Australian Government Department of Health



Quick reference guide

New Items for: Eating Disorders

Date of change: 1 November 2019

New items:

ems: 82350, 82351, 82352, 82353, 82354, 82355, 82356, 82357, 82358, 82359, 82360, 82361, 82362, 82363, 82364, 82365, 82366, 82367, 82368, 82369, 82370, 82371, 82372, 82373, 82374, 82375, 82376, 82377, 82378, 82379, 82380, 82381, 82382, 82383, 90250, 90251, 90252, 90260, 90261, 90262, 90263, 90264, 90265, 90253, 90254, 90255, 90256, 90257, 90268, 90269, 90266, 90267, 90271, 90272, 90273, 90274, 90275, 90276, 90277, 90278, 90279, 90280, 90281, 90282

New Items

There are 64 new items for Eating Disorder services. The Eating Disorders items define services for which Medicare rebates are payable, where service providers undertake assessment and management of patients with a diagnosis of anorexia nervosa and patients with other specified eating disorder diagnoses who meet the eligibility criteria. It is expected that there will be a multidisciplinary approach to patient management through these items.

The item structure provides Medicare rebates for the development and review of Eating Disorder treatment and management plans, courses of evidence based eating disorder psychological and dietetic treatment services.

These items are relevant for medical practitioners in general practice, consultant psychiatrists or consultant paediatricians and eligible Clinical Psychologists and Psychologists, Occupational Therapists, Social Workers and Dietitians. Items are grouped as follows with more details below:

Category 1 – Professional Attendances: Group A36 Eating Disorders

Subgroup 1: GP and medical practitioner eating disorders treatment plan (EDP) (90250-90257)

Subgroup 2: Consultant psychiatrist and paediatrician eating disorders treatment plans (EDP) (90260-90263)

Subgroup 3: Review of eating disorder treatment plans (EDR) (90264-90269)

Subgroup 4: GP and medical practitioner eating disorders psychological treatment (EDPT) services (90271-90282)

Category 8 – Miscellaneous Services: Group M16 – Eating disorders services

Subgroup 1: Eating disorders dietitian health services (82350-82351)

Subgroup 2: EDPT services provided by eligible clinical psychologists (82352-82359)

Subgroup 3: EDPT services provided by eligible psychologists (82360-82367)

Subgroup 4: EDPT services provided by eligible occupational therapists (82368-82375)

Subgroup 5: EDPT services provided by eligible social workers (82376-82383)

These items do not apply if the patient is an admitted patient in hospital.



Patient impacts

Eligible patients will be able to receive a Medicare rebate for;

The development of a treatment and management plan by a medical practitioner in general practice, a consultant psychiatrist or consultant paediatrician.

- Reviews of their progress against the treatment plan and formal specialist reviews.
- Evidence based eating disorder psychological treatment services, up to 40 services in a 12 month period.
- up to 20 dietetic services, in a 12 month period.

For any particular patient, an eating disorder treatment and management plan expires at the end of a 12 month period following provision of that service.

Patient Eligibility

The eating disorder items are available to eligible patients in the community. These items do not apply to services provided to admitted (in-hospital) patients.

The referring practitioner is responsible for determining that a patient is eligible for an EDP and therefore EDPT and dietetic services.

'Eligible patient' defines the group of patients who can access the new eating disorder services. There are two cohorts of eligible patients.

- 1. Patients with a clinical diagnosis of anorexia nervosa; or
- 2. Patients who meet the eligibility criteria (below), and have a clinical diagnosis of any of the following conditions:
 - i. bulimia nervosa;
 - ii. binge-eating disorder;
 - iii. other specified feeding or eating disorder.

The eligibility criteria, for a patient, is:

- a. a person who has been assessed as having an Eating Disorder Examination Questionnaire score of 3 or more; and
- b. the condition is characterised by rapid weight loss, or frequent binge eating or inappropriate compensatory behaviour as manifested by 3 or more occurrences per week; and
- c. a person who has at least two of the following indicators:
 - i. clinically underweight with a body weight less than 85% of expected weight where weight loss is directly attributable to the eating disorder;
 - ii. current or high risk of medical complications due to eating disorder behaviours and symptoms;
 - iii. serious comorbid medical or psychological conditions significantly impacting on medical or psychological health status with impacts on function;
 - iv. the person has been admitted to a hospital for an eating disorder in the previous 12 months;
 - v. inadequate treatment response to evidence based eating disorder treatment over the past six months despite active and consistent participation.

Practitioners should have regard to the relevant diagnostic criteria set out in the Diagnostic and Statistical Manual of the American Psychiatric Association – Fifth Edition (DSM-5)

Practitioners can access the Eating Disorder Examination Questionnaire at <u>https://www.credo-oxford.com/pdfs/EDE_17.0D.pdf</u>



The Eating Disorders Items Stepped Model of Care

The eating disorder items support a 'stepped model' for best practice care of eligible patients with eating disorders that comprise:

- assessment and treatment planning services;
- provision of and/or referral for appropriate evidence based eating disorder psychological and dietetic treatment services; and
- regular review and ongoing management to ensure the patient accesses the appropriate level of intervention to meet their needs.

The following model sets out the steps for an eligible patient to follow for their eating disorders treatment and mangment pathway in relation to the new items.

For the purpose of the 40 EDPT count; eating disorder psychological treatment service includes a service under provided under the following items: 90271, 90272, 90273, 90274, 90275, 90276, 90277, 90278, 90279, 90280, 90281, 90282, 2721, 2723, 2725, 2727, 283, 285, 286, 287, 371, 372 and items in Groups M6, M7 and M16 (excluding items 82350 and 82351).

The Stepped Model

'STEP 1' - PLANNING (trigger eating disorders pathway) items 90250-90257 and 90260-90263

An eligible patient receives an eating disorder plan (EDP) developed by a medical practitioner in general practice (items 90250-90257), consultant psychiatrist (items 90260-90262) or consultant paediatric (items 90261-90263).

