

2007/08 Budget – Aged care – improved health services for residents of aged care homes

The 2007/08 Budget measure *Aged care – improved health services for residents of aged care homes* will increase Medicare rebates for GP attendances in residential aged care facilities from 1 November 2007.

The fees for the majority of GP services in aged care facilities have a derived fee structure. Derived fees have a base component which is the same as for other services of the same length and complexity performed in-surgery, and a “call-out” component. The “call-out” component is added to the base fee and paid only once per visit being apportioned across all patients seen in that visit.

For attendances by Vocationally Recognised GPs (VR GPs) in residential aged care facilities the call-out fee will increase by \$18. For attendances by Other Medical Practitioners (OMPs) the call-out fee will increase by \$14.05 for standard consultations and by \$12.45 for brief, long and prolonged consultations in residential aged care facilities.

For example, where a VR GP sees one patient in a residential aged care facility for a standard consultation (MBS item 35) the rebate is currently the fee for MBS item 23 (in-surgery standard consultation) + \$22.45 “call-out” component. From 1 November 2007 this will be the fee for MBS item 23 + \$40.45.

The measure will also increase the fee for contributions to multidisciplinary care plans for patients with chronic conditions and complex care needs in residential aged care (MBS item 731) and in the community (MBS item 729). The fees for both items will increase by \$17.55 from 1 November 2007.

These fees will also be indexed in line with indexation of the Medicare Benefits Schedule from 1 November 2007.