

Enhanced Primary Care (EPC) Program

Referral form for individual Allied Health Services under Medicare

To be completed by referring GP:

Please tick:

- Patient has GP Management Plan (item 721 or review item 725) AND Team Care Arrangements (item 723)
- GP has contributed to or reviewed a multidisciplinary care plan prepared by the patient's aged care facility

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 both be claimed for these services.
Patients should be advised that they must choose whether to access one or the other.

GP details	PLEASE STAMP OUR WRITE YOUR DETAILS BELOW																																																	
Provider Name Address																																																		
Patient details																																																		
Medicare	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Patient's ref <input type="checkbox"/>																																																
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Allied Health Professional (AHP) patient referred to: (Please specify name or type of AHP)																																																		
Name	<input style="width: 100%;" type="text" value="Pro Fit Lifestyle"/> Ph: (02) 1300 052 125 Fax: (02) 8821 8822																																																	
Address	<input style="width: 100%;" type="text"/>																																																	
		Postcode <input style="width: 100%;" type="text"/>																																																
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.																																																		
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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 www.health.gov.au/epc or ordered by faxing (02) 6289 7120 or by phoning (02) 6289 4297.																																																		
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