GP Aged Care Incentive (GPACI) MBS User Guide



The General Practice in Aged Care Incentive (GPACI) provides incentive payments to general practices and general practitioners for delivering regular visits and care planning to permanent residents living in residential aged care. The new incentive aims to strengthen and formalise relationships between residents and their primary care provider, or general practice.

The purpose of this resource is to support General Practices to plan their delivery of care for the GPACI and provide examples of how to use MBS items to meet the requirements of this incentive. To use the guide in your practice, simply select the Sample Schedule (pg. 3 – 8) and Example Annual Cycle billing scenario (pg. 11 – 15) that best suits your practice team and setting.

This resource demonstrates the potential use of MBS items related to the GPACI. For a full explanation of each MBS item please refer to MBS online. <u>https://www.mbsonline.gov.au/.</u> Note that MBS items in the examples outlined must be billed by providers whose provider numbers are associated with the General Practice to count toward GPACI service requirements. Estimated billing examples on pg. 10 - 14 do not include triple bulk billing and practices are encouraged to add this for their MMM area as applicable. An example of triple bulk billing is provided on pg. 15 for illustrative purposes for an MMM 4 practice.

Disclaimer: This resource outlines some examples of how General Practice can utilise GPACI MBS Items and Care to enable the incentive payments under the program, General Practices are advised that this resource does not cover all scenarios or scheduling of MBS items to meet GPACI service payments. General Practices or Aboriginal Community Controlled Health Organisations should consider their unique model of care, team structure and business model when planning or considering the GPACI. General Practices are encouraged to refer to the GPACI Guidelines on DoHAC website for more information: https://www.health.gov.au/our-work/gpaci

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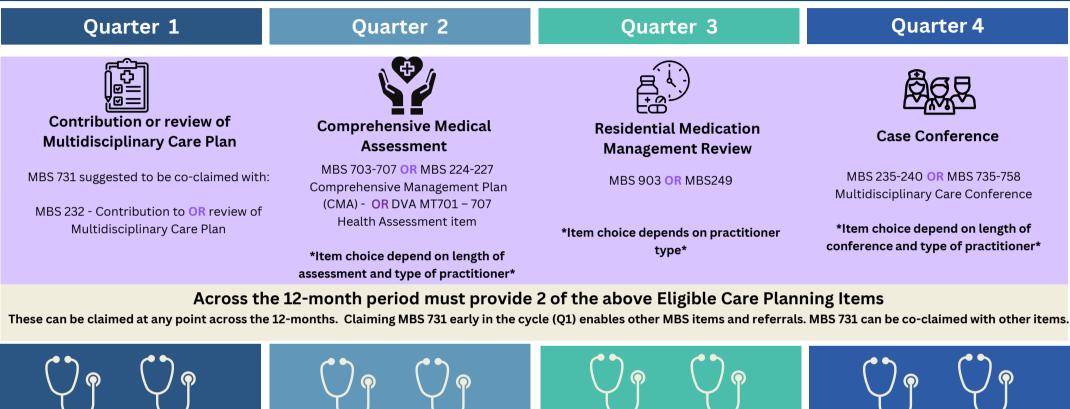
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GPACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER VISITING ONLY





NOTE: Completing 2 Regular Visits with your patient per quarter triggers the incentive payment to both the Responsible Practitioner and the Practice. Payments will not be triggered if the two visits are not completed within the quarter in two separate calendar months. Triple bulk billing applies with eligible patients.





GPACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER + ALTERNATIVE PROVIDER

