



Mental Health Nurse Incentive Program update October 2008



Change to credential date

To participate in the Mental Health Nurse Incentive Program, mental health nurses must have, or be working towards a mental health nursing credential from the Australian College of Mental Health Nurses.

To give participants time to earn this credential, interim arrangements allow currently registered nurses to participate in the Program, as long as they have obtained, or are working towards obtaining specialist qualifications in mental health—such as a Graduate Diploma in Mental Health Nursing or a Masters in Mental Health Nursing or three years recent experience in mental health nursing.

Following consultation with key stakeholders, the Minister for Health and Ageing, the Hon Nicola Roxon MP, has approved the extension of the requirement for nurses to be credentialed from 31 December 2008 to 31 December 2009.

This extension lets nurses working under the Mental Health Nurse Incentive Program have sufficient time to get the credential, as well as continue to provide support to general practitioners and private psychiatrists participating in the Program.

Due to the nature of the credentialing process, mental health nurses who do not hold the required credentials should contact the college on **1300 667 079*** as soon as possible to discuss application requirements. Formal notification from the Department of Health and Ageing will be posted to all eligible organisations shortly.

Change to reporting requirements—shared employment arrangements

As reported in the June 2008 Mental Health Nurse Incentive Program update, shared employment arrangements under the Program have started, allowing state and territory health organisations and participating practices to share mental health nursing resources.

To monitor the success of this arrangement, new reporting requirements will be introduced to program claim forms.

The new forms will require you to:

- declare if the mental health nurse providing the service is under a shared employment arrangement
- indicate if a patient is being seen under a shared care plan between the primary health carer (the participating organisation) and a state or territory health organisation.

This reporting will require entry into tick boxes, so will have minimal impact on the administrative requirements of the Program for participating organisations.

Mental Health Nurse Incentive Program audit

Medicare Australia will conduct annual audits of the Mental Health Nurse Incentive Program in accordance with its audit program. Those organisations selected for audit will be notified and given a reasonable timeframe in which to provide evidence or prepare for an onsite visit.

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Program hints and tips— frequently asked questions

Does a care plan need to be in place before the nurse sees the patient?

The General Practitioner Mental Health Care plan (or equivalent psychiatrist plan) should be developed in collaboration with the mental health nurse prior to providing mental health nursing services to the patient. These plans must include specific reference to the roles and responsibilities of both the nurse and the treating general practitioner or psychiatrist.

Treatment must be provided according to the plan and the relevant clinical guidelines for the treatment of the disorder—emphasising the importance of making sure the care plan is in place before starting the treatment.

Mental health nurse involvement in the development of the care plan can be included as a service to patients on program claim forms.

Does the patient need to see the psychiatrist/ general practitioner before they see the mental health nurse?

Entrance criteria for patients under the Mental Health Nurse Incentive Program includes the requirement for general practitioners or psychiatrists to determine that the patient has a severe mental disorder and would benefit from receiving services provided under this initiative. This must happen before the nurse provides services to the patient.

The general practitioner or psychiatrist must remain principally responsible for the patient's clinical mental health care.

How many patients can I see in one session?

Under new Mental Health Nurse Incentive Program arrangements, mental health nurses must provide at least two individual services to patients per session. There is no limit to the number of patients that can be seen in a session.

As a guide to nurse case loads, a full time mental health nurse should have a minimum case load of 20 individual patients with a severe mental disorder per week, averaged over three months.

Can I claim a group session?

Group sessions can be claimed under the Mental Health Nurse Incentive Program, providing all patients are eligible under the Program, and services provided during sessions are in line with program guidelines.

Is there a maximum number of sessions I can claim?

The Mental Health Nurse Incentive Program limits the number of sessions that may be claimed to 10 sessions per week, per nurse (a week runs from a Monday to a Sunday).

Any sessions claimed over the limit of 10 sessions per week, per nurse will not be paid.

What will I be required to do if I am audited?

Section 9 of the program guidelines describes the compliance obligations under the Mental Health Nurse Incentive Program. If an organisation is selected for audit, they must be able to substantiate each requirement through documented evidence, formal protocols and records.

Reminder

Please submit your claims on a regular basis to Medicare Australia, either weekly or fortnightly. This helps us to appropriately assess claims and contact you and if necessary, to clarify information without impacting on timely payments.

MHNIP update correspondence:

Write **The Editor
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Medicare Australia
PO Box 1001
Tuggeranong DC ACT 2901**

Online **medicareaustralia.gov.au/providers**

Email **mhnip.no@medicareaustralia.gov.au**

Access MHNIP forms:

www.medicareaustralia.gov.au
then go to **For health professionals >
Incentives & allowances >
Mental health nurse incentive program**

Telephone enquiry line:

National number: **1800 222 032***

TTY **1800 552 152**** (hearing impaired)

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