'STEP 2' - COMMENCE INITIAL COURSE OF TREATMENT (psychological & dietetic services)

Once an eligible patient has an EDP in place, the 12 month period commences, and the patient is eligible for an initial course of treatment, up to 20 dietetic services (82350 and 82351) and 10 EDPT services (82352-82383, 90271-90282). A patient will be eligible for an additional 30 EDPT services in the 12 month period, subject to reviews from medical practitioners to determine appropriate intensity of treatment.

After each course of treatment, the relevant practitioners should provide the medical practitioner who is managing the patient's EDP (where appropriate) with a written report to inform the review and indicate patient progress and need.

'STEP 3" – EDR (90264-90269) to CONTINUE ON INITIAL COURSE OF TREATMENT (managing practitioner review and progress up to 20 EDPT services)

It is expected that the managing practitioner will be reviewing the patient on a regular, ongoing and as required basis. However, a patient must have a review of the EDP, to assess the patient's progress against the EDP and/or update the EDP, before they can access the next course of treatment (10 EDPT) services. This is known as the 'first review'. The first review should be provided by the patient's managing practitioner. Relevant practitioners should provide the medical practitioner who is the managing the patient's EDP (where appropriate) with a written report.

Where another course of treatment is appropriate the patient progress up to 20 EDPT services.

'STEP 4' FORMAL SPECIALIST AND PRACTITIONER REVIEW 90266-90269

To continue beyond 20 EDPT services a patient must have two additional reviews before they can access more than 20 EDPT services. One review (the 'second review') must be performed by a medical practitioner in general practice (90264-90265) (who is expected to be the managing practitioner), and the other (the 'third review') must be performed by a consultant paediatrician (90267 or 90269) or consultant psychiatrist (90266 or 90268). Should both recommend the patient requires more intensive treatment, the patient would be able to access an additional 10 EDPT services in



the 12 month period. These reviews are required to determine that the patient has not responded to treatment at the lower intensity levels.

The patient's managing practitioner should be provided with a copy of the specialist review.

The specialist review by the psychiatrist or paediatrician can occur at any point before 20 EDPT services. The practitioner should refer the patient for specialist review as early in the treatment process as appropriate. If the practitioner is of the opinion that the patient should receive more than 20 EDPT services, the referral should occur at the first practitioner review (after the first course of treatment) if it has not been initiated earlier.

Practitioners should be aware that the specialist review can be provided via telehealth (90268 and 90269). Where appropriate, provision has been made for practitioner participation on the patient-end of the telehealth consultation.

It is expected that the managing practitioner will be reviewing the patient on a regular, ongoing and as required basis. However, a patient must have a review of the EDP (90264-90269), to assess the patient's progress against the EDP or update the EDP, before they can access the next course of treatment.

'STEP 5' ACCESS TO MAXIMUM INTENSITY OF TREATMENT 90264-90269 (continue beyond 30 EDPT services)

To access more than 30 EDPT treatment services in the 12 month period, patients are required to have an additional review (the 'fourth review') to ensure the highest intensity of treatment is appropriate. Subject to this review, a patient could access the maximum of 40 EDPT treatment services in a 12 month period. The fourth review should be provided by the patient's managing practitioner, where possible.

An Integrated Team Approach: A patient's family and/or carers should be involved in the treatment planning and discussions where appropriate. The family can be involved in care options throughout the diagnosis and assessment, and are usually the support unit that help to bridge the gap between initial diagnosis and eating disorder specific treatment.

The National Standards for the safe treatment of eating disorders specify a multi-disciplinary treatment approach that provides coordinated psychological, physical, behavioural, nutritional and functional care to address all aspects of eating disorders. People with eating disorders require integrated inter-professional treatment that is able to work within a framework of shared goals, care plans and client and family information. Frequent communication is required between treatment providers to prevent deterioration in physical and mental health (RANZCP Clinical Guidelines: Hay et al., 2014). Consider regular case conferencing to ensure that the contributing team members are able to work within a shared care plan and with client and carers to achieve best outcomes.

Guidance:

It is expected that practioners providing services under these items should have appropriate skills, knowledge and experience to provide eating disorders treatment. However, there are a number of resources which may be of assistance to practitioners in supporting and developing eating disorders treatment plans, these are provided in AN.36.1 and MN.16.1

Patient and Provider eligibility are set out in the legislation and within associated explanatory notes. The notes are: Category 1: AN.36.1, AN.36.2, AN.36.3, AN.36.4, AN.36.5, AN.36.6 Category 8: MN.16.1, MN.16.2, MN.16.3, MN.16.4 Australian Government



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Category 1 – Professional Attendances

Group A36 - Eating Disorders Services – Subgroup 1 – GP and medical practioner eating disorders treatment and management plans

New items - 90250-90257 Eating Disorders Treatment and Management Plans – Explanatory Note AN.36.2

Overview: Eating Disorder Treatment Plan (EDP) items

The EDP items describe services for which Medicare rebates are payable where practitioners undertake the development of a treatment and management plan for patients with a diagnosis of anorexia nervosa and patients with other specified eating disorder diagnoses who meet the eligibility criteria.

The EDP items trigger eligibility for items which provide delivery of eating disorders psychological treatment (EDPT) services (up to a total of 40 psychological services in a 12 month period) and dietetic services (up to a total of 20 in a 12 month period).

For any particular patient, an eating disorder treatment and management plan expires at the end of a 12 month period following provision of that service. Eating Disorders treatment services are not available to the patient if the EDP has expired or is no longer required/in place.

Restrictions or requirements

Patients seeking rebates for items 90250-90257 and 90260-90263 will not be eligible if the patient has had a claim for these items within the last 12 months.

Items 90250-90257 cannot be claimed with Items 2713, 279, 735, 758, 235 and 244. Items 90261 and 90263 cannot be claimed with Items 110, 116, 119, 132, 133.

Consultant psychiatrist and paediatrician EDP items 90260-90263 do not apply if the patient does not have a referral within the period of validity (12 Months).

A patient cannot have more than one eating disorder treatment and management plan in a 12 month period. Patients requiring further treatment will need a new eating disorder treatment and management plan to provide a comprehensive and coordinated treatment plan for the next 12 months.

