

GP Aged Care Incentive (GP ACI) MBS User Guide



The GP ACI commenced on 1 July 2024 providing 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 GP ACI and provide examples of how to use MBS items to meet the requirements of this incentive.

Disclaimer: This resource outlines some examples of how General Practice can utilise GP ACI MBS Items and Care to enable the incentive payments under the program, General Practices are advised that this resource does not cover every single scenario or possible structure for scheduling the GP ACI items to enable incentive payments. The General Practice or ACCHO model of care, and team structure will further inform the general practice on how the organisation/business may apply the GP ACI. General Practices are encouraged to ensure familiarity and adherence with the GP ACI Guidelines on DoHAC website: <https://www.health.gov.au/our-work/gpaci>

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GP ACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER VISITING ONLY

Quarter 1



Contribution or review of Multidisciplinary Care Plan

MBS 731 suggested to be co-claimed with:

MBS 232 - Contribution to **OR** review of Multidisciplinary Care Plan

Quarter 2



Comprehensive Medical Assessment

MBS 703-707 **OR** MBS 224-227 Comprehensive Management Plan (CMA) - Health Assessment item

Item choice depend on length of assessment and type of practitioner

Quarter 3



Residential Medication Management Review

MBS 903 **OR** MBS249

Item choice depends on practitioner type

Quarter 4



Case Conference

MBS 235-240 **OR** MBS 735-758 Multidisciplinary Care Conference

Item choice depend on length of conference and type of practitioner

Across the 12-month period must provide 2 of the above Eligible Care Planning Items

These can be claimed at any point across the 12-months, however, suggest claiming MBS 731 early in the cycle (Q1) as it enables other items and referrals. MBS 731 can be co-claimed with other items.



2x Eligible Regular Services

Must be claimed in separate calendar months

MBS Items 90035-90054 **OR** MBS 90188-90215

Item choice depend on length of consultation and type of practitioner



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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.

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GP ACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER + ALTERNATIVE PROVIDER

Other GP / Prescribed medical practitioner / Nurse practitioner

Quarter 1	Quarter 2	Quarter 3	Quarter 4
 <p>Contribution or review of Multidisciplinary Care Plan</p> <p>MBS 731 suggested to be co-claimed with:</p> <p>MBS 232 - Contribution to OR review of Multidisciplinary Care Plan</p>	 <p>Comprehensive Medical Assessment</p> <p>MBS 703-707 OR MBS 224-227 Comprehensive Management Plan (CMA) - Health Assessment item</p> <p>*Item choice depend on length of assessment and type of practitioner*</p>	 <p>Residential Medication Management Review</p> <p>MBS 903 OR MBS249</p> <p>*Item choice depends on practitioner type*</p>	 <p>Case Conference</p> <p>MBS 235-240 OR MBS 735-758 Multidisciplinary Care Conference</p> <p>*Item choice depend on length of conference and type of practitioner*</p>

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These can be claimed at any point across the 12-months, however, suggest claiming MBS 731 early in the cycle (Q1) as it enables other items and referrals. MBS 731 can be co-claimed with other items.

 <p>2x Eligible Regular Services 1x Responsible Provider + 1x Alternative Provider</p> <p>*Must be claimed in separate calendar months* MBS Items 90035-90054 OR MBS 90188-90215 OR MBS 82205-82215 *Item choice depend on length of consultation and type of practitioner*</p>	 <p>2x Eligible Regular Services 1x Responsible Provider + 1x Alternative Provider</p> <p>*Must be claimed in separate calendar months* MBS Items 90035-90054 OR MBS 90188-90215 OR MBS 82205-82215 *Item choice depend on length of consultation and type of practitioner*</p>	 <p>2x Eligible Regular Services 1x Responsible Provider + 1x Alternative Provider</p> <p>*Must be claimed in separate calendar months* MBS Items 90035-90054 OR MBS 90188-90215 OR MBS 82205-82215 *Item choice depend on length of consultation and type of practitioner*</p>	 <p>2x Eligible Regular Services 1x Responsible Provider + 1x Alternative Provider</p> <p>*Must be claimed in separate calendar months* MBS Items 90035-90054 OR MBS 90188-90215 OR MBS 82205-82215 *Item choice depend on length of consultation and type of practitioner*</p>
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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.





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.

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GP ACI 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 Worker

Quarter 1	Quarter 2	Quarter 3	Quarter 4
 <p>Contribution or review of Multidisciplinary Care Plan</p> <p>MBS 731 suggested to be co-claimed with:</p> <p>MBS 232 - Contribution to or review of Multidisciplinary Care Plan</p>	 <p>Comprehensive Management Assessment</p> <p>MBS 703-707 OR MBS 224-227 Comprehensive Management Plan (CMA) - Health Assessment item</p> <p>*Item choice depend on length of assessment and type of practitioner*</p>	 <p>Residential Medication Management Review</p> <p>MBS 903 OR MBS249</p> <p>*Item choice depends on practitioner type*</p>	 <p>Case Conference</p> <p>MBS 235-240 OR MBS 735-758 Multidisciplinary Care Conference</p> <p>*Item choice depend on length of conference and type of practitioner*</p>

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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.

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 ATSIHW.







