

February 2025

Telehealth and coronavirus: Medicare Benefits Schedule (MBS) activity in Australia



Telehealth activity graphs

Graph time-points

Pre-2020

Telehealth (videoconference) has been available in Australia on the Medicare Benefits Schedule since 2011. Largely it was only available to a small proportion of the population residing in rural and remote areas. The telehealth codes that existed prior to the coronavirus pandemic continued to be available during the pandemic, so where possible their prior and ongoing activity has been presented in the graphs starting from November 2019.

March 2020

Coronavirus telehealth and telephone codes were introduced during March 2020. They could be claimed from March 13th, but only for vulnerable populations. Therefore, the activity for telehealth and telephone consultations for March 2020 only offers an indication for the potential uptake.

Reports for March 2020 data were run on the MBS statistics website on May 6-8th 2020.

April 2020

Changes were made to the coronavirus telehealth and telephone codes on April 6th. By the end of April all Australians could receive health practitioner consultations via these alternative modalities due to the pandemic.

Reports for April 2020 data were run on the MBS statistics website on June 11th 2020. The April data did not include the codes added to the MBS on April 20th, these were added when the analysis for May 2020 was completed (this will affect the numbers reported in for allied health, specialist services and psychiatry).

May 2020

Changes were made to the coronavirus telehealth and telephone codes on May 22nd for allied health and specialist services.

Reports for May 2020 data were run on the MBS statistics website on July 9th 2020.

Once updated May data graphs were updated to include new item numbers released on April 20th and May 22nd. Each of the new items had pre-existing in-person codes that were added to the event counts since November 2019, changing the previously reported activity percentages.

June 2020

No new codes were introduced onto the scheme during June 2020.

Reports for June 2020 data were run on the MBS statistics website on July 31st 2020.

July, August and September 2020

No new codes were introduced onto the scheme during July, August and September 2020. From the start of July 2020, Telehealth GP providers will be required to have an existing and continuous relationship with a patient in order to provide Telehealth services.

Data from the MBS statistics website was unavailable from August to October 31st, data reports for July and August returned an error message. For this reason, reports for July, August and September 2020 data were run on the MBS statistics website on October 31st 2020.

October 2020

No new codes were introduced onto the scheme during October 2020.

Reports for October 2020 data were run on the MBS statistics website on December 9th 2020.

November 2020

No new codes were introduced onto the scheme during November 2020.

Reports for November 2020 data were run on the MBS statistics website on January 12th 2021.

December 2020

No new codes were introduced onto the scheme during December 2020.

Reports for December 2020 data were run on the MBS statistics website on February 4th 2021.

January 2021

No new codes were introduced onto the scheme during January 2021.

Reports for January 2021 data were run on the MBS statistics website on February 23rd 2021.

February 2021

No new codes were introduced onto the scheme during February 2021.

Reports for February 2021 data were run on the MBS statistics website on March 26th 2021.

March 2021

No new codes were introduced onto the scheme during March 2021.

Reports for March 2021 data were run on the MBS statistics website on April 30th 2021.

April 2021

No new codes were introduced onto the scheme during April 2021.

Reports for April 2021 data were run on the MBS statistics website on May 27th 2021.

May 2021

No new codes were introduced onto the scheme during May 2021.

Reports for May 2021 data were run on the MBS statistics website on July 2nd 2021.

June 2021

No new codes were introduced onto the scheme during June 2021 that are relevant to the images shared.

Reports for June 2021 data were run on the MBS statistics website on August 5th 2021.

Quarter 2, 2021

No new codes were introduced onto the scheme during June 2021 that are relevant to the images shared.

Reports for Quarter 2 2021 data were run on the MBS statistics website on September 20th 2021.

