# **A Complete Guide to Telehealth Appointments in Australia**

## **Introduction: What is Telehealth?**

### **Definition and Scope of Telehealth in Australia**

Telehealth, frequently referred to as telemedicine, represents a transformative approach to healthcare delivery in Australia, enabling medical professionals to conduct consultations and provide a comprehensive array of health services remotely.1 This innovative model leverages advanced telecommunications technology to facilitate diagnosis, administer treatment, manage follow-up care, and support preventive health initiatives. Telehealth consultations can occur directly between a clinician and a patient, or they can involve multiple healthcare professionals forming a multidisciplinary team, often including carers and interpreters to ensure comprehensive and inclusive care.1

The core objective of telehealth is to extend healthcare access, particularly in situations where in-person visits are either clinically unnecessary or geographically impractical.1 This flexibility is crucial for patients in remote areas, those with mobility challenges, or individuals who are housebound. The scope of telehealth encompasses various modalities designed to suit diverse clinical needs. These include real-time, or synchronous, interactions such as video calls and telephone consultations, which allow for immediate communication between patient and provider. Additionally, telehealth incorporates 'store-and-forward' (asynchronous) methods, where clinical information, such as medical images or patient data, is securely transmitted for later review by a healthcare professional. Remote patient monitoring (RPM) also falls under the telehealth umbrella, involving the continuous tracking of a patient's health data from a distance, enabling proactive management of chronic conditions and timely interventions.3

### **The Transformative Role of Telehealth in Australian Healthcare**

Telehealth has fundamentally reshaped Australia's universal healthcare program, Medicare, becoming a pivotal component in ensuring continuity of care for millions of Australians.2 Its rapid expansion, particularly since March 2020 in response to the COVID-19 pandemic, underscored its indispensable role in maintaining health service delivery during unprecedented public health challenges. Many of these expanded services have since been permanently integrated into the Medicare system, reflecting a lasting shift in healthcare provision.2

One of the most profound impacts of telehealth has been the dramatic improvement in access to timely healthcare services across the nation. This is especially significant for Australians residing in rural and remote areas, who historically faced considerable travel burdens and logistical challenges to access medical specialists or even their general practitioners.2 By removing these geographical barriers, telehealth has fostered greater equity in healthcare access, ensuring that location does not dictate the quality or availability of care. Beyond mere convenience, the widespread adoption of telehealth has also enhanced public safety. By enabling remote consultations, it reduces the need for physical interaction, thereby minimizing the spread of infectious illnesses. This benefit was particularly critical during periods requiring self-isolation or quarantine, demonstrating telehealth's capacity to protect both patients and healthcare providers.2

### **Key Benefits for Patients and Providers**

The integration of telehealth into the Australian healthcare landscape has yielded substantial benefits for both patients and healthcare providers, optimizing the efficiency and accessibility of medical services.

Patient Benefits:

Telehealth significantly improves access to healthcare by dismantling geographical barriers, making it feasible for individuals in remote locations, those with limited mobility, or who are housebound to receive necessary medical attention.2 This expanded reach means that patients no longer need to travel long distances, saving considerable time and expense, and reducing the need to take time off work or arrange childcare for appointments.3 The flexibility of scheduling consultations from the comfort of one's home, often outside traditional clinic hours, further enhances convenience, while also allowing patients to avoid crowded waiting rooms, which can be a source of anxiety or infection risk.4 Telehealth also contributes to reduced waiting times, facilitating faster diagnosis and appropriate treatment, and fosters improved continuity and quality of care by enabling more frequent and consistent contact with healthcare providers, even under specialist supervision for local treatment.3

Provider Benefits:

For healthcare providers, telehealth offers numerous operational and professional advantages. It reduces the need for travel, cutting down on associated expenses and time away from their primary practice locations.3 This leads to a higher patient reach, as geographical and travel barriers are minimized, allowing practitioners to serve a broader population.3 Clinics often report a significant reduction in patient "no-shows," which improves efficiency and ensures more consistent patient engagement.3 Telehealth also provides opportunities for real-time assistance with complex cases and emergencies through inter-clinician consultations. Furthermore, it allows for improved allocation of consulting rooms within a practice, especially where space is limited, and offers staff the flexibility to work remotely. From a professional development standpoint, telehealth facilitates informal knowledge transfer through increased collaboration, networking, and case conferencing opportunities among healthcare professionals.3

Practice Manager Benefits:

Practice managers also reap considerable benefits from telehealth integration. It opens avenues for service delivery growth, expanding the practice's capacity and reach.3 Telehealth streamlines clinical workflows and enhances practice efficiency through time savings, leading to more cost-effective service delivery via higher patient flow. Moreover, it significantly improves the coordination of care and service integration across different healthcare settings and specialties, contributing to a more cohesive and patient-centric healthcare system.3

## **Regulatory Framework and Policy Landscape**

### **Evolution of Telehealth Policy in Australia**

The policy landscape for telehealth in Australia has undergone a rapid and significant transformation, largely catalyzed by the COVID-19 pandemic. Prior to March 2020, telehealth services were available but limited in scope and Medicare subsidization. The urgent need to ensure continuity of care while minimizing infection risk during the pandemic led the Australian Government to rapidly expand Medicare-subsidized telehealth services to the entire population.2 This swift implementation, described as "10 years of reform in only 10 days," introduced 281 temporary Medicare Benefits Schedule (MBS) items for telehealth between March and May 2020.8

Recognizing the immense benefits and widespread adoption, many of these temporary services were made a permanent feature of Medicare from 1 January 2022, with 211 telehealth items retained permanently.2 This decision marked a "most significant structural reform to Medicare since it began," solidifying telehealth's role in the national healthcare system.8 A central tenet of Medicare telehealth policy is the "established clinical relationship," which generally requires a patient to have had a face-to-face consultation with their general practitioner (GP) or another GP in the same practice within the 12 months prior to the telehealth service.2 This requirement aims to balance accessibility with the importance of continuity of care, ensuring that telehealth complements, rather than entirely replaces, ongoing patient-provider relationships.

However, the policy has evolved to include limited exceptions to this rule. For instance, patients under 12 months old are exempt from the established clinical relationship requirement.9 Furthermore, mental health telehealth items and blood-borne virus and sexual reproductive health items have been made permanent and continue to operate outside of this rule, ensuring vital support remains accessible without prior in-person visits.10 Notably, some temporary exemptions, such as those for non-directive pregnancy counselling, were removed from 1 July 2024, indicating an ongoing refinement of policy to optimize telehealth utilization.10

The MyMedicare program is also playing an increasingly significant role in shaping the future of telehealth access and benefits. Registration with MyMedicare can unlock access to longer telehealth consultations, particularly phone consultations, and provides increased bulk billing incentives for longer telehealth consultations for children, pensioners, and concession card holders who are registered with the program.10 This strategic integration underscores the government's commitment to leveraging digital health initiatives to enhance patient access and support primary care.

