# MEDICARE REBATES

## ROUTINE HOURS CONSULTATIONS

### IN THE SURGERY

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>$17.20</td>
<td>(Level A) Brief</td>
</tr>
<tr>
<td>23</td>
<td>$37.60</td>
<td>(Level B) Standard &lt; 20 mins</td>
</tr>
<tr>
<td>36</td>
<td>$72.80</td>
<td>(Level C) Long 20-40 mins</td>
</tr>
<tr>
<td>44</td>
<td>$107.15</td>
<td>(Level D) Prolonged ≥ 40 mins</td>
</tr>
</tbody>
</table>

### RESIDENTIAL AGED CARE FACILITY (RACF)

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90001</td>
<td>$55.00</td>
<td>Flag fall service for each visit, first patient seen only. Applies to return visits same day, except for continuation of earlier episode of care.</td>
</tr>
<tr>
<td>90020</td>
<td>$17.20</td>
<td>Brief (applicable to each patient seen)</td>
</tr>
<tr>
<td>90035</td>
<td>$37.60</td>
<td>Standard (applicable to each patient seen)</td>
</tr>
<tr>
<td>90043</td>
<td>$72.80</td>
<td>Long (applicable to each patient seen)</td>
</tr>
<tr>
<td>90051</td>
<td>$107.15</td>
<td>Prolonged (applicable to each patient seen)</td>
</tr>
</tbody>
</table>

### HOME/INSTITUTION/HOSPITAL VISITS (EXCLUDING RACF)

**One patient seen**

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>$43.55*</td>
<td>Brief</td>
</tr>
<tr>
<td>24</td>
<td>$63.95*</td>
<td>Standard</td>
</tr>
<tr>
<td>37</td>
<td>$89.15*</td>
<td>Long</td>
</tr>
<tr>
<td>47</td>
<td>$133.50*</td>
<td>Prolonged</td>
</tr>
</tbody>
</table>

### AFTER HOURS CONSULTATIONS – Non-Urgent

(Mon-Fri: before 8am/after 6 or 8pm†; Sat: before 8am/after noon or 1pm†; Sun/Public holiday: all day) † Later times apply to surgery consults

**IN THE SURGERY**

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5000</td>
<td>$29.00</td>
<td>Brief</td>
</tr>
<tr>
<td>5020</td>
<td>$49.00</td>
<td>Standard</td>
</tr>
<tr>
<td>5040</td>
<td>$83.95</td>
<td>Long</td>
</tr>
<tr>
<td>5060</td>
<td>$117.75</td>
<td>Prolonged</td>
</tr>
</tbody>
</table>

### RESIDENTIAL AGED CARE FACILITY (RACF)

**One patient seen**

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5010</td>
<td>$75.70</td>
<td>Brief</td>
</tr>
<tr>
<td>5028</td>
<td>$95.70</td>
<td>Standard</td>
</tr>
<tr>
<td>5049</td>
<td>$130.65</td>
<td>Long</td>
</tr>
<tr>
<td>5067</td>
<td>$164.45</td>
<td>Prolonged</td>
</tr>
</tbody>
</table>

### HOME/INSTITUTION VISITS (EXCLUDING HOSPITAL/RACF)

**One patient seen**

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5003</td>
<td>$54.95</td>
<td>Brief</td>
</tr>
<tr>
<td>5023</td>
<td>$74.95</td>
<td>Standard</td>
</tr>
<tr>
<td>5043</td>
<td>$109.90</td>
<td>Long</td>
</tr>
<tr>
<td>5063</td>
<td>$143.70</td>
<td>Prolonged</td>
</tr>
</tbody>
</table>

### HEALTH ASSESSMENTS

**AFTER HOURS CONSULTATIONS – Urgent**

(Mon-Fri: 7-8am, 6-11pm; Sat: 7-8am, 12noon-11pm; Sun/Public holiday: 7am-11pm)

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>585</td>
<td>$129.80*</td>
<td>Urgent after hours</td>
</tr>
</tbody>
</table>

**599** $153.00* Urgent unsociable hours (between 11pm-7am)

### ELIGIBLE GROUPS

- 40-49-year-olds at high risk of diabetes (3 YEARLY)
- 45-49-year-olds at risk of developing chronic disease (ONCE ONLY)
- People aged ≥ 75 years (ANNUALLY)
- Permanent RACF residents (ANNUALLY)
- People with intellectual disability (ANNUALLY)
- Refugees with Medicare access (ONCE ONLY)
- Former serving members of the ADF (ONCE ONLY)

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**Source:** [www.mbsonline.gov.au](http://www.mbsonline.gov.au)

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*75% and/or 85% rebate also applies to these item numbers.

