



# 100% Medicare Rebate for GP Attendances

## Higher Medicare rebates from 1 January 2005

From 1 January 2005, the Medicare benefit (or rebate) for most services provided by a general practitioner (GP) increased from 85% to 100% of the Medicare schedule fee.

The 100% Medicare rebate applies to services provided by both *vocationally and non-vocationally registered GPs*.

## What services attract a 100% Medicare rebate?

The 100% Medicare rebate applies to:

- non-referred attendances (ie consultations) provided by a GP, except where the patient has been admitted to a hospital – explained further below; and
- services provided by a practice nurse on behalf of a GP.

The services (Medicare items) that attract the 100% Medicare rebate are listed at the end of this fact sheet.

The 100% Medicare rebate does not apply to:

- referred services (eg those provided by specialists, consultant physicians, allied health professionals or dental practitioners);
- procedures or diagnostic tests performed by a GP;
- non-referred services performed by a medical practitioner where the service is stated as being provided in the practice of sports medicine or emergency medicine, or in the specialty of public health medicine; or
- services provided by optometrists.

## Does the 100% Medicare rebate apply to services provided by a practice nurse on behalf of a GP?

Yes. The following services provided by a practice nurse on behalf of a GP attract a 100% Medicare rebate:

- Item 10993 (immunisation);
- Item 10996 (wound management); and
- Items 10998 and 10999 (Pap smears taken by a practice nurse in rural and remote areas). \*

\* For further information, see the separate fact sheet on items 10998 and 10999 and the November 2005 Medicare Benefits Schedule Book.

## Does the 100% Medicare rebate apply to the after-hours GP attendance items?

Yes. The 100% Medicare rebate applies to the after-hours attendance items that commenced on 1 January 2005, as part of the Government's *Round the Clock Medicare* policy. These are items 5000 to 5267. \*\*

\*\* For further information, see the separate fact sheet on these after-hours items.

**Strengthening**  
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## How does the 100% Medicare rebate apply to GP consultations provided in a hospital?

The 100% Medicare rebate applies to non-referred attendances on *non-admitted patients* in private outpatient and emergency departments. Prior to 1 January 2005, these services attracted a Medicare benefit of 85% of the schedule fee.

There are no changes to the arrangements for the services provided to admitted patients in a hospital. In these circumstances, a 75% Medicare benefit continues to apply, with patients being able to privately insure for the remaining 25% of the schedule fee.

## How is the 100% Medicare rebate paid?

The 100% Medicare rebate is paid automatically by Medicare Australia for the range of services covered by this initiative. The higher Medicare benefit appears on the statement of benefit from Medicare Australia.

## Does the service need to be bulk billed in order to attract the 100% Medicare rebate?

No. The 100% Medicare rebate applies regardless of whether the service is bulk billed.

For example, in the case of a level B surgery consultation (item 23):

- If the consultation is bulk billed, the GP claims the 100% rebate (\$31.45) from Medicare.
- If the consultation is not bulk billed, the patient claims the 100% rebate (\$31.45) from Medicare.

## Does the 100% Medicare rebate affect the bulk billing incentives for Commonwealth concession card holders and children under 16?

No. The bulk billing incentives continue to apply as before.

The bulk-billing incentives (now \$5.15 and \$7.85 as a result of indexation from 1 November 2005) continue to be paid when claimed for an eligible patient. The 100% Medicare rebate does not apply to these incentive items.

## Does the 100% Medicare rebate affect other GP programs?

Entitlements under other GP programs, such as the Practice Incentives Program (PIP), are not affected.

## Does it affect patients' and families' eligibility for the Medicare Safety Net?

No. Eligibility under the Medicare Safety Net is unchanged as a result of the 100% Medicare rebate.

## Does the 100% Medicare rebate apply to veterans?

From 1 January 2005, the fees paid to Local Medical Officers increased from 100% to 115% of the Medicare schedule fee, plus the Veterans' Access Payment. Further information about this initiative can be obtained from the Department of Veterans' Affairs on **133 254** (capital city) or **1800 555 254** (outside a capital city).

## Further information

For further information about the 100% Medicare rebate, visit the Medicare Australia website at [www.medicareaustralia.gov.au/medicareinitiatives](http://www.medicareaustralia.gov.au/medicareinitiatives) or call Medicare Australia on **132 150**.

## Services that attract the 100% Medicare rebate – as at 1 November 2005

Medicare Benefits Schedule (MBS) Group	Name of Group	Item numbers
Group A1 <i>(all items other than items 19, 33, 40, 50)</i>	General practitioner attendances to which no other item applies	1, 2, 601, 602, 3, 4, 13, 20, 23, 24, 25, 35, 36, 37, 38, 43, 44, 47, 48, 51
Group A2 <i>(all items other than items 87, 89, 90, 91)</i>	Other non-referred attendances to which no other item applies	52, 53, 54, 57, 58, 59, 60, 65, 81, 83, 84, 86, 92, 93, 95, 96, 97, 98, 697, 698
Group A5	Prolonged attendances to which no other item applies	160, 161, 162, 163, 164
Group A6	Group therapy	170, 171, 172
Group A7	Acupuncture	173, 193, 195, 197, 199
Group A14	Health assessments	700, 702, 704, 706, 710, 712
Group A15 <i>(all items other than items 746, 749, 757, 768, 771, 773, 820-866)</i>	Multidisciplinary care plans and multidisciplinary case conferences	721, 723, 725, 727, 729, 731, 734, 736, 738, 740, 742, 744, 759, 762, 765, 775, 778, 779
Group A17	Medication management review	900, 903
Group A18	General practitioner attendances associated with Practice Incentives Program (PIP) payments	2497, 2501, 2503, 2504, 2506, 2507, 2509, 2517, 2518, 2521, 2522, 2525, 2526, 2546, 2547, 2552, 2553, 2558, 2559, 2574, 2575, 2577, 2578
Group A19	Other non-referred attendances associated with Practice Incentives Program (PIP) payments to which no other item applies	2598, 2600, 2603, 2606, 2610, 2613, 2616, 2620, 2622, 2624, 2631, 2633, 2635, 2664, 2666, 2668, 2673, 2675, 2677, 2704, 2705, 2707, 2708
Group A20	Focussed psychological strategies	2721, 2723, 2725, 2727
Group A22	General practitioner after-hours attendances to which no other item applies	5000, 5003, 5007, 5010, 5020, 5023, 5026, 5028, 5040, 5043, 5046, 5049, 5060, 5063, 5064, 5067
Group A23	Other non-referred after-hours attendances to which no other item applies	5200, 5203, 5207, 5208, 5220, 5223, 5227, 5228, 5240, 5243, 5247, 5248, 5260, 5263, 5265, 5267
Group M2	Services provided by a practice nurse on behalf of a medical practitioner	10993, 10996, 10998, 10999