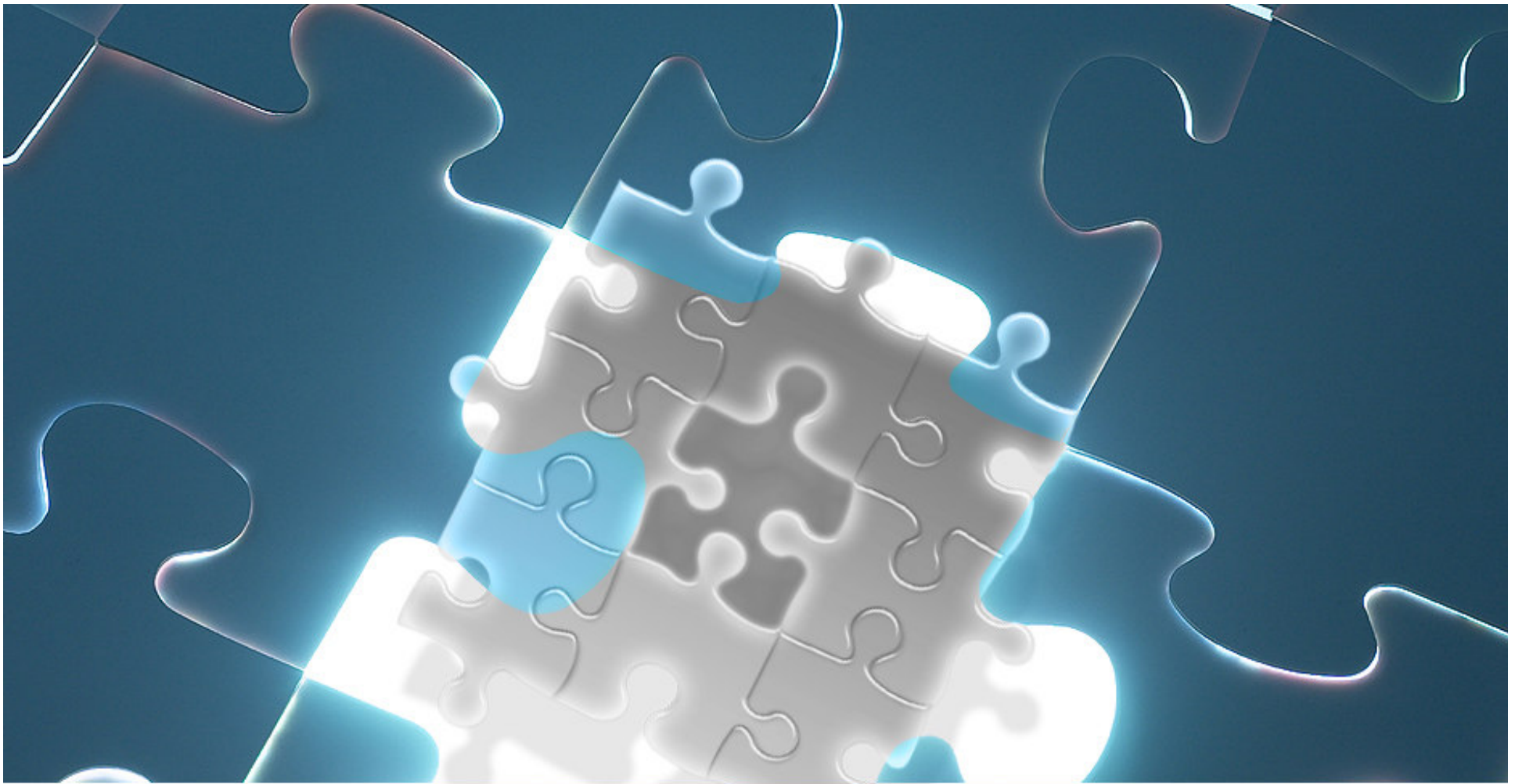


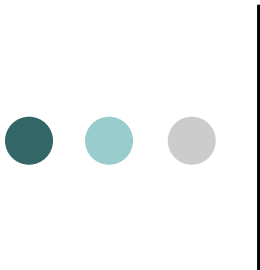


CDM items and Mental Health

Anne Diamond

GPDV





New CDM items

- From 1 July 2005 new items on the Medicare Benefits Schedule will make it easier for GPs to manage the health care of patients with chronic medical conditions, including patients needing multidisciplinary care.
- The new items replace existing EPC multidisciplinary care planning items which will be phased out and withdrawn from 1 November 2005



Brief overview

- Result of the Red Tape Taskforce Review
- New CDM items increase care planning options for GPs, expand patient eligibility and increase the assistance from practice nurses and others
- Open to all GPs not just BOIMH registered GPs



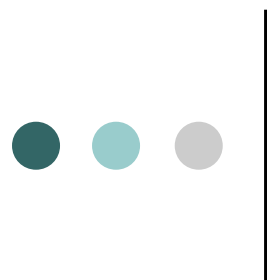
What's different? EPC MCP Items vs CDM Items

Medicare items for EPC Multidisciplinary Care Planning to be withdrawn on 1 November 2005:

- 720** Preparation of a care plan by a GP.
- 722** Preparation of a discharge care plan by a GP.
- 724** Review of a care plan by a GP.
- 726** Contribution by a GP to a plan or review by another provider.
- 728** Contribution by a GP to a discharge plan or review by another provider.
- 730** Contribution by a GP to a plan or review by another provider for residents of aged care facilities.