100% schedule fee for services as of April 2019 listed.
### CHRONIC DISEASE/COMPLEX CARE NEEDS MANAGEMENT

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>721</td>
<td>$144.25*</td>
<td>GP Management Plan (GPMP)</td>
</tr>
<tr>
<td>723</td>
<td>$114.30*</td>
<td>Team Care Arrangement (TCA)</td>
</tr>
<tr>
<td>732</td>
<td>$72.05*</td>
<td>Review of GPMP/TCA</td>
</tr>
<tr>
<td>10997</td>
<td>$12.00</td>
<td>Service to patient with GPMP/TCA by practice nurse/Aboriginal health worker (up to 5 per patient per year)</td>
</tr>
<tr>
<td>139</td>
<td>$134.50</td>
<td>Assessment, diagnosis and management plan for a child under 13 with an eligible disability (see MBS)</td>
</tr>
<tr>
<td>729</td>
<td>$70.40</td>
<td>Contribution/review of multidisciplinary care plan prepared by another provider, for non-RACF residents</td>
</tr>
<tr>
<td>731</td>
<td>$70.40</td>
<td>Contribution to/review of multidisciplinary care plan prepared by another provider, for RACF resident</td>
</tr>
<tr>
<td>900</td>
<td>$154.80</td>
<td>Domiciliary medication management review</td>
</tr>
<tr>
<td>903</td>
<td>$106.00</td>
<td>Residential medication management review</td>
</tr>
</tbody>
</table>

### ASTHMA CYCLE OF CARE COMPLETION (IN ROOMS)

- **Standard**
  - Item no 2546: $37.05
  - Item no 2552: $71.70
  - Item no 2558: $105.55

- **Long**
  - Item no 2546: $37.05
  - Item no 2552: $71.70
  - Item no 2558: $105.55

- **Prolonged**
  - Item no 2546: $37.05
  - Item no 2552: $71.70
  - Item no 2558: $105.55

Minimum requirements of care completed, see MBS for details.

### DIAGNOSTIC PROCEDURES

<table>
<thead>
<tr>
<th>Item no</th>
<th>Fee</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>11505</td>
<td>$41.10*</td>
<td>Diagnostic spirometry — pre and post bronchodilator (one annually)</td>
</tr>
<tr>
<td>11506</td>
<td>$20.55*</td>
<td>Disease monitoring spirometry — pre and post bronchodilator</td>
</tr>
<tr>
<td>11700</td>
<td>$31.25*</td>
<td>12-lead ECG</td>
</tr>
</tbody>
</table>

### WOMEN’S HEALTH

- **Urine pregnancy test**
  - Item no 73806: $10.15* |

- **Routine antenatal attendance**
  - Item no 16500: $47.15* |

- **Management of pregnancy >28/40 (including mental health assessment) by shared care GP who is not planning to perform the delivery**
  - Item no 16591: $142.65* |

- **Administration of hormone implant by cannula (including Implanon)**
  - Item no 14206: $35.60* |

- **Removal of Implanon**
  - Item no 30062: $60.75* |

- **Insertion of IUD**
  - Item no 35503: $53.55* |

### MINOR PROCEDURES

- **Diagnostic biopsy of skin**
  - Item no 30071: $52.20* |

- **Diagnostic biopsy of mucous membrane**
  - Item no 30072: $52.20* |

- **Ablative treatment of 10 or more premalignant skin lesions**
  - Item no 30192: $39.55* |

- **Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed), by serial curettage or laser excision/ablative laser procedure**
  - Item no 30202: $48.35* |

- **Removal of malignant neoplasm of skin or mucous membrane (histopathologically-proven or dermatologist-confirmed) by cryotherapy using repeat freeze thaw cycles**
  - Item no 30206: $109.90* |

- **Removal of subcutaneous foreign body, requiring incision and exploration +/- wound closure**
  - Item no 30215: $23.50* |

- **Removal of superficial foreign body, including cornea/ sclera**
  - Item no 30218: $27.35* |

- **Aspiration of haematoma**
  - Item no 30216: $27.35* |

- **Incision and drainage of abscess/haematoma (excluding aftercare)**
  - Item no 30219: $27.35* |

- **Removal of foreign body from ear (other than by simple syringing)**
  - Item no 30220: $92.50* |

- **Wound repair, ≤ 7cm, superficial**
  - Item no 40029: $25.50* |

- **Wound repair, > 7cm, deep**
  - Item no 40030: $82.50* |

- **Ear, nose, and throat (ENT) examination**
  - Item no 40031: $137.50* |

- **Tooth extraction**
  - Item no 40032: $137.50* |

- **Sinus surgery**
  - Item no 40033: $137.50* |

- **Gastroscopy**
  - Item no 40034: $137.50* |

- **Colonoscopy**
  - Item no 40035: $137.50* |

- **Urology**
  - Item no 40036: $137.50* |

- **Cardiology**
  - Item no 40037: $137.50* |

- **Oncology**
  - Item no 40038: $137.50* |

- **Radiology**
  - Item no 40039: $137.50* |

- **Imaging**
  - Item no 40040: $137.50* |

- **Pathology**
  - Item no 40041: $137.50* |

- **Anatomy**
  - Item no 40042: $137.50* |

- **Histology**
  - Item no 40043: $137.50* |

- **Cytology**
  - Item no 40044: $137.50* |

- **Mammography**
  - Item no 40045: $137.50* |

- **Ultrasound**
  - Item no 40046: $137.50* |

- **Therapeutic radiology**
  - Item no 40047: $137.50* |

- **Rehabilitation**
  - Item no 40048: $137.50* |

- **Occupational therapy**
  - Item no 40049: $137.50* |

- **Speech therapy**
  - Item no 40050: $137.50* |

- **Podiatry**
  - Item no 40051: $137.50* |

- **Osteopathy**
  - Item no 40052: $137.50* |

- **Surgery**
  - Item no 40053: $137.50* |

- **Anesthesia**
  - Item no 40054: $137.50* |

- **Other**
  - Item no 40055: $137.50* |

**Note:** Items 11505, 11506, and 11700 are eligible for a 75% or 85% rebate when provided to appropriate patients. For further information, see the MBS entries for these procedures.