### **Key Legislation and Guidelines**

The provision of telehealth services in Australia operates within a robust legal and ethical framework, drawing primarily from existing healthcare laws and professional guidelines rather than specific telehealth-only legislation.9 This approach ensures that the standard of care in a virtual setting mirrors that of an in-person consultation.11

Privacy and Data Protection:

The cornerstone of privacy in Australian healthcare, including telehealth, is the Privacy Act 1988 (Cth) and its associated Australian Privacy Principles (APPs).1 This federal legislation, complemented by state and territory laws like the

*Health Records and Information Privacy Act 2002 (NSW)*, provides a higher degree of protection for sensitive health information due to its inherent nature and potential for misuse.1 Telehealth service providers are explicitly recognized as "health service providers" under the Privacy Act and must adhere to strict obligations regarding the collection, use, and disclosure of patient data.9

Crucially, health information can generally only be collected by lawful and fair means, and typically requires the patient's express or implied consent, provided the information is reasonably necessary for delivering the health service.9 Exceptions exist, such as preventing a serious threat to life or public health.9 Secure transmission of patient information is paramount, necessitating the use of encrypted communication tools that meet Australian standards to prevent unauthorized access and data breaches.12 Furthermore, the

*Telecommunications (Interception and Access) Act 1979 (Cth)* makes it an offense to intercept private telecommunications without consent, meaning all participants in a recorded telehealth conversation must provide express consent for such recording.9 For cross-border data transfers, strict compliance with APP 8 of the Privacy Act is required, ensuring that overseas recipients provide comparable protection for health information, or that explicit patient consent is obtained.9 Telehealth businesses are also obligated to clearly state their privacy policies, including any international data transfers.9

Professional Guidelines:

The Medical Board of Australia (MBA) provides comprehensive guidelines for doctors conducting telehealth consultations, emphasizing responsible and safe use.11 While supporting telehealth as a means to improve access, the MBA stresses that it is not appropriate for all consultations and should not be considered a routine substitute for in-person visits.11 The Board generally prefers video consultations over telephone calls when practical and considers telehealth most appropriate within a continuing clinical relationship that also involves in-person consultations.11 However, it acknowledges the important role of one-off telehealth consultations, particularly for episodic or emergency care in rural and remote settings.11

Doctors are expected to adhere to the *Good Medical Practice: A Code of Conduct for Doctors in Australia* regardless of the consultation modality, ensuring the standard of care in a telehealth consultation is safe and, as far as possible, meets the same standards as an in-person consultation.11 Key requirements for practitioners include:

* Conducting consultations from a quiet, distraction-free space that ensures privacy.11
* Clearly identifying themselves, their specialty, and their role to the patient, especially for new patients.11
* Confirming the identity of the patient and any other persons present.11
* Ensuring the patient understands the telehealth process and is comfortable with the technology.11
* Applying usual principles for informed consent, protecting privacy, confidentiality, and providing culturally safe care.11
* Continuously assessing the appropriateness of telehealth for the consultation and arranging in-person visits if necessary.11
* Accepting responsibility for evaluating all information used in assessment and treatment, regardless of its source.11
* Ensuring patients are aware of arrangements for receiving referrals, prescriptions, and test requests.11
* Maintaining detailed records, including the type of technology used, any technical issues, and consent for digital recording or My Health Record uploads.11  
    
  Crucially, the MBA explicitly states that prescribing or providing healthcare via questionnaire-based asynchronous web-based tools, without a real-time patient-doctor consultation (in-person, video, or telephone), is not considered good medical practice.9 This measure aims to close the gap between some online prescribing business models and established good medical practice, emphasizing that clinical judgment requires direct interaction.18

Digital Health Standards:

The Australian Digital Health Agency (ADHA) plays a central role in establishing and overseeing digital health standards to ensure safe, seamless, and secure healthcare delivery.1 The

*Digital Health Procurement Guidelines* outline critical requirements for telehealth systems and technologies. These include the ability to discover and validate Individual Healthcare Identifiers (IHI) via the Healthcare Identifier (HI) Service and integrate them into local patient records.1 Systems must also support the storage of Healthcare Provider Identifier-Organisation (HPI-O) details and adhere to the Patient Australian Core Data for Interoperability (AUCDI).1

Furthermore, telehealth software should support the authoring and consumption of clinical documents in Fast Healthcare Interoperability Resources (FHIR®) formats, a key standard for interoperability.1 Adherence to the National Safety and Quality Health Service (NSQHS) Standards is mandated, particularly concerning informed consent, partnering with consumers, communicating for safety, comprehensive care, and clinical governance.1 These standards ensure that digital health solutions, including telehealth, contribute to a high-quality and safe healthcare environment. The ADHA's

*National Digital Health Strategy* aims to ensure that by 2022, all healthcare providers can contribute to and use health information in My Health Record and communicate with other professionals and patients via secure digital channels, moving away from paper-based correspondence.20

## **Medicare and Private Health Insurance Coverage**

### **Medicare Benefits Schedule (MBS) for Telehealth**

The Medicare Benefits Schedule (MBS) for telehealth services in Australia has been permanently integrated, providing a wide array of telephone and video consultations that mirror the clinical requirements and benefits of their face-to-face counterparts.21 While video services are generally preferred for substituting in-person consultations due to their richer interactive capabilities, phone services remain available where clinically appropriate or when video is not feasible.13 It is important to note that MBS telehealth attendance items typically cannot be claimed for services provided to admitted hospital or hospital-in-the-home patients, with some specific exceptions for psychiatry items.21 Email consultations are not covered by MBS telehealth items.21

A broad range of healthcare professionals can provide MBS-funded telehealth services. These include general practitioners (GPs), specialists and consultant physicians, allied health providers (such as psychologists, physiotherapists, occupational therapists, and social workers), mental health professionals, nurse practitioners, participating midwives, and Aboriginal and Torres Strait Islander health practitioners.2 This extensive coverage ensures that diverse healthcare needs can be met remotely.

The MBS outlines specific item numbers for various telehealth services, categorized by the type of care and the health professional providing it. Below is a summary of key MBS telehealth item categories:

| Service Category | Eligible Professionals | Examples of Video/Phone Items |
| --- | --- | --- |
| **Chronic Disease Management (CDM)** | GPs, Prescribed Medical Practitioners | GP Management Plan (Video: 92024), Team Care Arrangements (Video: 92025) 21 |
| **Better Access (Mental Health)** | GPs, Prescribed Medical Practitioners, Clinical Psychologists, Psychologists, Occupational Therapists, Social Workers | Prepare GP MHTP (Video: 92112-92113), Focused Psychological Strategies (Video: 91818-91819, Phone: 91842-91843), Family/Carer Participation (Video: 91859-91861, Phone: 91864-91865) 21 |
| **Eating Disorder Treatment** | GPs, Medical Practitioners, Psychiatrists, Paediatricians, Dietitians, Clinical Psychologists, Psychologists, Occupational Therapists, Social Workers | Prepare Plan (Video: 92146-92147), Psychological Treatment (Video: 93076, Phone: 93110) 21 |
| **Complex Neurodevelopmental Disorders & Disabilities** | Paediatricians, Psychiatrists, Specialists, GPs, Psychologists, Speech Pathologists, Occupational Therapists, Audiologists, Optometrists, Orthoptists, Physiotherapists | Assessment/Diagnosis (Video: 92140), Allied Health Assessment (Video: 93032, Phone: 93040) 21 |
| **In-patient Psychiatry** | Consultant Psychiatrists | Attendance >45 mins (Video: 92483) 21 |
| **Practice Nurses** | Practice Nurses (can be claimed under supervising GP) | Antenatal Service (Video: 91850, Phone: 91855), Chronic Condition Management (Video: 93201, Phone: 93203) 21 |
| **Participating Midwives** | Participating Midwives (can be claimed under supervising GP) | Antenatal/Postnatal Services (Video: 91211-91212, Phone: 91218-91219) 21 |
| **Nurse Practitioners** | Nurse Practitioners | Attendance <20 mins (Video: 91178, Phone: 91189) 21 |
| **Aboriginal & Torres Strait Islander Health Practitioners/Workers** | Health Practitioners/Workers (can be claimed under supervising GP) | Telehealth Support (Video: 10983), Follow-up Service (Video: 93200, Phone: 93202) 21 |

Note: This table provides a summary; full details and specific item numbers are available on the MBS Online website.21

Bulk Billing:

Bulk billing allows patients to receive medical services without any out-of-pocket costs, as the healthcare provider directly bills Medicare and accepts the Medicare benefit as full payment.23 To be bulk billed for a telehealth service, a patient must be enrolled in Medicare, and the health professional must choose to bulk bill.23 Many GPs and specialists offer bulk-billed telehealth services, and individuals with concession or healthcare cards are often eligible for bulk-billed services.23

A key condition for bulk-billed GP telehealth services is the "established clinical relationship," meaning the patient must have had a face-to-face consultation with their regular doctor or another doctor in the same practice within the preceding 12 months.2 While this rule aims to ensure continuity of care, certain exceptions exist, such as for patients under 12 months old, or for specific mental health and sexual health services.9 The MyMedicare program further supports bulk billing for telehealth, offering increased incentives for longer consultations for registered children, pensioners, and concession card holders.10 Patients are advised to confirm bulk billing availability with their provider when booking an appointment.23

### **Private Health Insurance Coverage**

Beyond Medicare, private health insurance increasingly plays a role in covering telehealth services in Australia, particularly for services that fall outside the scope of MBS subsidies.13 Prior to the COVID-19 pandemic, private health insurers generally did not reimburse claims for remotely delivered healthcare services. However, the pandemic significantly accelerated the acceptance and coverage of telehealth by private funds.13

Major private health insurers like Bupa and Medibank now offer various telehealth-related benefits. Bupa, for instance, provides a range of telephone-based health coaching programs delivered by their in-house team of qualified nurses and dietitians.25 These programs, such as the Bupa Health Coaching Program (for chronic conditions like diabetes), Pre-Admission and Recovery Support Program, The COACH® Program (for cardiovascular events), Dietitian Health Coaching Service, and Hip and Knee Support Line, are available to eligible Bupa customers with active Hospital Cover at no additional cost, though patients are responsible for ancillary costs like phone or internet usage.25 Eligibility typically requires the member to be aged 18 or older, hold domestic Bupa Hospital Cover, and be able to speak English and converse on the phone, with specific program eligibility criteria also applying.25

Medibank also allows eligible extras members to claim benefits on selected telehealth services, including psychology, physiotherapy, and dietetics.26 The benefits paid for telehealth consultations are generally the same as those for face-to-face consultations, but they are subject to annual limits, waiting periods, and fund rules.26 It is important to note that benefits for dental and orthodontic treatments are typically only paid for in-person services.26 Patients are encouraged to check their specific cover summary and confirm with their provider about payment options and claim procedures before booking a telehealth appointment.26 This evolving landscape indicates a growing recognition by private insurers of telehealth's value in providing accessible and effective care.

## **Electronic Prescriptions and Digital Referrals**

### **Electronic Prescriptions (e-scripts)**

Electronic prescriptions, or e-scripts, represent a significant advancement in Australia's digital health infrastructure, offering a secure and convenient alternative to traditional paper prescriptions.27 This system has been legalized nationally by the Australian Government for Pharmaceutical Benefits Scheme (PBS) medicines, with individual states and territories also adapting their legal frameworks to enable e-prescribing within their jurisdictions.27

Legal & Technical Framework:

The Australian Digital Health Agency (ADHA) is instrumental in developing and maintaining the technical framework that underpins e-prescribing. This framework ensures that clinical software systems can securely create, transmit, and store electronic prescriptions while upholding consumer choice of prescriber and pharmacy, adhering to strict privacy and security principles, and aligning with relevant legislation.27 When a prescriber generates an e-script using conformant medical software, a unique electronic token, typically in the form of a QR code, is created and sent to the patient via SMS or email.27 This token serves as a key to "unlock" the legal prescription at the pharmacy, rather than being the legal prescription itself.30 The system is designed with safeguards to meet specific technical and security standards, ensuring the legal validity, security, and compliance of electronic prescriptions with Australian regulations.30

Exceptions & Requirements:

Electronic prescriptions share the same legal requirements as paper prescriptions, but with certain practical exceptions designed to streamline the process. Prescribers of conformant e-scripts are exempt from the need to handwrite or hand-sign the prescription, underline or initial dangerous/unusual doses, or, for Schedule 8 (S8) medicines, write the quantity in both words and figures.30 Similarly, pharmacists dispensing conformant e-scripts are exempted from endorsing the date of dispensing, pharmacy address, prescription reference number in ink, or keeping S4B and S8 prescriptions in hardcopy.30 These exemptions are possible because conformant systems securely record and retain these details, making them easily searchable.30

However, specific requirements apply, particularly for S8 medicines in NSW. Pharmacists must ensure the on-screen display shows repeat intervals for S4B and S8 medicines; if not, only a single supply can be dispensed, and the prescription must be electronically cancelled.30 For S8 psychostimulants and pharmacist-compounded S8 medicines, the NSW Ministry of Health approval number must be displayed.30 Pharmacists are also required to verify the patient's and/or prescriber's identity for S8 prescriptions, and if forgery is suspected, the prescription should not be dispensed and must be reported to Pharmaceutical Services and the Digital Health Agency.30

Active Script List (ASL):

The Active Script List (ASL) is a digital list that consolidates a consumer's active electronic prescriptions and computer-generated paper prescriptions.27 This feature is particularly beneficial for patients managing multiple medications, as it eliminates the need to track individual tokens.28 Once registered for an ASL with a participating pharmacy, new electronic prescriptions are automatically added to the list. Patients can then simply walk into their preferred pharmacy, provide consent for staff to access their ASL, and have their medicines dispensed directly from the digital list.28 Consumers retain control over which prescriptions are sent to their ASL and which prescribers and pharmacists can view it.27

Consumer Benefits:

From a consumer perspective, e-scripts offer significant advantages. They provide unparalleled convenience by eliminating the need to carry paper prescriptions, thereby reducing the risk of loss.28 This is especially beneficial for frequent travelers. The digital format streamlines the dispensing process, saving time and enhancing medicine safety.28 A notable benefit is the ability to delegate collection: if a patient cannot physically attend the pharmacy, they can securely forward their electronic prescription token to a family member, carer, or friend to collect medication on their behalf.28 For repeat prescriptions, the pharmacy issues a new token via SMS or email, simplifying subsequent refills.28 In cases of accidental loss or deletion, tokens can be easily resent by contacting the prescriber for original scripts or the issuing pharmacy for repeats.28 As of early 2025, over 23.5 million Australians (more than 90% of the population) have a My Health Record, which can be used to access e-prescriptions and ASL, demonstrating widespread adoption and engagement with digital health tools.28

### **Digital Referrals and Secure Communication**

The secure exchange of health information, including digital referrals, is a critical component of modern Australian healthcare. Given the sensitive nature of health data and the stringent privacy laws, robust measures are essential to ensure compliant and confidential communication.14 Non-compliance with these regulations can lead to severe penalties and significantly erode patient trust.14

Importance of Secure Communication:

The Privacy Act 1988 and other relevant frameworks mandate that healthcare providers handle personal health information responsibly and securely.14 This includes obtaining explicit patient consent before collecting, using, or disclosing any personal health information, and clearly communicating how their data will be managed.14 Secure transmission is paramount to prevent unauthorized access, requiring the use of encrypted communication tools that adhere to Australian standards for safeguarding health information throughout its transmission.14

National Digital Health Strategy:

Australia's National Digital Health Strategy, "Safe, seamless and secure: evolving health and care to meet the needs of modern Australia," explicitly addresses the need for secure communication channels.20 A key strategic priority was to ensure that by 2022, every healthcare provider and patient would have the ability to communicate via secure digital channels, effectively eliminating reliance on outdated methods like paper correspondence, fax machines, or postal services.20 The benefits of this digital transformation are far-reaching, encompassing improved safety, enhanced quality of care, reduced healthcare costs, and strengthened continuity and coordination of care. This also supports the development of new methods for diagnosis and specialist referrals, fostering a more integrated and efficient healthcare ecosystem.20 The strategy acknowledges that while electronic communication methods were established, a lack of nationally consistent, standards-based approaches had limited effective interoperability, leading to communication breakdowns and disjointed patient experiences.20 The ADHA is taking a national leadership role to achieve interoperability through the development and management of specifications and standards.20