Additional Information regarding preperation, who can provide the service, what is involved in assessment and planning, and claiming is set out in the Explanatory Note - AN.36.2

The following items are for the preparation of a written eating disorder treatment and management plan for an eligible patient, if:

- the plan includes an opinion on diagnosis of the patient's eating disorder; and •
- the plan includes treatment options and recommendations to manage the patient's condition for the following 12 months; and
- the plan includes an outline of the referral options to allied health professionals for mental health and dietetic services, and specialists, as appropriate; and



- the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees):
 - i. a copy of the plan; and
 - ii. suitable education about the eating disorder

Item 90250– EDP preperation of at least 20 minutes but < 40 minutes by GP without mental health training

Summary Descriptor: Professional attendance by a general practitioner who has not undertaken mental health skills training (not including a specialist or consultant physician), of at least 20 minutes but less than 40 minutes in duration.

 Fee: \$72.85
 Benefit: 100% = \$72.85

 Extended Medicare Safety Net Cap: \$218.55

Item 90251– EDP preperation of at least 40 minutes by GP without mental health training

Summary Descriptor: Professional attendance by a general practitioner who has not undertaken mental health skills training (not including a specialist or consultant physician), of at least 40 minutes in duration

Fee: \$107.25 **Benefit:** 100% = \$107.25

Extended Medicare Safety Net Cap: \$321.75

Item 90252– EDP preperation of at least 20 minutes but < 40 minutes by GP with mental health training

Summary Descriptor: Professional attendance by a general practitioner who has undertaken mental health skills training (not including a specialist or consultant physician), of at least 20 minutes but less than 40 minutes in duration.

 Fee: \$92.50
 Benefit: 100% = \$92.50

 Extended Medicare Safety Net Cap: \$277.50

Item 90253– EDP preperation of at least 40 minutes by GP with mental health training

Summary Descriptor: Professional attendance by a general practitioner who has undertaken mental health skills training (not including a specialist or consultant physician), of at least 40 minutes in duration.

Fee: \$136.25 Benefit: 100% = \$136.25 Extended Medicare Safety Net Cap: \$408.75



Item 90254– EDP preperation of at least 20 minutes but < 40 minutes by OMP without mental health training

Summary Descriptor: Professional attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has not undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration.

 Fee: \$58.30
 Benefit: 100% = \$58.30

 Extended Medicare Safety Net Cap: \$174.90

Item 90255– EDP preperation of at least 40 minutes by OMP without mental health training

Summary Descriptor: Professional attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has not undertaken mental health skills training, of at least 40 minutes in duration.

 Fee: \$85.80
 Benefit: 100% = \$85.80

 Extended Medicare Safety Net Cap: \$257.40

Item 90256– EDP preperation of at least 20 minutes but < 40 minutes by OMP with mental health training

Summary Descriptor: Professional attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has undertaken mental health skills training, of at least 20 minutes but less than 40 minutes in duration.

Fee: \$74.00 Benefit: 100% = \$74.00 Extended Medicare Safety Net Cap: \$222

Item 90257– EDP preperation of at least40 minutes by OMP with mental health training

Summary Descriptor: Professional attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) who has undertaken mental health skills training, of at least 40 minutes in duration.

 Fee: \$109
 Benefit: 100% = \$109

 Extended Medicare Safety Net Cap: \$327

Australian Government **Department of Health**



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Category 1 – Professional Attendances

Group A36 - Eating Disorders Services – Subgroup 2 – Consultant psychiatrist and paediatrician eating disorders treatment plans

New items - 90260–90263 Eating Disorders Treatment and Management Plans (EDP)- Explanatory Note AN.36.2

Overview: Eating Disorder Treatment Plan (EDP) items

The EDP items describe services for which Medicare rebates are payable where practitioners undertake the development of a treatment and management plan for patients with a diagnosis of anorexia nervosa and patients with other specified eating disorder diagnoses who meet the eligibility criteria.

The EDP items trigger eligibility for items which provide delivery of eating disorders psychological treatment (EDPT) services (up to a total of 40 psychological services in a 12 month period) and dietetic services (up to a total of 20 in a 12 Month period).

For any particular patient, an eating disorder treatment and management plan expires at the end of a 12 month period following provision of that service. Eating Disorders treatment services are not available to the patient if the EDP has expired or is no longer required/in place.

Consultant psychiatrist provides an EDP service, the service must also include:

- administering an outcome measurement tool, where clinically appropriate. The choice of outcome tool to be • used is at the clinical discretion of the practitioner. Practitioners using such tools should be familiar with their appropriate clinical use, and if not, should seek appropriate education and training; and
- conducting a mental state examination.

Restrictions or requirements

Patients seeking rebates for items 90250-90257 and 90260-90263 will not be eligible if the patient has had a claim for these items within the last 12 months.

Items 90250-90257 cannot be claimed with Items 2713, 279, 735, 758, 235 and 244. Items 90261 and 90263 cannot be claimed with Items 110, 116, 119, 132, 133.

Consultant psychiatrist and paediatrician EDP items 90260-90263 do not apply if the patient does not have a referral within the period of validity.

A patient cannot have more than one eating disorder treatment and management plan in a 12 month period. Patients requiring further treatment will need a new eating disorder treatment and management plan to provide a comprehensive and coordinated treatment plan for the next 12 months.

Additional Information regarding preperation, who can provide the service, what is involved in assessment and planning, and claiming is set out in the Explanatory Note - AN.36.2

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EDP Items 90262 and 90263 provide for provision of video conference attendance, consistent with other video conference services listed in the Table (see AN.36.6 Eating Disorders Telehealth – Consultant psychiatrists or paediatricians).

