



## Introduction to general practice



## General practice business

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Module 3: June 2009

## Learning objectives

On completion of this module participants will have:

- an awareness of the diversity of the general practice environment
- an understanding of general practice financing and its impact on the practice nurse
- an understanding of Medicare, bulk billing, and other aspects of funding
- an appreciation of the role of the practice nurse in Enhanced Primary Care and Chronic Disease management
- knowledge of the role played by the practice nurse in contributing to enhancing quality and practice accreditation.

## General practice

- medical practice that offers primary, continuing, comprehensive, holistic care for individuals, families and communities
- prevent illness, identify risk, offer early intervention
- care for episodic illness and chronic disease and disability
- refer and coordinate care
- patient centred, accessible, comprehensive, continuous coordinated.

## General practice

The Royal Australian College of General Practitioners definition:

*“General practice is the provision of primary continuing comprehensive whole patient care to individuals, families and their communities”*

*“It involves the ability to take responsible action on any medical problem the patient presents, whether or not it forms part of an ongoing doctor patient relationship”*

*“In managing the patient the GP may make appropriate referral to other Doctors, health care professionals and community services”*

## General practice: gate keeper to health care

- 2006-2007 > 100 million visits to a GP billed to Medicare
- 85% visit a GP at least once a year
- \$11.7 billion paid in Medicare benefits in 2006-2007
- \$4226 spent per person on average.

## Figures about general practice

- in 2006-2007: 25256 non specialist medical practitioners (Medicare)
- practices small (solo): very large (many GPs)
- one or more principals (partners) plus associates
- corporates.

## Multidisciplinary practices

- general practitioners
- practice nurses
- practice managers
- receptionists
- allied health professionals
- links to community services
- Aboriginal health services
- super clinics.

## Medicare funding

Medicare is Australia's universal health care system introduced in 1984 to provide eligible Australian residents with affordable accessible and high quality health care.

- general taxation
- medicare levy
- medical, PBS, optometry, dental
- bulk billing of fee payment.

## Medicare benefits schedule (MBS)

- rate of benefit for services is at least 85% of the MBS Schedule fee for an item
- appointments normally four to six patients an hour but varies depending on need and is billed accordingly
- most GPs provide services on the basis of sessions which are three and a half hours.

## Classification of standard patient consultation attendances

Level	Definition
A MBS Item Number 3	These are for obvious and straightforward cases and records would reflect this. It requires a short patient history and limited examination and management or action taken. An example would be Triple Antigen or Tetanus Immunisation
B MBS Item Number 23	These consultations involve the taking of a selective history and implementation of a management plan in relation to one or more problems. Selective history relates to a specific problem or condition and implementation of a management plan includes deciding on a plan of management and any immediate action or treatment, ordering tests or referring the patient. Level B is the most commonest type of consultation. An example would be symptoms of an upper respiratory infection.
C MBS Item Number 36	Greater complexity is involved through the taking of a detailed history and examination of multiple systems. Physical attendance of at least 20 minutes is required. This is followed with arrangement of investigations and implementation of a management plan. An example would be essential hypertension presenting with headaches.
D MBS Item Number 44	This category covers those difficult problems where the diagnosis is elusive and highly complex requiring consideration of several possible differential diagnoses. Therefore, there is a need for a comprehensive history and examination of multiple systems, arranging investigations and development of a management plan. The duration is at least 40 minutes. Examples include: headaches with peripheral neurological signs, depression accompanied by insomnia or headaches and complex psychological or family relationship problems.

## Medicare benefits schedule (MBS)

The Medicare benefits schedule can be accessed online at:

- <http://www.health.gov.au/internet/mbsonline/publishing.nsf/Content/Medicare-Benefits-Schedule-MBS-1>

## General practice software packages

- there are a number of medical software packages available to general practice
- all the programs have the capacity to manage the accounting process, appointment systems and clinical patient records.

## Practice Incentives Program

The Practice Incentives Program (PIP) aims to recognise general practices that provide comprehensive, quality care, and that are accredited or working towards accreditation against the Royal Australian College of General Practitioners *Standards for General Practices*.

The PIP is part of a 'blended payment' approach to general practice funding. That is where payments made through the program are in addition to other income sources for GPs and the practice, such as patient fees and Medicare rebates.