Best Practices for Secure Communication:

To maintain secure digital communication in healthcare, several best practices are critical:

1. **Adopt Encrypted Messaging Platforms:** Healthcare providers must select communication platforms that offer end-to-end encryption, specifically designed for the Australian healthcare industry. This ensures that only the intended sender and recipient can access sensitive patient information, complying with legal requirements for data protection.14
2. **Train and Educate Staff:** Regular and ongoing training for all staff is essential to foster a culture of privacy and security awareness. Healthcare professionals must be proficient in privacy regulations and the correct use of secure messaging tools to mitigate emerging threats.14
3. **Implement Access Controls:** Robust access controls, such as role-based permissions, password protection, two-factor authentication (MFA), and activity logging, are fundamental. These measures ensure that only authorized personnel can access sensitive patient information within practice management and clinical systems.14
4. **Conduct Regular Audits:** Frequent and thorough security audits of communication systems and protocols are vital for identifying vulnerabilities and ensuring ongoing compliance. Penetration testing can simulate real-world attacks, allowing weaknesses to be patched proactively.14
5. **Stay Informed and Compliant:** Given the dynamic nature of privacy laws and healthcare regulations, organizations must continuously monitor legislative changes and update their policies and practices accordingly. This proactive approach helps maintain compliance and reduces legal risks.14

By adhering to these practices, healthcare providers can not only meet legal obligations but also build and maintain patient trust, which is foundational to high-quality virtual care.14

## **Practicalities of a Telehealth Appointment**

### **Technology Requirements and Troubleshooting**

Successful telehealth appointments rely on adequate technology and a suitable environment. Patients and providers must ensure their setup supports a seamless and private consultation.

Essential Equipment:

For a video telehealth consultation, the basic requirements include a computer or laptop equipped with a connected webcam or an inbuilt camera. A headset, or alternatively, speakers and an inbuilt microphone on the device, are necessary for clear audio communication. Crucially, a stable and good internet connection is indispensable. A minimum internet speed of 384 kilobits per second (kbs) for both 'download' and 'upload' is recommended to ensure adequate connectivity for video calls.31 If internet speeds fall below this threshold, patients should contact their health service provider to arrange alternative consultation methods.31

Optimizing Environment:

The physical environment during a telehealth consultation is as important as the technology itself. Both patients and providers should choose a quiet, well-lit room that is free from distractions.11 It is advisable to avoid sitting directly in front of windows, as backlighting can obscure facial features and make it difficult for the other party to see clearly.31 Most importantly, the chosen space must ensure privacy, preventing others not involved in the patient's care from hearing any audio or viewing the consultation on screen.11 This commitment to privacy is a fundamental aspect of maintaining confidentiality in virtual care.12

Troubleshooting Common Issues:

Despite careful preparation, technical issues can arise. Common troubleshooting steps include restarting the device or, if an application is used, uninstalling and reinstalling it.31 If the health professional cannot hear the patient, checking that the microphone is not muted and the volume is sufficiently high is often the solution.31 Conversely, if the patient cannot hear the health professional, ensuring the speaker volume on their device is turned up is the first step.31 For persistent technical issues, patients can often find detailed step-by-step instructions on their health service provider's website or contact their service for direct technical support.31 Healthcare providers are also expected to have processes in place to continue or reschedule consultations if technology fails.11

Barriers to Adoption:

Despite the benefits, several barriers can hinder telehealth adoption. These include:

* **Ethical Barriers:** Concerns about data privacy and confidentiality, especially given the sensitive nature of health records, can deter some individuals. Employing robust cybersecurity measures like data encryption and obtaining informed consent for each consultation are crucial to address these fears.32
* **Economical Barriers:** The perceived cost of investing in telehealth infrastructure, such as broadband and equipment, and training personnel, can be a concern, particularly in low-resource settings. These costs can be mitigated by selecting appropriate delivery methods (e.g., SMS instead of video if suitable) and leveraging widely available devices like smartphones.32
* **Regulatory Barriers:** While Australia has a clear framework, variations in regulations or licensing requirements across regions can pose challenges.32 Ensuring compliance with data privacy laws is paramount for patient safety.32
* **Socio-cultural Barriers:** Resistance to change, particularly among older clinicians and patients, and concerns about the perceived lack of personal contact, can impede adoption. Limited digital literacy and internet access, especially in rural areas, also remain significant challenges that require increased awareness and education to mitigate.32

### **Preparing for Your Telehealth Consultation**

Effective preparation is key to a productive telehealth consultation, ensuring both patient and provider can maximize the benefits of the virtual interaction.

Confirming Identity & Consent:

At the outset of a telehealth consultation, the healthcare provider is responsible for confirming their own identity and specialty, as well as the identity of the patient and any other persons present.11 This is particularly important for new patients to establish trust and clarity.11 The provider must also ensure the patient understands the process involved in the telehealth consultation and is comfortable using the technology, especially if it is their first virtual experience.11 Informed consent is a critical aspect; patients must be fully aware of and consent to any digital recording of the consultation or the uploading of their information to digital health infrastructure like My Health Record.11 This aligns with fundamental patient rights to privacy and confidentiality.11

Information Sharing:

Patients should be made aware of the arrangements for collecting or receiving important documentation, such as referrals, prescriptions, examination requests, and test results.11 This ensures a seamless continuation of care beyond the virtual appointment. Healthcare providers must also be aware of and comply with state, territory, and jurisdictional legislative requirements when prescribing medicines, including using government real-time prescription monitoring services and My Health Record, and ensuring their contact details are available on prescriptions for dispensing pharmacists.11

Environment & Support:

Patients are encouraged to be mindful of their surroundings during the consultation to maintain privacy, being aware of who might be able to hear or view the session.11 Telehealth consultations also allow for the presence of support persons, which may include family members, friends, other health practitioners, carers, or interpreter services. This facilitates comprehensive care and ensures patients feel supported and understood, particularly for those with additional needs or language barriers.11

### **Patient Rights and Responsibilities**

Patients engaging in telehealth consultations in Australia are afforded a comprehensive set of rights, coupled with important responsibilities that contribute to safe and effective care. These rights are protected by the Australian Charter of Healthcare Rights, ensuring a patient-centered approach to healthcare delivery.37

Patient Rights:

Patients have the right to:

* **Access:** Receive high-quality healthcare treatments and services that meet their needs, consistent with Australian national standards.37
* **Safety:** Be cared for in a safe clinical environment, whether in-person or virtual.38
* **Respect:** Be treated as an individual, with dignity and respect, and have their culture, identity, beliefs, and choices recognized.37
* **Communication:** Engage in open and honest communication with their healthcare provider, asking questions and receiving clear information about their condition, treatment options, services, and costs in an understandable manner.37 This includes being informed about potential benefits and risks to give informed consent.37
* **Participation:** Be involved in shared decision-making about their healthcare to the extent they choose, and to include support people in planning and decision-making.37
* **Privacy:** Have their personal privacy respected and their health information kept secure and confidential, with limited legal exceptions.37
* **Feedback:** Provide feedback or make a complaint without affecting the way they are treated, with concerns addressed transparently and in a timely manner.37
* **Additional Support:** Access interpreter services where English is not their first language.37
* **Choice:** Decline or refuse treatment and services offered.37
* **Information Access:** Access their health records according to the law, provided written consent is given.37
* **Second Opinion:** Seek a second opinion if desired.37
* **Open Disclosure:** Be informed if something has gone wrong during their healthcare journey, including how it happened, its potential impact, and corrective actions.38

Patient Responsibilities:

Alongside these rights, patients also hold responsibilities that foster a collaborative and effective healthcare relationship:

* **Honest Communication:** Inform all healthcare team members of their expectations and provide accurate, up-to-date information about their health, current treatments, symptoms, medications, and allergies.37
* **Understanding Care Plan:** Understand the details of their care plan prior to treatment and ask questions if unsure.37
* **Appointment Adherence:** Attend scheduled appointments, as these are crucial for their care, and provide adequate advance notice for cancellations or rescheduling.37
* **Respectful Interactions:** Treat all healthcare staff and other patients with kindness, dignity, and consideration.37
* **Financial Responsibility:** Read and understand information provided about appointment and treatment costs, and be responsible for these costs, particularly in private clinics.37
* **Confidentiality:** Respect the confidentiality and privacy of others, particularly in shared virtual spaces.38

This balance of rights and responsibilities ensures that telehealth consultations are conducted safely, ethically, and effectively, promoting optimal patient outcomes and a positive healthcare experience.