The following items are for consultant psychiatrist and consultant paediatrician preparation of a written eating disorder treatment and management plan for an eligible patient, if:

- (a) the patient has been referred by a referring practitioner; and
- (b) during the attendance, the consultant psychiatrist:
 - (i) uses an outcome tool (if clinically appropriate); and
 - (ii) carries out a mental state examination; and
 - (iii) makes a psychiatric diagnosis; and
- (c) within 2 weeks after the attendance, the consultant psychiatrist:
 - (i) prepares a written diagnosis of the patient; and
 - (ii) prepares a written management plan for the patient that:
 - (A) covers the next 12 months; and
 - (B) is appropriate to the patient's diagnosis; and
 - (C) comprehensively evaluates the patient's biological, psychological and social issues; and
 - (D) addresses the patient's diagnostic psychiatric issues; and
 - (E) makes management recommendations addressing the patient's biological, psychological and social issues; and
 - (iii) gives the referring practitioner a copy of the diagnosis and the management plan; and
 - (iv) if clinically appropriate, explains the diagnosis and management plan, and a gives a copy, to:
 - (A) the patient; and
 - (B) the patient's carer (if any), if the patient agrees

Item 90260– EDP Consultant Psychiatrist in consulting rooms of at least 45 minutes

Summary Descriptor: Professional attendance of at least 45 minutes in duration at consulting rooms by a consultant physician in the practice of the consultant physician's specialty of psychiatry.

 Fee:
 \$466.80
 Benefit:
 85% = \$396.80

 Extended Medicare Safety Net Cap:
 \$500.00

Item 90261– EDP Consultant Paediatrician in consulting rooms of at least 45 minutes

Summary Descriptor: Professional attendance of at least 45 minutes in duration at consulting rooms by a consultant physician in the practice of the consultant physician's specialty of paediatrics.

 Fee:
 \$272.15
 Benefit:
 85% = \$231.30

 Extended Medicare Safety Net Cap:
 \$500



Item 90262– EDP Consultant Psychiatrist by video conference of at least 45 minutes

Summary Descriptor: Professional attendance of at least 45 minutes in duration by video conference by a consultant physician in the practice of the consultant physician's specialty of psychiatry.

Video Conference: Refer Explanatory Note: AN.36.6

 Fee: \$466.80
 Benefit: 85% = \$396.80

 Extended Medicare Safety Net Cap: \$500.00

Item 90263– EDP Consultant Paediatrician by video conference of at least 45 minutes

Summary Descriptor: Professional attendance of at least 45 minutes in duration by video conference by a consultant physician in the practice of the consultant physician's specialty of paediatrics.

Video Conference: Refer Explanatory Note: AN.36.6

Fee: \$272.15 Benefit: 85% = \$231.30 Extended Medicare Safety Net Cap: \$500

Category 1 – Professional Attendances

Group A36 - Eating Disorders Services – Subgroup 3 – Review of eating disorder treatment and management plans

New items - 90264–90269 Eating Disorder Treatment Plan review (EDR) – Explanatory Note AN.36.3

Overview: Eating Disorder Treatment Plan Review (EDR) items

The EDR items define services for which Medicare rebates are payable where practitioners undertake to review the efficacy of the patient's eating disorder treatment and management plan (EDP). This includes modifying the patient's plan, where appropriate, to improve patient outcomes. The review services can be provided by medical practitioners working in general practice, psychiatry and paediatrics.

An EDR may be provided by the managing practitioner who prepared the patient's initial plan (or another practitioner in the same practice or in another practice where the patient has changed practices) and should include a systematic review of the patient's progress against the initial EDP (whether it was prepared by a GP, psychiatrist or paediatrician) and by completing the activities that must be included in a review.



When to render an EDR review item

It is expected that the managing practitioner will be reviewing the patient on a regular, ongoing and as required basis. However, a patient must have a review of the EDP to assess the patient's progress against the EDP or update the EDP, as the patient is approaching the end of each course of treatment before they can access the next course of treatment.

Under the Eating Disorders Items Stepped Model of Care a course of treatment is defined as 10 eating disorder psychological treatment (EDPT) services. It is required that a patient must have a review after each course of treatment. After each course of treatment, the relevant practitioners are required to provide the referring (managing) medical practitioner with a written report.

Restrictions or requirements

Eating Disorder Plan review Items 90264-90269 must have had an EDP 90250-90257 or 90260-90263 in the previous 12 Months.

Items 90264- 90265 cannot be claimed with items 2713 and 279.

Consultant psychiatrist and paediatrician EDP items 90266- 90269 do not apply if the patient does not have a referral within the period of validity.

Items 90264-90265 for an EDR, performed by a medical practitioner working in general practice, should not be performed in association with a GP mental health consultation review service (item 2712 and 277).

Additional Information regarding reviewing a plan, what is to be included and claiming is set out in the Explanatory Note – *AN.36.3*

EDP Items 90268 and 90269 provide for provision of video conference attendance, consistent with other video conference services listed in the Table (see AN.36.6 Eating Disorders Telehealth – Consultant psychiatrists or paediatricians).

Item 90264– EDR by General Practitioner

Descriptor: Professional attendance by a general practitioner to review an eligible patient's eating disorder treatment and management plan prepared by the general practitioner, an associated medical practitioner working in general practice, or a consultant physician practising in the specialty of psychiatry or paediatrics, if:

- a) the general practitioner reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and
- b) modifications are made to the eating disorder treatment and management plan, recorded in writing, including:
 - i. recommendations to continue with treatment options detailed in the plan; or
 - ii. recommendations to alter the treatment options detailed in the plan, with the new arrangements documented in the plan; and
- c) initiates referrals for a review by a consultant physician practising in the specialty of psychiatry or paediatrics, where appropriate; and



- d) the general practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees):
 - i. a copy of the plan; and
 - ii. suitable education about the eating disorder.

Fee: \$72.85 Benefit: 100% = \$72.85 Extended Medicare Safety Net Cap: \$218.55

Item 90265- EDR by Medical Practitioner

Descriptor: Professional attendance by a medical practitioner (not including a general practitioner, specialist or consultant physician) to review an eligible patient's eating disorder treatment and management plan prepared by the medical practitioner, an associated medical practitioner working in general practice, or a consultant physician practising in the specialty of psychiatry or paediatrics, if:

- a) the medical practitioner reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and
- b) modifications are made to the eating disorder treatment and management plan, recorded in writing, including:
 - i. recommendations to continue with treatment options detailed in the plan; or
 - ii. recommendations to alter the treatment options detailed in the plan, with the new arrangements documented in the plan; and
- c) initiates referrals for a review by a consultant physician practising in the specialty of psychiatry or paediatrics, where appropriate; and
- d) the medical practitioner offers the patient and the patient's carer (if any, and if the practitioner considers it appropriate and the patient agrees):
 - i. a copy of the plan; and
 - ii. suitable education about the eating disorder.

