



AHPA BRIEFING PAPER – SEPTEMBER 2007

## ***MEDICARE – IMPROVEMENTS NEEDED TO TACKLE CHRONIC DISEASE***

Allied Health Professions Australia (AHPA) urges the Federal Government to improve Medicare-funded access to allied health professionals for people with chronic conditions and complex care needs. There is clear evidence of the benefits of allied health interventions for chronic disease, both for patient wellbeing and reduced treatment costs.

AHPA believes changes to the Medical Benefits Scheme are needed to:

- **Improve the treatment for patients with chronic illness**
- **Make GP referrals to allied health professionals easier**
- **Increase allied health consultations where needed**
- **Increase the range of allied health services covered**
- **Introduce an evidence-based system for new Medicare items.**

### THE CURRENT SITUATION

Medicare currently provides rebates for allied health professional services under very restrictive conditions, for people with chronic conditions and complex care needs. AHPA believes that the next step in improving Medicare and tackling chronic disease – which can include diabetes, cardiac and respiratory problems, and a wide range of age and obesity-related conditions - is to make it easier for these patients to access the allied health services they need.

Currently a Medicare rebate is available for a maximum of five allied health consultations a year, for patients who are being managed by their GP under an Enhanced Primary Care (EPC) multidisciplinary care plan, or a GP Management Plan and a Team Care Arrangement<sup>1</sup>.

For people with chronic conditions and complex care needs, health and quality of life would be improved by greater Medicare-funded access to appropriate allied health services. AHPA also considers that an independent review system is needed to assess and recommend evidence-based treatments which should be covered by Medicare.

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<sup>1</sup> For details, see <http://www.health.gov.au/internet/wcms/publishing.nsf/Content/pcd-programs-epc-chronicdisease>

## MAKE GP REFERRALS TO ALLIED HEALTH PROFESSIONALS EASIER

AHPA believes that GPs should be free to approve allied health professional services for people with chronic conditions and complex care needs, on the basis of a GP Management Plan, without the requirement for Team Care Arrangements. Some patients do not need access to several different types of allied health services, but would benefit from access to one particular discipline, such as physiotherapy, podiatry, dietetics or psychology.

The change needed is for GPs to be able to make an EPC Program referral for allied health services under Medicare by just using Medicare Item 721 (GP Management Plan), without also having to use Medicare Item 723 (Team Care Arrangement) or using items 720, 722, 730 or 731 (EPC multidisciplinary care plan).

AHPA also believes that allied health professionals as well as GPs should be able to claim under Medicare for case management and case conferences to improve collaboration and reporting arrangements.

## INCREASE ALLIED HEALTH CONSULTATIONS WHERE NEEDED

Allied Health Professions Australia urges the Federal Government to replace the current limit of five Medicare-funded allied health visits a year by a 6 + 6 + 6 formula, as in the recently introduced COAG Mental Health *Better access to psychiatrists, psychologists and general practitioners through the Medicare Benefits Scheme* initiative.

Under this initiative, the GP or practitioner managing the patient can authorise up to six allied health services, followed (after a review) by a further six; and in exceptional circumstances can authorise an additional six, giving a total of up to 18 services per year.<sup>2</sup>

AHPA contends that people with chronic and complex conditions may have as much need for allied health support as people with mental illness, and that therefore the 6 + 6 + 6 formula should be adopted for EPC chronic disease management under Medicare.

## INCREASE THE RANGE OF ALLIED HEALTH SERVICES COVERED

- **Flexibility in service structure:**

Medicare currently has a 'one size fits all' approach to allied health services provided under the EPC Program. Regardless of what service is provided and by whom, there is one single scheduled fee – currently \$55.05 (for which the benefit payable is \$46.80).

AHPA contends that the current single price-structure for allied health services should be replaced by a 3-tier structure providing different levels of payment for different types of service. These would be:

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<sup>2</sup> For details, see <http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pcd-programs-amhpm>

- Initial consultation - 30 to 45 minutes (diagnostic assessment, preliminary treatment)
- Standard service – up to 30 minutes (this equates with the current scheduled fee)
- Extended service – 45 minutes and over.

There should also be a loading for out-of-room consultations.

These changes to the Medicare Allied Health items (10950 -10970) would provide greater flexibility in treatment options for patients, and more equitable returns to allied health professionals.

- **Eligible allied health service providers**

AHPA believes that the list of allied health professionals eligible to provide services under the Medicare Allied Health and Dental Care initiative should be expanded to include Prosthetists and Orthotists who are full members of the Australian Orthotic and Prosthetic Association. Orthotists and Prosthetists are university trained in the prescription, fitting and manufacture of orthoses and prostheses for all physical requirements, including those relating to the management of chronic disease.

## INTRODUCE AN EVIDENCE-BASED SYSTEM FOR NEW MEDICARE ITEMS

Allied Health Professions Australia contends that interventions by health professionals for which there is high-level evidence of effectiveness and cost-efficiency should be directly funded by Medicare. It urges the Federal Government to set up an Advisory Committee, similar to the Pharmaceutical Benefits Advisory Committee, to assess current items, recommend possible new Medicare items, and review who is eligible to deliver items, based on the clinical evidence for their effectiveness; and to review those items for which there is no evidence of effectiveness. This would enable a clear, independent process for reviews.

## ABOUT AHPA

Allied Health Professions Australia (formerly the Health Professions Council of Australia) is the national voice of the major health professions other than medical practitioners and nurses. Members of AHPA are national organisations representing specific professions, with membership across Australia in both urban and rural areas. Collectively, they represent more than 50,000 allied health professionals.

Current membership of AHPA represents: audiologists, dietitians, exercise physiologists, occupational therapists, orthoptists, orthotists and prosthetists, pharmacists, physiotherapists, podiatrists, psychologists, radiographers, radiation therapists, social workers, sonographers and speech pathologists.

More details about AHPA and its member organisations can be found at:  
[www.ahpa.com.au](http://www.ahpa.com.au)

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