATION; BASED ON DIAMETER OF EXCISION		
30045	\$104.00	Superficial > 7cm - subcutaneous tissue only	Nose, eyelid, eyebrow, lip, ear, digit, genitalia or contiguous area		
30049	\$164.15	Deep > 7cm - Involves tissues deep to subcutaneous e.g. fascia or muscle	31356	\$195.80	< 6 mm
30052	\$224.65	Full thickness Ear, Eyelid & Nose	31358	\$239.60	≥ 6 mm
OTHER SURGICAL			Face, neck, scalp, nipple-areola, distal lower limb (knee or below) or distal upper limb		
13757	\$64.55	Venesection – for haemochromatosis	31361	\$165.20	< 14 mm
18213	\$78.40	IV regional anaesthesia	31363	\$216.05	≥ 14 mm
18254	\$89.20	Brachial Block	Other site		
30003	\$32.15	Localised burns dressing	31365	\$140.00	< 15 mm
30006	\$41.15	Extensive burns dressing	31367	\$188.95	15 – 30 mm
30071	\$46.20	Skin biopsy – Specimen sent for histopathology	31369	\$217.55	> 30 mm
30072	\$46.20	Mucous membrane biopsy – sent for hist	EXCISION OF MALIGNANT MELANOMA: SPECIMEN MUST BE SENT FOR PATHOLOGICAL EXAMINATION; BASED ON DIAMETER OF EXCISION		
30192	\$35.00	Cryotherapy to ≥ 10 premalignant lesions	Nose, eyelid, eyebrow, lip, ear, digit, genitalia or contiguous area		
30207	\$39.45	Multiple injections to skin lesions with hydrocortisone	31371	\$315.75	≥ 6 mm
30216	\$24.20	Aspiration of haematoma	Face, neck, scalp, nipple-areola, distal lower limb (knee or below) or distal upper limb		
30219	\$24.20	Incision of haematoma and small abscess	31372	\$273.05	< 14 mm
32142	\$59.80	Excision of anal skin tags or polyps	31373	\$315.60	≥ 14 mm
32147	\$39.90	Incise Perianal Thrombosis	Other site		
35513	\$196.10	Bartholin's cyst excision	31374	\$249.35	< 15 mm
35517	\$129.20	Bartholin's cyst or gland marsupialisation	31375	\$268.35	15 – 30 mm
35611	\$56.60	Cervical polyp removal	31376	\$311.00	> 30 mm
41647	\$97.20	Ear toilet; requiring use of operating microscope and microinspection of tympanic membrane with or without general anaesthesia	FRACTURES		
41677	\$79.65	Treat epistaxis by cauterization, packing or both	47348	\$83.15	Carpus other than scaphoid
46513	\$49.95	Removal of fingernail	47354	\$149.90	Scaphoid
47904	\$49.95	Removal of toenail	47361	\$116.60	Radius or ulna, distal
47915	\$149.90	Wedge resection for ingrowing nail of toe	47387	\$241.40	Radius or ulna, shaft
47916	\$75.35	Partial resection for ingrowing nail of toe, including phenolisation	47411	\$99.80	Tuberosity of humerus
DISLOCATIONS			47423	\$191.50	Proximal humerus
47000	\$62.55	Mandible	47462	\$99.80	Clavicle
47015	\$75.05	Shoulder (without general anaesthetic)	47471	\$38.05	Ribs (one or more)
47018	\$174.80	Elbow	47561	\$241.40	Tibia shaft
47024	\$174.80	Radioulnar joint – distal / proximal	47595	\$142.50	Ankle joint, hindfoot, midfoot, metatarsals or toes
47042	\$99.80	Interphalangeal or metacarpophalangeal joint			
47057	\$112.40	Patella			
47069	\$62.55	Toe			