

REFERRALS TO ACCREDITED EXERCISE PHYSIOLOGISTS UNDER MEDICARE

WHO CAN BE REFERRED?

Patients on a GP Management Plan (GPMP) and Team Care Arrangements (TCAs) are eligible for five individual allied health sessions per year on the Medicare Benefits Schedule. Patients with Type 2 Diabetes can also access Medicare rebates for up to eight allied health group services per calendar year.

WHAT MEDICARE ITEM NUMBERS CAN I USE?

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ITEM NUMBER	SERVICE PROVIDED	ELIGIBLE PATIENTS	PREREQUISITE FOR CLAIMING
10953	Exercise physiology service	Patients who have a chronic condition & complex care needs	GP claimed GPMP and TCA in past 2 years
81110	Exercise physiology service – assessment	Patients with type 2 diabetes	GP claimed GPMP
81115	Exercise physiology service – group service		Assessed as suitable by Assessment for Group Services (item 81100, 81110 or 81120).
81315	Exercise physiology service	Indigenous Australians who have had a health check	GP must have completed a health check.

WHAT IS THE REFERRAL PROCESS FOR INDIVIDUAL MEDICARE ITEMS

STEP 1: GP REFERRAL

GP refers eligible patient to our Accredited Exercise Physiologists under the appropriate Medicare item

STEP 2: AEP SERVICE

Accredited Exercise Physiologist at MV Health and Fitness provides individual service/s to the patient. A written report is then sent to your referring GP after the first and last service, or more if clinically necessary.

STEP 3: GP PATIENT REVIEW

GP conducts a review of patient's GPMP and/or TCA. Patient reviews should be conducted every 6 months.





Referral Form for Individual Allied Health Services under Medicare for patients with a chronic medical condition and complex care needs

Note: GPs can use this form issued by the Department of Health or one that contains all of the components of this form.

To be completed by referring GP:

Please tick:

- Patient has GP Management Plan (item 721) AND Team Care Arrangements (item 723) OR
 GP has contributed to or reviewed a multidisciplinary care plan prepared by the patient's residential aged care facility (item 731)

Note: GPs are encouraged to attach a copy of the relevant part of the patient's care plan to this form.

GP details

Provider Number

Name

Address Postcode

Patient details

Medicare Number Patient's ref no.

First Name Surname

Address Postcode

Allied Health Provider (AHP) patient referred to: (Please specify name or type of AHP) Moonee Valley Health and Fitness
Ph. (03)9996-0790

Name Fax: 03 8692 6715

Address Postcode

Referral details – Please use a separate copy of the referral form for each type of service

Eligible patients may access Medicare rebates for a maximum of 5 allied health services (total) in a calendar year. Please indicate the number of services required by writing the number in the 'No. of services' column next to the relevant AHP.

No of services	AHP Type	Item Number	No of services	AHP Type	Item Number	No of services	AHP Type	Item Number
	Aboriginal Health Worker/Aboriginal and Torres Strait Islander Health Practitioner	10950		Exercise Physiologist	10953		Podiatrist	10962
	Audiologist	10952		Mental Health Worker	10956		Psychologist	10968
	Chiropractor	10964		Occupational Therapist	10958		Speech Pathologist	10970
	Diabetes Educator	10951		Osteopath	10966			
	Dietitian	10954		Physiotherapist	10960			

Referring General Practitioner's signature

Date signed

The AHP must provide a written report to the patient's GP after the first and last service, and more often if clinically necessary.

Allied health providers should retain this referral form for record keeping and Department of Human Services (Medicare) audit purposes.

This form may be downloaded from the Department of Health website at www.health.gov.au/mbsprimarycareitems

THE FORM DOES NOT HAVE TO ACCOMPANY MEDICARE CLAIMS