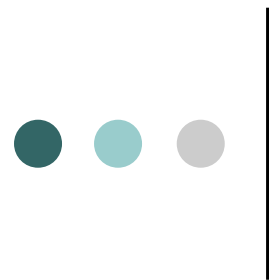
Medicare items for Chronic Disease Management introduced on 1 July 2005:

- 721** Preparation of a GP Management Plan by a GP (including on discharge for private patients).
- 723** Coordination of Team Care Arrangements by a GP (including on discharge for private patients).
- 725** Review of a GP Management Plan by a GP.
- 727** Coordination of a review of Team Care Arrangements by a GP.
- 729** Contribution by a GP to a plan or review prepared by another provider (including on discharge).
- 731** Contribution by a GP to a plan or review by another provider for residents of aged care facilities (including on discharge).



Overview of the changes

Plan	Criteria	Item	Fee	GP access	AH benefits
GPMP Review 12 mths	Chronic medical condition, 6 months One condition	721 725	\$120 \$60	All	
TCA Review 12 mths	Complex Multidisciplinary team	723 727	\$95 \$60	All	5 rebated services to \$44
3-step MH Process Review 6 mths	ICD-10 PCV disorders	2574- 2578	SIP \$150 C \$58.55 D \$86.20	BOIMH registered	AAPS 6+6 free sessions

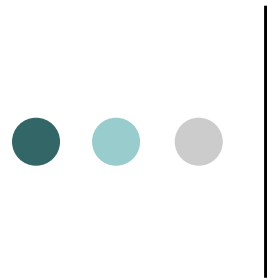


Allied Health Items?

- Patients can still access allied health items after their GP has completed and claimed both a GPMP and TCA or contributed to an aged care resident's care plan.
- Patients are still eligible for 5 Allied Health services a year.

When to apply –Scenario 1

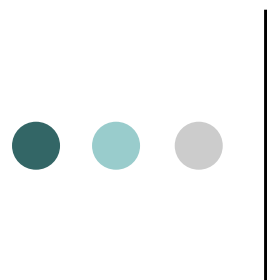
Plan	Criteria	Item	Fee	GP access	AH benefits
GPMP Review	Chronic medical condition, 6 months One condition only	721	\$120 \$60	All	N/A
OR (not both)					
3-step MH Process	ICD-10 PCV disorders	2574 - 2578	SIP \$150 C \$58.55 D \$86.20	BOIMH registered	AAPS 6+6 free sessions



When to apply –Scenario 2

Plan	Criteria	Item	Fee	GP access	AH benefits
GPMP AND	Chronic medical condition, 6 months (MH condition)	721	\$120	All	
TCA AND	Complex + comorbid conditions Multidisciplinary approach	723	\$95	All	5 rebated services to \$44
3-step MH Process	ICD-10 PCV disorders	2574 - 2578	SIP \$150 C \$58.55 D \$86.20	BOIMH registered	AAPS 6+6 free sessions