Other GP / Prescribed medical practitioner / Nurse practitioner



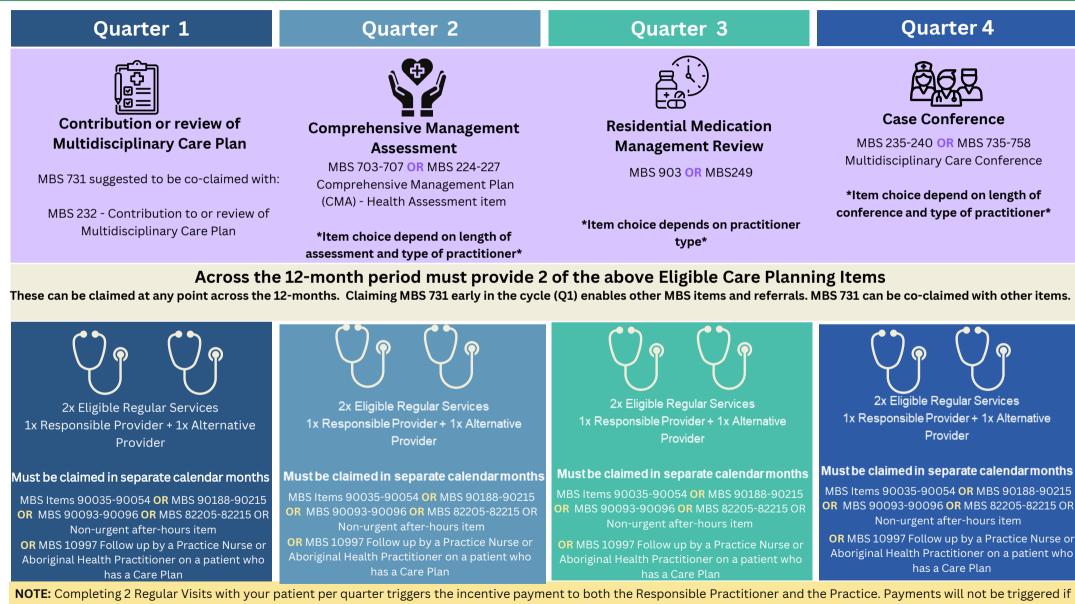
NOTE: Completing 2 Regular Visits with your patient per quarter triggers the incentive payment to both the Responsible Practitioner and the Practice. Payments will not be triggered if the two visits are not completed within the quarter in two separate calendar months. Triple bulk billing applies with eligible patients. Also note, the **RESPONSIBLE PROVIDER must complete 4 of the eligible regular services** 1 per quarter across the 12-months, another GP or Nurse Practitioner can provide

the other regular visits.



GPACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER + OTHER CARE TEAM MEMBERS

Other GP / Prescribed medical practitioner / Nurse practitioner / Practice Nurse / Aboriginal &/or Torres Strait Islander Health Practitioner



the two visits are not completed within the quarter in two separate calendar months. Triple bulk billing applies with eligible patients. Also note, the **RESPONSIBLE PROVIDER must complete 4 of the eligible regular services** 1 per quarter across the 12-months, another GP or Nurse Practitioner can provide the other

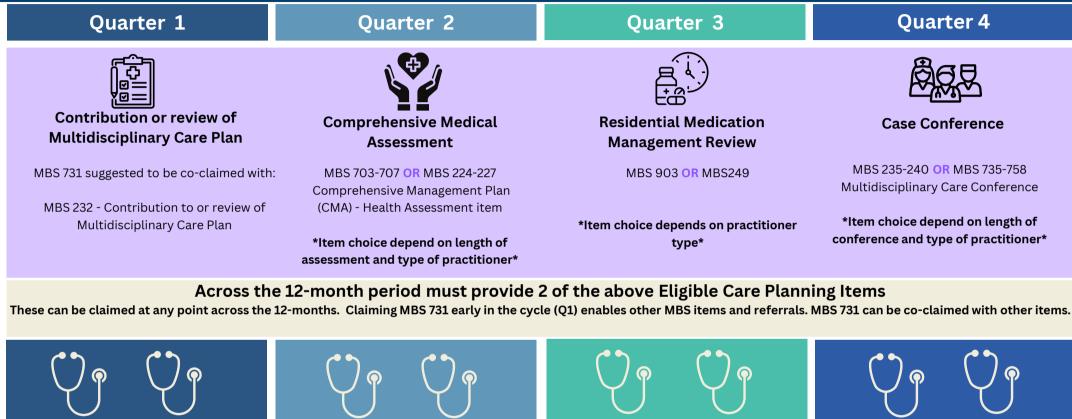
regular visits. MBS731 MUST have been billed before the follow up items can be completed by a Practice Nurse or Aboriginal &/or Torres Strait Islander Health Practitioner.