GP ACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER VISITING ONLY

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

Quarter 1	Quarter 2	Quarter 3	Quarter 4
 <p>Contribution or review of Multidisciplinary Care Plan</p> <p>MBS 731 suggested to be co-claimed with:</p> <p>MBS 232 - Contribution to or review of Multidisciplinary Care Plan</p>	 <p>Comprehensive Medical Assessment</p> <p>MBS 703-707 OR MBS 224-227 Comprehensive Management Plan (CMA) - Health Assessment item</p> <p>*Item choice depend on length of assessment and type of practitioner*</p>	 <p>Residential Medication Management Review</p> <p>MBS 903 OR MBS249</p> <p>*Item choice depends on practitioner type*</p>	 <p>Case Conference</p> <p>MBS 235-240 OR MBS 735-758 Multidisciplinary Care Conference</p> <p>*Item choice depend on length of conference and type of practitioner*</p>

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 <p>2x Eligible Regular Services</p> <p>*Must be claimed in separate calendar months*</p> <p>MBS Items 90035-90054 OR MBS 90188-90215</p> <p>OR Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter</p>	 <p>2x Eligible Regular Services</p> <p>*Must be claimed in separate calendar months*</p> <p>MBS Items 90035-90054 OR MBS 90188-90215</p> <p>OR Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter</p>	 <p>2x Eligible Regular Services</p> <p>*Must be claimed in separate calendar months*</p> <p>MBS Items 90035-90054 OR MBS 90188-90215</p> <p>OR Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter</p>	 <p>2x Eligible Regular Services</p> <p>*Must be claimed in separate calendar months*</p> <p>MBS Items 90035-90054 OR MBS 90188-90215</p> <p>OR Can use MBS 91800 - 91803 Telehealth Service as follow up appointment in the quarter</p>
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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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GP ACI RACH Visits - Sample Schedule - RESPONSIBLE PROVIDER + ALTERNATIVE PROVIDER

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

Quarter 1	Quarter 2	Quarter 3	Quarter 4
 <p>Contribution or review of Multidisciplinary Care Plan</p> <p>MBS 731 suggested to be co-claimed with:</p> <p>MBS 232 - Contribution to or review of Multidisciplinary Care Plan</p>	 <p>Comprehensive Medical Assessment</p> <p>MBS 703-707 OR MBS 224-227 Comprehensive Management Plan (CMA) - Health Assessment item</p> <p>*Item choice depend on length of assessment and type of practitioner*</p>	 <p>Residential Medication Management Review</p> <p>MBS 903 OR MBS249</p> <p>*Item choice depends on practitioner type*</p>	 <p>Case Conference</p> <p>MBS 235-24 OR MBS 735-758 Multidisciplinary Care Conference</p> <p>*Item choice depend on length of conference and type of practitioner*</p>

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GP ACI 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 Worker
+ Practicing in MMM 4-7 where telehealth appointments can be used as follow up

Quarter 1	Quarter 2	Quarter 3	Quarter 4
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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. **MBS731 MUST** have been billed before the follow up items can be completed by a Practice Nurse or ATSIHW.

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 Worke follow up visit RACH	10987 Practice Nurse (not timed) 10997 ATSIHW (Not timed)			
Telehealth	91800	91801	91802	91920

DEFINITIONS

Responsible Provider = Medical practitioner who holds an eligible speciality 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 GP ACI criteria of TWO Care Planning Items per annum.

MBS 731 is required to be able to bill Practice nurse/ ATSIHW Items MBS 10987 & 10997 and also required to trigger allied health appointments (chronic disease management items for Podiatry, Dietitian, Physio, Ex Phys, Occupational Therapy, etc). This GP ACI MBS User Guide Strongly recommends practitioners claim this item within the first quarter to maximise the multidisciplinary team function of GPACI.

On the following pages are some example annual billing/claiming cycles using GP ACI 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).





Example Annual Cycle inc. estimated billing - Responsible Provider Only

MMM1-3

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 for 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 for shorter or longer regular visits, after hours
Annual Billed Amount in this example: \$1540.30 + incentive payment of \$300 (Responsible GP incentive) + \$130 (practice incentive) = \$1970.30 (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 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 items are available for shorter or longer regular visits, after hours and face to face.
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July	August	September	October	November	December
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Example Annual Cycle inc. estimated billing - Responsible Provider + Alternate Provider (other GP or Nurse Practitioner)

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 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 for shorter or longer regular visits, after hours
Quarter 3			Quarter 4		
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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
\$120.80	\$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 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 for shorter or longer regular visits, after hours
Annual Billed Amount in this example: \$1436.10 + incentive payment of \$300 (Responsible GP incentive) + \$130 (practice incentive) = \$1866.10 (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 inc. estimated billing - Responsible Provider + Other Team Members (other GP or NP or Practice Nurse or Aboriginal &/or Torres Strait Islander Health Worker)

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 Practice Nurse/ Health Worker MBS 10987/10997	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 Worker MBS 10987/10997
\$80.20 + \$216.80 = \$297	\$82.90	\$27.30/ \$13.65	\$229.65	\$82.90	\$27.30/ \$13.65
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 for 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 Practice Nurse/ Health Workers MBS 10987/10997	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 Worker MBS 10987/10997
\$120.80	\$82.90	\$27.30/ \$13.65	\$229.65	\$82.90	\$27.30/ \$13.65
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 for shorter or longer regular visits, after hours
Annual Billed Amount in this example: \$1317.90/ \$1263.30+ incentive payment of \$300 (Responsible GP incentive) + \$130 (practice incentive) = \$1747.90/\$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.		