Mental Health Care Plan — MBS Pathway

Plan, refer to psychology, and review under Better Access

CLINICAL PATHWAY

From 1 Nov 2025, the Better Access redesign removed the dedicated review/consultation items. Preparation items (2700/2701/2715/2717) remain, but reviews and ongoing mental-health consults are now billed as standard time-tiered attendances. Preparation items are only payable if done by a GP at the patient's MyMedicare practice, or their usual medical practitioner.

THE CARE CYCLE

1	**Identify:** patient cue, or opportunistic screen with K10
2	**Assess:** risk, comorbidity, severity, function, supports
3	**Prepare a plan:** 2700/2701 (shorter/less complex) or 2715/2717 (longer/more complex) — written plan with goals
4	**Refer:** Better Access psychology, with or without pharmacotherapy — see MH-05/MH-06 for severity-banded stepped care
5	**Review:** standard time-tiered consult (e.g. 23/36/44) — adjust plan, consider further referral or specialist input

PREPARATION ITEMS — KEY CHANGES

- **2700 / 2701 / 2715 / 2717** (time-based preparation) remain current — no new item numbers were introduced
- **2712 (review) and 2713 (MH consult) were removed** — rebill this work under standard time-tiered general attendance items
- A review is **no longer required** just to issue a further Better Access referral

EXACT DESCRIPTORS, TIMES & FEES

Item descriptors, time thresholds and schedule fees change — confirm current wording and fees for 2700/2701/2715/2717 and the standard attendance items at mbsonline.gov.au before billing.

MYMEDICARE LINKAGE (FROM 1 NOV 2025)

Preparation items are only payable for a plan made by a GP/prescribed medical practitioner at the patient's **MyMedicare-registered practice**, or by their **usual medical practitioner** (majority of the patient's care over the past, or likely next, 12 months). Patients aren't restricted to that practice for the Better Access services themselves.

BETTER ACCESS PATHWAY

- Up to **10 individual + 10 group** sessions per calendar year, resetting 1 January
- First block of **6 sessions**, then a GP review before a further **4** become available
- Telehealth-eligible. Providers: registered/clinical psychologist, mental health social worker, occupational therapist (with Better Access endorsement)

WHEN TO CONSIDER A PLAN

K10 ≥20, or a positive PHQ-9/GAD-7, in a patient with functional impact. Match treatment intensity to severity — see **MH-05** (depression) and **MH-06** (anxiety) for the full severity-banded stepped-care detail; don't duplicate those bands here.

■ SAFETY

- Ask directly about suicidal ideation — asking does not increase risk
- Cover ideation, intent, plan, means and protective factors at every risk review
- Reassess risk at every consult while distress remains high, not only at the scheduled review

■ RED FLAGS / REFER

- Imminent risk or a clear plan/means — same-day mental health team or ED, do not leave the patient alone
- Crisis lines: Lifeline 13 11 14, Suicide Call Back Service 1300 659 467, 13YARN 13 92 76 (Aboriginal & Torres Strait Islander)
- Complex comorbidity, diagnostic uncertainty, or not improving after two referral blocks — psychiatry referral