

Staying Private or Mixed Billing: Navigating the Changes with Confidence

Acknowledgement of Country

In the spirit of reconciliation, Cubiko, RACGP, HotDoc and CHC Medical acknowledge the Traditional Custodians of country throughout Australia and their connections to land, sea and community. We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.

Gaagal by Miimi and Jiinda



Housekeeping

- This session is being recorded. A copy of the recording will be emailed to all registrants after the session.
- This webinar is approved for RACGP CPD. Practitioners attending live and who have provided their RACGP member number will have their CPD hours automatically uploaded.
- If you share the recording with others at your practice, and they're a practitioner they can also claim CPD for the recording by quick logging it via their RACGP CPD Home.
- Questions? Drop them in the Q&A tab at the bottom of your screen and we'll answer them during the session. Cubiko team are here to help.











Cubiko and RACGP have joined together to bring you a series of webinars in the lead up to changes to Medicare on 1 November.









Meet our presenters



Chris Smeed
CEO & Founder of Cubiko



Dr Michael Wright RACGP President



Magali De Castro RN Leadership & Development Coach at HotDoc



Tara Welsh
Director at CHC Medical
General Practice









Who is this webinar for?

This session is for practices that will continue to private or mix bill after 1 November.









Overview of the Program

Recording of our Should We Enrol?

Making Sense of the New Incentives webinar.











What we'll cover in this session

- Understand what the changes mean for mixed and private billing practices
- Look at data to track for financial sustainability and patient access
- Explore key considerations for your team and your patients
- Discuss communication strategies for managing expectations



















Expanded eligibility criteria for Bulk Billing Incentives

Currently, incentives only apply when bulk billing children under 16 or patients with a Commonwealth concession card. From 1 November 2025, incentives will apply to all Medicare-eligible patients.









The item descriptors for all Group M1 BBI items will be updated to remove references to children under 16 and concession card holders. No other changes will be made to the item descriptors.

Category 8 - MISCELLANEOUS SERVICES

Group

M1 - Management Of Bulk-Billed Services

Subgroup

1 - Management of general bulk billed services

A medical service to which an item in this Schedule (other than this item) applies, if:

- (a) the service is an unreferred service; and
- (b) the service is provided to a person who is:
- (i) under the age of 16; or
- (ii) a concessional beneficiary; and
- (c) the person is not an admitted patient of a hospital; and
- (d) the service is bulk-billed in relation to the fees for:
- (i) this item; and

10990 Fee 🚹

- (ii) any other item in this Schedule applying to the service;
- other than a service associated with a service:
- (e) to which another item in this Group applies; or
- (f) that is a general practice support service; or
- (g) that is a MyMedicare service

Fee: \$8.60 **Benefit:** 85% = \$7.35

(See para $\underline{\text{MN.1.1}}, \underline{\text{MN.1.3}}$ of explanatory notes to this Category)

← Previous - Item 10989

Next - Item 10991 →









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Triple Bulk Billing Incentive

No change except expanded eligibility.

If it was single, it stays single. If it was triple, it stay triple.

General practitioners (GPs) can access tripled incentives when bulk billing the following types of consultations:

Category	MBS item numbers
Standard attendances – Face-to-face	23, 36, 44, 123
Attendances at a place other than consulting rooms or a RACF	24, 37, 47, 124
Professional attendances at a RACF	90035, 90043, 90051, 90054
After-hours attendances at consulting rooms	5020, 5040, 5060, 5071
After-hours attendances at a place other than consulting rooms or a RACF	5023, 5043, 5063, 5076
After-hours attendances at a RACF	5028, 5049, 5067, 5077









MMM is Important

	Standard incentive (existing items)	Tripled incentives (all eligible patients)	Tripled incentives (services linked to MyMedicare)*
MMM 1	10990	75870	75880
MMM 2	10991	75871	75881
MMM 2-7	10992	75872	N/A
(after-hours)			
MMM 3-4	75855	75873	75882
MMM 5	75856	75874	75883
MMM 6	75857	75875	75884
MMM 7	75858	75876	75885









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Introducing the Bulk Billing PIP

- ற் The BBPIP also launches on 1 November 2025.
- Practices that participate will receive an additional 12.5% payment on each dollar of MBS benefit for eligible NRA services, this is to be split evenly between the GP and the practice.
- Payments will be made quarterly, on top of MBS rebates.









