



IN SUMMARY:

- Medicare rebates are available for a maximum of five services per patient each calendar year, with out-of-pocket costs counting towards the extended Medicare safety net
- Patient must be a person of Aboriginal or Torres Strait Islander descent who has had a health assessment
- A person is of Aboriginal or Torres Strait Islander descent if they self-identify
- Your GP will decide whether you should be referred for these services
- Allied health professionals must be registered with Medicare Australia

PRIVATE HEALTH INSURANCE

If you have private health insurance, you will need to decide if you wish to use Medicare or your private health insurance to pay for these services. You cannot use private health insurance ancillary cover to 'top up' your Medicare rebate.

CLAIMING

Allied health professionals, like doctors, are free to set the level of their fees. If your allied health provider bulk bills, there will be no charge for these services. If not, you will be charged a fee and you can claim the rebate from Medicare.

Out-of-pocket expenses for these services count towards the extended Medicare safety net.

If you are unsure, or lose track of how many allied health services you have claimed in a calendar year, you can check with Medicare Australia on 132 011.

MORE INFORMATION

More information is available at www.health.gov.au/mbsprimarycareitems

If you have any questions, ask your doctor or practice nurse.

MEDICARE REBATES FOR FOLLOW-UP ALLIED HEALTH SERVICES

FOR INDIGENOUS AUSTRALIANS WHO HAVE HAD A HEALTH CHECK

Patient Information

WHO IS ELIGIBLE?

These services are available to a person of Aboriginal or Torres Strait Islander descent if a medical practitioner has undertaken a health assessment and identified a need for follow-up Allied Health Services.

ALLIED HEALTH SERVICES

Once your GP has done a health assessment, you can be referred for up to five allied health services each calendar year. These services may be in addition to the five services available to patients with chronic medical condition and complex care needs. It is important to understand that your GP will decide whether you should be referred for these services.

The five services can be provided by a single allied health professional or shared across different professionals.

You can request that the GP refer you to an allied health professional you already know, or your GP can recommend one.

Allied health professionals need to meet specific eligibility criteria and be registered with Medicare Australia.

Eligible allied health professionals

- Aboriginal health workers
- audiologists
- chiropractors
- diabetes educators
- dietitians
- exercise physiologists
- mental health workers
- occupational therapists
- osteopaths
- physiotherapists
- podiatrists
- psychologists
- speech pathologists

OTHER ALLIED HEALTH SERVICES AVAILABLE UNDER MEDICARE

A practice nurse/Aboriginal health worker item (10987) has been introduced for people of Aboriginal or Torres Strait Islander descent who have received a health assessment. This item enables Aboriginal or Torres Strait Islander people to receive follow-up services from a practice nurse or registered Aboriginal health worker on behalf of a GP.

Medicare benefits are also available for a range of other allied health services for certain patients. You may be eligible for these if you:

- have a chronic medical condition and complex care needs;
- have type 2 diabetes;
- have an assessed mental disorder;
- are a child with autism or any other pervasive developmental disorder;
- are a woman who is concerned about either a current pregnancy, or one that occurred in the previous 12 months.