



Meeting the mental health needs of *people living with chronic physical conditions*

This fact sheet sets out some options for utilising MBS items to attend to the mental health needs of people with chronic physical conditions.

Key messages

- **Maintain a level of clinical awareness of co morbid mental health problems in people with chronic physical conditions**
- **Mental health items can be useful to treat people with mental health problems co morbid with their chronic physical condition**
- **The mental health MBS items can be used in tandem with CDM items**

People with a chronic physical disease can be managed using the Chronic Disease Management (CDM) MBS items for GP Management Planning and Team Care Arrangements.

Chronic Disease Management (CDM) MBS Items	
<p>The Chronic Disease Management (CDM) Medicare items are for GPs to manage the health care of patients with chronic or terminal medical conditions, including mental illness and/or patients whose complexity of needs requires multidisciplinary, team-based care from a GP and at least two other health or care providers.</p> <p>NB patients with chronic and severe mental illness are eligible for CDM items, and the allied health and dental items that can be accessed as a result</p>	
Item No.	Item Description
#721	Preparation of GP Management Plan (GPMP)
#723	Co-ordination of Team Care Arrangements (GP Management Plan not mandatory)
#732	Review of GP Management Plan or Co-ordination of review of Team Care Arrangements
#729	Contribution to a Multidisciplinary Care Plan, or to a review of a multidisciplinary care plan, for a patient who is not a care recipient in a residential aged care facility
#731	Contribution to a multidisciplinary care plan, or to a review of a multidisciplinary care plan, for a resident in an aged care facility

Use of the CDM items enables the patient to access **five Medicare rebateable allied health services** per calendar year, including: diabetes education, exercise physiology, dietetics, physiotherapy, podiatry, psychology and other mental health services.¹

¹ Patients need to be referred by their GP for the allied health services recommended in their care plan, using the referral form issued by DoHA that can be found at: <http://www.health.gov.au/mbsprimarycareitems> or a form that contains all the components of the Department's form.

People with chronic physical conditions are at increased risk of mental health problems, particularly depression and, depending on the condition, anxiety.

RACGP's *Guidelines for Preventative Activities in General Practice* (the *Red Book*) recommends that GPs screen people with chronic illness for depression and 'offer effective management and follow up if further assessment confirms depression' and 'Maintain a high level of clinical awareness of those at high risk of depression' p58

The Red Book suggests that 'asking two simple questions may be as effective as longer instruments:

- 'Over the past 2 weeks, have you felt down, depressed or hopeless?' and
- 'Over the past 2 weeks have you felt little interest or pleasure in doing things?'

Asking a patient if help is needed in addition to these two screening questions improves the specificity of a diagnosis of depression

However, given the limit of 5 sessions *and* the likelihood that a patient with a chronic physical disease will benefit from Allied Health services other than for mental health/psychology, if referral for focused psychological strategies is being considered as part of the planned management of their mental health issue, using the **mental health items** may be a better option to address the mental health needs of people with chronic physical conditions.

It is preferable that wherever possible patients have only one plan for primary care management, unless the patient clearly requires an additional plan for the management of a separate condition. There is therefore **no barrier to using both CDM and mental health items if the patient's clinical conditions warrant it.**

Mental Health Items	
The mental health items provide a structured framework for GPs to undertake early intervention, assessment and management of patients with mental disorders, as well as providing referral pathways to clinical psychologist and allied mental health service providers.	
Item No.	Item Description
#2710	Preparation of Mental Health Treatment Plan (GP with MH Skills Training)
#2702	Preparation of Mental Health Treatment Plan (GP without MH Skills Training)
#2712	Review of GP Mental Health Treatment Plan
#2713	Mental Health Consultation

Use of the Mental Health Treatment Plan item enables a patient with co-morbid mental health problems to access up to **12 sessions of focused psychological strategies** to assist them to develop the psychological resources to cope with and manage their chronic disease. These sessions can be accessed via the Better Access or ATAPS program.

Better Access - As part of the Better Access initiative GPs can refer patients for Medicare-subsidised mental health services. Patients are eligible for up to 12 (18 in exceptional circumstances) Medicare-rebated sessions of focussed psychological strategies per calendar year provided by eligible psychologists, social workers and occupational therapists, or suitably trained GPs.

ATAPS (Better Outcomes) - Access to Allied Psychological Services (ATAPS) enables GPs to prepare a mental health treatment plan and refer their patients to allied health professionals who deliver focused psychological strategies at low or no cost. ATAPS is funded by the Department of Health and Ageing and managed through your Division of General Practice. NB: ATAPS is a capped program, targeted at disadvantaged groups.