



Australian Government

Department of Health

MEDICARE BENEFITS FOR NON-DIRECTIVE PREGNANCY SUPPORT COUNSELLING SERVICES

Summary

- Rebates are available for up to three (3) non-directive pregnancy support counselling services per patient, per pregnancy.
- A person who is currently pregnant or who has been pregnant in the preceding 12 months may access the services.
- Services can address all pregnancy-related issues for which non-directive counselling is appropriate.
- Services are provided by eligible GPs, and allied health professionals on referral from a GP.
- Providers may set their own fees. If a provider accepts the Medicare benefit as full payment for the service, there will be no out-of-pocket cost. If not, you will have to pay the difference between the fee charged and the Medicare rebate.

A person who is currently pregnant or who has been pregnant in the preceding 12 months, and who is concerned about that pregnancy, may claim Medicare benefits for up to three (3) non-directive pregnancy support counselling services (in total) per pregnancy.

What is non-directive counselling?

This is a form of counselling based on the understanding that, in many situations, people can resolve their own problems without being provided with a solution by the counsellor.

The service involves the counsellor undertaking a safe, confidential process that helps the patient explore concerns they have about a pregnancy. This includes providing unbiased, evidence-based information about all options and services available to the patient, where requested.

The service can address all pregnancy-related issues for which non-directive counselling is appropriate.

An eligible person's partner may attend counselling sessions, however, only one fee (for the patient) applies to each service.

Who can provide these services?

Services can be provided by a medical practitioner (including a GP, but not including a specialist or consultant physician) – hereafter referred to as a GP. The GP must be registered with Medicare Australia as having completed non-directive pregnancy counselling training.

Private psychologists, social workers and mental health nurses may also provide services on referral from a GP, where the practitioners are registered with Medicare Australia as meeting the following eligibility criteria and having completed appropriate non-directive pregnancy counselling training:

- Psychologists must hold general registration in the health profession of psychology under the applicable law in force in the State or Territory in which the service

is provided and be certified by the Australian Psychological Society as appropriately trained in non-directive pregnancy counselling.

- Social workers must be a 'Member' of the Australian Association of Social Workers (AASW) and certified by AASW either as meeting the standards for mental health set out in AASW's 'Practice Standards for Mental Health Social Workers', as in force on 8 November 2008 or as an Accredited Social Worker.
- Mental health nurses must be a 'Credentialled Mental Health Nurse' as certified by the Australian College of Mental Health Nurses (ACMHN).

Exclusions

GPs, psychologists, social workers and mental health nurses who have a direct pecuniary interest in a health service that has as its primary purpose the provision of pregnancy termination services cannot provide non-directive pregnancy support counselling services under Medicare.

Training and Registration with Medicare Australia

Non-directive pregnancy counselling training is available online from the following organisations:

For GPs: The Royal Australian College of General Practitioners (RACGP): <http://www.gplearning.com.au/Home> and the Australian College of Rural and Remote Medicine (ACRRM): https://www.rmeo.com/rmeo/dls_rmeo.pl?a=welcome

For psychologists and social workers:

The Australian Psychological Society (APS): <http://www.psychology.org.au/> with links from the Australian Association of Social Workers: <http://www.aasw.asn.au/> and the Australian College of Mental Health Nurses (ACMHN): <http://www.acmhn.org/>

Referral Process

Any GP may refer patients to eligible psychologists, social workers and mental health nurses for services, via a signed and dated letter or note. GPs do not need to have completed non-directive pregnancy counselling training to make referrals.

Patients may be referred to more than one allied health professional (eg, where the patient does not wish to continue receiving services from the provider they were referred to in the first instance).

A new referral is required for each pregnancy or where the patient wishes to be referred to a different provider.

Patients who are unsure of the number of rebates available to them may check with Medicare Australia on 132 011. Providers may also check prior to providing a service (patient needs to be present).

Which MBS items apply?

There are four MBS items for the provision of non-directive pregnancy support counselling services:

- 4001 – provided by a GP;
- 81000 – provided by a psychologist;
- 81005 – provided by a social worker;
- 81010 – provided by a mental health nurse.

What conditions must be met before the relevant item can be claimed?

For item 4001:

- The service is provided by a GP registered with Medicare Australia as meeting the credentialling requirements for provision of the service, and lasts at least 20 minutes.

For items 81000, 81005 and 81010:

- The service is provided by a psychologist, social worker or mental health nurse, respectively, registered with Medicare Australia as meeting the credentialling requirements for provision of the service, and lasts at least 30 minutes.

For items 4001, 81000, 81005 and 81010:

- The service is provided individually and in person to a person who is currently pregnant or has been pregnant in the 12 months preceding the service.
- The person is not an admitted patient of a hospital or day-hospital facility.
- The person has not received more than three services, per pregnancy, to which items 4001, 81000, 81005 and 81010 apply.

More Information

The explanatory notes and item descriptors for these items are in the Medicare Benefits Schedule (MBS) available online at: <http://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.