

BILLING COVID-19 ITEM NUMBERS

AS AT 17 MARCH 2020

IN A NUTSHELL



*****THIS ARTICLE HAS BEEN SUPERSEDED BY THE 6 APRIL 2020 ARTICLE*****

As a result of many questions about appropriate billing of the new COVID-19 item numbers, we have put together this quick guide to explain how and when to bill the item numbers correctly (***as at 18 March 2020***).

A few important points before we get into the detail:

- ✓ The COVID-19 Telehealth and Telephone item numbers can only be bulk billed as this is one of the elements in all of the COVID-19 item number descriptors
- ✓ The item numbers can only be used if the patient is vulnerable/isolated OR the health professional is at risk for COVID-19
- ✓ There are no geographic requirements for the COVID-19 item numbers but the geographic requirements for the “normal” Telehealth item numbers remains unchanged
- ✓ The services provided by Telehealth or Telephone must still have appropriate clinical content to qualify as a consultation
- ✓ Clinical notes are critical so you must document the clinical content of your Telehealth and Telephone consultations
- ✓ The COVID-19 Telehealth and Telephone item numbers can only be used for outpatients
- ✓ The item numbers for surgeons and physicians must be a consultation of at least five minutes in duration
- ✓ At this point, the item numbers are valid until 30 September 2020

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BULK BILLING REQUIREMENT

If you bill any of the COVID-19 Telehealth or Telephone item numbers, you are required to bulk bill the items. As the item numbers can only be used for outpatient consultations, you will receive 85% of the Schedule Fee (referred to in the below chart as the “bulk bill rebate”).

You cannot bulk bill the COVID-19 item numbers and then charge another fee, no matter what you call the fee.

When you bulk bill the COVID-19 item numbers, you must still comply with the bulk billing rules regarding assignment of the Medicare benefit to you by the patient prior to processing your billing for the consultation. This process has several steps including a discussion during the Telehealth or Telephone consultation, an email from the practice and the requirement for an email response from the patient. If you need detailed information on the compliant process, please email a request to billing@medbill.com.au.

If you do not wish to bulk bill, you can still perform Telehealth or Telephone consultations and charge the patient a private fee in any amount that you feel is appropriate. However, there will then be **no Medicare rebate for the patient** as there is no appropriate Medicare item number for this service.

With patients not wanting to attend appointments in rooms, many will be more than willing to pay a private fee with no Medicare rebate. If you take this approach, you need to inform the patient before the consultation of the private fee you will charge and let them know there will be no Medicare rebate. When you raise an invoice/receipt for the consultation, DO NOT use a Medicare item number on the receipt. Set up a unique item number in your system that is not a Medicare item number.

COVID-19 ITEM NUMBERS CAN ONLY BE USED IF THE PATIENT IS VULNERABLE/ISOLATED OR THE HEALTH PROFESSIONAL IS AT RISK FOR COVID-19

The COVID-19 item numbers can only be billed if the patient falls within the below definition of vulnerable/isolated OR the health professional meets the below definition of “at risk for COVID-19”.

The definition of a health professional at risk for COVID-19 is:

A health professional at risk for COVID-19 means a person that:
(a) has been diagnosed with COVID-19 but who is not a patient of a hospital; or
(b) has been required to isolate themselves in quarantine in accordance with home isolation guidance issued by the Australian Health Protection Principal Committee.

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The definition of vulnerable/isolated patient is:

Vulnerable/isolated patients are those where at least one of the following apply:

*(a) the person has been diagnosed with COVID-19 virus but who is not a patient of a hospital; or
(b) the person has been required to isolate themselves in quarantine in accordance with home isolation guidance issued by Australian Health Protection Principal Committee (AHPPC); or
(c) the person is considered more susceptible to the COVID-19 virus being a person who is:
(i) at least 70 years old; or
(ii) at least 50 years old and is of Aboriginal or Torres Strait Islander descent; or
(iii) is pregnant; or
(iv) is a parent of a child under 12 months; or
(v) is already under treatment for chronic health conditions or is immune compromised;
or
(d) the person meets the current national triage protocol criteria for suspected COVID-19 infection.*

PLEASE NOTE:

- ✓ If you are treating a paediatric patient, it is the patient (not their parent/carer) that must qualify as vulnerable/isolated. If the paediatric patient does not meet the criteria AND the health professional does not meet the definition of being at risk for COVID-19, the COVID-19 item numbers cannot be billed. The only alternative is to charge a private fee with no Medicare rebate.
- ✓ Don't forget about "normal" telehealth items. If the child meets the geographic criteria and other criteria for "normal" telehealth, you can still use those item numbers.
- ✓ If patients request Telehealth or Telephone consultations because they do not wish to take any potential risks of visiting a medical practice, this is not sufficient to qualify for the COVID-19 item numbers. The patient must meet the above criteria to qualify.
- ✓ The COVID-19 item numbers cannot be used for consultations with patients who have been admitted to hospital.