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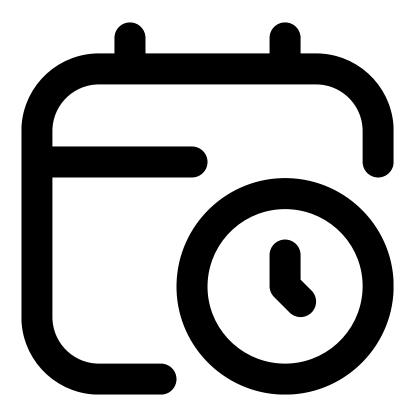








You can opt in later.





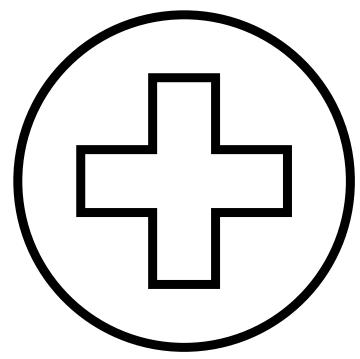






Impact on private/mixed billing: The clinical perspective

- Many factors influence billing, but it remains a personal choice
- Helping patients understand the need for fees is vital











Keeping fees up to date

Regularly reviewing and updating fees helps your practice stay sustainable and reflect the true value of care

Review fees regularly to reflect costs

- Communicate changes clearly with patients
- Ensure fees represent the value of your care









Average Price for Private 23

As of 1 September 2025

\$88.55









Average Price for Private 36

As of 1 September 2025

\$143.35









What is your biggest worry leading up to 1 November?

- Patients assuming all practices will bulk bill
- Managing difficult patient conversations

- Keeping team messaging consistent
- Explaining the value of private or mixed billing









Team Alignment

For this to work, every practitioner and team member needs to be aligned.

- Q; Ensure all GPs are on board
- Be clear on your practice bulk billing policy









Team Communication

Consistent messaging across the team is key. When everyone delivers the same message, patients trust your practice and avoid confusion.

Team meeting to align on messaging

- Shared resources for common patient questions
- Simple scripts for reception and nurses
- Encourage staff to raise tricky conversations for group discussion









The importance of consistent communication

- Communication = the foundation of successful therapeutic relationships
- Access to both information and misinformation
- Remember who you're speaking to











Planning & rolling out patient comms











Planning your approach to patient communications



Key steps

- 1. Brief the practice team so everyone's on the same page
- Proactively signal 'business as usual' in terms of your private/mixed billing policy
- 3. Create supporting documents, signs, etc.
- 4. Set aside time to check in with the team and review any challenges









Enabling teams to handle difficult conversations

Put aside some time to train the team & prepare sample scripts around:

- The upcoming changes: Summary of key changes in simple terms
- What patients may assume: e.g. All practices are now fully bulk billing.
- How to address patient concerns, questions or assumptions
- How to escalate issues if something is beyond the team member's scope









How to assist when a patient is frustrated:

It's not just what you say, the how speaks louder

- Stay clear on your intention to help & support the patient
- Reassure the patient that you will do your best to assist
- Genuinely care and show you are invested in this having a positive outcome
- Seek to listen & understand the issue better
- Offer options or set a time to report back with an update
- Follow through with your word on timeframes/promises











Sample script:

"I completely understand this can feel frustrating and also confusing with the recent government announcements.

Our practice did a thorough assessment, and in order to continue providing the level of care and service you know us for, we've decided we need to remain a [private billing / mixed billing] practice.

I understand this may not be the answer you were hoping for, but I'd be happy to go through our fees with you now so you know exactly what to expect for your appointment."









Zero Tolerance for Bullying & Harassment



No one should have to put up with foul language, abuse or disrespectful/derogatory comments from a patient.

If this happens, you can interrupt the patient:

"John, while I'm more than happy to help you, I cannot do so if you continue to swear. Is that understood?"

If they continue:

"John, I want to help you, but I simply cannot if you continue to swear at me. If this happens again I'll have no option but to end this discussion and ask you to leave the premises"

If that still doesn't work

"John, you've left me no alternative but to end this conversation. You will need to leave the premises now."

Request assistance if needed, speak to your manager & make notes of what happened while it's fresh in your mind.

