



Australian Government

Medicare Australia

Practice Incentives Program

General Practitioner Aged Care Access Incentive Guidelines – August 2011

Contents

Introduction	1
Definition of a GP	1
The Practice Incentives Program General Practitioner Aged Care Access Incentive	1
What are the Practice Incentives Program General Practitioner Aged Care Access Incentive payments and requirements?	1
Is our General Practitioner eligible for the Practice Incentives Program General Practitioner Aged Care Access Incentive?	2
How does the practice apply for the Practice Incentives Program General Practitioner Aged Care Access Incentive?	2
Eligible Medicare Benefits Schedule items	3
What are the obligations of the practice and/or General Practitioner?	3
Is there an appeals process?	3
More information	3

Introduction

The Practice Incentives Program (PIP) aims to encourage continuing improvements in general practice through financial incentives to support quality care, and improve access and health outcomes for patients. To be eligible to participate in the PIP, a practice must be accredited, or registered for accreditation, against the Royal Australian College for General Practitioners (RACGP) *Standards for general practices*. Practices must achieve full accreditation within 12 months of joining the PIP and maintain full accreditation thereafter.

Payments are made through the PIP:

- to encourage use of electronic health systems
- to ensure patients have access to after hours care
- to support rural practices
- to encourage rural general practitioners (GPs) to provide procedural services
- to support practices to employ practice nurses
- to encourage practices to teach medical students
- for participating in educational activities to improve prescribing behaviour
- to encourage cervical screening
- for best practice management of patients with asthma and diabetes
- to encourage GPs to provide increased and continuing services in Commonwealth-funded Residential Aged Care Facilities (RACFs)
- to support best practice management of Aboriginal and Torres Strait Islander patients with chronic disease.

The PIP is administered by Medicare Australia on behalf of the Australian Government Department of Health and Ageing.

Definition of a GP

For the purposes of the PIP, GPs include general practitioners and non-specialist medical practitioners, known as other medical practitioners, who provide non-referred services and are not GPs. General practitioners include Fellows of the RACGP and the Australian College of Rural and Remote Medicine (ACRRM), vocationally registered general practitioners and medical practitioners undertaking approved training.

The Practice Incentives Program General Practitioner Aged Care Access Incentive

The PIP General Practitioner Aged Care Access Incentive (ACAI) aims to encourage GPs to provide increased and continuing services in RACFs.

What are the Practice Incentives Program General Practitioner Aged Care Access Incentive payments and requirements?

The PIP GP ACAI payments are based on a GP providing a required number of eligible Medicare Benefits Schedule (MBS) services in RACFs in a financial year. The payment levels and Qualifying Service Levels (QSLs) below are for the 2010-11 financial year. Medicare Australia will advise practices of any changes to the payment levels and/or QSLs for future financial years.

The PIP GP ACAI has two payment tiers which are summarised in Table 1 below.

Table 1: Payments and requirements of the Practice Incentives Program General Practitioner Aged Care Access Incentive.

Tier	Qualifying Service Level (QSL)	Service Incentive Payment (SIP)
Tier 1	60 services	\$1 500
Tier 2	140 services	\$3 500

To receive the:

- Tier 1 payment of \$1 500, GPs must reach the QSL 1 by providing at least 60 eligible MBS services in RACFs in the 2010-11 financial year
- Tier 2 payment of \$3 500, GPs must reach the QSL 2 by providing a total of at least 140 eligible MBS services in RACFs in the 2010-11 financial year.

Eligible GPs can receive a total of two GP ACAI Service Incentive Payments (SIPs) totalling \$5 000 for the financial year. The SIPs are in addition to the consultation fee.

SIPs are automatically paid by Medicare Australia to GPs who reach the QSLs. GPs reach the QSLs by providing the required number of eligible MBS services in RACFs (see Table 1 above).

For services to be counted towards the QSLs, GPs must claim the MBS services provided in RACFs using a Medicare provider number that is linked to a PIP practice.

Is our General Practitioner eligible for the Practice Incentives Program General Practitioner Aged Care Access Incentive?

To be eligible for the PIP GP ACAI payments, the GP must:

- work from a PIP practice
- ensure that eligible MBS services are provided to residents in RACFs
- reach the QSLs by providing the required number of MBS services in RACFs in a financial year
- use a Medicare provider number that is linked to a PIP practice when claiming MBS services in RACFs.

How does the practice apply for the Practice Incentives Program General Practitioner Aged Care Access Incentive?

GPs from PIP practices do not need to apply for this incentive. If your practice is not currently in the PIP you can apply by completing the Practice Incentives Program and General Practice Immunisation Incentive application form.

Once the required number of MBS items has been claimed, the payments are automatically paid to the bank account nominated by the GP in the next PIP payment quarter. Unless specified otherwise, payments are made to the GP who provided the services in RACFs.

If Medicare Australia does not have the banking details of the GP, a form will be automatically generated and sent to the GP's main PIP practice branch after Medicare Australia has processed the MBS claims for services provided in RACFs.

Eligible Medicare Benefits Schedule items

Eligible MBS services are those provided to residents in Commonwealth-funded RACFs and Multipurpose Services.

Multipurpose Services are integrated health and aged care services that provide flexible and sustainable service options for small rural and remote communities.

MBS services that count towards the QSLs include attendances in RACFs, contributions to Care Plans, and Residential Medication Management Reviews.

The MBS items that count towards the QSLs are listed below:

20, 35, 43, 51, 92, 93, 95, 96, 731, 903, 5010, 5028, 5049, 5067, 5260, 5263, 5265 and 5267.

This list may be revised to include or remove MBS items.

For more information on the use and billing of MBS items call the Medicare Provider enquiry line on **132 150** (call charges may apply) Monday to Friday Australian Eastern Standard Time.

What are the obligations of the practice and/or General Practitioner?

The practice must:

- provide information to Medicare Australia as part of its ongoing audit program to verify that the practice meets the PIP eligibility requirements
- make sure the information provided to Medicare Australia is accurate
- advise Medicare Australia in writing, of any changes to practice arrangements by the relevant 'point in time' date or within 14 calendar days, whichever date is earliest. Refer to the Practice Incentives Program Guidelines for more information.

On joining the PIP, the practice must nominate an authorised contact person(s). This person(s) will be required to verify on behalf of the practice, any changes to information submitted for PIP claims and payments. The authorised contact person(s) will be the person to whom all correspondence or enquiries are addressed. Medicare Australia will only deal with the current practice owner(s) or an authorised contact person(s).

Is there an appeals process?

The PIP has an established appeals process. To request a review of a decision, the authorised contact person(s) or the current practice owner(s) must write to Medicare Australia within 28 calendar days of the date on the notice of the decision they would like reviewed. Medicare Australia will review its decision and advise the practice in writing of the outcome.

Advice on further avenues of appeal are available from Medicare Australia.

More information

For information about the PIP GP ACAI call PIP on **1800 222 032** (call charges may apply) between 8.30 am to 5.00 pm Australian Central Standard Time, Monday to Friday. For more information email pip@medicareaustralia.gov.au or go to www.medicareaustralia.gov.au/pip

These Guidelines are for information purposes only. While it is intended that the Commonwealth will make payments as set out in these Guidelines, the making of payments is a matter at the sole discretion of the Commonwealth. The Commonwealth may alter arrangements for the PIP GP ACAI at any time and without notice.

The Commonwealth does not accept any legal liability or responsibility for any injury, loss or damage incurred by the use of, reliance on, or interpretation of the information provided in these Guidelines.