# Mental Health Medicare Benefit Schedule (MBS) Telehealth (video and phone) services

Last updated: 23 October 2025

- MBS Telehealth (video and phone) services provided by general practitioners (GPs), prescribed medical practitioners (PMPs), nurse practitioners, participating midwives, allied health professionals are available nationally.
- A service may only be provided by telehealth where it is safe and clinically appropriate to do so.
- Providers are expected to obtain informed financial consent from patients prior to providing the service; providing details regarding their fees, including any out-of-pocket costs.

## What are the changes?

#### 1 March 2025

From 1 March 2025, the term 'telehealth attendance' was changed to collectively refer to both video and phone attendances. Where an MBS item can only be claimed for a specific attendance format, it specifically states phone attendance or video attendance. This change has no impact on the function of the MBS items for mental health telehealth services introduced in response to the pandemic and will continue to be available, including:

- 4 individual psychological therapy items for the provision of services by eligible clinical psychologists;
- 20 individual focused psychological strategies items for services provided by an eligible registered psychologist, eligible GP, eligible PMP, eligible occupational therapist, or eligible social worker;
- 12 items for the provision of group therapy services in telehealth eligible areas; and
- 9 items for psychological treatment services provided by an eligible clinical psychologist, psychologist, dietitian, occupational therapist, or social worker for patients with an Eating Disorder Treatment and Management Plan.

There are currently 24 MBS items for the provision of family and carer participation sessions via telehealth. Eligible Australians can access individual therapy mental health telehealth services, regardless of their location, and where it is safe and clinically appropriate to do so. The eligibility for access to group therapy telehealth services remains restricted to Modified Monash Model 4-7 locations. The same limits with respect to the number of total services available in a calendar year still apply, regardless of whether services are through telehealth or face to face

#### 1 November 2025

From 1 November 2025, changes will apply to telehealth services provided under the Better Access initiative for the preparation of new mental health treatment plans (MHTP), referrals for treatment services and reviews of a patient's MHTP, dated on or after this date, namely:

- Medicare benefits will only be paid for these services when a patient has seen either a GP or PMP at the patient's MyMedicare registered practice, or their usual medical practitioner.
- MHTP review and ongoing mental health telehealth consultation items will be removed from the MBS. Instead, GPs and PMPs will use time-tiered professional (general) attendance items to review, refer and/or provide ongoing mental health consultation for a patient's mental health.
- The MyMedicare and usual medical practitioner requirements will apply to GP and PMP telehealth items for MHTPs, with these services no longer exempt from the established clinical relationship rule. Further information on the GP MBS telehealth (video and phone) established clinical relationship criteria and exemptions can be found in explanatory note AN.1.1 on MBS Online.

These changes do not affect telehealth (video and phone) focussed psychological strategies services which will continue to be available to any patient from any eligible GP and eligible PMP who has the appropriate training recognised by the General Practice Mental Health Standards Collaboration.

Information regarding mental health telehealth services provided by a GP and a PMP can be found in the MBS Telehealth Services webpage in the GP factsheet.

Information regarding mental health telehealth services provided under the Better Access initiative can be found in the <u>'Better Access Medicare Benefits Schedule (MBS) telehealth</u> (video and phone) services' factsheet.

A separate factsheet about these telehealth services for allied health professionals and specialists, including consultant physicians and psychiatrists can be found on <u>MBS Online</u>.

#### Why are the changes being made?

The change is in response to stakeholder feedback received during the MBS Review Advisory Committee (MRAC) post-implementation review of MBS telehealth; the change is intended to reduce misinterpretation by clarifying MBS item descriptors.

Telehealth MBS items will continue to allow people in need of mental health therapy service, including those living in rural, remote and very remote areas, to receive prompt treatment, and reduce any potential inconvenience, time and expense of having to travel to larger regional centres or major cities for sessions with their treating health practitioner.

#### Who is eligible?

The MBS telehealth items are available for a wide range of allied mental health consultations. All Medicare eligible Australians who meet the eligibility requirements to receive Medicare mental health services can now receive these services.

#### What telehealth options are available?

Video services are the preferred approach for substituting a face-to-face consultation. However, providers may offer audio-only services via telephone. There are separate items available for the audio-only services.

No specific equipment is required to provide Medicare-compliant telehealth services. Practitioners must ensure that their chosen telecommunications solution meets their clinical requirements and satisfies privacy laws. To assist providers with their privacy obligations, a privacy checklist for telehealth services has been made available on MBS Online: <a href="http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist">http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist</a>. Further information can be found on the <a href="https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist">https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist</a>. Further information can be found on the <a href="https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist">https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-TelehealthPrivChecklist</a>. Further information can be found on the <a href="https://www.mbsonline.gov.au/internet/mbsonline.gov.au/int

## Information for providers

The MBS telehealth items will allow providers to continue to deliver essential services to patients within their care. The administrative clean up only clarifies original regulations and does not impact fees or how the items work.

Providers do not need to be in their regular practice to provide telehealth services. Providers should use their provider number relevant to the appropriate practice and must provide safe services in accordance with normal professional standards. MBS telehealth items have the same clinical requirements as the corresponding face-to-face consultation items and have the same MBS benefit.

The telehealth MBS items may be used to substitute equivalent face-to-face consultations where it is clinically appropriate and safe to do so.

#### Information for patients

Patients should ask their service providers about their potential telehealth options that may be available where clinically appropriate. The updated terminology clarifies original regulations and does not impact fees or how the items work and therefore does not impact patients' experience.

Telehealth services may be used to substitute equivalent face-to-face consultations.

#### Who was consulted on the changes?

The use of updated language was informed by stakeholder consultation, including a Post Implementation Review of Telehealth by MRAC released in June 2024. Consultation with stakeholders has informed the introduction and refinement of MBS telehealth items. The transition to permanent arrangements has also been informed by medical experts and key stakeholders within the health sector.

# Information about how changes are monitored and reviewed

The Department of Health, Disability and Ageing (the department) regularly reviews the use of MBS items in consultation with the profession.

Providers are responsible for ensuring Medicare services claimed using their provider number meet all legislative requirements. All Medicare claiming is subject to compliance checks and providers may be required to submit evidence about the services they bill. More information about the department's compliance program can be found on its website at <a href="Medicare compliance">Medicare compliance</a>.

#### Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website. You can also subscribe to future MBS updates by visiting 'Subscribe to the MBS' on the MBS Online website.

The department provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the *Health Insurance Act 1973* and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email <a href="mailto:askMBS@health.gov.au">askMBS@health.gov.au</a>.

Private health insurance information on the product tier arrangements is available at <a href="https://www.privatehealth.gov.au">www.privatehealth.gov.au</a>. Detailed information on the MBS item listing within clinical categories is available on the <a href="https://department's website">department's website</a>. Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the <a href="https://example.com/Private Health Insurance">Private Health Insurance</a> (Benefit Requirements) Rules 2011 found on the <a href="https://example.com/Federal Register of Legislation">Federal Register of Legislation</a>. If you have a query in relation to private health insurance, you should email <a href="https://example.com/PHI@health.gov.au">PHI@health.gov.au</a>.

Subscribe to 'News for Health Professionals' on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact the Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the Downloads page.

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This sheet is current as of the last updated date shown above and does not account for MBS changes since that date.