

EPC Item Number Claiming Rules

	Not on the same day	725	Review of a GP Management review
	No restrictions	727	Review of a Team Care Arrangement
2710	GP Mental Health Care Plan	900	Domiciliary Medication Management review
2712	GP Mental Health Care Plan Review	2517	Completion of Diabetes Cycle of care
2713	GP Mental Health Care consultation	2546	Completion of Asthma Cycle of Care
721	Preparation of a GP Management Plan	10997	Nurse review of a person with chronic disease
723	Preparation Of a Team Care arrangement		

Months until next claim for service

Item Claimed	2710	12	1								NO	
	2712	3	3*								NO	
	2713										NO	
	721				24		6			12		
	723					24		6			YES	
	725				6		6		3	3	YES	
	727					6		6	3	3	YES	
	900								12		YES	
	2517*						3	3		11-13	YES	
	2546*				12		3	3			12	NO
	10997					YES	YES	YES		YES	NO	5 a year
	MBS Item No.	2710	2712	2713	721	723	725	727	900	2517	2546	10997

* 2712 – Only claimable twice per year.

721 & 723	Recommended claiming period 24mths, claimable at 12mths if circumstances significantly. If claiming prior to 24mth the patient invoice or voucher should be annotated
725 & 727	Recommended claiming period 6 months, claimable at 3 months if clinically indicated.
2517*	Cannot claim within 3 months of review items 725 and 727.
2546*	Cannot claim within 12 months of claiming item 721 alone as services significantly overlap. Can claim after claiming 721 and 723 as patients have complex conditions, but not on the same day.
10997	Must have GPMP in place.

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