

MyMedicare Chronic Condition Management



Do you have a chronic condition?

As a patient, your usual general practice team can work with you to support your chronic condition health care needs. Regular check ups are a great idea to keep your condition well managed.

My GP gave me a chronic condition management plan – what is that?

This is a plan that your GP develops with you and your healthcare team to support your chronic condition. This plan will be reviewed with you on a regular basis.

Your GP may also give you referrals to other healthcare providers to assist you to achieve your goals.

Can I see a person of my choice?

You can take the referral to any eligible healthcare provider in the allied health service listed on the referral by your GP.

How many visits does my referral allow?

Medicare supports up to five allied health visits per calendar year.

How much will it cost?

Medicare helps pay for these appointments, but you may still pay an out-of-pocket fee. Check the expected costs with your allied health provider when you book the appointment.

If I have a referral for two different services, how many visits can I claim at each one?

Unless your GP has specified, you can choose but it's a maximum of five total services for the calendar year.

Example

Mary has diabetes and has been given two referrals. One to a podiatrist and one to a physiotherapist. Mary can choose which provider she sees, and how many times she sees them.

Mary decides to book three Medicare subsidised visits to the physiotherapist. This means she can only have two Medicare subsidised visits to the podiatrist. Any additional visits to either service will not be subsidised by Medicare.



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