GPACI MBS User Guide



GPACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER VISITING ONLY

Practicing in MMM 4-7 where telehealth appointments can by used as follow up



2x Eligible Regular Services

Must be claimed in separate calendar months

MBS Items 90035-90054 **OR** MBS 90188-90215 OR MBS 90093-90096 OR non-urgent afterhours item **OR** Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in

the quarter

2x Eligible Regular Services Must be claimed in separate calendar

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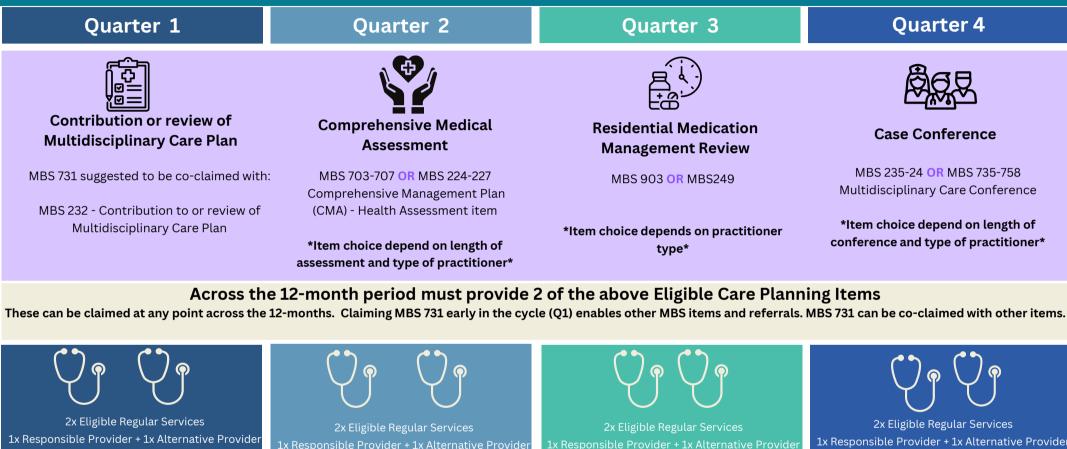
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GPACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER + ALTERNATIVE PROVIDER

Other GP / Prescribed medical practitioner / Nurse practitioner + Practicing in MMM 4-7 where telehealth appointments can by used as follow up



Must be claimed in separate calendar months

MBS Items 90035-90054 OR MBS 90093-900096 OR MBS 90188-90215 OR MBS 82205-82215 OR after hours non-urgent **OR** Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter

Must be claimed in separate calendar months

MBS Items 90035-90054 OR MBS 90093-900096 OR MBS 90188-90215 OR BS 82205-82215 **OR** after hours non-urgent **OR** Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter

Must be claimed in separate calendar months MBS Items 90035-90054 OR MBS 90093-900096 OR MBS 90188-90215 OR BS 82205-

OR Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter

1x Responsible Provider + 1x Alternative Provider Must be claimed in separate calendar months

MBS Items 90035-90054 OR MBS 90093-900096 OR MBS 90188-90215 OR BS 82205-82215 **OR** after hours non-urgent **OR** Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in

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Also note, the **RESPONSIBLE PROVIDER must complete 4 of the eligible regular services - 1 per quarter** across the 12-months, another GP or Nurse Practitioner can provide the other regular visits. Note this visiting schedule is only relevant for practitioners in MMM4-7 areas. Can claim up to 4 telehealth consults across the 12-months

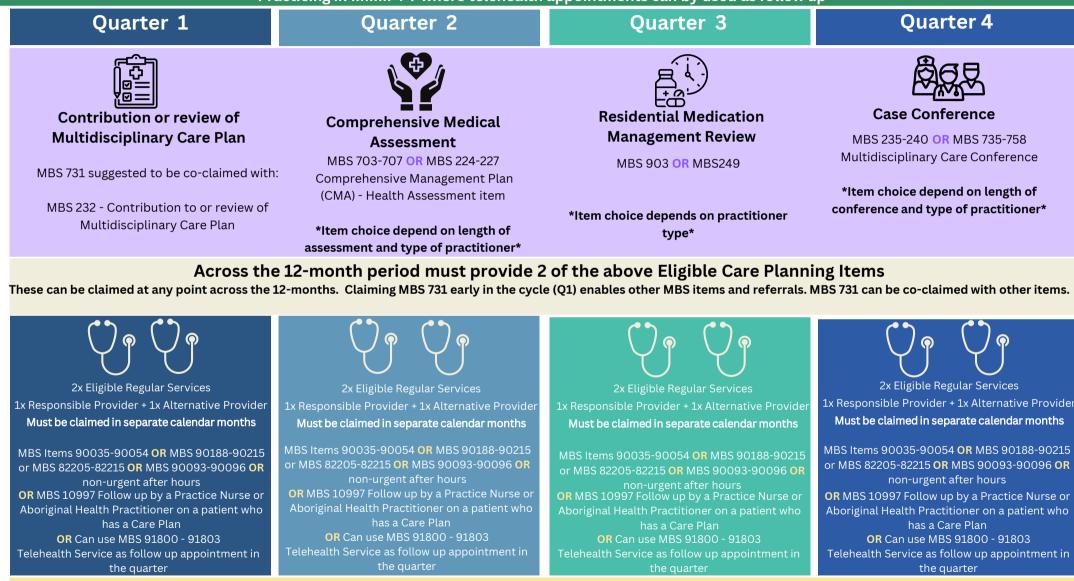
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GPACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER + OTHER CARE TEAM MEMBERS