Fee: \$58.30 **Benefit:** 100% = \$58.30

Extended Medicare Safety Net Cap: \$174.90

Item 90266– EDR by Consultant Psychiatrist

Descriptor: Professional attendance of at least 30 minutes in duration at consulting rooms by a consultant physician in the practice of the consultant physician's specialty of psychiatry for an eligible patient, if:

- a) the consultant psychiatrist reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and
- b) the patient has been referred by a referring practitioner; and
- c) during the attendance, the consultant psychiatrist:





- i. uses an outcome tool (if clinically appropriate); and
- ii. carries out a mental state examination; and
- iii. makes a psychiatric diagnosis; and
- iv. reviews the eating disorder treatment and management plan; and
- d) within 2 weeks after the attendance, the consultant psychiatrist:
 - i. prepares a written diagnosis of the patient; and
 - ii. revises the eating disorder treatment and management; and
 - iii. gives the referring practitioner a copy of the diagnosis and the revised management plan; and
 - iv. if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:
 - (A) the patient; and
 - (B) is the patient's carer (if any), if the patient agrees.

Fee: \$291.80 Benefit: 85% = \$248.05 Extended Medicare Safety Net Cap: \$500.00

Item 90267- EDR by Consultant Paediatrician

Descriptor: Professional attendance of at least 20 minutes in duration at consulting rooms by a consultant physician in the practice of the consultant physician's specialty of paediatrics for an eligible patient, if:

- a) the consultant paediatrician reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and
- b) the patient has been referred by a referring practitioner; and
- c) during the attendance, the consultant paediatrician reviews the **eating disorder treatment and management** plan, including a:
 - i. review of initial presenting problems and results of diagnostic investigations; and
 - ii. review of responses to treatment and medication plans initiated at time of initial consultation; and
 - iii. comprehensive multi or detailed single organ system assessment; and
 - iv. review of original and differential diagnoses; and
- d) within 2 weeks after the attendance, the consultant paediatrician:
 - i. prepares a written diagnosis of the patient; and
 - ii. revises the eating disorder treatment and management; and
 - iii. gives the referring practitioner a copy of the diagnosis and the revised management plan; and
 - iv. if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:
 - (A) the patient; and
 - (B) is the patient's carer (if any), if the patient agrees.

Fee: \$136.25 Benefit: 85% = \$115.80 Extended Medicare Safety Net Cap: \$408.75





Item 90268– EDR by Consultant Psychiatrist by video

Descriptor: Professional attendance of at least 30 minutes in duration by video conference by a consultant physician in the practice of the consultant physician's specialty of psychiatry for an eligible patient, if:

- a) the consultant psychiatrist reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and
- b) the patient has been referred by a referring practitioner; and
- c) during the attendance, the consultant psychiatrist:
 - i. uses an outcome tool (if clinically appropriate); and
 - ii. carries out a mental state examination; and
 - iii. makes a psychiatric diagnosis; and
 - iv. reviews the eating disorder treatment and management plan; and
- d) within 2 weeks after the attendance, the consultant psychiatrist:
 - i. prepares a written diagnosis of the patient; and
 - ii. revises the eating disorder treatment and management; and
 - iii. gives the referring practitioner a copy of the diagnosis and the revised management plan; and
 - iv. if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:
 - (A) the patient; and
 - (B) is the patient's carer (if any), if the patient agrees.

Video Conference: Refer Explanatory Note: AN.36.6

 Fee: \$291.80
 Benefit: 85% = \$248.05

 Extended Medicare Safety Net Cap: \$500.00

Item 90269- EDR by Consultant Paediatrician by video

Descriptor: Professional attendance of at least 20 minutes in duration by video conference by a consultant physician in the practice of the consultant physician's specialty of paediatrics for an eligible patient, if:

- a) the consultant paediatrician reviews the treatment efficacy of services provided under the eating disorder treatment and management plan, including a discussion with the patient regarding whether the eating disorders psychological treatment and dietetic services are meeting the patient's needs; and
- b) the patient has been referred by a referring practitioner; and
- c) during the attendance, the consultant paediatrician reviews the eating disorder treatment and management plan, including a:
 - i. review of initial presenting problems and results of diagnostic investigations; and
 - ii. review of responses to treatment and medication plans initiated at time of initial consultation; and
 - iii. comprehensive multi or detailed single organ system assessment; and
 - iv. review of original and differential diagnoses; and
- d) within 2 weeks after the attendance, the consultant paediatrician:



- i. prepares a written diagnosis of the patient; and
- ii. revises the eating disorder treatment and management; and
- iii. gives the referring practitioner a copy of the diagnosis and the revised management plan; and
- iv. if clinically appropriate, explains the diagnosis and the revised management plan, and gives a copy, to:
 - (A) the patient; and
 - (B) is the patient's carer (if any), if the patient agrees.

Video Conference: Refer Explanatory Note: AN.36.6

Fee: \$136.25 Benefit: 85% = \$115.80 Extended Medicare Safety Net Cap: \$408.75

Category 1 – Professional Attendances

Group A36 - Eating Disorders Services – Subgroup 4 – GP and medical practitioner eating disorders psychological treatment services

New items - 90271–90282 Medical Practitioner in general practice Eating Disorders Psychological Treatment (EDPT) services – Explanatory Note AN.36.4

Overview: Eating Disorder Psychological Treatment (EDPT) Services

Provision of EDPT by a suitably trained medical practitioner in general practice (90271 - 90282) is for patients with anorexia nervosa and other patients with complex presentations of diagnosed eating disorders who meet the eligibility requirements and would benefit from a structured approach to the management of their treatment needs in the community setting.

An 'eating disorder psychological treatment service' (EDPT) is defined in AN.36.1

Restrictions or requirements

Patients seeking rebates for EDPT services must have had an EDP 90250-90257 or 90260-90263 in the previous 12 Months.

