

Practice nurse items

This section relates to those items that can be claimed by nurse practitioners and explains the relevant procedures.

Item 10993: Immunisation

Item 10993 can be claimed by a general practitioner where an immunisation is provided by a practice nurse on behalf of a general practitioner in any of the following locations:

- the consulting rooms of a general practice; or
- a residential aged care facility; or
- a home visit to a patient; or
- an institution (other than a hospital or day hospital facility).

This excludes locations typically associated with mass immunisations, such as schools, workplaces, shopping centres etc. Subsection 19(4) of the HIA prevents the payment of Medicare benefits in relation to mass immunisations.

What types of immunisations can be claimed?

This item can be claimed where a practice nurse administers any vaccine registered under the *Therapeutic Goods Act 1989*. The practice nurse must be appropriately qualified and trained to provide the immunisation. This includes compliance with any State or Territory requirements. See explanatory notes in the MBS M.2 for further information.

The vaccine may be administered to either an adult or a child.

When is the immunisation item not claimable?

This item cannot be claimed if the practice nurse is administering the vaccine to the patient under a Commonwealth or State funded immunisation program.

Must the general practitioner be present to claim the immunisation item?

As the immunisation service is being provided on behalf of, and under the general supervision of the general practitioner, the general practitioner retains responsibility for the health, safety and clinical outcomes of the patient.

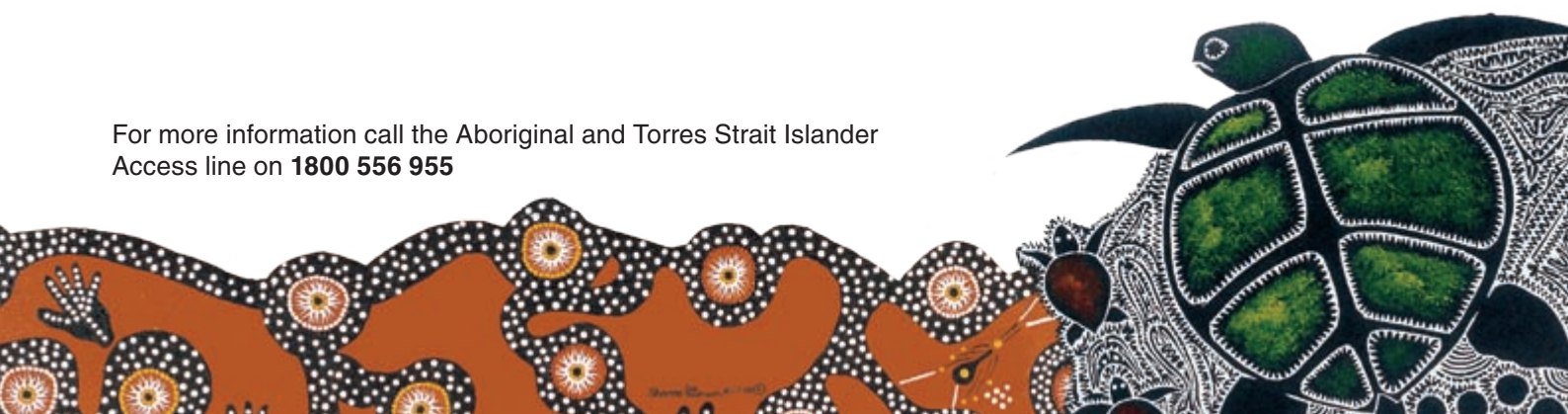
The general practitioner does not need to be present at the time of the immunisation.

It is up to the general practitioner to decide whether they need to see the patient prior to the immunisation being administered by the practice nurse. Where this does occur, the general practitioner will still be able to claim for the professional service they provide to the patient.

Can I claim more than one immunisation item?

No. Item 10993 can be claimed only once per patient visit, even if more than one vaccine is administered during the same patient visit.

For more information call the Aboriginal and Torres Strait Islander Access line on **1800 556 955**



Will item 10993 affect existing immunisation payments?