Other GP / Prescribed medical practitioner / Nurse practitioner/ Practice Nurse/ Aboriginal &/Or Torres Strait Islander Health Practitioner + Practicing in MMM 4-7 where telehealth appointments can by used as follow up



NOTE: Completing 2 Regular Visits with your patient per quarter triggers the incentive payment to both the Responsible Practitioner and the Practice. Payments will not be triggered if the two visits are not completed within the quarter in two separate calendar months. Triple Bulk billing applies with eligible patients.

Also note, the **RESPONSIBLE PROVIDER must complete 4 of the eligible regular services 1 per quarter** across the 12-months, another GP or Nurse Practitioner can provide the other regular visits. **MBS731 MUST** have been billed before the follow up items can be completed by a Practice Nurse or Aboriginal &/or Torres Strait Islander Health Practitioner.

Regular Appointment/ Visit timing by MBS Item and By Practitioner



General Attendance Items	Level B 6-20minutes	Level C 20+ Minutes	Level D 40+ Minutes	Level E 60+ Minutes
RACF/RACH Visit VR GP	90035	90043	90051	90054
RACF/RACH visit *after hours - VR GP	5028	5049	5067	5077
RACH/RACH Visit Prescribed Medical Practitioner	90188	90202	90212	90215
RACH Visit Nurse Practitioner	82205	82210	82215	N/A
Practice Nurse or Aboriginal &/or Torres Strait Islander Health Practitioner follow up visit RACH	10997 (Not timed)			
Telehealth	91800	91801	91802	91920
Non-Urgent After Hours	776/ 5028 / 5263	788/ 5049/ 5265	789/ 5067/ 5265	2200/ 5077/ 5262/ 5267

DEFINITIONS

Responsible Provider = Medical practitioner who holds an eligible specialty code, as outlined in Appendix 10.2, and who for the purposes of the General Practice in Aged Care Incentive are responsible for coordinating the delivery of eligible services to an eligible patient

Prescribed Medical Practitioner = previously non vocationally registered/ OMPS

VR = Vocationally Registered General Practitioner

Other Important Notes about GP ACI

Care Planning Items can be claimed on the same day or on separate visits as long as it meets the GPACI criteria of TWO Care Planning Items per annum.

MBS 731 is required to be able to bill Practice nurse/ Aboriginal &/or Torres Strait Islander Health Practitioner Item MBS 10997 and required to trigger allied health appointments (chronic disease management items for Podiatry, Dietitian, Physio, Ex Phys, Occupational Therapy, etc). This GPACI MBS User Guide Strongly recommends practitioners claim this item within the first quarter to maximise the multidisciplinary team function of GPACI.

To be eligible for the 4th quarter payment a total of 8 regular visits need to be completed across 12 months (Not required to be delivered in separate calendar months). If a GP misses a quarter, they will need to make up the missed visit at another point in the 12-month period.

On the following pages are some example annual billing/claiming cycles using GPACI MBS items. Note: there are many ways a General Practice may structure the care provided to an aged care resident. These are examples to provide an idea of how visits could be placed, indicative billing amounts (noting if claiming longer consults or after hours items the billed amount is higher).



