



# The Department of Health and Aged Care's role in identifying potential inappropriate practice

Information on the Department's role in identifying and intervening with practitioners and corporate entities where potential inappropriate practice is found.

## Our Role

We are responsible for ensuring the integrity of Australia's health payments system, including to ensure that claims against Medicare, the Child Dental Benefits Scheme (CDBS) and the Pharmaceutical Benefits Scheme (PBS) are made correctly and appropriately.

The *Health Insurance Act 1973* (HIA) and the *Human Services (Medicare) Act 1973* provide for audits and reviews of provider claiming to be conducted.

We identify potential non-compliance through routine monitoring of Medicare Benefits Schedule (MBS) and CDBS billing, and PBS prescribing practices. Cases may also arise from tip-offs about practitioner billing or prescribing.

Data of medical practitioners in Australia, who bill under Medicare, is analysed to identify practitioners who vary from their peers. Where the variance could be due to possible inappropriate practice, the Department may review a practitioner's servicing through the Practitioner Review Program (PRP).

The function of the PRP is to review Medicare servicing behaviour to determine whether a request should be made to the Director of Professional Services Review (Director) for review under the Professional Services Review (PSR) Scheme. Practitioners are only referred to the Director where concerns are unable to be resolved under the PRP.

## How we identify potential inappropriate practice

Concerns of possible inappropriate practice are commonly identified through monitoring individual practitioners' patterns of providing or initiating MBS and CDBS services and prescribing PBS items. Concerns of potential inappropriate practice are identified by a Departmental Professional Adviser who is a qualified health professional.

Data of medical practitioners in Australia, who bill under Medicare, is considered as part of the analysis to identify practitioners who are at variance to their peers. Other relevant information is also considered, such as a practitioner's location, patient profile/demographics, specialisation or special interests, additional training, clinical relevance, and other potentially relevant matters.



Where concerns that the practitioner may be engaging in inappropriate practice are unable to be resolved under the PRP, a delegate of the Chief Executive Medicare (delegate) may request the Director to review the practitioner's or corporate entity's provision of services. All relevant information, including all information provided by practitioners throughout the PRP process, is considered by the delegate prior to making the request the Director.

In determining the level of possible inappropriate practice, Professional Advisers and the delegate of the Chief Executive Medicare will consider factors such as:

- The degree of variance from peers in a range of parameters, such as total services, daily services, or the rendering or initiating of individual services. These practitioners will often be either among the highest renderers of services compared to peers or will vary from peers in their rendering or initiating of MBS items and/or PBS prescribing.
- Whether MBS/CDBS/PBS requirements have been met, including the item descriptors and PBS restrictions and authority requirements.
- Whether services were clinically relevant. A 'clinically relevant' service is one that is generally accepted by the relevant profession as necessary for the appropriate treatment of the patient.

## **Why preventing inappropriate practice is important**

Preventing inappropriate practice is crucial to maintaining the high quality and integrity of Australia's health care system and retaining patient confidence. Preventing inappropriate practice:

- protects patients and the community from the risks associated with inappropriate practice by ensuring clinically relevant and appropriate health care services are provided.
- ensures the sustainability of Medicare by protecting the Australian Government and the community from having to meet the cost of medical/health services provided because of inappropriate practice.