

PART B – To be completed by allied health provider (AHP) who undertakes assessment service:
Eligible patients may access Medicare rebates for **up to 8** allied health group services in a calendar year.
Group size must be between 2 and 12 persons.
Indicate the name of the provider/s, and details of the group service programme.

Name of provider/s:

Name of programme:

No. of sessions in programme:

Venue (if known):

Name of referring AHP:

**Signature
and date**

Allied health providers must provide, or contribute to, **a written report** to the patient's GP after the assessment service and at completion of the group services programme. Allied health providers should retain a copy of the referral form for record keeping and Department of Human Services (Medicare) audit purposes. Allied health services funded by other Commonwealth or State/Territory programmes are not eligible for Medicare rebates under these items, except where the service is operating under sub-section 19(2) arrangements.

This form may be downloaded from the Department of Health website at www.health.gov.au/mbsprimarycareitems.

THIS FORM DOES NOT HAVE TO ACCOMPANY MEDICARE CLAIMS