Who can provide the service: Items in this group can be rendered by a medical practitioner in general practice with the required mental health training. This includes:

Medical practitioners who can render a general practitioner service in Group A1 of the MBS (see note AN.0.9 for the types of medical practitioners). These medical practitioners can render a 'general practitioner' service for items in subgroup 1 of Group A36. These doctors must have the mental health training requirements as specified below.



• Medical practitioners who are not general practitioners, specialists or consultant physicians. These medical practitioners can render a 'medical practitioner' service for items in subgroup 1 of Group A36. These doctors must have the mental health training requirements as specified below.

Mental health training: Medical practitioner in general practice who meets the training and skills requirements as determined by the General Practice Mental Health Standards Collaboration, and are entered on the Register as being eligible to render a focussed psychological strategy service, can render an eating disorders psychological treatment service.

Note: The General Practice Mental Health Standards Collaboration operates under the auspices of the Royal Australian College of General Practitioners.

Additional Information regarding what is involved in a service and claiming is set out in Explanatory Note - AN.36.4

Item 90271– EDPT by GP in consulting rooms at least 30 minutes but < 40 minutes

Descriptor: Professional attendance at consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

 Fee: \$94.25
 Benefit: 100% = \$94.25

 Extended Medicare Safety Net Cap: \$282.75

Item 90272– EDPT by GP other than consulting rooms at least 30 minutes but < 40 minutes

Descriptor: Professional attendance at a place other than consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Derived Fee: The fee for item 90271, plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90271 plus \$2.05 per patient.

Extended Medicare Safety Net Cap: 300% of the Derived fee for this item, or \$500.00, whichever is the lesser amount.



Item 90273– EDPT by GP in consulting rooms at least 40 minutes

Descriptor: Professional attendance at consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Fee: \$134.85 **Benefit:** 100% = \$134.85

Extended Medicare Safety Net Cap: \$404.55

Item 90274– EDPT by GP other than consulting rooms at least 40 minutes

Descriptor: Professional attendance at a place other than consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Derived Fee: The fee for item 90273, plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90273 plus \$2.05 per patient.

Extended Medicare Safety Net Cap: 300% of the Derived fee for this item, or \$500.00, whichever is the lesser amount.

Item 90275– EDPT by Medical Practitioner in consulting rooms at least 30 minutes but < 40 minutes

Descriptor: Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Fee: \$75.40 Benefit: 100% = \$75.40 Extended Medicare Safety Net Cap: \$226.20



Item 90276– EDPT by Medical Practitioner other than consulting rooms at least 30 minutes but < 40 minutes

Descriptor: Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Derived Fee: The fee for item 90275, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90273 plus \$1.65 per patient.

Extended Medicare Safety Net Cap: 300% of the Derived fee for this item, or \$500.00, whichever is the lesser amount.

Item 90277– EDPT by Medical Practitioner in consulting rooms at least 40 minutes

Descriptor: Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Fee: \$107.90 Benefit: 100% = \$107.90 Extended Medicare Safety Net Cap: \$323.70

Item 90278– EDPT by Medical Practitioner other than consulting rooms at least 40 minutes

Descriptor: Professional attendance at a place other than consulting rooms by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan.

Derived Fee: The fee for item 90277, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90273 plus \$1.65 per patient.

Extended Medicare Safety Net Cap: 300% of the Derived fee for this item, or \$500.00, whichever is the lesser amount.



Item 90279– EDPT by GP video conference rooms at least 30 minutes but < 40 minutes

Descriptor: Professional attendance at consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan, if:

- (a) the attendance is by video conference; and
- (b) the patient is not an admitted patient; and
- (c) the patient is located within a telehealth eligible area; and
- (d) the patient is, at the time of the attendance, at least 15 kilometres by road from the general practitioner.

Video Conference: Refer Explanatory Note: AN.36.5

Fee: \$94.25 Benefit: 100% = \$94.25 Extended Medicare Safety Net Cap: \$282.75

Item 90280– EDPT by GP video conference rooms at least 40 minutes

Descriptor: Professional attendance at consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan, if:

- (a) the attendance is by video conference; and
- (b) the patient is not an admitted patient; and
- (c) the patient is located within a telehealth eligible area; and
- (d) the patient is, at the time of the attendance, at least 15 kilometres by road from the general practitioner.

Video Conference: Refer Explanatory Note: AN.36.5

Fee: \$134.85 **Benefit:** 100% = \$134.85

Extended Medicare Safety Net Cap: \$404.55

Item 90281– EDPT by medical parctitioner video conference rooms at least 30 minutes but < 40 minutes

Descriptor: Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan, if:

- (a) the attendance is by video conference; and
- (b) the patient is not an admitted patient; and
- (c) the patient is located within a telehealth eligible area; and



(d) the patient is, at the time of the attendance, at least 15 kilometres by road from the general practitioner.

Video Conference: Refer Explanatory Note: AN.36.5

 Fee: \$75.40
 Benefit: 100% = \$75.40

 Extended Medicare Safety Net Cap: \$226.20

Item 90282– EDPT by medical practitioner video conference rooms at least 40 minutes

Descriptor: Professional attendance at consulting rooms by a medical practitioner (not including a general practitioner, specialist or consultant physician), for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan, if:

- (a) the attendance is by video conference; and
- (b) the patient is not an admitted patient; and
- (c) the patient is located within a telehealth eligible area; and
- (d) the patient is, at the time of the attendance, at least 15 kilometres by road from the general practitioner.

Video Conference: Refer Explanatory Note: AN.36.5

Fee: \$107.90 Benefit: 100% = \$107.90 Extended Medicare Safety Net Cap: \$323.70



Category 8 – Miscellaneous Services

Group M16 - Eating Disorders Services – Subgroup 1 – Eating disorders ditetitian health services

New items - 82350–82351 Eating Disorders Dietetic Treatment Services – Explanatory Notes MN.16.1 and MN.16.2

Overview Eating Disorder Dietetic Treatment Services

Provision of eating disorder dietetic services by a suitably trained Dietitian (82350 and 82351) are for patients with anorexia nervosa and other patients with complex presentations of diagnosed eating disorders who meet the eligibility requirements and would benefit from a structured approach to the management of their treatment needs in the community setting.

