



IMPROVING QUALITY IN AFTER HOURS GP SERVICES

The Australian Government is making changes to Medicare Benefit Schedule (MBS) funded urgent after-hours General Practitioner (GP) services to ensure quality after-hours care is available to all Australians.

We are taking steps to ensure that patients needing an after-hours doctor receive the best quality care under Medicare.

Twenty eight MBS items are available for urgent and non-urgent services provided after-hours, including those that take place in consultation rooms, at a patient's home and in residential aged care facilities. The majority of these are not changing.

The changes will affect **four urgent after-hours MBS items only**. These items are claimed most often for home visits and also have higher MBS fees than the non-urgent items.

What are the key changes?

Providing the right care at the right time

This change follows a comprehensive review of the after-hours sector, conducted by the Medicare Benefits Schedule (MBS) Review Taskforce, which recommended that access to urgent after-hours care should be used only when necessary and that funding should be appropriate to the level of care being provided.

The changes have been welcomed by the Australian Medical Association, the Royal Australian College of General Practitioners and the GP Deputising Association.

Government is committed to funding after-hours services

This measure supports the \$1 billion annually that the Australian Government invests in services and support for people seeking care in the after-hours period (in addition to hospital funding).

This includes funding for standard after-hours MBS items, Health direct, the after-hours GP helpline, and Primary Health Networks.

Better definition of the urgent after-hours assessment

Not all after-hours home visits are the same or are charged the same. Under the revised changes to descriptors of urgent after-hours services, doctors will now need to accurately assess and record the type of care a patient needs. This is to help make sure that when a patient books an after-hours appointment, the doctor properly assesses the patient's circumstances and decides the most appropriate care. This could be a hospital visit, an urgent after-hours home or clinic visit, a standard after-hours visit or advising the patient to see their regular GP the next day.

Changing the pre-booking rules for urgent after-hours services

The medical need for an urgent after-hours home visit cannot be anticipated well in advance. This is why proper assessment of the patient's circumstances is essential for providing quality patient care.

The changes will end the practice of pre-booking urgent after-hours home visits two hours before 6pm (when the after-hours GP home visit period starts).

This will help ensure a patient is properly assessed according to their personal circumstances.

There will also be limitations placed on inappropriate advertising of urgent after-hours GP services.

Adjusting the rebates for urgent after-hours item numbers

Under this measure, rebates will reflect the level of qualification of doctors.

GPs, doctors in regional and rural areas and all doctors who work late at night (between 11pm and 7am) will continue to receive the higher rebate. Non GPs will have their rebate adjusted in stages over coming years.

The measure also continues to provide support for vocationally registered GPs and GP registrars that are appropriately supervised who are skilled and qualified to provide comprehensive urgent after-hours care.

Why are these changes being made?

The changes follow a comprehensive review by the MBS Review Taskforce.

The Taskforce, comprised of clinicians and consumers, is providing independent advice to the Government.

The use of urgent after-hours items has increased by 157 per cent between 2010–11 and 2016–17. There is no clinical explanation for the large increase. Growth has been driven by a corporate model of largely advertising on the basis of convenience, rather than medical need.

The changes focus on ensuring that the urgent after-hours MBS items are used appropriately, maintain good patient outcomes and provide value for the healthcare system and taxpayer.

What does this mean for patients?

These changes will ensure that urgent after-hours GP services can be provided to patients in genuinely urgent situations by an appropriate doctor.

What does this mean for providers?

All GP services that operate after-hours will continue to be able to treat patients under Medicare using any of the 24 standard after-hours items.

Services provided in rural and remote areas also will not change, in recognition of the difficulty Australians in these areas can face in accessing after-hours care.

There are also no changes to urgent services provided between 11pm–7am.

Changes only apply to other medical practitioners working in metropolitan areas that bill urgent attendances in the 'sociable after-hours period'*.

The MBS Review Taskforce concluded that there is little evidence to support claims that these changes to urgent after-hours attendance items would impact on hospital emergency department attendances.

These changes will commence on 1 March 2018.

Further details on all the changes can be found on www.mbsonline.gov.au.

*Table illustrates the breakdown of medical attendance hours:

Attendance	Type of Attendance	Applicable time		
		Monday to Friday*	Saturday*	Sunday/and or public holiday
Standard attendance items	Standard attendance in consulting rooms	8am and 8pm	8am and 12 noon	N/A
Urgent after-hours items	Urgent attendance – sociable after-hours	7am – 8am 6pm – 11pm	Between 7am – 8am and 12 noon – 11pm	Between 7am – 11pm
	Urgent attendance – unsociable hours	Between 11pm – 7am	Between 11pm – 7am	Between 11pm – 7am
Non-urgent after-hours items	Non-urgent after hours at consulting rooms	Before 8am or after 8pm	Before 8am or after 1pm	All day
	Non-urgent after hours at a place other than consulting rooms	Before 8am or after 6pm	Before 8am or after 12 noon	All day