



Better Start for Children with Disability Initiative Medicare Items Fact Sheet for Health Providers and Parents

The Better Start for Children with Disability initiative commenced on 1 July 2011, and created new items in the Medicare Benefits Schedule (MBS) for the early diagnosis and treatment of children with an eligible disability. The list of eligible conditions was expanded on 1 January 2013, and again on 1 March 2014 when Rett's disorder was included as an eligible condition.

Eligibility

The Better Start Medicare items are early intervention services for children with any of the following conditions:

- (a) sight impairment that results in vision of less than or equal to 6/18 vision or equivalent field loss in the better eye, with correction.
- (b) hearing impairment that results in:
 - (i) a hearing loss of 40 decibels or greater in the better ear, across 4 frequencies; or
 - (ii) permanent conductive hearing loss and auditory neuropathy.
- (c) deafblindness
- (d) cerebral palsy
- (e) Down syndrome
- (f) Fragile X syndrome
- (g) Prader-Willi syndrome
- (h) Williams syndrome
- (i) Angelman syndrome
- (j) Kabuki syndrome
- (k) Smith-Magenis syndrome
- (l) CHARGE syndrome
- (m) Cri du Chat syndrome
- (n) Cornelia de Lange syndrome
- (o) microcephaly if a child has:
 - (i) a head circumference less than the third percentile for age and sex; and
 - (ii) a functional level at or below 2 standard deviations below the mean for age on a standard developmental test, or an IQ score of less than 70 on a standardised test of intelligence.
- (p) Rett's disorder

“Standard development test” refers to the Bayley Scales of Infant Development or the Griffiths Mental Development Scales; “standardised test of intelligence” refers to the Wechsler Intelligence Scale for Children (WISC) or the Wechsler Preschool and Primary Scale of Intelligence (WPPSI). It is up to the clinical judgement of the diagnosing practitioner if other tests are appropriate to be used.

Children with an eligible disability can access Better Start Medicare services providing they have **not** already accessed services under the *Helping Children with Autism program* and providing they meet the requirements of each service.

Medicare items for specialists, consultant physicians or general practitioners

Medicare items are available for **assessment, diagnosis and the creation of a treatment and management plan** by a specialist or consultant physician (MBS item 137) or a general practitioner (MBS item 139) for a child aged under 13 years.

A GP, specialist or consultant physician can refer a child to an eligible allied health provider to assist with diagnosis of the child or for the purpose of contributing to the child's disability treatment and management plan. Referrals for these **allied health assessment** services can be made by a GP as an outcome of the service provided under one of the MBS items 3-51, or as an outcome of a service provided by specialist or a consultant physician under one of the MBS items 104-131 or under one of the MBS items 296-370 (excluding item 359).

When a treatment and management plan is in place, the medical practitioner who develops the plan can refer a child for **allied health treatment** services, providing the child is aged under 15 years and had a treatment and management plan prepared for them before their 13th birthday. Only one disability treatment and management plan can be prepared for a child in their lifetime. However, if a child sees a different medical practitioner to the one who prepared the treatment and management plan, the GP, consultant physician or specialist who is seen subsequently can refer the child for any remaining allied health treatment services that are available to the child.

Children with an existing treatment and management plan created under MBS items 137 or 139 can be **reviewed** under attendance items for specialists, consultant physicians or general practitioners.

Referring medical practitioners are not required to use a specific form to refer patients for the allied health services that are available through the *Better Start for Children with Disability* initiative. The **referral** may be a letter or note to an eligible allied health professional, signed and dated by the referring practitioner.

Medicare items for allied health providers

Children with an eligible disability can be referred by a GP, specialist or consultant physician for the following allied health services:

- up to **four diagnostic / assessment services** from psychologists, speech pathologists, occupational therapists, audiologists, optometrists, orthoptists or physiotherapists to assist the referring practitioner with diagnosis or to contribute to a child's treatment and management plan (for a child under 13 years of age).
- up to **twenty treatment services** from psychologists, speech pathologists, occupational therapists, audiologists, optometrists, orthoptists or physiotherapists (for a child under 15 years of age, providing a treatment and management plan is in place before their 13th birthday).

These are the total number of services available to each child through the Better Start program – not an annual entitlement.

Assistance with diagnosis / contribution to a treatment plan*

MBS items for allied health assessment of children with disability

- 82000 Psychologist
- 82005 Speech pathologist
- 82010 Occupational therapist
- 82030 Audiologist, optometrist, orthoptist, physiotherapist

* Prerequisite MBS items: 104-131 or 296-370 (excluding item 359) (specialist or consultant physician); or 3-51 (general practitioner).

Treatment services**

MBS items for allied health treatment of children with disability

- 82015 Psychologist
- 82020 Speech pathologist
- 82025 Occupational therapist
- 82035 Audiologist, optometrist, orthoptist, physiotherapist

** Prerequisite MBS items: 137 (specialist or consultant physician); or 139 (general practitioner).

A **course of treatment** for the allied health treatment services consists of the number of allied health services stated on the child's referral, up to a maximum of 10 services. This enables the referring practitioner to consider a report from the allied health provider(s) about the services provided to the child, and the need for further treatment.

Patients will require a separate **referral** for each allied health provider they are referred to and they will also need new referrals for each new course of treatment.

More Information

The explanatory notes and item descriptors for these items are in the Medicare Benefits Schedule (MBS) available online at: www.mbsonline.gov.au

For inquiries about eligibility, claiming, fees and rebates, call the Department of Human Services (Medicare): patient inquiries 132 011; provider inquiries 132 150.