No. Service incentive payments currently received as part of the GPPI Scheme and notification payments received through the Australian Childhood Immunisation Register are unaffected by the new immunisation item.

Item 10996: Wound management

Circumstances in which item 10996 can be claimed

Item 10996 can be claimed by a general practitioner where wound management is administered by a practice nurse on behalf of a general practitioner.

The wound management can be provided in any location, except where the patient has been admitted to a hospital or day-hospital facility.

What type of wound management can be claimed under this item?

This item can be claimed for the treatment of any wound, except for normal post-operative aftercare.

Must the general practitioner be present to claim item 10996?

As the wound management service is being provided on behalf of, and under the general supervision of, the general practitioner, the general practitioner retains responsibility for the health, safety and clinical outcomes of the patient.

The medical practitioner does not need to be present during the treatment of the wound. However, the general practitioner must conduct an initial assessment of the patient in order to give instruction in relation to the treatment of the wound. Where a practice nurse provides ongoing wound management, the general practitioner is not required to see the patient during each subsequent visit.

Common elements for items 10993 and 10996

Who can claim items 10993 and 10996?

Items 10993 and 10996 can only be claimed by a general practitioner for services provided by a practice nurse.

All GPs whether vocationally registered or not are eligible to claim the items.

The items can be claimed in any general practice where general practitioners are eligible to receive Medicare benefits. This includes Aboriginal Community Controlled Clinics and Qld/NT Health identified hospitals/clinics that have approval under exemption to subsection 19(2) which gives them approval to bulk bill Medicare.

What is a practice nurse for the purposes of items 10993 and 10996?

A practice nurse must be either a registered or an enrolled nurse and employed by, or their services retained by, a general practice.

The practice nurse must also be appropriately qualified and trained, including compliance with any State or Territory requirements, to provide the relevant service for the particular item.

Can items 10993 and 10996 be claimed in conjunction with the bulk billing incentive items?

Yes. Item 10990 can be claimed as long as the immunisation or wound management service is provided to a Commonwealth concession card holder or child under 16 years and the service is bulk billed, unreferral and provided out-of-hospital.

Item 10991 can be claimed as long as the immunisation or wound management service is provided to a Commonwealth concession card holder or child under 16 years and the service is bulk billed, unreferral and provided out-of-hospital and the service is provided at, or from, a practice location in:

- (i) a regional, rural or remote area; or
- (ii) Tasmania; or
- (iii) A geographical area included in any of the SSD spatial units in the explanatory notes in the GMST, DIST and PST; or
- (iv) the geographical area included in the SLA spatial unit of Palm Island (AC).

If these conditions are met, the medical practitioner can claim both the bulk bill incentive items plus item 10993 and/or 10996

For example, item 10993 (and/or item 10996) + item 10990 or 10991.

Item 10998 for pap smears taken by a practice nurse in a regional, rural or remote area.

Item 10998

Service provided by a practice nurse, being the taking of a cervical smear from a person, if:

- a. the service is provided on behalf of, and under the supervision of, a medical practitioner; and
- b. the service is provided at, or from, a practice location in a regional, rural or remote area; and
- c. the person is not an admitted patient of a hospital or approved day hospital facility.

Item 10998 only applies where:

- the practice nurse is appropriately qualified and trained to take a cervical smear; and
- the medical practitioner under whose supervision the smear is taken retains responsibility for the health, safety and clinical outcomes of the person.

Item 10998 will operate in a similar way to the immunisation and wound management items (10993 and 10996). Further information on these items can be found in the explanatory notes (M.2) of the MBS book.

Who can claim item 10998?

Item 10998 can only be claimed by a general practitioner for a pap smear that is taken by a practice nurse on behalf of the general practitioner.

All vocationally registered and non-vocationally registered GPs are eligible to claim the item.

What qualifications and training are required for a practice nurse to take a pap smear?

It is a requirement of the item that the practice nurse must be appropriately qualified and trained to take a pap smear. This means that, where credentialing arrangements are in place; the practice nurse should be credentialed as qualified and trained to take pap smears.

