



Medicare GP Mental Health Care items

Background

On 1 November 2006, GP Mental Health Care items became available on the Medicare Benefits Schedule (MBS). These items are improving access to mental health services provided by GPs and were developed in consultation with GP organisations.

The items provide a structured framework for GPs to undertake early intervention, assessment and management of patients with mental disorders, and provide referral pathways to clinical psychologists and other allied mental health service providers.

Overview of the items

There are three GP Mental Health Care items.

(1) Preparation of a GP Mental Health Care Plan (item 2710)

- Involves the assessment of a patient and preparation of a GP Mental Health Care Plan.
- Enables referral of patients to psychiatrists, and for psychological therapy by clinical psychologists or focussed psychological strategies (FPS) services by qualified GPs or allied mental health professionals.
- Recommended frequency is one plan per patient, with a new plan only being prepared when clinically required (generally not within 12 months of a previous plan), supported by continuing management through consultation and review services.

(2) Review of a GP Mental Health Care Plan (item 2712)

- Enables a review of the patient's progress against the goals in the GP Mental Health Care Plan.
- Recommended frequency is an initial review between four weeks and six months after the completion of the GP Mental Health Care Plan and, if required, a further review at least three months after the first review.

(3) GP Mental Health Care Consultation (item 2713)

- An extended consultation (at least 20 minutes) with a patient where the primary treating problem is related to a mental disorder.
- May be used for continuing management of a patient with a mental disorder, including for a patient being managed under a GP Mental Health Care Plan.

Access to mental health services

Patients who have a GP Mental Health Care Plan, or who are being managed by a GP under a referred psychiatrist assessment and management plan (item 291), have access to certain mental health service items on the MBS.



Eligible patients can claim up to 12 Medicare rebates per calendar year (provided in one or more groups of up to six sessions) for individual services provided by clinical psychologists, appropriately trained GPs and/or other allied mental health professionals. Patients may also be referred for FPS services under Access to Allied Psychological Services (ATAPS), available through Divisions of General Practice.

Eligible patients can also claim up to 12 rebates per calendar year for group services provided by clinical psychologists and/or other allied mental health professionals.

Referring patients

Referrals to eligible allied mental health professionals should include similar information as per normal GP referral arrangements, and GPs should specifically consider including both a statement identifying that a GP Mental Health Care Plan has been completed for the patient (including, where appropriate and with the patient's agreement, attaching a copy of the patient's GP Mental Health Care Plan) and clearly identifying the specific number of sessions the patient is being referred for. Referrals should be provided, as required, in one or more groups of up to six sessions.

Patients with pre-30 April 2007 3 Step Mental Health Process

Patients with mental health plans completed and reviewed before 30 April 2007 using the 3 Step Mental Health Process can receive ongoing management from their GP, as required, through the GP Mental Health Care Consultation item.

Mental health education and training for GPs

Although not mandatory, it is strongly recommended that GPs providing mental health care using the new GP Mental Health Care items have completed appropriate mental health training (in addition to normal medical training), such as training recognised through the General Practice Mental Health Standards Collaboration.

Appropriate mental health training can help GPs to further develop and improve their skills in diagnosing, treating and referring patients with mental disorders to appropriate services.

Further information

GPs should refer to the latest version of the Medicare Benefits Schedule Book for the full requirements for these items.

Information is also available at www.health.gov.au or by calling Medicare Australia on 132 150 (for GPs) or 132 011 (for patients).