## **When is Telehealth Appropriate?**

Telehealth offers a versatile mode of healthcare delivery, but its appropriateness depends heavily on the clinical context and patient needs. While it has proven highly effective for many conditions, it is not a universal substitute for in-person care.

### **Conditions Best Suited for Telehealth**

Telehealth is particularly well-suited for a wide range of medical conditions and services where a physical examination is not strictly necessary, or where remote monitoring and discussion suffice.1 This includes:

* **General Practice Consultations:** Routine check-ups, especially for stable chronic conditions like high blood pressure or diabetes, where patients have access to monitoring equipment.4
* **Specialist Consultations:** Many specialist consultations, ranging from psychiatry to certain surgical follow-ups, can be effectively conducted via telehealth, particularly if the patient lives far from the specialist or the condition is stable.2
* **Allied Health Services:** Psychology, physiotherapy, chiropractic, podiatry, and dietetics consultations are frequently delivered via telehealth, especially for counseling, rehabilitation post-injury, or advice on diet and physical activity.2
* **Mental Health Services:** Telehealth has significantly expanded access to mental health support, including mental health assessments, treatment plans, and focused psychological strategies, addressing the increasing demand for virtual counseling and psychiatric consultations.2
* **Administrative Reasons:** Issuing repeat prescriptions for long-standing conditions, re-issuing sick notes, and writing referral letters are common and highly efficient uses of telehealth.4
* **Remote Patient Monitoring (RPM):** This involves monitoring patient health and clinical information from a distance, allowing practitioners to check physiological parameters and intervene as needed. Examples include tracking blood glucose for diabetes or blood pressure for hypertension, often facilitated by connected wearable devices.3
* **Store-and-Forward:** The transmission of images or information from one healthcare provider to another for later review, such as pathology or radiology results, is another effective application.3
* **Clinical Advice, Education, and Training:** Telehealth is valuable for providing general health advice, patient education, and professional development or case conferencing among clinicians.3
* **Specific Patient Populations:** Telehealth has proven particularly beneficial for residential aged care patients, reducing infection risk and increasing access to GPs during normal clinic hours.44 It also offers a safe and convenient alternative for patients who are unwell or need to self-isolate, reducing the spread of illness.3

### **When Physical Consultation is Essential**

Despite its broad utility, telehealth is not appropriate for all medical consultations and should not be considered a routine substitute for in-person visits.11 Face-to-face consultations remain the preferred standard of care in many scenarios, offering greater opportunities for comprehensive investigations and often being more beneficial for both patients and providers.7

Physical consultation is essential in situations that require:

* **Physical Examination:** Conditions where a doctor needs to conduct a physical examination, such as listening to the heart or lungs, palpating the abdomen, assessing a joint or limb, taking temperature, or performing internal examinations (e.g., gynecological exams).4
* **High-Risk Conditions:** Assessing patients with high-risk conditions or those who may have a serious illness, such as chest pain or severe shortness of breath, where immediate physical assessment is critical.41
* **Procedures:** Any medical procedures, including excising skin lesions, taking swabs or smears, injections, or inserting contraceptive devices, inherently require an in-person setting.40
* **Changing Medical Conditions:** When a patient's medical condition is rapidly changing, or a description or photo alone is insufficient for accurate assessment, an in-person visit is necessary.40
* **Communication Barriers:** Telehealth may not be suitable for patients who are confused, not competent to communicate effectively over the phone or video, or who have significant hearing or speech issues that impede clear virtual communication.41 Patients who are anxious or nervous and prefer a face-to-face interaction should also be accommodated.41
* **Establishing a New Patient-Doctor Relationship:** While the Medical Board of Australia allows a patient to consult a doctor for the first time using telehealth and for new scripts to be issued as part of a telehealth consultation, it strongly cautions against prescribing or providing healthcare where a patient has never had a real-time direct consultation (in-person, video, or telephone) with that doctor.18 The Board explicitly states that asynchronous, questionnaire-based "tick-box" prescribing without a real-time consultation is not good medical practice, as it undermines a doctor's ability to exercise safe clinical judgment without direct interaction and access to comprehensive medical records.18

In summary, while telehealth significantly enhances accessibility and convenience, healthcare providers are expected to continuously assess its clinical appropriateness and facilitate access to in-person care when necessary.11

## **Choosing a Telehealth Provider**

Selecting a telehealth provider requires careful consideration to ensure safe, effective, and compliant healthcare. Patients should prioritize trust, safety, and the provider's adherence to professional and legal standards.46

### **Verifying Doctor Registration and Credentials**

A fundamental step in choosing a telehealth provider is verifying the registration and credentials of the healthcare professionals involved. In Australia, all registered health practitioners must have a current registration with the Australian Health Practitioner Regulation Agency (AHPRA).15 AHPRA registration signifies that the practitioner has met all the necessary requirements to practice medicine in Australia, including appropriate education, training, and adherence to professional standards.47

Patients can immediately check a doctor's registration status online using the AHPRA Registers of Practitioners.47 By searching for the practitioner's name or registration number, individuals can confirm their registration and view any conditions or limitations on their practice.50 It is important to be aware that some practitioners may use different names for registration than those they are commonly known by, so it may be necessary to confirm the registered name with the practitioner or their health service.50 If a practitioner's name does not appear on the public register or if there are questions about the details shown, AHPRA can be contacted for a confidential conversation.50 This verification process is crucial for ensuring that the care received is from a legitimately qualified and regulated professional.

### **Ensuring Platform Security and Privacy**

The security and privacy of personal health information are paramount in telehealth. Patients entrust their sensitive medical data to digital platforms, making robust security measures non-negotiable.16

Key security practices for telehealth platforms include:

* **End-to-End Encryption:** This ensures that patient information is secure both when stored (at rest) and when communicated (in transit), preventing unauthorized access.16
* **Multi-Factor Authentication (MFA):** MFA adds an extra layer of security beyond traditional passwords, significantly reducing the risk of unauthorized access due to weak or compromised credentials.16
* **Regular Security Audits:** Frequent and thorough security audits, including penetration testing, help identify vulnerabilities and compliance gaps proactively, allowing weaknesses to be patched before they can be exploited.16
* **Secure Data Storage:** Platforms must ensure that data storage complies with relevant privacy regulations, such as the *Privacy Act 1988* (Cth) and state-specific legislation like the *Health Records and Information Privacy Act* (NSW).1 This often involves using secure, compliant cloud services with robust access controls and data segregation.16
* **Clear Privacy Policies:** Reputable telehealth providers will have transparent and easily accessible privacy policies that clearly outline how patient data is collected, used, stored, and disclosed.16

Patients are advised to take personal steps to enhance their privacy during consultations, such as choosing a quiet room where they will not be disturbed and being aware of their surroundings to prevent others from hearing or viewing the consultation.11 They should also confirm consent if the consultation is digitally recorded or if information is uploaded to digital health infrastructure.11 The psychological aspect of trust is deeply tied to security; when patients feel confident that their data is protected, they are more likely to engage openly and share comprehensive health information, leading to better health outcomes and fostering long-term relationships with providers.16

### **Red Flags and What to Avoid**

When choosing a telehealth provider, patients should be vigilant for certain "red flags" that may indicate substandard or potentially fraudulent practices. Avoiding these can protect patient safety and financial interests.

