

Senate Community Affairs Legislation Committee

ADDITIONAL BUDGET ESTIMATES - 16 FEBRUARY 2012 ANSWER TO QUESTION ON NOTICE

Human Services Portfolio

Topic: Medicare – