

## Referral Form for Individual Allied Health Services under Medicare for patients with a chronic medical condition and complex care needs

Note: GPs can use this form issued by the Department of Health and Ageing or one that contains all of the components of this form.								
To be completed by referring GP:								
Please tick:								
Patient has GP Management Plan (item 721 or review item 732) AND Team Care Arrangements (item 723 or review item 732)								
GP has contributed to or reviewed a multidisciplinary care plan prepared by the patient's aged care facility (item 731)								
Note: GPs are encouraged to attach a copy of the relevant part of the patient's care plan to this form.								
Medicare rebates and Private Health Insurance benefits cannot <u>both</u> be claimed for these services.  Patients should be advised that they must <u>choose</u> whether to access one or the other.								
GP deta	ails							
Provider Number								
Name								
Address							Postcode	
Patient details								
Medicare Number Patient's ref no.								
First Name Surname								
Address								
Allied Health Professional (AHP) patient referred to: (Please specify name or type of AHP)								
Name Exercise Physiologist								
Address Green Apple Wellness Centre - 21 Bald Hills Rd, Bald Hills Postcode 4036								
Referral details - Please use a separate copy of the referral form for each type of service								
Eligible patients may access Medicare rebates for up to 5 allied health services (total) in a calendar year. Please indicate the number								
of services required by writing the number in the 'No. of services' column next to the relevant AHP.								
No of services	AHP Type	Item Number	No of services	AHP Type	Item Number	No of services	AHP Type	Item Number
	Aboriginal Health Worker	10950		Exercise Physiologist	10953		Podiatrist	10962
	Audiologist	10952		Mental Health Worker	10956		Psychologist	10968
	Chiropractor	10964		Occupational Therapist	10958		Speech Pathologist	10970
Diabetes Educator		10951		Osteopath	10966			
	Dietitian	10954		Physiotherapist	10960			
Referring General Practitioner's signature  Date signed								
The AHP must provide a written report to the patient's GP after the first and last service, and more often if clinically necessary.								
Allied health professionals should retain this referral form for record keeping and Medicare Australia audit purposes.								
Allied health services funded by other Commonwealth or State/Territory programs are not eligible for Medicare rebates under this initiative.								
This form may be downloaded from the Department of Health and Ageing website at <a href="https://www.health.gov.au/mbsprimarycareitems">www.health.gov.au/mbsprimarycareitems</a>								
THE FORM DOES NOT HAVE TO ACCOMPANY MEDICARE CLAIMS								