Key red flags and what to avoid include:

* **Overlapping Appointments or Billing Irregularities:** Be wary of providers who appear to schedule or bill for multiple patients simultaneously (e.g., two appointments at the same time). This is a significant warning sign that at least one appointment may not have occurred or failed to meet the required standard of care. Such practices can lead to false claims and regulatory issues.51 Patients should ensure that billing codes used for virtual services are compliant with Medicare and private payer rules, as incorrect coding can result in denied claims or audits.51
* **Asynchronous "Tick-Box" Prescribing Without Consultation:** A major concern is the practice of prescribing medication based solely on a questionnaire or "tick-box" system, without any real-time direct consultation (in-person, video, or telephone) between the patient and the doctor.18 The Medical Board of Australia explicitly states that this is not good medical practice, as it prevents a doctor from exercising proper clinical judgment based on a full patient history and direct interaction.18 Patients should avoid services that offer prescriptions without this crucial real-time engagement.
* **Lack of Transparency:** Some direct-to-consumer (DTC) telehealth services may lack transparency regarding their operational models, including how they ensure quality and safety, manage risks, or integrate care with a patient's regular GP or health record.45 While many DTC services aim for positive outcomes, the commercial nature of some, particularly those owned by large corporations, can raise questions about prioritizing profits over patient care.45 Patients should seek providers who are transparent about their processes and limitations.
* **Absence of an Established Clinical Relationship (for Medicare Subsidies):** For Medicare-subsidized GP telehealth services, an "established clinical relationship" (a face-to-face consultation within the last 12 months with the same GP or practice) is generally required.9 While exceptions exist for specific services like mental health, patients should be cautious if a provider promises bulk-billed GP telehealth without meeting this general criterion, as it may lead to unexpected out-of-pocket costs.

Choosing a reputable telehealth provider involves diligence in verifying credentials, understanding platform security, and recognizing practices that deviate from established standards of care.

## **The Future of Telehealth in Australia**

Telehealth in Australia is not merely a temporary measure but a dynamic and evolving component of the healthcare system, poised for significant growth and further integration, driven by technological innovation and ongoing policy development.

### **Emerging Technologies and Innovations**

The future of telehealth will be profoundly shaped by advancements in various technologies:

* **Artificial Intelligence (AI) and Machine Learning (ML):** AI-powered large language models (LLMs) are already enhancing telehealth offerings. They can automate triage and symptom checking, preparing reports in consistent language and directing patients to appropriate services, thereby freeing clinicians from time-consuming data gathering.52 LLMs are also increasingly used to generate draft clinical notes, reducing administrative burden and improving patient transitions between providers.52 In mental health, supervised LLMs can deliver cognitive behavioral therapy exercises and collect mood data between sessions, expanding access to support in areas with limited specialist availability.52 Furthermore, AI technology is being trialed to monitor patients' vital signs remotely during standard telehealth appointments by analyzing facial features from video images, with potential for measuring heart rate, blood pressure, oxygen, pain, and anxiety levels without additional devices.53
* **Wearable Devices and Remote Patient Monitoring (RPM):** The integration of wearable devices and RPM solutions is transforming chronic disease management and post-hospital care. Devices like smartwatches, pulse oximeters, blood pressure monitors, and glucose meters allow for real-time tracking of vital signs and physiological parameters.34 Partnerships between telehealth solutions (e.g., Coviu) and medical device distributors (e.g., Propell Health with iHealth devices) enable clinicians to view real-time measurements during video calls, identifying and prioritizing at-risk patients for timely interventions.55 This continuous monitoring provides patients with comfort and allows for informed decisions on escalating care.55
* **5G Networks and Blockchain:** The rollout of 5G networks is critical for improving telehealth quality by enabling seamless video consultations, real-time data transmission, and enhanced remote diagnostics due to its high performance and reliability.16 While connectivity costs remain a barrier for some Australian firms, the recognition of 5G's potential for innovation in AI and IoT is strong.56 Blockchain technology is also emerging as a solution to enhance data privacy, security, and interoperability in telemedicine applications, further fortifying patient data protection.16
* **Virtual Reality (VR) and Augmented Reality (AR):** These immersive technologies are creating new opportunities for rehabilitation and training in allied health. VR and AR can provide interactive experiences and realistic simulations, enhancing patient engagement and motivation in therapy programs.54

### **Policy Outlook and Market Trends**

Telehealth is now a permanent and integral component of Australia's healthcare system, a status solidified by the government's decision to retain many MBS telehealth items introduced during the pandemic.2 This permanent integration is considered a "most significant structural reform to Medicare".8 The policy landscape will continue to evolve, balancing the need for accessibility with the importance of continuity and quality of care.7 The ongoing refinements to the "established clinical relationship" rule and the increasing role of programs like MyMedicare highlight this adaptive approach.10

The Australian telehealth market is projected for substantial growth. Forecasts indicate a compound annual growth rate (CAGR) of 18.6% for the telemedicine market and 28% for the broader telehealth market from 2025 to 2030, with projected revenues reaching USD 14,511.6 million and USD 21,834.9 million by 2030, respectively.57 The Australian telehealth market size reached approximately AUD 1498.63 million in 2024 and is projected to grow to nearly AUD 6961.13 million by 2034, at a CAGR of 16.60%.59

Key drivers of this growth include:

* **Increasing Adoption of Digital Healthcare Solutions:** The widespread use of digital platforms, mobile health apps, and wearable devices is fueling demand.34
* **Rising Prevalence of Chronic Diseases:** The need for continuous monitoring and follow-up care for chronic conditions necessitates greater telehealth adoption.34
* **Government Support and Favorable Regulations:** Ongoing government investments and supportive policies continue to promote virtual healthcare services.34
* **Shortage of Healthcare Professionals:** Telemedicine helps manage patient loads, particularly in rural and underserved areas, by addressing the global shortage of medical professionals.34
* **COVID-19 Pandemic Acceleration:** The pandemic significantly accelerated telehealth adoption, establishing it as a widely accepted mode of care.34

However, challenges persist, including regulatory and licensing barriers across different regions, limited digital literacy and internet access in certain populations, ongoing data privacy and cybersecurity concerns, and inconsistencies in reimbursement and insurance coverage.34 Addressing these challenges will be crucial for sustained growth and equitable access.

### **Impact on Patient Experience and Healthcare Delivery**

The integration of telehealth has had a largely positive impact on patient experience and the overall delivery of healthcare in Australia.