A patient with an EDP plan can access up to 20 dietetic services under items 10954, 82350 and 82351 in a 12 Month Period. For any particular patient, an eating disorder treatment and management plan expires at the end of a 12 month period following provision of that service. After that period, a patient will require a new EDP to continue accessing eating disorders dietetic services.

Restrictions or requirements

Patients seeking rebates for eating disorders dietetic services must have had an Eating Disorder Treatment Plan (EDP) 90250-90257 or 90260-90263 in the previous 12 Months. The plan must require that the patient needs dietetic services for treatment of their eating disorder, and the patient must be provided with a referral for access to the dietetic health services.

In order to provide eating disorder dietetic services, Dietitians must be an 'Accredited Practising Dietitian' as recognised by the Dietitians Association of Australia (DAA).

After each course of treatment, the relevant dietitian is required to provide the referring medical practitioner with a written report on assessments carried out, treatment provided and recommendations for future management of the patient's condition. This reporting is required after the first service, as clinically required following subsequent services and after the final service.

This reporting will inform the managing practitioner's reviews of the EDP and enable the practitioner to assess the patient's progress and response to treatment.

Additional Information regarding eligibility, claiming and reporting is set out in Explanatory Note - MN.16.2



Item 82350- Eating Disorder Dietetic Treatment service

Descriptor: Dietetics health service provided to an eligible patient by an eligible dietitian if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is of at least 20 minutes in duration.

Fee: \$63.25 **Benefit:** 85% = \$53.75

Extended Medicare Safety Net Cap: \$189.75

Item 82351– Eating Disorder Dietetic Treatment service by video conference

Descriptor: Dietetics health service provided to an eligible patient by an eligible dietitian if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the dietitian; and
- (g) the service is of at least 20 minutes duration.

Video Conference: Refer Explanatory Note: MN.16.4

Fee: \$63.25 Benefit: 85% = \$53.75 Extended Medicare Safety Net Cap: \$189.75



Category 8 – Miscellaneous Services

Group M16 - Eating Disorders Services – Subgroups 2-5 – Eating disorder psychological treatment services provided by allied health providers

New items - 82352–82383 Eating Disorders Psychological Treatment (EDPT) services provided by allied health providers – Explanatory Note MN.16.1 and MN.16.3

Overview: Eating Disorder Psychological Treatment (EDPT) Services

For the purpose of this information Allied mental health professional is the generic term used to describe providers eligible to provider services under these items, including; clinical psychologists, registered psychologists, eligible accredited mental health social workers and eligible occupational therapists.

Provision of EDPT services by a suitably trained Allied mental health professional (82352-82383) are for patients with anorexia nervosa and other patients with complex presentations of diagnosed eating disorders who meet the eligibility requirements and would benefit from a structured approach to the management of their treatment needs in the community setting.

There are 24 items for the provision of eating disorder specific evidence based psychological treatment services by eligible allied mental health professionals:

- clinical psychologists (item 82352-82359)
- registered psychologists (item 82360-82367)
- occupational therapists (82368- 82375)
- accredited mental health social workers (items 82376-82383)

For the purpose of the 40 EDPT count; eating disorder psychological treatment service includes a service under provided under the following items: 90271, 90272, 90273, 90274, 90275, 90276, 90277, 90278, 90279, 90280, 90281, 90282, 2721, 2723, 2725, 2727, 283, 285, 286, 287, 371, 372 and items in Groups M6, M7 and M16 (excluding items 82350 and 82351).

Restrictions or requirements

Patients seeking rebates for EDPT services must have had an EDP 90250-90257 or 90260-90263 in the previous 12 Months. The plan must require that the patient needs mental health services for treatment of their eating disorder, and the patient must be provided with a referral for access to the allied health services.

Additional Information regarding provider and patient eligibility, treatment types, claiming and reporting is set out in Explanatory Note – MN.16.3



Item 82352– EDPT – Clinical Psychologist in consulting rooms at least 30 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 30 minutes but less than 50 minutes in duration.

Fee: \$101.35 **Benefit:** 85% = \$86.15

Extended Medicare Safety Net Cap: \$304.05

Item 82353– EDPT – Clinical Psychologist by video conference at least 30 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and
- (g) the service is at least 30 minutes but less than 50 minutes in duration.

Fee: \$101.35 Benefit: 85% = \$86.15 Extended Medicare Safety Net Cap: \$304.05

Item 82354– EDPT – Clinical Psychologist other than in consulting rooms at least 30 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 30 minutes but less than 50 minutes in duration.

Fee: \$126.65 Benefit: 85% = \$107.65 Extended Medicare Safety Net Cap: \$379.95



Item 82355– EDPT – Clinical Psychologist in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$148.80 **Benefit:** 85% = \$126.50

Extended Medicare Safety Net Cap: \$446.40

Item 82356– EDPT – Clinical Psychologist by video conference at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and
- (g) the service is at least 50 minutes in duration.

Fee: \$148.80 Benefit: 85% = \$126.50 Extended Medicare Safety Net Cap: \$446.40

Item 82357– EDPT – Clinical Psychologist other than in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$174.10 **Benefit:** 85% = \$148 **Extended Medicare Safety Net Cap:** \$500



Item 82358– EDPT – Clinical Psychologist as part of a group 6-10 at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided in person; and
- (d) the service is at least 60 minutes in duration.

Fee: \$37.80 Benefit: 85% = \$32.35 Extended Medicare Safety Net Cap: \$113.40

Item 82359– EDPT – Clinical Psychologist as part of a group 6-10 by video conference at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible clinical psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the attendance is by video conference; and
- (d) the patient is located within a telehealth eligible area; and
- (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and
- (f) the service is at least 60 minutes in duration.

