MBS Eligibility

The MBS Eligibility tab is available when the clinical and billing systems are provided by the same vendor and the data extract for the clinical system is version 1_5 or above. The 'Pen CS CAT4 - User Guide Part 1 – Installation and Configuration' explains how to configure your preferences to collect billing data as well as clinical data. This report is visible in the 'Daily', 'CDM' and 'I-qi' view as well as in the CAT4 full view.

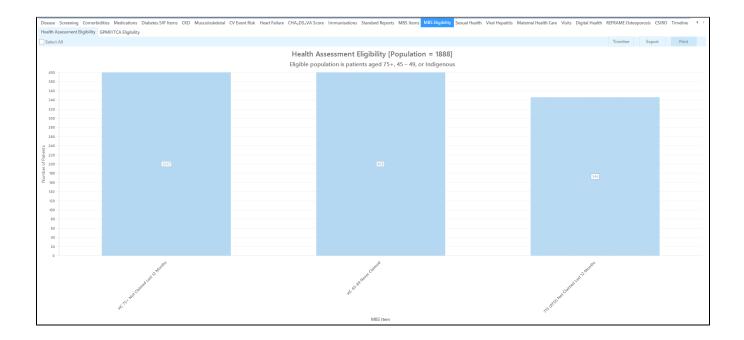
For the details of the MBS item numbers used in this report please see the table above in the MBS item report paragraph.

Note: Diabetes SIP tab is removed from this report, due to removal of relevant MBS items from Medicare in 2022.

There are two tabs showing different MBS item eligibilities:

· Health Assessment Eligibility

This report shows the number of patients eligible for the 75+ year old (not claimed in the previous 12 months), the 45-49 year old (never claimed) and the Indigenous (item 715) health checks (not claimed in the previous 12 months).



GPMP/TCA Eligibility

This report applies to patients with Diabetes, CVD or CKD (please refer to the mapping document for your clinical systems for details of which diagnosis is included in these groups) and displays a bar chart with

- GPMP/TCA never claimed
- GPMP/TCA >18mths no review
- GPMP/TCA >18mths review >6mths
- GPMP/TCA 12-18mths no review
- GPMP/TCA 12-18mths review >6mths



All reports display the information in the reidentification report with the patient details, information on the MBS item not claimed and the date of the last claim.

