



Australian Government
Department of Health and Ageing

FACT SHEET

Better Access to Psychiatrists, Psychologists and General Practitioners through the Medicare Benefits Schedule (Better Access) initiative

NEW MEDICARE ITEMS FOR GP MENTAL HEALTH TREATMENT PLANS: 2011-12 BUDGET MEASURE

Background to the Budget Measure

The 2011-12 Budget included the introduction of new time-tiered Medicare items for the preparation of a GP Mental Health Treatment Plan and changes to Medicare rebates.

An outline of this budget measure was provided in a previous Fact Sheet circulated in May 2011, which can be found at:

<http://www.health.gov.au/internet/budget/publishing.nsf/Content/budget2011-factsheet02.htm>

This Fact Sheet contains more detailed information on the Medicare items for GP Mental Health Treatment Plans including the new item numbers, the Schedule Fees and Frequently Asked Questions.

Key Points:

From 1 November 2011, Medicare items 2702 and 2710 for the preparation of a GP Mental Health Treatment Plan will be removed from the Medicare Benefits Schedule (MBS) and replaced with four new time-tiered items – 2700, 2701, 2715 and 2717.

GPs who have completed Mental Health Skills training accredited by the General Practice Mental Health Standards Collaboration (GPMHSC) and who previously claimed item 2710 will now claim item 2715 (for a consultation of between 20 and 39 minutes) or item 2717 (for a consultation of 40 minutes or more). The schedule fee for item 2715 is \$87.60 and item 2717 is \$129.00.

GPs who have not completed accredited Mental Health Skills training and who previously claimed item 2702 will now claim item 2700 (for a consultation of between 20 and 39 minutes) or item 2701 (for a consultation of 40 minutes or more). The schedule fee for item 2700 is \$69.00 and item 2701 is \$101.55.

There will also be changes to the Medicare Benefits Schedule fee structure for the GP Mental Health Review item 2712 and the GP Mental Health Consultation item 2713. From 1 November 2011, the rebate for both items 2712 and 2713 will be \$69.00.

Q: What are the requirements for the new GP Mental Health Treatment Plan items 2700, 2701, 2715 and 2717?

A: The requirements for the new GP Mental Health Treatment Plan items 2700, 2701, 2715 and 2717 are the same as they were for items 2702 and 2710, however the new items are time-tiered and GPs can decide which item to use depending on the time spent with the patient developing the Mental Health Treatment Plan.

In developing a Mental Health Treatment Plan under either item number 2700, 2701, 2715 or 2717 GPs are required to undertake a comprehensive assessment of the patient's mental health needs, and record that assessment and diagnosis in the Plan.

In order to claim the above items GPs must undertake this assessment of their patient and develop the Mental Health Treatment Plan themselves, in consultation with the patient.

GPs should refer to Explanatory Notes A.46 of the MBS online at www.mbsonline.gov.au for detailed information on the steps involved in preparing a GP Mental Health Treatment Plan.

Q: Can I still refer patients for allied mental health services under a GP Mental Health Treatment Plan that was in place prior to 1 November 2011 using items 2702 or 2710?

A: Yes, you are still able to refer patients for allied mental health services under item 2702 or 2710 providing the Mental Health Treatment Plan was in place prior to 1 November 2011. You do not have to complete another GP Mental Health Treatment Plan using one of the new items if you are already managing a patient's care needs under one of these earlier items.

Patients accessing Psychological Therapy services provided by clinical psychologists or Focussed Psychological Strategies services provided by GPs and allied mental health providers can still receive Medicare rebates for these services under former items 2702 and 2710 if these items are in place pre 1 November 2011.

For all new patients on or after 1 November 2011, GPs who have completed Mental Health Skills training and who previously claimed item 2710 will now claim item 2715 (for a consultation of between 20 and 39 minutes) or item 2717 (for a consultation of 40 minutes or more). GPs who have not completed accredited Mental Health Skills training and who previously claimed item 2702 will now claim item 2700 (for a consultation of between 20 and 39 minutes) or item 2701 (for a consultation of 40 minutes or more).

Q: What allied mental health services are patients entitled to receive a rebate for under the Better Access initiative?

A: Once a GP Mental Health Treatment Plan has been completed patients are eligible to be referred by their GP for services by:

- Clinical psychologists providing psychological therapy services; or
- Allied mental health professionals (psychologists, social workers or occupational therapists) providing focussed psychological strategies (FPS) services; or
- Appropriately trained GPs providing FPS services.

Prior to 31 October 2011, people receiving services under Better Access were able to access up to 12 individual services and/or up to 12 group services. In exceptional circumstances patients can access an additional six individual services prior to 31 October 2011. Exceptional circumstances are defined as a significant change in the patient's clinical condition or care circumstances which make it appropriate and necessary to increase the number of services. It is up to the referring practitioner to determine that the patient meets the requirements for exceptional circumstances.

From 1 November 2011 eligible people with a diagnosed mental disorder will be able to access rebates for up to 10 individual and/or up to 10 group allied mental health services per calendar year. As referred to above, patients are also eligible for up to 10 group services per calendar year.

Patients can be referred for an initial course of treatment (a maximum of six individual services in any one referral but maybe less depending on the referral and the patient's clinical need) to a maximum of 10 individual services per calendar year. As referred to above, patients are also eligible for up to 10 group services per calendar year.

For further information on allied mental health services, GPs can refer to the MBS Allied Health Schedule, available through the 'Downloads' page on MBS online at www.mbsonline.gov.au.

A new fact sheet on the changes to allied mental health services under the Better Access initiative is available at:
<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-ba>

Q: How often should I prepare a GP Mental Health Treatment Plan for a patient?

A: Many patients will not require a new Mental Health Treatment Plan after their initial plan has been prepared (this may be under item 2702 or 2710 prior to 1 November 2011 or under items 2700, 2701, 2715 or 2717 from 1 November 2011).

As is the case now, a new Mental Health Treatment Plan should not be prepared unless clinically required and generally not within 12 months of a previous Plan.

A rebate for the preparation of a Mental Health Treatment Plan will not be paid within 12 months of a previous claim for the patient or within three months following a claim for a GP Mental Health Review item 2712.

GPs should refer to Explanatory Notes A.46 of the MBS online at www.mbsonline.gov.au for detailed information on the claiming requirements for the GP Mental Health Treatment Plan Medicare items.

Q: How can I confirm that I am registered as having completed Mental Health Skills Training so I can claim items 2715 and 2717?

A: If you are unsure whether you have completed Mental Health Skills Training, you should contact the GPMHSC to check whether you have done so on telephone (03) 8699 0554/0556 or by emailing gpmhsc@racgp.org.au.

Q: If I am yet to complete Mental Health Skills Training, how can I find out what courses are available in my area?

A: There are a number of ways to find available Mental Health Skills Training courses. You could visit the GPMHSC's find training page at www.gpmhsc.org.au, or contact the GPMHSC on (03) 8699 0554/0556 or your College, local Division of General Practice or Medicare Local.

Further information

For more detailed information about MBS items descriptors and explanatory notes visit the Department of Health and Ageing's 'MBS Online' website at www.mbsonline.gov.au.

Information regarding eligibility, claiming and payment processes can be obtained from Medicare Australia on 132 150 (providers) or 132 011 (patients) or by visiting www.medicareaustralia.gov.au.

Information on the GP Mental Health Treatment Plan items and the allied mental health items is also available on the Department's website <http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-ba>

1 November 2011