Tools to simplify patient communication



Using a range of communication modes:

- Physical poster/sign (eg. "Important note on our billing policy from Nov 2025")
- Your **on-hold message** to remind patients of your billing policies
- On your **practice website**'s 'About us' area and as part of booking flows
- Your **social medi**a accounts: Not as a social post, but as part of your 'About us'
- For appointments booked **over the phone**, consider reminding patients that as a private billing practice, appointment fees are payable at the time of consultation.

If you want to proactively reach a large number of patients:

• Consider a **broadcast**, but only if necessary for your practice context







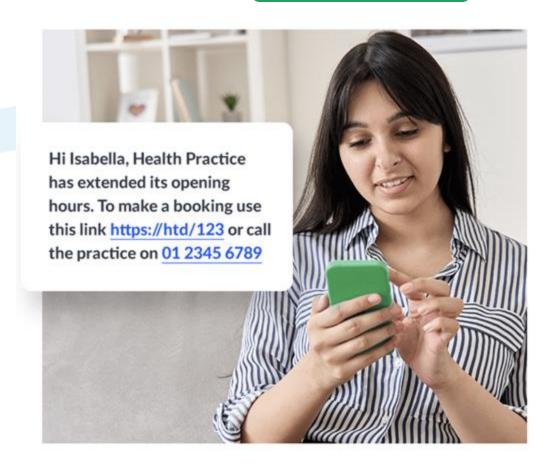


Broadcasts via SMS

Available Now

Get your message to your patients - fast

- Full control of your message Write the message you want to send, or choose from one our templates
- Custom targeting Send to the right people by selecting age and gender of your patients, or uploading your own patient list
- Quick and easy Simple to set up, send and measure your success
- Get more online bookings Encourage patients to book appointments by using a link attached to the message









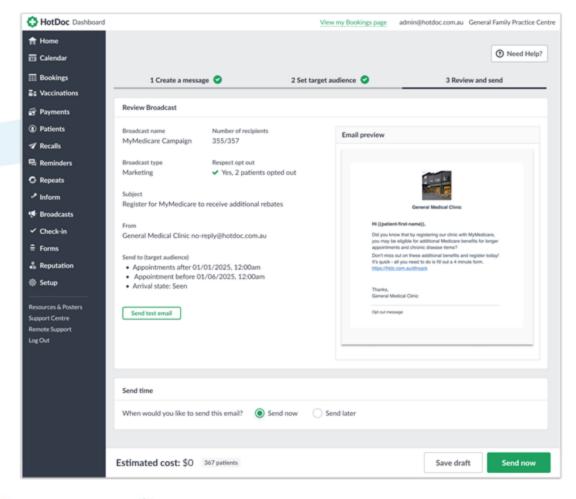


Email Broadcasts

Maximise patient engagement with multichannel communication tools

- Targeted email campaigns Send personalised communications at scale to promote services, health programs, and practice updates
- Built-in compliance protection Automated consent verification ensures all communications meet opt-in requirements
- **Effortless patient outreach** Increase service adoption and strengthen relationships through trusted communication channels

Coming soon











What matters most now for your practice

Your billing model stays strong. Your practice stays sustainable.

 ■ Keep your team aligned.

Set expectations early with patients.

Use data to guide sustainability.









Thank you to our Co-Hosts















For further resources please visit:



Cubiko Resource Hub



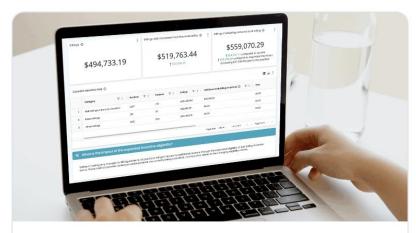
RACGP Resource Hub (Coming Soon)











Tuesday, 7 October @ 12 PM QLD time

For all Practices making the switch

Webinar

Making the Switch: Practical Steps for Enrolling

Read more >





Tuesday, 14 October @ 12 PM QLD time

Webinar

Ask the Department your questions:
Bulk billing Q&A with RACGP and
DoHAC

Read more >













Wednesday, 15 October @ 12 PM QLD time

For GP's, Nurses, PM's & Practice Owners

Webinar

Mental Health Treatment Plans after 1 Nov: What's Changing and How to Prepare

Read more >





Wednesday, 29 October @ 12 PM QLD time

For all Practices making the switch

Webinar

Countdown to November: Your Questions Answered

Read more >









We would love to hear your feedback on today's session.