* SIP should not be claimed within 3 months of GPMP Review

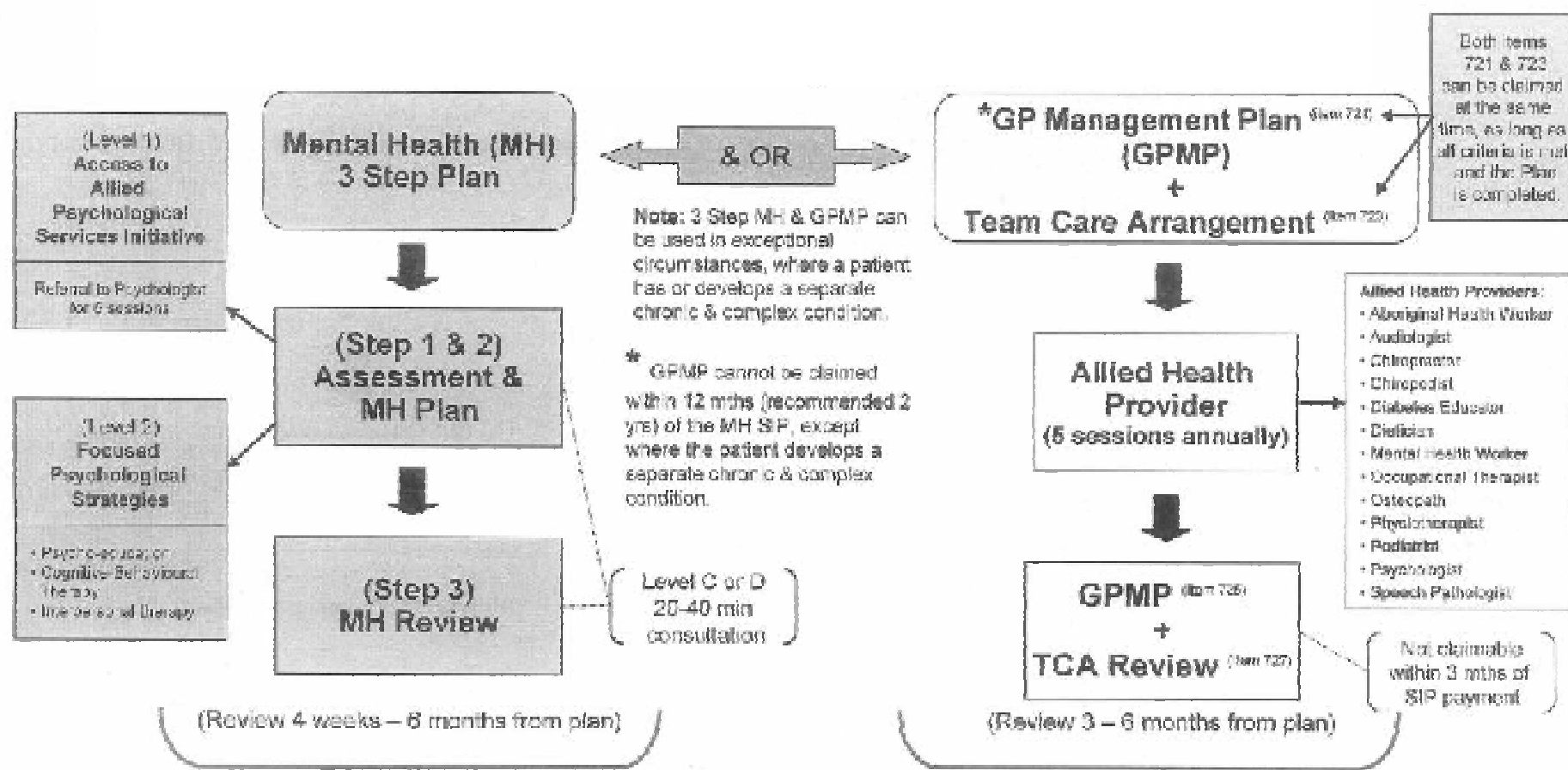


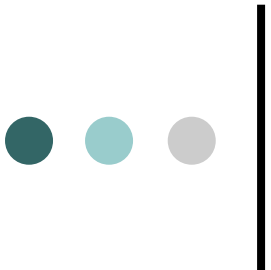
Summary

Condition	Item	Item	Review	GP access	AH benefits
Depression (Chronic)	GPMH Or 3-step MH	721 2574-2578	GPMH Review Or 3-step MH Review	All BOIMH	N/A Or AAPS 6+6 free sessions
Depression + Cardiovascular (complex + multidisciplinary)	GPMH + TCA + 3-step MH	721 723 2574-2578	GPMH Review + 3-step MH Review	BOIMH registered	5 rebated services + AAPS 6+6 free sessions

* SIP should not be claimed within 3 months of GPMH Review

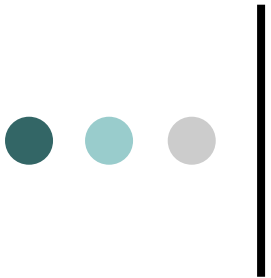
GPs Registered with HIC for the 3 Step Mental Health Process Service Incentive Payment (SIP)





AH Items and AAPS 6+6 sessions

- Q: Using a GPMP + TCA + 3-step MH Process, can a patient be referred under the AH items (5 rebated services) for psychological care?
- A: Yes, if the mental health condition is chronic and complex and different to the one the patient is referred via AAPS project, eg depression (AAPS) and eating disorder (AH items) = dietitian and psychologist



Comparison of CDM and 3-Step MH Process

	CDM Items	3-step MH Process
GP eligibility	All	BOIMH only
Services to patient	5 sessions of 20-30mins	12 sessions of 45-50mins
Rebate to patient	\$44	Free or low cost
Psychologists	HIC registered	Division brokered
Paperwork	Yes	Yes
Co-ordinate others	Yes, 2 others	No – referral to AH
Capped fee	No	\$10,000 cap on 3-step MH
Fee	GPMH – \$120 TCA – \$95 Review \$60 = \$275	SIP \$150 C \$58.55 D \$86.20



Resources

- www.health.gov.au/internet/wcms/publishing.nsf/Content/pcd-programs-epc-chronicdisease
- www.adgp.com.au