Quarter 3, 2021

Community services added: From **16 July 2021**, the list of exemptions to the 'usual medical practitioner' rule have been changed to apply a nationally consistent approach. The current test for exempting patients who have their movement restricted by a State and Territory public health order have been replaced with three separate criteria; the patient is in COVID-19 isolation because of a State or Territory public health order; the patient is in COVID-19 quarantine because of a State or Territory public health order; the patient is located in an COVID-19 hotspot as declared by the Commonwealth Chief Medical Officer.

Hospital services not added: Commencing **15 September 2021**, 40 new temporary MBS telehealth items (20 video and 20 phone) became available when the admitting specialist medical practitioner is unable to attend their patient in hospital due to COVID-19 restrictions. These, and their equivalent in-person codes were not added to the figures.

Reports for Quarter 3 2021 data will be run on the MBS statistics website on November 15th 2021.

Quarter 4, 2021

No new codes were introduced onto the scheme during Quarter 4 2021 that are relevant to the images shared. However, many of the items were made permanent.

Reports for Quarter 4 2021 data were run on the MBS statistics website on February 28th 2022.

Quarter 1, 2022

No new codes were introduced onto the scheme during Quarter 1 2022 that are relevant to the images shared.

Reports for Quarter 1 2022 data were run on the MBS statistics website on May 12th 2022.

Quarter 2, 2022

No new codes were introduced onto the scheme during Quarter 2 2022 that are relevant to the images shared.

Reports for Quarter 2 2022 data were run on the MBS statistics website on August 24th 2022.

Quarter 3, 2022

No new codes were introduced onto the scheme during Quarter 3 2022 that are relevant to the images shared.

Reports for Quarter 3 2022 data were run on the MBS statistics website on October 27th 2022.

Quarter 4, 2022

No new codes were introduced onto the scheme during Quarter 4 2022 that are relevant to the images shared.

Reports for Quarter 4 2022 data were run on the MBS statistics website on February 22nd 2023.

Quarter 1, 2023

No new codes were introduced onto the scheme during Quarter 1 2023 that are relevant to the images shared.

Reports for Quarter 1 2023 data were run on the MBS statistics website on May 12th 2023.

Quarter 2, 2023

All codes were reviewed for currency and accuracy, prior to the data pull for Quarter 2 2023. New codes were added to the General Practitioner and the Mental Health data sets.

Reports for Quarter 2 2023 data were run on the MBS statistics website on August 29th 2023.

Quarter 3, 2023

No new codes were introduced onto the scheme during Quarter 3 2023 that are relevant to the images shared.

Reports for Quarter 3 2023 data were run on the MBS statistics website on October 31st 2023.

Quarter 4, 2023/2023 Annual Summary

No new codes were introduced onto the scheme during Quarter 4 2023 that are relevant to the images shared. Reports for Quarter 4 2023 data were run on the MBS statistics website on February 14th 2024.

Quarter 4 2023 data was combined with Q1, Q2, and Q3 2023 data in order to present annual 2023 figures. A once yearly report of overall numbers will be the format going forward.

2024 Annual Summary

No new codes were introduced onto the scheme during 2024 that are relevant to the images shared. Reports for 2024 data were run on the MBS statistics website on January 30th 2025.

Description of graph content

General practitioner

This graph includes codes for general practitioners to perform standard consultations (between <5min and 45min+), consultations with people of Aboriginal and Torres Strait Islander descent and Chronic Disease Management consultations.

This graph does not include any general practitioner activity claimed using codes that are specifically for mental health interventions.

Telehealth activity prior to coronavirus has been represented from November 2019 where available.

Referred or specialist services

This graph includes codes for specialists, consultants and other referred specialist services to perform standard consultations.

This graph does not include any activity claimed using codes specifically for psychiatrist services.

Telehealth activity prior to coronavirus has been represented from November 2019 where available.

Mental health support

This graph includes data for mental health services provided via in-person, telehealth and telephone by psychologists, general practitioners or allied health clinicians. The activity includes that from the better access initiative and the initiatives providing mental health support as a result of the droughts and bushfires.