CLINICAL CONTENT OF CONSULTATION

The services provided by Telehealth or Telephone must still have appropriate clinical content to qualify as a consultation. Clinical notes are critical to document the clinical content of your Telehealth and Telephone consultations. Please contact us at billing@medbill.com.au if you want further information regarding the standards for clinical content for a billable consultation.

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THE COVID-19 ITEM NUMBERS

Below is a brief summary of the item numbers for Surgeons, Physicians and Psychiatrists. Please read the detailed item numbers in the MBS to ensure that you fulfil all aspects of the item numbers before billing them.

EQUIVALENT ITEM #	COVID-19 ITEM #	SHORT DESCRIPTION	BULK BILL BENEFIT
TELEHEALTH			
104	91822	Telehealth initial attendance	\$ 75.05
105	91823	Telehealth subsequent attendance	\$ 37.70
110	91824	Telehealth initial attendance	\$ 132.30
116	91825	Telehealth subsequent attendance	\$ 66.25
119	91826	Telehealth minor attendance	\$ 37.70
300	91827	Telehealth Consultation, continuing Patient, not more than 15 minutes	\$ 38.00
302	91828	Telehealth Consultation, continuing Patient, 15-30 minutes	\$ 75.80
304	91829	Telehealth Consultation, continuing Patient, 30-45 minutes	\$ 116.70
306	91830	Telehealth Consultation, continuing Patient, 45-70 minutes	\$ 161.00
308	91831	Telehealth Consultation, continuing Patient, more than 75 minutes	\$ 186.85
TELEPHONE			
104	91832	Telephone initial attendance	\$ 75.05
105	91833	Telephone subsequent attendance	\$ 37.70
110	91834	Telephone initial attendance	\$ 132.30
116	91835	Telephone subsequent attendance	\$ 66.25
119	91836	Telephone minor attendance	\$ 37.70
300	91837	Telephone Consultation, continuing Patient, not more than 15 minutes	\$ 38.00
302	31838	Telephone Consultation, continuing Patient, 15-30 minutes	\$ 75.80
304	91839	Telephone Consultation, continuing Patient, 30-45 minutes	\$ 116.70
306	91840	Telephone Consultation, continuing Patient, 45-70 minutes	\$ 161.00
308	91841	Telephone Consultation, continuing Patient, more than 75 minutes	\$ 186.85

TELEHEALTH PLATFORM TO USE

Many practitioners use Facetime or Skype for Telehealth. There are also several more secure low-cost platforms to use such as Zoom and doxy.me.

SUMMARY

In short, the steps to bill the COVID-19 item numbers are:

- 1) Determine if either the doctor or the patient meet the criteria for billing a COVID-19 item number.

(If neither the doctor or the patient meet the criteria, do not use the COVID-19 item numbers)

If you determine the reason that the patient qualifies for the item numbers is they have a "chronic condition", note in the clinical notes the reason that you have determined that the patient has a "chronic condition".

- 2) Appointment made by reception staff for time/date of call
- 3) Zoom or doxy.me invitation sent to the patient
- 4) Consultation done by TH or phone
- 5) Full clinical notes recorded (to the same standard as you need to do for face to face consultation)
- 6) Medicare assignment of benefits email sent (make sure to use approved format)
- 7) Patient replies to Medicare assignment of benefits email
- 8) Patient bulk billed if using COVID-19 item number.

If you need further information on the COVID-19 item numbers, please email our expert team at billing@medbill.com.au.

Medical Billing Experts is supporting medical practices to keep their medical billing current during the COVID-19 crisis. If you close your rooms or have staffing shortages, you can make short-term arrangements to process your medical billing through outsourcing to us. Our goal is to keep your cash flow stable during the COVID-19 crisis as well as ensuring Medicare compliance.

Please feel free to email me at loryn@medbill.com.au for more information about how Medical Billing Experts can assist you during this period.

Kind regards,

Loryn Einstein

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