Published: 1 Sep 2011



Referrals to Accredited Exercise Physiologists under Medicare

Who can be referred?

Patients who have both a GP Management Plan (GPMP) and Team Care Arrangements (TCAs) have access to allied health <u>individual services</u> on the Medicare Benefits Schedule. Eligible patients can claim a maximum of **five (5) allied health services per calendar year.** The five allied health services can be made up of one type of service (e.g. five exercise physiologist services) or a combination of different types of services.

In addition, patients with a GPMP and type 2 diabetes can also access Medicare rebates for up to **eight (8) allied health group services per calendar year**. Group programs do not have to be limited to type 2 diabetes groups only. Relevant group programs for type 2 diabetes patients may include:

- Fitness or weight management group services; or
- Blood glucose monitoring services.

What Medicare item numbers can I use?

Medicare Australia provides the following funding items for patients requiring a referral to an Accredited Exercise Physiologist:

Item number	Service Provided	Eligible Patients	Prerequisite for Claiming
10953	Exercise physiology service	Patients who have a chronic condition & complex care needs	 GP claimed GPMPAND TCA in past 2 yrs. GP must refer using an approved referral form.*
81110	Exercise physiology service – assessment	Patients with type 2 diabetes	 GP claimed GPMP. GP must refer using an approved referral form.*
81115	Exercise physiology service – group service		- Assessed as suitable by Assessment for Group Services (item 81100, 81110 or 81120).
81315	Exercise physiology service	Indigenous Australians who have had a health check	 GP must have completed a health check. GP must refer using an approved referral form.*

^{*}Approved referral forms are available at www.exerciseismedicine.org.au

What is the referral process for <u>individual</u> Medicare items?

Step 1: GP Referral

GP refers eligible patient to an Accredited Exercise Physiologist under the appropriate Medicare item number for the maximum* number of visits.

*5 visits per calendar year for patients on a GPMP & TCA

Step 2: AEP Service

Accredited Exercise Physiologist provides an individual service/s to the patient.

A written report must be provided to the referring GP after the first and last service, or more if clinically necesary.

Step 3: GP Patient Review

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

What is the referral process for group items for people with type 2 diabetes?

Step 1: Referral

GP refers eligible patient to Accredited Exercise Physiologist to be assessed for suitability for a preferred group service, e.g. fitness/weight management.

Step 2: Individual Assessment

Accredited Exercise Physiologist individually assesses patient for suitability and prepares for group services. Unsuitable patients may be screened out at this time. Report provided to GP on assessment undertaken, suitability for group services &

nature of proposed group services.

Step 3: Group Services

Accredited Exercise Physiologist conduct group sessions. Maximum of 8 sessions per calendar year. Sessions must include 2-12 Medicare patients. Non-Medicare, full-paying patients can also attend.

Report provided to referring GP after last service.

Related information

Department of Health and Ageing:

http://www.health.gov.au/internet/main/publishing.nsf/Content/mbs-primary-care

Exercise is Medicine® Australia: www.exerciseismedicine.org.au

Medicare Australia: www.medicareaustralia.gov.au