* **Patient Satisfaction:** Studies indicate high levels of patient satisfaction with telehealth. For instance, an ABS survey found that 89.2% of people who had a telehealth appointment would use the services again if offered.4 Another study revealed that 69% of respondents were satisfied with their telehealth consultation, and 60% would choose to continue using telehealth in the future.60 The majority of participants (87%) felt they received the information required, and 71% agreed the outcome was the same as a face-to-face consultation.60 While some experienced technical difficulties (17.4%), the overwhelming sentiment was positive, with 79% saving significant time.60
* **Effectiveness:** Research suggests that telehealth can be as effective as face-to-face care for managing known conditions in known patients.7 It has proven particularly valuable for chronic disease management, enabling easier and more effective regular check-ins, which can lead to better adherence to care plans and potentially improved long-term health outcomes, such as better blood pressure control and fewer hospital visits.5 Telehealth has also led to a significant uptake of mental health consultations, with an 11% increase in allied mental health consultations observed between April and December 2020.6
* **Addressing Disparities:** Telehealth has been instrumental in improving access to healthcare for vulnerable groups and those in rural and remote settings, where traditional access is often challenging.6 For instance, by November 2020, approximately ten million healthcare services had been delivered to regional, rural, and remote areas since March 2020.6 However, challenges remain for people from non-English speaking backgrounds and those with limited access to or proficiency with technology, highlighting the need for continued efforts to ensure equitable access for all Australians.6
* **Continuity of Care:** Telehealth facilitates continuity of care by allowing patients to maintain regular contact with their healthcare professionals even when physical access is difficult.4 This reduces fragmentation of care that can occur when patients need to see different doctors due to travel or other barriers, ensuring their medical history and understanding are maintained within a consistent care team.6

## **Conclusion**

Telehealth has firmly established itself as an indispensable and transformative element of Australia's healthcare system. Driven by the accelerated adoption during the COVID-19 pandemic and subsequently cemented by permanent Medicare funding, it has significantly expanded access to medical services, particularly benefiting individuals in rural and remote areas and those with mobility limitations. The convenience, flexibility, and reduced waiting times offered by telehealth have garnered high patient satisfaction, while providers benefit from increased patient reach and improved workflow efficiencies.

The robust regulatory framework, underpinned by the *Privacy Act 1988* and detailed professional guidelines from bodies like the Medical Board of Australia, ensures that telehealth services maintain the same high standards of safety, quality, and privacy as in-person consultations. The ongoing evolution of policies, including the "established clinical relationship" rule and the development of programs like MyMedicare, reflects a considered approach to balancing accessibility with continuity of care.

Innovations in electronic prescribing, digital referrals, and secure communication platforms are streamlining administrative processes and enhancing information exchange across the healthcare ecosystem. The integration of emerging technologies such as AI for diagnostics and mental health support, wearable devices for remote patient monitoring, and advancements in 5G networks and blockchain for data security, points to a future where telehealth becomes even more sophisticated and integrated into daily healthcare practice.

While telehealth offers immense opportunities, its continued success hinges on addressing persistent challenges, including ensuring equitable digital literacy and internet access, mitigating cybersecurity risks, and refining reimbursement models. The Australian experience demonstrates that telehealth is not merely a temporary solution but a permanent, evolving pillar of healthcare delivery, poised for substantial growth and further innovation, ultimately contributing to a more accessible, efficient, and patient-centered health system for all Australians.

