Information Sheet for EPC / Team Care Plan Patients Attending Physiotherapy



For patients with chronic conditions and complex care needs a Medicare rebate is available for a maximum of five services per patient each calendar year. Patients must have a GP Management Plan and Team Care Arrangements prepared by their GP, or be residents of a residential aged care facility who are managed under a multidisciplinary care plan. For more detailed information on the Physiotherapy rebate and requirements, you can search for Item number 10960 in the Medicare Benefits Schedule.

Steps to take towards making an EPC / Team Care Plan Claim

- 1. Your GP will initiate the process by completing the required paperwork and Physiotherapy referral.
- 2. Call Teneriffe Physiotherapy on 3252 8866 to arrange an appointment. Make sure you advise that you are making an EPC/Team Care Plan claim.
- 3. Bring your doctor's referral letter and other documents provided by your GP with you to your initial consultation.
- 4. The focus of your treatment will be on improving self-management of your chronic and complex condition.
- 5. Patients are required to pay our normal fee and will be issued with a receipt to submit to Medicare. Please note that regardless of what your Doctor may have indicated, we do not bulk bill Medicare for this service.
- 6. Your Physiotherapist is required to communicate with your referring GP (usually by a short letter) after your first EPC/ Team Care Plan Physiotherapy session to advise on their assessment findings and management plan.
- 7. Your Physiotherapist is required to communicate with your referring GP (usually by a short letter) after your final EPC/ Team Care Plan Physiotherapy session to advise on the results of the treatment sessions and any ongoing management plan.