



Australian College of Mental Health Nurses

Sustainable private practice, and sources of funding

2022

How this resource can help you

One of the Australian College of Mental Health Nurses' (the College) key aims is to create a wide range of opportunities for mental health nurses to work in primary, community or acute care, including establishing their own private practice. With pent-up, unmet demand for counselling, parenting skills, addiction and trauma-informed psychotherapy services post-COVID, there has never been a better time for nurses and midwives to consider private practice.

While mental health nurses (MHNs) – including Credentialed Mental Health Nurses (CMHNs) and Mental Health Nurse Practitioners (MHNPs) are still not able to claim for services under Better Access, there are many alternative forms of funding for private practice such as NDIS, VOCAT, TAC, some private health insurance companies, and some PHN programs. In addition, many service users can afford to pay fees privately. Fees can be scaled according to income, and sometimes pro bono work may be possible. Thus, many of our members have been able to establish successful private practices over the last twenty-five years, despite limited or no access to external or government funding. An interview with the founder of one such private practice can be found on the College website [here](#).

The key to starting and growing a successful practice is to plan effectively. A **Starting a Private Practice Guide** is available [here](#) and assists you to think about the next steps. This guide was presented at the ACMHN International Conference in 2022.

The College has started a Nurses in Private Practice network (NIPP) which hosts monthly education and networking webinars. To join NIPP please contact the Chair of PsySIG Claire Hudson McAuley on 0408 509 110.

MBS eligibility for MHNs

While MBS funding is not necessary for a successful practice, eligible CMHNs, and MHNPs and midwives can claim specific MBS item numbers depending on their skill set and client eligibility. The drawbacks are that MBS funding requires additional time and paperwork to the government and referring doctor, and the amounts paid are very low compared to normal fees. It would be unwise to establish any private practice solely on MBS fees without charging out of pocket payments to the client, which is currently not permitted. However, MBS benefits payable is included in the links below.

Chronic Disease Management Plans

Mental health services for a patient who has a Chronic Disease Management Plan ([MBS Item number 10956](#)). If a GP has prepared a chronic disease management plan for the patient, they can receive a Medicare rebate for up to five sessions with allied health professionals. This includes the provision of mental health services provided by CMHNs.

A similar item is available for patients who identify as Aboriginal and Torres Strait Islander ([MBS Item number 81325](#)).

Non-Directive Pregnancy Counselling

A CMHN can provide up to three counselling sessions related to pregnancy issues when the consumer is referred by their GP after they have completed an online CPD training program through the ACMHN. This service can be provided up to 12 months after pregnancy. ([MBS Item number 81010](#))

Allied Health Multidisciplinary Case Conferences

Eligible allied health practitioners including nurses may claim this item number under the conditions below.

The client must verbally agree to the case conference, and this must be documented in the client's file. There is no requirement to have a pre-existing relationship with the client and a CMHN can participate in the consultation. These items can be used once every three months. [Department of Health Factsheet 8/12/2021](#)

The following numbers go with this item:

Service	Items in person, via video conference or via telephone
<p>Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in:</p> <p>(a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility.</p> <p>If the conference lasts for at least 15 minutes, but for less than 20 minutes (other than a service associated with a service to which another item in this Group applies)</p>	<p>10955</p>
<p>Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in:</p> <p>(a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility.</p> <p>if the conference lasts for at least 20 minutes, but for less than 40 minutes (other than a service associated with a service to which another item in this Group applies)</p>	<p>10957</p>
<p>Attendance by an eligible allied health practitioner, as a member of a multidisciplinary case conference team, to participate in:</p> <p>(a) a community case conference; or (b) a multidisciplinary case conference in a residential aged care facility.</p> <p>if the conference lasts for at least 40 minutes (other than a service associated with a service to which another item in this Group applies)</p>	<p>10959</p>

MBS item numbers for MHNPs

Mental health nurse practitioners have AHPRA-endorsed extensions to practice including:

- No referral from a GP is required and unlimited number of consultations available
- Advanced mental and physical health assessment
- Ordering clinical investigations and pathology under Medicare
- Clarify & confirm diagnosis
- Treatment options including prescribing under PBS within specialised scope of practice (a prescriber number is required to register with Medicare and PBS)
- MHNPs can also de-prescribe medications within their scope of practice
- Referrals to medical specialists
- Issuing sick certificates

Click below for more information on:

- [Bulk billing for nurse practitioners and midwives](#)
- [What are the nurse practitioner MBS items](#)



MBS item numbers for MHNPs

Time limited MBS items	Face-to-face items	Telephone conference	Videoconferencing	Video consultation with specialist or consultant physician/residential care service
Brief	82200	91192	91193	NA
< 20 minutes	82205	91178	91189	82220/82223
20 + minutes	82210	91179	91190	82221/82224
40 + minutes	82215	91180	91191	82222/82225

Application for a Medicare provider number

A provider number is a unique number issued to eligible health professionals who participate in the Medicare (MBS) program.

A provider number:

- Is required for billing or requesting of services eligible for a Medicare benefit.
- Identifies a practitioner's qualifications, registration, eligibility status and any restrictions in their access to Medicare benefits.
- Identifies the practitioner's practice location to enable the process of claims from the Department of Veterans' Affairs.

Applications for a provider number are completed through [Services Australia](#).



Charging fees under MBS Items

When claiming the client's MBS rebate and establishing your full fee as a private provider, it is important to consider what your full fee needs to include to cover all your expenses (consider rent, insurance, phone/internet, stationery, licenses, and software, administration time, reception costs).

It is also worth noting that as a private practitioner, you aren't compelled to see people by referral from anyone and can refer clients to alternative services. Common practice may include a combination of:

- Charging clients based on the gap that people usually get between Medicare and seeing a psychologist under Better Access.
- Reducing the out-of-pocket fee or bulk billing those clients who are less able to afford the out-of-pocket fee (for example those with a HealthCare Card).
- Considering if you can access resources to reduce your costs. For example, organisations may provide free or reduced consulting room rental, free reception, use of phone, scanning and photocopying for bulk billing services.
- It is strongly advised to augment MBS clients with privately paying clients to ensure MBS payments aren't the only income stream. Effective practice also requires a range of referral sources for clients, not just from PHNs, individual psychiatrists or GPs. Please refer to the **Starting a Private Practice Guide** which is available [here](#).

