Practice nurse items Quick Reference Guide



Blue Mountains | Hawkesbury | Lithgow | Penrith

MBS items 10983, 10984, 10987, 10997 and 16400

This guide explains the key requirements for claiming services provided by a practice nurse on behalf of a GP. The term 'GP' is used in this guide as a generic reference to medical practitioners able to claim these items.

Note: These items do not apply for admitted patients of a hospital and must be provided under GP supervision.

This document is intended as a guide only. It is recommended that you read this document in conjunction with the relevant MBS item descriptors and explanatory notes on the <u>MBS Online</u> website.

ltem	Service	Snapshot of key Human Services requirements
10987	Follow up service for an Indigenous patient who has received a health check (assessment)	 Services provided by a practice nurse under Item 10987, is consistent with the needs identified in the patient's health check and is provided between further consultations with the patient's GP. This can include: Examinations/interventions as indicated by the health check; Education regarding medication compliance and associated monitoring; Checks on clinical progress and service access; Education, monitoring and counselling activities and lifestyle advice; Taking a medical history; and Prevention advice for chronic conditions, and associated follow up. Services are only available to Indigenous patients who have received a health check (including MBS Item 715) or children who have received a health check as part of the Northern Territory Emergency Response and is claimable for up to ten services per patient in a calendar year.
10997	Monitoring and support for a person with chronic disease	 Under Item 10997 a practice nurse provides monitoring and support service to a person with a chronic disease care plan, consistent with the scope of the care plan, provided between the more structured reviews of the care plan by the patient's usual GP. This can include: Checks on clinical progress; Monitoring medication compliance; Self-management advice; and Collection of information to support GP reviews of Care Plans. Services are available to patients with a GP Management Plan, Team Care Arrangements or Multidisciplinary Care Plan in place (MBS items 721, 723, 729, 731, 732) and claimable for up to five services per patient in a calendar year.



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16400	Antenatal service	Antenatal service is provided by a nurse at, or from, an eligible practice location in a regional, rural or remote area.
		Item 16400 cannot be claimed together with another antenatal attendance item for the same patient, on the same day by the same practitioner.
		Claimable for up to ten services per patient per pregnancy.
10983	Telehealth patient- end clinical support	Under Item 10983 a practice nurse provides clinical support to a patient undertaking an eligible MBS video (Telehealth) consultation with a specialist, consultant physician or psychiatrist.
		The patient, at the time of the consultation, must be outside an inner metropolitan area, with the following exceptions:
		 a) Patients receiving a service from an Aboriginal Medical Service, or b) Patients receiving a service from an Aboriginal Community Controlled Health Service to which a direction made under subsection 19(2) of the <i>Health Insurance Act 1973</i> applies.
		The decision to provide clinical support to the patient must be made in consultation with the specialist, consultant physician or psychiatrist.
10984	Telehealth patient-end clinical support at residential aged care facility	Under Item 10984 a practice nurse provides clinical support to a patient undertaking an eligible MBS video (Telehealth) consultation with a specialist, consultant physician or psychiatrist.
		The patient, at the time of the consultation, must be either: a) a care recipient receiving care in a residential aged care service (other than a self-contained unit), or
		 b) at consulting rooms situated within such a complex if they are a care recipient receiving care in a residential aged care service (excluding accommodation in a self-contained unit).
		The decision to provide clinical support to the patient must be made in consultation with the specialist, consultant physician or psychiatrist.

Can I bill a GP attendance item and practice nurse item?

It is up to the GP to decide whether they need to see the patient. Where the GP has a separate consultation with the patient, then the GP is entitled to claim a Medicare item for the time and complexity of their personal attendance on the patient. The time the patient spends receiving a service (as listed in this guide) from the practice nurse is not to be included when determining the duration for the GP attendance item.

If, during a telehealth consultation, the practice nurse requests the attendance of the GP or vice versa, only 1 item is billable – either the GP attendance or practice nurse attendance item. If a telehealth patient - end GP attendance item is claimed, the duration of a GP attendance item does not include the time a patient spends receiving a service from a practice nurse.



This data is accurate as at 23 July 2018, sourced from <u>http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/</u> <u>Content/Home</u> and <u>https://www.humanservices.gov.au/organisations/health-professionals/enablers/education-guide-<u>practice-nurse-items/33236</u> websites. Please consider any relevant information at <u>https://www.humanservices.gov.au/</u> when using this material.</u>

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