

# Person—General Practitioner MBS out of hours health assessment indicator, yes/no code N

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	General Practitioner MBS out of hours health assessment indicator
<b>METEOR identifier:</b>	556549
<b>Registration status:</b>	<ul style="list-style-type: none"><li>• <a href="#">National Health Performance Authority (retired)</a>, Retired 01/07/2016</li></ul>
<b>Definition:</b>	An indicator of whether a person's Medicare Benefits Schedule (MBS) out of hours Health Assessment was conducted by a General Practitioner, as represented by a code.
<b>Data Element Concept:</b>	<a href="#">Person—General Practitioner MBS health assessment indicator</a>

## Value domain attributes

### Representational attributes

<b>Representation class:</b>	Code						
<b>Data type:</b>	Boolean						
<b>Format:</b>	N						
<b>Maximum character length:</b>	1						
<b>Permissible values:</b>	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></tbody></table>	Value	Meaning	1	Yes	2	No
Value	Meaning						
1	Yes						
2	No						

## Data element attributes

### Collection and usage attributes

**Guide for use:**

CODE 1 Yes

A person has received an MBS Health Assessment conducted by a GP.

CODE 2 No

A person has not received an MBS Health Assessment conducted by a GP.

GP attendances are Medicare benefit-funded patient/doctor encounters, such as visits and consultations, for which the patient has not been referred by another doctor. GP attendances exclude services provided by practice nurses and Aboriginal and Torres Strait Islander health practitioners on a GP's behalf.

In terms of Medicare Benefits Schedule (MBS) structure, GP attendances comprise all items in:

- Group A1 – general practitioner attendances to which no other item applies
- Group A2 – other non-referred attendances to which no other item applies
- Group A5 – prolonged attendances to which no other item applies
- Group A6 – group therapy
- Group A7 – acupuncture
- Group A11 – urgent attendances after hours
- Group A14 – health assessments
- Group A15, subgroup 1 – GP management plans, team care arrangements and multidisciplinary care plans
- Group A15, subgroup 2, items 735-758 – multidisciplinary case conference – medical practitioner (other than a specialist or consultant physician)
- Group A16 – medical practitioner sports physician attendances
- Group A17 – domiciliary and residential management reviews
- Group A18 – general practitioner attendances associated with PIP incentive payments
- Group A19 – other non-referred attendances associated with PIP incentive payments to which no other item applies
- Group A20 – general practitioner mental health treatment
- Group A22 – general practitioner after hours attendances to which no other item applies
- Group A23 – other non-referred after hours attendances to which no other item applies
- Group A27 – pregnancy support counselling
- Group A30 – medical practitioner telehealth attendances

In terms of 'Broad Type of Service' Groups, GP attendances comprise all items in Broad Type of Services Groups 'A' – GP/VRGP non-referred attendances, 'M' - Enhanced Primary Care and 'B' Non-referred other attendances as published in official MBS statistics by the Department of Human Services and the Department of Health.