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Example Annual Cycle inc. estimated billing - Responsible Provider Only **MMM1-3**

National MyMedicare PHN Implementation Program



Quarter 1			Quarter 2		
January	February	March	April	May	June
Eligible Care Planning Item MBS 731 + MBS 705	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min
\$80.20 + \$216.80 = \$297	\$82.90	\$82.90	\$229.65	\$82.90	\$82.90
Other eligible items available depending on the patient's needs. Start the annual cycle with item 731 to ensure have best access to MDT requirements.	Other items are available for shorter or longer regular visits, after hours Note regular visits need to be in separate calendar months,	Other items are available for shorter or longer regular visits, after hours	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	Other items are available fo shorter or longer regular visits, after hours
Quarter 3			Quarter 4		
July	August	September	October	November	December
Eligible Care Planning Item - Med Review MBS 903	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min
\$120.80	\$82.90	\$82.90	\$229.65	\$82.90	\$82.90
Other eligible Items available depending on the patient's needs MMRs aim to help people to get the most benefit from their medicines and minimise their risk of medicines-related harm - National Commission on Safety & Quality in Healthcare	Other items are available for shorter or longer regular visits, after hours	Other items are available for shorter or longer regular visits, after hours	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	Other items are available fo shorter or longer regular visits, after hours
Annual Billed Amount	in this example: \$1540.3 le GP incentive) + \$130		additional care needs to bi	er may visit the patient more Il for follow up telehealth app ng on patient's individual care	ointment, or bill for longer

\$1970.30 (noting incentive paid quarterly)

appointment items depending on patient's individual care needs, therefore the billed amount for the patient may be more or less - example only.

Example Annual Cycle inc. estimated billing - Responsible Provider Only MMM4-7





Quarter 1		Quarter 2			
January	February	March	April	May	June
Eligible Care Planning Item MBS 731 + MBS 705	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 91801 20+ mins	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 91801 20+ mins
\$80.20 + \$216.80 = \$297	\$82.90	\$82.90	\$229.65	\$82.90	\$82.90
Other eligible items available depending on the patient's needs. Start the annual cycle with item 731 to ensure have best access to MDT requirements.	Other items are available for shorter or longer regular visits, after hours Note regular visits need to be in separate calendar months,	This item represents a telehealth appt. Other items are available for shorter or longer regular visits, after hours and face to face.	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	This item represents a telehealth appt. Other item are available for shorter or longer regular visits, after hours and face to face.
Quarter 3		Quarter 4			
July	August	September	October	November	December
Eligible Care Planning Item - Med Review MBS 903	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 91801 20+ mins	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Responsible Provider MBS 91801 20+ mins
\$120.80	\$82.90	\$82.90	\$229.65	\$82.90	\$82.90
Other eligible Items available depending on the patient's needs MMRs aim to help people to get the most benefit from their medicines and minimise their risk of medicines-related harm - National Commission on	Other items are available for shorter or longer regular visits, after hours	This item represents a telehealth appt. Other items are available for shorter or longer regular visits, after hours and face to face.	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	This item represents a telehealth appt. Other item are available for shorter of longer regular visits, after hours and face to face.
	in this example: \$1540.3 le GP incentive) + \$130 (additional care needs to bi	er may visit the patient more ll for follow up telehealth app ng on patient's individual care	ointment, or bill for longe

\$1970.30 (noting incentive paid quarterly)

amount for the patient may be more or less - example only.

Example Annual Cycle inc. estimated billing - Responsible Provider + Alternate Provider (other GP or Nurse Practitioner)

National MyMedicare PHN Implementation Program



Quarter 1			Quarter 2		
January	February	March	April	Мау	June
Eligible Care Planning Item MBS 731 + MBS 705	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Nurse Practitioner MBS 82210 20-40min	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Nurse Practitioner MBS 82210 20-40min
\$80.20 + \$216.80 = \$297	\$82.90	\$58.85	\$229.65 + may be able to bill for NP time at CC	\$82.90	\$58.85
Other eligible items available depending on the patient's needs. Start the annual cycle with item 731 to ensure have best access to MDT requirements.	Other items are available for shorter or longer regular visits, after hours Note regular visits need to be in separate calendar months,	Other items are available for shorter or longer regular visits, after hours	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	Other items are available fo shorter or longer regular visits, after hours
Quarter 3		Quarter 4			
July	August	September	October	November	December
Eligible Care Planning Item - Med Review MBS 903	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Nurse Practitioner MBS 82210 20-40min	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Nurse Practitioner MBS 82210 20-40min
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Annual Billed Amount of \$300 (Responsib	in this example: \$1436.1 le GP incentive) + \$130 (practice incentive) =	additional care needs to bil	er may visit the patient more I for follow up telehealth app ng on patient's individual care	ointment, or bill for longer

\$1866.10 (noting incentive paid quarterly)

amount for the patient may be more or less - example only.