- PIP payments are mainly dependent on practice size, which is based on patients seen, rather than on the number of consultations performed. A rural loading is also paid to practices in rural and remote locations.

## Practice nurse MBS item numbers

In 2004, the Australian government introduced MBS item numbers for practice nurses to provide a service on behalf of a GP.

## Medicare item numbers for practice nurses

Description	Item Numbers
Immunisation given by a nurse on behalf of GP	10993
Cervical smear and preventative checks provided by practice nurse <ul style="list-style-type: none"><li>• with preventative health check</li><li>• without preventative health check</li></ul>	10994, 10995, 10998, 10999
Wound management by a nurse on behalf of GP	10996
Chronic disease: monitoring and support <ul style="list-style-type: none"><li>• checks on clinical progress</li><li>• monitoring medication compliance</li><li>• self management advice</li><li>• collection of information to support GP review of care plans</li></ul>	10997
Antenatal checks	16400
Healthy Kids check	711, 709

## Items where nurses can assist GP's

Description	Item Number
45 year old health check	▪ 717
Health assessments	▪ 700-706
▪ at consulting rooms	▪ 700
▪ at home	▪ 702
EPC Care Planning	▪ 721-731
▪ GP Management Plan (GPMP)	▪ 721
▪ Team Care Arrangements (TCA)	▪ 723
▪ reviews of GPMP and TCA	▪ 725, 727
Asthma cycle of care	▪ 2546
Diabetes cycle of care	▪ 2517
Cervical Smear: unscreened women	▪ 2501

## Enhanced primary care (EPC)

### Designed to:

- provide more preventive care for older Australians
- improve coordination of care for people with chronic conditions and complex care needs
- provide a framework for a multidisciplinary clinical approach.

## Range of EPC item numbers

Service	Item No	Rebate
75 Health Assessment (Practice)	700	\$171.00
75 Health Assessment (Home)	702	\$242.00
Aboriginal and Torres Straight Islander Older person 55+ Health Check (Practice)	704	\$175.10
Aboriginal and Torres Straight Islander Older person 55+ Health Check (Home)	706	\$247.10
Aboriginal and Torres Straight Islander Child Health Check (Practice)	708	\$175.10
Aboriginal and Torres Straight Islander Adult Health Check (Practice)	710	\$208.70
Healthy Kids Check (by medical practitioner)	709	\$ 46.05
Healthy Kids Check (by practice nurse)	711	\$ 46.05
Comprehensive Medical Assessment	712	\$196.20

## Range of EPC item numbers

Service	Item No	Rebate
Type 2 Diabetes Risk Evaluation	713	\$ 61.40
Refugee Health Assessment (Practice)	714	\$208.70
Refugee Health Assessment (Not in Practice)	716	\$
45-49 year Health Check	717	\$104.55
Health Assessment of a patient with an intellectual disability (Practice)	718	\$208.70
Health Assessment of a patient with an intellectual disability (Not in Practice)	719	\$232.15
Domiciliary Medication Management Review (DDMR)	900	\$140.20
Residential Medication Management Review (RMMR)	903	\$ 6.00

## Chronic disease management (CDM)

- designed to most effectively manage the health care of clients with chronic medical conditions, including those requiring multidisciplinary care
- clients can have a GP Management Plan (GPMP) or a Team Care Arrangement (TCA).

## Range of CDM item numbers

Service	Item No	Rebate
GP Management Plan	721	\$ 128.00
Team Care Arrangements	723	\$ 101.00
GP Management Plan Review	725	\$ 64.00
Team Care Arrangement Review	727	\$ 64.00
Contribution by GP to Care Plan	729	\$ 62.00
Contribution by GP to Care Plan RACF	731	\$ 62.00

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The Medical Benefits Schedule can be accessed online at:

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## Australian Childhood Immunisation Register (ACIR)

- national register: records details of vaccinations
- facilitates checks on immunisation status
- forms the basis of an immunisation history
- provides information to facilitate family payments
- provides information for incentive payments to GPs.

## Practice accreditation

- continual work for improvement in terms of structures, processes and outcomes
- RACGP Standards for General Practice
  - benchmarks of quality and safety
  - registration for accreditation (AGPAL, GP Accreditation Plus)
  - self assessment against standards
  - peer appraisal
  - ongoing cycle of quality improvement.