

RACF care and Medicare billing overview

Current as at August 2022

This quick guide is to assist general practice in understanding the Residential Aged Care Facility (RACF) and Medicare Benefits Schedule (MBS) items and incentives.

The full item descriptor and information relating to RACF attendance items can be found on the MBS website here > www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Home

RACF CONSULTATIONS - GP	FEE	ITEM
<i>General practitioners can charge item number 90001 fee \$58.15 for initial attendance, on one occasion, applicable only to the first patient seen. GPs are then able to claim a Level A to D items for each RACF resident attended.</i>		
Brief (Level A)	\$18.20	90020
Standard (Level B)	\$39.75	90035
Long (Level C)	\$76.95	90043
Prolong (Level D)	\$113.30	90051

RACF AFTER HOURS CONSULTATIONS NON-URGENT	FEE	ITEM
<i>Fees based on one patient seen. For more than one patient or non-vocationally registered item numbers, refer to MBS.</i>		
Mon-Fri: before 8am and after 6pm; Sat-Sun: 12noon-Mon 8am; public holiday: all day		
Brief	\$80.05	5010
Standard	\$101.20	5028
Long	\$138.20	5049
Prolonged	\$173.90	5067

RACF CONSULTATIONS - MEDICAL PRACTITIONER MM1	FEE	ITEM
<i>General practitioners can charge item number 90002 fee \$42.25 for initial attendance, on one occasion, applicable only to the first patient seen. GPs are then able to claim a Level A to D items for each RACF resident attended.</i>		
Brief (Level A)	\$8.50	90092
Standard (Level B)	\$16.00	90093
Long (Level C)	\$35.50	90095
Prolong (Level D)	\$57.50	90096

RACF AFTER HOURS CONSULTATIONS URGENT	FEE	ITEM
<i>For non-vocationally registered item numbers, refer to MBS.</i>		
Mon-Fri: 7am-8am, 6pm-11pm; Sat: 7am-8am, 12 noon-11pm; Sun/public holiday: 7am-11pm		
Urgent after hours	\$137.25	585
Between 11pm and 7am		
Urgent unsociable hours	\$161.75	599
Telehealth via video conference	\$161.75	92210

RACF CONSULTATIONS - MEDICAL PRACTITIONER MM2-7	FEE	ITEM
<i>General practitioners can charge item number 90002 call-out fee \$42.25 for initial attendance, on one occasion, applicable only to the first patient seen. GPs are then able to claim a Level A to D items for each RACF resident attended.</i>		
Brief (Level A)	\$14.20	90183
Standard (Level B)	\$31.00	90188
Long (Level C)	\$60.05	90202
Prolong (Level D)	\$88.40	90212

RACF COMPREHENSIVE MEDICAL ASSESSMENT (CMA)	FEE	ITEM
<i>Undertake CMA on admission for new residents, or for existing permanent residents.</i>		
<i>Frequency: either once per 12 months, or significant change in condition or treatment (e.g. palliative care).</i>		
Brief	\$62.75	701
Standard	\$145.80	703
Long	\$201.15	705
Prolonged	\$284.20	707
Aboriginal or Torres Strait Islander persons health assessment RACF	\$220.85	93470



NQPHN acknowledges the Aboriginal and Torres Strait Islander peoples as Australia's First Nation Peoples and the Traditional Custodians of this land. We respect their continued connection to land and sea, country, kin, and community. We also pay our respect to their Elders past, present, and emerging as the custodians of knowledge and lore.

RACF care and Medicare billing overview (continued)

RESIDENTIAL MEDICATION MANAGEMENT REVIEW (RMMR)	FEE	ITEM
<p>A RMMR is a review of medications in collaboration with the pharmacist report, for residents at risk of medication-related problems or significant change in medical condition.</p> <p>GP initiates RMMR with an accredited pharmacist for permanent residents (new or existing)</p>		
	\$112.05	903

GP CONTRIBUTE TO OR REVIEW A MULTIDISCIPLINARY CARE PLAN	FEE	ITEM
<p>Requested to contribute to eligible multidisciplinary care plan, prepared by RACF or other provider.</p> <p>GP's contribution is to give advice, prepare part of the plan or amendments to the plan, and add a copy to the resident's medical records.</p> <p>Where clinically indicated, on submission of item 731 claim, residents may be eligible to access five allied health services in addition to those funded by RACF.</p> <p>Frequency: every three months, recommended every six months.</p>		
	\$74.40	731
Telehealth via video conference	\$74.40	92027

RACF CASE CONFERENCING			
<p>Resident's GP organises and coordinates case conferencing for patients with chronic or complex needs, with at least two other healthcare providers whom provide different care or services.</p> <p>Resident/family may be involved/present but are not counted as care providers</p> <p>If organising and contributing to a case conference, both items can be claimed.</p>			
ITEM	FEE	ITEM	CONTRIBUTE TO
735	\$74.75	747	\$54.90 15-19 mins
739	\$127.85	750	\$94.10 20-39 mins
743	\$213.15	758	\$156.65 >40 mins

RACF CHRONIC DISEASE MANAGEMENT/ CARE PLANNING		
93469	\$73.25	Professional attendance by a GP at RACF to contribute to a multidisciplinary care plan or review prepared by that facility

GENERAL PRACTICE AGED CARE ACCESS INCENTIVES (ACAI)	FEE
<p>PIP GP Aged Care Access Initiative payments are based on a GP providing and claiming a required number of eligible MBS services in RACFs in a financial year.</p> <p>Eligible GPs can receive two payments totalling \$5,000 for the financial year. The payments are in addition to the consultation fee.</p>	
Tier 1 *SIP (60 services)	\$1,500
Tier 2 *SIP (140 services)	\$3,500

Further information

Bulk bill incentive items 10990 or 10991 may be billed in conjunction with the Medicare Benefits Schedule (MBS) items if applicable.

Other enhanced primary care items may be suitable but are not RACF specific and have not been included.

For a comprehensive explanation of each MBS item number, please refer to the MBS online at www.health.gov.au/mbsonline