

## *RACGP recommendations on telehealth and point of care testing in general practice*

### Items considered

#### *Point of care testing*

Item No	Item Name - Short
73801	Semen examination for presence of spermatozoa
73802	Leucocyte count, erythrocyte sedimentation rate, examination of blood film (including differential leucocyte count), haemoglobin, haematocrit or erythrocyte count 1 test
73803	2 tests described in item 73802
73804	3 tests described in item 73802
73805	Microscopy of urine, whether stained or not, or catalase test
73806	Pregnancy test by 1 or more immunochemical methods
73807	Microscopy for wet film other than urine, including any relevant stain
73808	Microscopy of Gram-stained film, including (if performed) a service described in item 73805 or 73807
73809	Chemical tests for occult blood in faeces by reagent stick, strip, tablet or similar method
73810	Microscopy for fungi in skin, hair or nails – 1 or more sites
73811	Mantoux test

#### *Telehealth*

Item No	Item Name - Short
2100	Telehealth – Medical Practitioner providing clinical support - at consulting rooms for at least 5 minutes
2122	Telehealth – Medical Practitioner providing clinical support - not at consulting rooms for at least 5 minutes
2125	Telehealth – Medical Practitioner providing clinical support – at RACF for at least 5 minutes
2126	Telehealth – Medical Practitioner providing clinical support – at consulting rooms for less than 20 minutes
2137	Telehealth – Medical Practitioner providing clinical support - not at consulting rooms for less than 20 minutes
2138	Telehealth – Medical Practitioner providing clinical support – at RACF for less than 20 minutes
2143	Telehealth – Medical Practitioner providing clinical support – at consulting rooms for at least 20 minutes
2147	Telehealth – Medical Practitioner providing clinical support – not at consulting rooms for at least 20 minutes
2179	Telehealth – Medical Practitioner providing clinical support – at RACFs for at least 20 minutes
2195	Telehealth – Medical Practitioner providing clinical support – at consulting rooms for at least 40 minutes
2199	Telehealth – Medical Practitioner providing clinical support – not at consulting rooms for at least 40 minutes
2220	Telehealth – Medical Practitioner providing clinical support – at RACFs for at least 40 minutes

## Issues/Themes

### *Point of care testing (PoCT)*

- PoCT allows patients to receive immediate results and leave the consultation with an action plan in place, reducing the need for patients to return for a consultation to receive test results. This results in cost savings due to the reduction in consultations for the same problem.
- A limited amount of PoCT performed in general practice is currently supported by the Medicare Benefits Schedule (MBS). Many General Practitioners (GPs) are already providing PoCT (unsupported by MBS) for the benefit and convenience of their patients (for example, international normalised ratio (INR) testing).
- Evidence from a large scale trial in Australia that looked at PoCT in general practice and current costs of PoCT equipment suggests that general practice cannot compete against pathology providers in terms of cost per test but can compete on quality.<sup>1</sup>
- Noting this, the RACGP considers that practices should be able to provide PoCT and attract the same patient rebate as the equivalent pathology test. Practices are in a position to determine if this is a service they will choose to provide.
- In areas of need, such as rural, additional support funding may be required to make PoCT viable.

### *Telehealth*

- Consultative medicine needs to be modernised – GPs are impaired by the inability to use technology to consult with patients. Telehealth offers many advantages and there is ample evidence supporting the benefit of telehealth consultations between a patient and their GP.
- Current MBS consultation descriptors are workable for telehealth, however there are overarching restrictions that limit consultations between a patient and a GP to face-to-face only.
- Operational issues such as gaming and auditing will need to be addressed, however, these are no different to the issues that exist within the current MBS.

## Principles

- Where the technology for PoCT exists and has been validated to be as accurate as laboratory tests, pathology MBS item numbers should be available for use in general practice, allowing general practice the option of providing these tests using PoCT. General practice PoCT should attract the same patient rebate as the equivalent test in pathology laboratories. As technology progresses, GPs will be able to provide more tests via PoCT.
- The MBS should provide patient rebates for consultations between a patient and their usual GP or practice when provided via telehealth.
- The RACGP's current position on telehealth and the RACGP *Vision for general practice and a sustainable healthcare system* provides a framework and limitations/rules for telehealth use.

## Recommendations

The recommendation table below addresses the broad changes that need to be made to the MBS as it currently stands in order for the RACGP's recommendations to be achieved.

#	Item/Explanatory note	Change / Requirement	Purpose
1	G.13.1	<p><b>Allow consultations to be provided via telehealth</b></p> <p>The descriptors of consultation items can be applied to consultations provided via telehealth. Explanatory notes need to be edited to remove the current restrictions.</p> <p>G.13.1. Identifies a number of services which do not attract Medicare benefits.</p> <p>It is recommended that G.13.1 of the MBS be amended to remove reference to:</p> <ul style="list-style-type: none"> <li>a) telephone consultations</li> <li>b) issue of repeat prescriptions when the patient does not attend the surgery in person</li> </ul>	To remove restrictions on telehealth use for consultations between a patient and their usual GP or practice

#	Item/Explanatory note	Change / Requirement	Purpose
2	A.2.	<p><b>Allow consultations to be provided via telehealth</b></p> <p>The descriptors of consultation items can be applied to consultations provided via telehealth. Explanatory notes need to be edited to remove the current restrictions.</p> <p>Explanatory note A.2 defines professional attendances. It is recommended that this section be amended to recognise that professional services can be provided via telehealth.</p> <p>Additions to explanatory note A.2 are italicised:</p> <p>Professional attendances by medical practitioners cover consultations, <i>either face to face or via telehealth</i>, during which the practitioner: evaluates.... [continued as currently written]</p>	To recognise that consultations can be provided via telehealth.
3	A.3.	<p><b>Allow consultations to be provided via telehealth</b></p> <p>The descriptors of consultation items can be applied to consultations provided via telehealth. Explanatory notes need to be edited to remove the current restrictions.</p> <p>A.3. Identifies a number of services which do not attract Medicare benefits. It is recommended that this section of the MBS be amended to remove "Telephone consultation"</p>	To remove restrictions on telehealth use.

#	Item/Explanatory note	Change / Requirement	Purpose
4	P.1.1	<p><b>Open pathology items to general practitioners</b></p> <p>Section P.1.1. of the MBS outlines basic requirements for pathology services. This includes conditions relating to provision of services.</p> <p>The conditions outline that the service must be provided:</p> <ul style="list-style-type: none"> <li>- By, or on behalf of, an Approved Pathology practitioner; and</li> <li>- In a pathology laboratory accredited for that kind of service.</li> </ul> <p>It is recommended that an exemption be implemented in relation to PoCT and the section regarding conditions on provision of services be amended to add 'Services can also be provided by registered general practitioners via approved point of care testing'.</p>	To allow general practitioners to provide test via PoCT and attract the same patient rebate as pathology services
5	GROUP P9 – Simple Basic Pathology Tests	<p><b>Open pathology items to general practitioners</b></p> <p>Group P9 of Category 6, Pathology Services, lists a number of Simple Basic Pathology Tests that can be provided by a medical practitioner using point of care testing methods.</p> <p>Assuming the adoption of recommended change of P.1.1., Group P9 items are no longer needed, as these tests will be accessible to GPs via the equivalent pathology item numbers.</p>	

## References

1. Laurence C, Gialamas A, Yelland L, Bubner T, Glastonbury B, Beilby J. Point of care testing in general practice trial. Final report. Canberra, Australia: Department of Health and Ageing. 2008.