#### **Works cited**

1. Telehealth Services - Australian Digital Health Agency, accessed on June 30, 2025, <https://www.digitalhealth.gov.au/healthcare-providers/initiatives-and-programs/digital-health-standards/digital-health-standards-guidelines/get-started/5-standards-for-systems-and-technologies/telehealth-services>
2. Telehealth | Australian Government Department of Health, Disability ..., accessed on June 30, 2025, <https://www.health.gov.au/topics/health-technologies-and-digital-health/about/telehealth>
3. Telehealth for healthcare providers - Australian Digital Health Agency, accessed on June 30, 2025, <https://www.digitalhealth.gov.au/healthcare-providers/initiatives-and-programs/telehealth>
4. How Online Doctor Consultations Are Improving Healthcare in Australia - Phenix Health, accessed on June 30, 2025, <https://phenixhealth.com.au/how-online-doctor-consultations-are-improving-healthcare-in-australia/>
5. 8 Surprising Benefits of Telehealth: Why More Australians Are Choosing Online Doctors, accessed on June 30, 2025, <https://phenixhealth.com.au/8-surprising-benefits-of-telehealth-why-more-australians-are-choosing-online-doctors/>
6. The importance of telehealth in healthcare practice | GHE Australia, accessed on June 30, 2025, <https://globalhealtheducation.com/au/resources/importance-of-telehealth-in-healthcare>
7. MBS Review Advisory Committee: Telehealth Post-Implementation Review Final Report - Department of Health and Aged Care, accessed on June 30, 2025, <https://www.health.gov.au/sites/default/files/2024-06/mbs-review-advisory-committee-telehealth-post-implementation-review-final-report.pdf>
8. Expansion of Telehealth Services | Australian National Audit Office (ANAO), accessed on June 30, 2025, <https://www.anao.gov.au/work/performance-audit/expansion-telehealth-services>
9. Is the use of telehealth permitted? in Australia - DLA Piper Intelligence, accessed on June 30, 2025, <https://www.dlapiperintelligence.com/telehealth/countries/australia/01-availability-of-telehealth.html>
10. Navigating Telehealth in 2025: Understanding Medicare Changes and Bulk billing options, accessed on June 30, 2025, <https://teldoc.com.au/bulk-billing-health-blog/navigating-telehealth-in-2025-understanding-medicare-changes-and-bulk-billing-options/>
11. Guidelines: Telehealth consultations with patients - Medical Board of Australia, accessed on June 30, 2025, <https://www.medicalboard.gov.au/Codes-Guidelines-Policies/Telehealth-consultations-with-patients.aspx>
12. Privacy & the Use of Telehealth Platforms - MEDirect, accessed on June 30, 2025, <https://medirect.com.au/wp-content/uploads/2019/07/Telehealth-Video-Consultation-security-privacy.pdf>
13. Does the public health system include telehealth services, and if so, are such services free of charge, subsidised or reimbursed? Where the public health system does not include telehealth services, are such services covered by private health insurance? in Australia - DLA Piper Telehealth Around the World - DLA Piper Intelligence, accessed on June 30, 2025, <https://www.dlapiperintelligence.com/telehealth/countries/index.html?t=04-costs-of-telehealth&c=AU>
14. 5 Best Practices for Secure Communication in Australian Healthcare, accessed on June 30, 2025, <https://www.referralnet.com.au/2025/secure-healthcare-comms-australia>
15. IBA Healthcare and Life Sciences Law Committee Telemedicine Survey – AUSTRALIA, accessed on June 30, 2025, <https://www.ibanet.org/document?id=Healthcare-Telemedicine-Survey-Australia>
16. Telehealth Security: Essential Patient Trust & Data Protection Guide - Appinventiv, accessed on June 30, 2025, <https://appinventiv.com/blog/telehealth-security-for-patient-trust/>
17. How to Deliver Safe, Effective Health Services via Telehealth - Perceptive Health Blog, accessed on June 30, 2025, <https://www.perceptivehealth.com.au/blog/how-to-deliver-safe-effective-health-services-via-telehealth.html>
18. Revised telehealth guidelines raise standards, protect patients - Medical Board of Australia, accessed on June 30, 2025, <https://www.medicalboard.gov.au/News/2023-05-31-Revised-telehealth-guidelines.aspx>
19. Revised telehealth guidelines now in effect - Australian Health Practitioner Regulation Agency, accessed on June 30, 2025, <https://www.ahpra.gov.au/sitecore/content/Medical/News/2023-09-01-Revised-telehealth-guidelines-now-in-effect.aspx>
20. Australia's National Digital Health Strategy - Safe, seamless and ..., accessed on June 30, 2025, <https://www.digitalhealth.gov.au/sites/default/files/2020-11/Australia%27s%20National%20Digital%20Health%20Strategy%20-%20Safe%2C%20seamless%20and%20secure.pdf>
21. Telehealth billing codes for MBS items - Health professionals ..., accessed on June 30, 2025, <https://www.servicesaustralia.gov.au/telehealth-billing-codes-for-mbs-items?context=20>
22. MBS Telehealth Services, accessed on June 30, 2025, <https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-Telehealth-Updates-April%202023>
23. Bulk billing - Medicare - Services Australia, accessed on June 30, 2025, <https://www.servicesaustralia.gov.au/bulk-billing?context=60092>
24. Telehealth - Australian Digital Health Agency, accessed on June 30, 2025, <https://www.digitalhealth.gov.au/initiatives-and-programs/telehealth>
25. Bupa Telehealth, accessed on June 30, 2025, <https://www.bupa.com.au/telehealth>
26. Medibank Telehealth Services, accessed on June 30, 2025, <https://www.medibank.com.au/health-support/hospital-assist/covid19/telehealth-services/>
27. Electronic prescribing | Australian Government Department of Health ..., accessed on June 30, 2025, <https://www.health.gov.au/our-work/electronic-prescribing>
28. Australian Digital Health Project | Electronic prescriptions & active ..., accessed on June 30, 2025, <https://www.parkinsons.org.au/information-hub/australian-digital-health-project/adha-e-script/>
29. Electronic Prescriptions - Digital Health - Capital Health Network, accessed on June 30, 2025, <https://www.chnact.org.au/for-health-professionals/digital-health-2/electronic-prescriptions/>
30. Electronic prescribing - NSW Health - NSW Government, accessed on June 30, 2025, <https://www.health.nsw.gov.au/pharmaceutical/Pages/electronic-prescribing.aspx>
31. Telehealth Consumer user guide – for computers and laptops - WA Health, accessed on June 30, 2025, <https://www.health.wa.gov.au/-/media/Files/HealthyWA/New/Telehealth/telehealth-consumer-user-guide-computers-v3.pdf>
32. Barriers to Telehealth - Physiopedia, accessed on June 30, 2025, <https://www.physio-pedia.com/Barriers_to_Telehealth>
33. Barriers to the up-take of telemedicine in Australia - a view from providers, accessed on June 30, 2025, <https://www.rrh.org.au/journal/article/1581/>
34. Australia Telemedicine Market Size and Forecasts 2030 - Mobility Foresights, accessed on June 30, 2025, <https://mobilityforesights.com/product/australia-telemedicine-market>
35. Telehealth use in Australian primary healthcare during COVID- 19: a cross- sectional descriptive survey | BMJ Open, accessed on June 30, 2025, <https://bmjopen.bmj.com/content/bmjopen/13/1/e065478.full.pdf>
36. Information for practitioners who provide virtual care - Ahpra, accessed on June 30, 2025, <https://www.ahpra.gov.au/Resources/Information-for-practitioners-who-provide-virtual-care.aspx>
37. Patients Rights and Responsibilities - Women's Health Melbourne, accessed on June 30, 2025, <https://www.womenshealthmelbourne.com.au/patients-rights-and-responsibilities>
38. Your rights and responsibilities as a patient - Healthy WA, accessed on June 30, 2025, <https://healthywa.wa.gov.au/Articles/F_I/Going-to-hospital/Your-rights-and-responsibilities-as-a-patient>
39. Patient and carer rights in hospital | Better Health Channel, accessed on June 30, 2025, <https://www.betterhealth.vic.gov.au/health/servicesandsupport/patient-and-carer-rights-in-hospital>
40. Types of Consultations - Patients Australia - Australian Patients Association, accessed on June 30, 2025, <https://www.patients.org.au/types-of-consultations/>
41. How to conduct a telehealth consultation - GPSA, accessed on June 30, 2025, <https://gpsa.org.au/wp-content/uploads/2024/04/FAQ_telehealth_how-to-conduct_V7.pdf>
42. Telehealth Clinical Practice Guide | Optometry Australia, accessed on June 30, 2025, <https://www.optometry.org.au/wp-content/uploads/Professional_support/Guidelines/OPT003_Telehealth-Clinical-Practice-Guide_210520.pdf>
43. Digital health - Australian Institute of Health and Welfare, accessed on June 30, 2025, <https://www.aihw.gov.au/reports/australias-health/digital-health>
44. General practice perspective on the use of telehealth during the COVID-19 pandemic in Australia using an Action Research approach: a qualitative study | BMJ Open, accessed on June 30, 2025, <https://bmjopen.bmj.com/content/12/10/e063179>
45. The rise of direct‐to‐consumer telemedicine services in Australia: implications for primary care and future research, accessed on June 30, 2025, <https://www.mja.com.au/journal/2023/219/8/rise-direct-consumer-telemedicine-services-australia-implications-primary-care>
46. Choosing the Right Telehealth Service in Australia - Medmate, accessed on June 30, 2025, <https://medmate.com.au/news/choosing-the-right-telehealth-service-in-australia/>
47. medcertificates.com.au, accessed on June 30, 2025, <https://medcertificates.com.au/articles/how-to-tell-if-a-medical-certificate-is-genuine/#:~:text=You%20can%20verify%20a%20doctor's,and%20adherence%20to%20professional%20standards.>
48. Are your doctors registered in Australia? - Doctors On Demand, accessed on June 30, 2025, <https://www.doctorsondemand.com.au/faqs/about-doctors-on-demand/are-your-doctors-registered-in-australia/>
49. www.ahpra.gov.au, accessed on June 30, 2025, <https://www.ahpra.gov.au/News/Check-your-registration-status-online.aspx#:~:text=You%20can%20immediately%20check%20your,practitioner%20name%20for%20more%20information.>
50. Register of practitioners - Australian Health Practitioner Regulation Agency, accessed on June 30, 2025, <https://www.ahpra.gov.au/registration/registers-of-practitioners.aspx>
51. 10 Telehealth Fraud Red Flags (and How to Avoid Them) - Health Law Alliance, accessed on June 30, 2025, <https://www.healthlawalliance.com/blog/10-telehealth-fraud-red-flags-and-how-to-avoid-them>
52. The digital doctor will see you now: AI large language models expanding telehealth offerings - King & Wood Mallesons Pulse, accessed on June 30, 2025, <https://pulse.kwm.com/global/the-digital-doctor-will-see-you-now-ai-large-language-models-expanding-telehealth-offerings/>
53. Using AI to enhance remote patient care | NSW Government, accessed on June 30, 2025, <https://www.nsw.gov.au/departments-and-agencies/nbmlhd/news/stories/ai-enhances-remote-patient-care>
54. Influence of emerging technologies on Allied Health jobs today - CC Medical, accessed on June 30, 2025, <https://www.ccjobs.com.au/blog/emerging-technologies-in-allied-health-jobs>
55. Integrated remote patient monitoring solution - Coviu, accessed on June 30, 2025, <https://www.coviu.com/en-au/blog/integrated-remote-patient-monitoring-solution>
56. Australian firms cite connectivity costs as barrier to 5G adoption - CFOtech Australia, accessed on June 30, 2025, <https://cfotech.com.au/story/australian-firms-cite-connectivity-costs-as-barrier-to-5g-adoption>
57. Australia Telemedicine Market Size & Outlook, 2024-2030 - Grand View Research, accessed on June 30, 2025, <https://www.grandviewresearch.com/horizon/outlook/telemedicine-market/australia>
58. Australia Telehealth Market Size & Outlook, 2024-2030, accessed on June 30, 2025, <https://www.grandviewresearch.com/horizon/outlook/telehealth-market/australia>
59. Australia Telehealth Market Size, Growth & Share Report | 2025-2034, accessed on June 30, 2025, <https://www.expertmarketresearch.com.au/reports/australia-telehealth-market>
60. (PDF) Patient use, experience and satisfaction with telehealth in an Australian population: The Reimagining Healthcare Survey (Preprint) - ResearchGate, accessed on June 30, 2025, <https://www.researchgate.net/publication/370394928_Patient_use_experience_and_satisfaction_with_telehealth_in_an_Australian_population_The_Reimagining_Healthcare_Survey_Preprint>