All practice nurses taking pap smears should have undertaken an accredited course. Accredited training courses are now or will soon be available in all States and Territories. For information about accredited training for nurse pap smear providers, you should contact the Royal College of Nursing, Australia on **1800 061 660**, or the Cervical Screening Program in your State or Territory on **131 556**.

In all cases, the general practitioner (who is responsible for the health, safety and clinical outcomes of the patient) must be satisfied that the practice nurse is appropriately qualified and trained to take pap smears.

The practice nurse must also comply with any relevant legislative or regulatory requirements, including those applying to state and territory cervical cytology registers or laboratories.

Quality assurance and continuing professional development

Quality assurance is an important part of cervical screening. Continuing professional development is a compulsory part of the credentialing arrangements and is recommended for all nurses taking Pap smears in jurisdictions where there are currently no credentialing arrangements.

General practices, where nurses take pap smears, should also have a written clinical risk management strategy covering issues like clinical roles, pathology follow-up and patient consent.

DoHA will continue to work with general practices and nursing professions on issues about quality assurance such as credentialing, practice protocols and continuing professional development for nurses working in this role.

National and State and Territory cervical screening policies

When providing services covered by item 10998, the practice nurse should be aware of national, State and Territory cervical screening policies for the prevention of cervical cancer.

Questions and answers

Must the general practitioner see the patient first, or be present, in order to claim item 10998?

As the service is being provided on behalf of, and under the supervision of the general practitioner, the general practitioner retains responsibility for the health, safety and clinical outcomes of the patient.

However, this does not mean that the general practitioner is required to see the patient first, or be present with the practice nurse during the service, to claim item 10998.

It is up to the general practitioner to decide whether they need to initially see the patient. Where a consultation has taken place with the patient first, the general practitioner is entitled to claim for that professional service.

What level of medical indemnity insurance is required?

The general practitioner who claims item 10998 will need to ensure that their medical indemnity insurance covers circumstances where a practice nurse takes a pap smear on their behalf.

Can a practice nurse order the pathology for a pap smear?

Where pathology services are claimed through Medicare, the pathology can only be ordered by a general practitioner. In some jurisdictions, and in specific circumstances, a practice nurse may be able to order pathology through public pathology laboratories.

The practice nurse must also comply with any relevant legislative or regulatory requirements, including those applying to state and territory cervical cytology registers or laboratories.

Which practice locations are considered to be regional, rural and remote?

For the purposes of item 10998, a practice location in a regional, rural or remote area means a practice location in an area classified as RRMA 3–7 under the Rural Remote and Metropolitan Areas (RRMA) classification system.

A practice location is the place associated with the general practitioner's provider number from which the service has been provided. If you are unsure whether you are practising in an eligible area, you can call Medicare Australia on **132 150**.

What is the level of the Medicare rebate for item 10998?

Item 10998, along with items 10993 and 10996 for practice nurse services, will attract a 100% Medicare rebate from 1 January 2005.

This means that the Medicare rebate will be the same as the schedule fee.

Can item 10998 be claimed in conjunction with the bulk billing incentive item 10991?

Yes, as long as the pap smear service is provided to a Commonwealth concession card holder or person under the age of 16, and the service is bulk billed. In this case, the general practitioner would be able to claim item 10998 and item 10991.

Will item 10998 affect the outcomes component under the Practice Incentives Program (PIP) cervical screening initiative?

No. The PIP cervical screening outcomes payment will not be affected by item 10998.

Can the PIP items for unscreened or significantly under screened women still be claimed where the practice nurse takes the pap smear?

Yes. Where the general practitioner provides a consultation before the practice nurse takes the pap smear, and the conditions of both item 10998 and the relevant PIP items have been satisfied, the PIP items (2501–2509 and 2600–2616) and item 10998 can both be claimed.

In claiming the PIP item, the general practitioner is only eligible to claim for the length of time that they spend with the patient. This does not include the time that the practice nurse spends with the patient to take the pap smear.