

Answers to some frequently asked questions about the Medicare allied health and dental care initiative

Must an EPC MBS item for preparing or contributing to an EPC multidisciplinary care plan be claimed on Medicare before a Medicare rebate is paid for allied health or dental services?

Yes. Services provided under the allied health and dental items will not attract a Medicare rebate unless an Enhanced Primary Care (EPC) Item has already been claimed (Items 720, 722, and 730 in the case of aged care facility residents).

This means that, before a Medicare rebate can be paid for allied health or dental treatment provided on referral from a GP (as part of a care plan), either the patient must have already claimed a Medicare rebate for a care plan, or the GP must have already lodged a claim for direct payment from Medicare for the relevant EPC care planning item.

Where GPs bulk-bill patients for care planning, it may sometimes happen that a patient will have their first referred allied health or dental care service before the GP has actually lodged a Medicare claim for direct payment. When this happens, Medicare will be unable to process the patient's claim (or allied health professional/dentist's claim for direct payment) until after the GPs claim is submitted.

Doesn't a GP just have use the special 'referral form' to refer a patient for allied health or dental care services?

No. A patient must have an EPC multidisciplinary care plan in place before a GP can refer them for allied health or dental care services as outlined in their EPC plan. Only then can the GP refer a patient to an eligible allied health professional or dentist using the relevant *EPC Program referral form for allied health (or dental care) services*.

Medicare must have processed a claim for an EPC plan before a claim for an allied health or dental care service will be paid.

How many allied health and dental care services may be claimed through Medicare in a 12 month period?

For allied health services, the maximum number of services a patient may access in a 12 month period is five. The five services can be made up of five of the one type of allied health service or a combination of different types of service, for example, five physiotherapy services or one dietetic service and four podiatry services. The '12 month period' commences from the date of the first service.

For dental care services, the maximum number of services a patient may access in a 12 month period is three, with the first service being a dental assessment. Again, the '12 month period' commences from the date of the first service.

How does a GP know if their patient is eligible for Medicare allied health or dental care services?

Most people managed on Enhanced Primary Care (EPC) plans are managed by their usual GP and this GP will be making referrals to allied health or dental care services. Where a GP is unsure of the eligibility of their patient, for example, where the patient has recently moved from another area, the Health Insurance Commission (HIC) will be able to confirm whether previous EPC and allied health services have been claimed.

GPs can call with the patient present or alternatively the patient can call the HIC on 132 011.

How can allied health professionals and dentists check that an EPC plan is in place for the patient?

Patients being referred for allied health or dental care services must provide the allied health professional or dentist with the relevant *EPC referral form for allied health (or dental care) services* signed by their GP. This should indicate that the patient has an EPC multidisciplinary care plan and is eligible for Medicare rebateable services.

While allied health professionals and dentists referred to for services under an Enhanced Primary Care (EPC) multidisciplinary care plan are not required to be members of the care planning team, they often will be. They will thus know that the patient has an EPC plan and what services have been recommended.

Where allied health professionals and dentists are not members of the care planning team, they may be contacted by the GP to check their availability to provide services under the plan.

Where an allied health professional or dentist is unsure of the eligibility of their patient, for example, where the patient has recently moved from another area, the Health Insurance Commission (HIC) will be able to confirm whether previous EPC and allied health services have been received.

Allied health professionals and dentists can call with the patient present or alternatively the patient can call the HIC on 132 011.

How will a GP know whether an allied health professional or dentist is registered with the Health Insurance Commission (HIC) to provide Medicare rebateable services?

While HIC policy does not allow the disclosure of personal information to third parties, there are several ways a GP can find out whether an allied health professional or dentist is registered with the HIC to provide Medicare rebateable services:

- Where the GP invites an allied health professional or dentist to participate as a member of the care planning team and/or to provide services recommended in the plan, they will be able to inform the GP of their HIC registration status;

- Where allied health professionals and dentists are not members of the team, they will still often be contacted by the GP to check their availability to provide services under the plan (see EPC explanatory notes, MBS Book 1 November 2003, pages 36 and 37) and will be able to inform the GP of their HIC registration status;
- Where patients are already being treated by an allied health professional or dentist and become eligible for services under an EPC plan they may request that their GP refer them to a particular allied health professional or dentist under the plan. The patient or GP can confirm directly with the allied health professional or dentist if they are registered with HIC.

Allied health professionals and dentists may also inform GPs in their local area that they are registered with the HIC to provide Medicare rebateable services as part of their overall business communication strategy.