

# Key Takeaways on Updated Guidelines to Telehealth



Reading time:  
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In September 2023, the Medical Board of Australia released its new publication [Guidelines: Telehealth consultations with patients](#) ("the telehealth guidelines").

Here are three key messages to keep in mind, when using telehealth:

## 1. Real-time doctor-patient consultations remain key to safe healthcare

In the updated telehealth guidelines, the Medical Board of Australia is very clear that it does not support the prescribing or the provision of health care based on the transmission of data or images where there is no real-time interaction. In particular, the Board does not support prescribing based on the use of online health questionnaires.

Therefore, MIPS will now only cover asynchronous telehealth in the context of a pre-existing clinical relationship which involves real time consultation, whether that be by telehealth or face-to-face, and where there is the capacity for ongoing real time follow up.

## 2. International Health

One of the many benefits of telehealth is that it is convenient, both for the medical practitioner and the patient. This means that it can be conducted while you are overseas on holiday or at a conference. For example, if you follow up with test results for a patient by calling or texting the patient while overseas, this would be considered an international telehealth consultation. Here are three things to consider with international telehealth:

First, you need to be comply with any local requirements for registration and professional indemnity insurance in the overseas jurisdiction. Second, you need to be aware that Medicare rebates are not available if you or the patient is overseas. Third, you should be aware of the limitations of your MIPS medical indemnity insurance policy. You are only covered by MIPS for overseas practice, subject to all the terms and conditions of the policy, where you are not outside of Australia for more than 120 days, or the patient isn't also outside of Australia for more than 90 days. You are not covered if both you and the patient are outside Australia at the same time of the consultation

## 3. Interstate consultations

Finally, telehealth makes interstate consultations more common. This can create complexity when it comes to prescribing, particularly Schedule 8 medications or drugs of dependence, where the rules and regulations can differ between state and territory jurisdictions. The requirements around the need for a permit or the requirements around the need to check state-based monitored medicines databases can also vary.

This situation may occur when, for example, a GP based in Victoria is providing a telehealth service that is operated by a platform based in South Australia, but the patient resides in the ACT and decides to fill the prescription at a pharmacy just across the border in New South Wales. Knowing which laws apply can be complex and confusing and it is best to seek advice in those circumstances.

## More information

Please refer to our [previous webinar](#) for more information on the benefits and medicolegal risks of telehealth. The webinar also provides contact details for the state prescribing authorities that can guide and assist you with local rules and regulations.

If a member has concerns about their practice involving telehealth and require medico-legal assistance, contact us on 1800 061 113.

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