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Example Annual Cycle inc. estimated billing - Responsible Provider + Other Team Members (other GP or NP or Practice Nurse or Aboriginal &/or Torres Strait Islander Health Practitioner)

National MyMedicare PHN Implementation Program



Quarter 1			Quarter 2	
February	March	April	May	June
1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Practice Nurse/ Health Practitioner MBS 10997	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Practice Nurse/ Health Practitioner MBS 10997
\$82.90	\$13.65	\$229.65	\$82.90	\$13.65
Other items are available for shorter or longer regular visits, after hours Note regular visits need to be in separate calendar months,	Other items are available for shorter or longer regular visits, after hours	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	Other items are available f shorter or longer regular visits, after hours
Quarter 3		Quarter 4		
August	September	October	November	December
1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Practice Nurse/ Health Practitioner MBS 10997	Eligible Care Planning Item Case Conference MBS743 40+Mins	1x Eligible Regular Visit Responsible Provider MBS 90043 20-40min	1x Eligible Regular Visit Practice Nurse/ Health Practitioner MBS 10997
\$82.90	\$13.65	\$229.65	\$82.90	\$13.65
Other items are available for shorter or longer regular visits, after hours	Other items are available for shorter or longer regular visits, after hours	A Case conference can be used to engage with care team members from RACH, allied health, specialists and care team members from your practice. Provides an opportunity to collaborate	Other items are available for shorter or longer regular visits, after hours	Other items are available fo shorter or longer regular visits, after hours
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Annual Billed Amount in this example: \$1263.30+ incentive payment of \$300 (Responsible GP incentive) + \$130 (practice incentive) = \$1693.30(noting incentive paid quarterly) Noting that the practitioner may visit the patient more frequently in the year for additional care needs to bill for follow up telehealth appointment, or bill for longer appointment items depending on patient's individual care needs, therefore the billed amount for the patient may be more or less - example only. Example Annual Cycle estimated billing + Triple Bulk Billing Incentive included. MMM 4 location example (Responsible Provider Only)



Based on page 12 Annual Cycle example

Annual Billed Amount in this example: \$1540.30 + incentive payment of \$300 (Responsible GP incentive) + \$130 (practice incentive) = \$1970.30 (noting incentive paid quarterly)

Triple bulk billing amount for an MMM4

MBS 75873 claimed x 4 = \$40.55x4 = \$162.20 MBS 75882 (telehealth) claimed x 4 = \$40.55x4 = \$162.20

Total annual billed amount = \$1970.30 + \$162.20 + \$162.20 = \$2294.70

Other Important Information

Noting that the practitioner may visit the patient more frequently in the year for additional care needs to bill for follow up telehealth appointment, or bill for longer appointment items depending on patient's individual care needs, therefore the billed amount for the patient may be more or less - example only.

Also note this example is for MMM4 - Bulk Billing Incentive amounts differ between MMM areas. This resource has represented one example to ensure practitioners consider the inclusion of Triple Bulk Billing when using this User Guide.

Bulk Billing Incentive items reflect a \$ amount that already reflects the tripling of this item in MBS online, no need to carry out additional sums to triple these items.



For more information on Triple Bulk Billing scan the QR code to DoHAC website resources, including links to MBS Online.



REVIEW CYCLE FOR GPACI MBS USER GUIDE RESOURCE



PHNs have jointly developed this resource through the National PHN MyMedicare Implementation Program and the PHN Cooperative.

Review of the original National PHN MyMedicare branded resource will occur ~6 monthly or as required due to changing GPACI MBS items or policy.

This document is Version 3, published on 31 October 2024. The next review of the resource is due April 2025.

Printed copies of this resource are uncontrolled and may not contain the most up to date information. If you have any feedback on this resource, please contact <u>PHNMyMedicare@brisbanenorthphn.org.au</u>