Important tips for MyMedicare for General Practices

MyMedicare is designed to create and maintain a link between patients and one preferred general practice location for ongoing care, where patients can also access their preferred GP.

To maintain care continuity between the practice and the patient, some MBS Items and general practice incentives are subject to a MyMedicare conditional rule^.

To ensure your MyMedicare journey is smooth sailing for you and your patients, use the checklist below to make sure your MyMedicare setup is ship-shape! You may even wish to incorporate some of these into your practice processes.

Top tips for MyMedicare for general practices

1. Register your practice for MyMedicare*

2. MyMedicare practices should setup and maintain their Organisation Register including:

a. Ensure your Organisation Site Record details are correct (see Organisation Register – Health Professional Education Resources).

b. Make sure providers are linked from the date the Organisation Site Record was created or the day they commenced working from the practice (this includes GPs, Registrars, Nurse Practitioners, Practice Nurses, Aboriginal Health Workers and Practitioners).

c. Link your patients to their preferred GP in the Organisation Site Record.

d. Keep your Organisation Register up to date when providers change at your practice (when a provider leaves or a new provider starts at your practice).

e. Keep your accreditation up to date – check your accreditation record and ensure your accreditation details are added correctly (see page 8 – ORGREGM06 – Amend your Organisation Site Record through HPOS).

3. Switch on your HPOS notifications by email, and understand HPOS notifications

4. Communicate with your patients about MyMedicare registration*.

a. If you are the patient's usual practice they wish to attend for ongoing care (such as GP Chronic Conditions Management care), encourage patients to register for MyMedicare with your practice.

b. If a patient prefers to visit another general practice for ongoing care, do not register them for MyMedicare at your practice. Encourage them to register for MyMedicare and attend their preferred practice- particularly for care that is ongoing care (such as GP Chronic Conditions Management Items).

*MyMedicare Registration is voluntary for both patients and practices. Patients can self-register using the MyGov app. Practices must always gain informed consent from patients for MyMedicare registration.

5. If you are receiving a MyMedicare-related error code when processing claims, check that the patient is registered for MyMedicare with your practice. Remember, if you have more than one practice location, the patient needs to be registered at the location that the claim is being made.

MBS Items and Incentives linked with a MyMedicare conditional rule^ include:

- The General Practice in Aged Care Incentive
- GP Chronic Conditions Management Plans
- Telephone Level C and D MBS items
- Triple Bulk Billing Incentives for video and telephone consultations that are longer than 20 minutes (Levels C, D and E) for eligible MyMedicare patients registered with the practice.

It.is.important.to.remember.that.not.all.claim.rejections.are.related.to.MyMedicare¡.Co_claiming.restrictions.may.apply¡.There.are.also.long_standing.MBS.rules.that.apply.to.GP.chronic.condition.management.items.that.may.result.in.a.claim.being.rejected¡