Fee: \$37.80 **Benefit:** 85% = \$32.35

Extended Medicare Safety Net Cap: \$113.40

Item 82360– EDPT – Psychologist in consulting rooms at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$71.80 Benefit: 85% = \$61.05 Extended Medicare Safety Net Cap: \$215.40



Item 82361– EDPT – Psychologist by video conference at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and
- (g) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$71.80 Benefit: 85% = \$61.05 Extended Medicare Safety Net Cap: \$215.40

Item 82362– EDPT – Psychologist other than consulting rooms at least 20 minutes but less than 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$97.70 Benefit: 85% = \$83.05 Extended Medicare Safety Net Cap: \$293.10

Item 82363– EDPT – Psychologist in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$101.35 Benefit: 85% = \$86.15 Extended Medicare Safety Net Cap: \$304.05



Item 82364– EDPT – Psychologist by video conference at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and
- (g) the service is at least 50 minutes in duration.

Fee: \$101.35 Benefit: 85% = \$86.15 Extended Medicare Safety Net Cap: \$304.05

Item 82365– EDPT – Psychologist other than in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$127.30 Benefit: 85% = \$108.20 Extended Medicare Safety Net Cap: \$381.90

Item 82366– EDPT – Psychologist in group 6-10 at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided in person; and
- (d) the service is at least 60 minutes in duration.

Fee: \$25.85 Benefit: 85% = \$22.00 Extended Medicare Safety Net Cap: \$77.55



Item 82367– EDPT – Psychologist in group 6-10 by video conference at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible psychologist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the attendance is by video conference; and
- (d) the patient is located within a telehealth eligible area; and
- (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and
- (f) the service is at least 60 minutes in duration.

Fee: \$25.85 Benefit: 85% = \$22.00 Extended Medicare Safety Net Cap: \$77.55

Item 82368– EDPT – Occuptional Therapist in consulting rooms at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$63.25 **Benefit:** 85% = \$53.75

Extended Medicare Safety Net Cap: \$189.75

Item 82369– EDPT – Occuptional Therapist by video conference at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and
- (g) the service is at least 20 minutes but less than 50 minutes in duration.



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Fee: \$63.25 Benefit: 85% = \$53.75 Extended Medicare Safety Net Cap: \$189.75

Item 82370– EDPT – Occuptional Therapist other than in consulting rooms at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$89.10 **Benefit:** 85% = \$75.75

Extended Medicare Safety Net Cap: \$267.30

Item 82371– EDPT – Occuptional Therapist in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$89.35 Benefit: 85% = \$75.95 Extended Medicare Safety Net Cap: \$268.05



Item 82372– EDPT – Occuptional Therapist by video conference at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and
- (g) the service is at least 50 minutes in duration.

Fee: \$89.35 **Benefit:** 85% = \$75.95

Extended Medicare Safety Net Cap: \$268.05

Item 82373– EDPT – Occuptional Therapist other than in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$115.15 Benefit: 85% = \$97.90 Extended Medicare Safety Net Cap: \$345.45

Item 82374– EDPT – Occuptional Therapist in group 6-10 at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided in person; and
- (d) the service is at least 60 minutes in duration.

Fee: \$22.70 **Benefit:** 85% = \$19.30

Extended Medicare Safety Net Cap: \$68.10



Item 82375– EDPT – Occuptional Therapist in group 6-10 by video conference at least 60

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients by an eligible occupational therapist if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the attendance is by video conference; and
- (d) the patient is located within a telehealth eligible area; and
- (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and
- (f) the service is at least 60 minutes in duration.

Fee: \$22.70 Benefit: 85% = \$19.30 Extended Medicare Safety Net Cap: \$68.10

Item 82376– EDPT – Social Worker in consulting rooms at least 20 minutes but < 50 minutes

Descriptor Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$63.25 Benefit: 85% = \$53.75 Extended Medicare Safety Net Cap: \$189.75



Item 82377– EDPT – Social Worker by video conference at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and
- (g) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$63.25 Benefit: 85% = \$53.75 Extended Medicare Safety Net Cap: \$189.75

Item 82378– EDPT – Social Worker other than in consulting rooms at least 20 minutes but < 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 20 minutes but less than 50 minutes in duration.

Fee: \$89.10 Benefit: 85% = \$75.75 Extended Medicare Safety Net Cap: \$267.30

Item 82379– EDPT – Social Worker in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient in consulting rooms by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$89.35 Benefit: 85% = \$75.95 Extended Medicare Safety Net Cap: \$268.05



Item 82380– EDPT – Social Worker by video conference at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually; and
- (d) the attendance is by video conference; and
- (e) the patient is located within a telehealth eligible area; and
- (f) the patient is, at the time of the attendance, at least 15 kilometres by road from the psychologist; and
- (g) the service is at least 50 minutes in duration.

Fee: \$89.35 Benefit: 85% = \$75.95 Extended Medicare Safety Net Cap: \$268.05

Item 82381– EDPT – Social Worker other than in consulting rooms at least 50 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient at a place other than consulting rooms by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided to the patient individually and in person; and
- (d) the service is at least 50 minutes in duration.

Fee: \$115.15 Benefit: 85% = \$97.90 Extended Medicare Safety Net Cap: \$345.45

Item 82382– EDPT – Social Worker in a group 6-10 at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients (but not as an admitted patient of a hospital) by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the service is provided in person; and
- (d) the service is at least 60 minutes in duration.

Fee: \$22.70 Benefit: 85% = \$19.30 Extended Medicare Safety Net Cap: \$68.10



Item 82383– EDPT – Social Worker in a group 6-10 by video conference at least 60 minutes

Descriptor: Eating disorder psychological treatment service provided to an eligible patient as part of a group of 6 to 10 patients (but not as an admitted patient of a hospital) by an eligible social worker if:

- (a) the service is recommended in the patient's eating disorder treatment and management plan; and
- (b) the patient is not an admitted patient of a hospital; and
- (c) the attendance is by video conference; and
- (d) the patient is located within a telehealth eligible area; and
- (e) the patient is, at the time of the attendance, at least 15 kilometres by road from the clinical psychologist; and
- (f) the service is at least 60 minutes in duration.

Fee: \$22.70 Benefit: 85% = \$19.30 Extended Medicare Safety Net Cap: \$68.10

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This sheet is current as of the Last updated date shown above, and does not account for MBS changes since that date.