This graph does not include any general practitioner activity claimed using codes that are specifically for psychiatrist services.

Telehealth activity prior to coronavirus has been represented from November 2019 where available.

Psychiatrists

This graph includes data for in-person, telehealth and telephone consultations with psychiatrists. Psychiatry telehealth activity was established prior to the coronavirus pandemic.

This graph does not include any activity claimed using codes for other specialist services or psychology services.

Telehealth activity prior to coronavirus has been represented from November 2019 where available.

Allied Health

This graph includes codes for any allied health consultations provided using telehealth or telephone during the coronavirus pandemic.

This graph does not include any activity claimed using codes that are specifically for mental health interventions.

Telehealth activity prior to coronavirus has been represented from November 2019 where available.

Nurse practitioners

This graph includes codes for any nurse practitioner consultations provided using telehealth or telephone during the coronavirus pandemic.

Prior to the coronavirus pandemic nurse practitioners did not provide consultations via telehealth, only patient-end support.

MBS items not included in this data analysis

- Dental practitioner consultations
- Other Medical Practitioners (OMPs) consultations
- Antenatal and midwife consultations
- Patient-end consultations

- Specialist codes for inpatient services (Active September to December 2021)

Note on consultation numbers in graphics: Please be advised the number of consultations presented in graphics are approximations based on standard rounding conventions, depending on the size of the figure.

Notes from Services Australia¹

- The figures in the report include only those services that are performed by a registered provider, for services that qualify for Medicare Benefit and for which a claim has been processed by Services Australia. They do not include services provided by hospital doctors to public patients in public hospitals or services that qualify for a benefit under the Department of Veterans' Affairs National Treatment Account.
- State/Territory is determined according to the address (at the time of claiming) of the patient to whom the service was rendered.
- Month is determined by the date the service was processed by Services Australia, not the date the service was provided.
- Monthly figures may vary due to the varying number of processing days in a month, which depends on the number of days in the month, public holidays, overtime worked etc.
- Services/benefit per capita (ie. per 100,000 population) is calculated by dividing the number of services/benefit processed in a month by the number of people enrolled in Medicare at the end of that month.
- The information and data contained in the reports and tables have been provided by Services Australia for general information purposes only. While Services Australia takes care in the compilation and provision of the information and data, it does not assume or accept any liability for the accuracy, quality, suitability and currency of the information or data, or for any reliance on the information or data. Services Australia recommends that users exercise their own care, skill and diligence with respect to the use and interpretation of the information and data.

Recent publications on this topic by COH

- [Specialist consultation activity and costs in Australia: before and after the introduction of COVID-19 telehealth funding](#)
- [Telehealth for global emergencies: Implications for coronavirus disease 2019 \(COVID-19\)](#)
- [Telehealth uptake in general practice as a result of the coronavirus \(COVID-19\) pandemic](#)
- [Building on the momentum: Sustaining telehealth beyond COVID-19](#)
- [Costs to the Medicare Benefits Schedule for general practitioner consultations: A time-series analysis](#)
- [The impact of telehealth policy changes on general practitioner consultation activity in Australia: a time-series analysis](#)
- [Increase in telemental health services on the Medicare Benefits Schedule after the start of the coronavirus pandemic: data from 2019 to 2021](#)
- [How have temporary Medicare telehealth item numbers impacted the use of dietetics services in primary care settings?](#)
- [Telehealth sustainability after COVID-19 – can you see me by video?](#)

¹ http://medicarestatistics.humanservices.gov.au/statistics/mbs_item.jsp

- [Medicare reimbursed telehealth exercise physiology services were underutilised through the coronavirus \(COVID-19\) pandemic: an ecological study](#)

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For more information

For more information, please contact Dr Centaine Snoswell or the UQ Centre for Online Health.

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Contact details

Dr Centaine Snoswell

E enquiries@coh.uq.edu.au

W <https://coh.centre.uq.edu.au/>

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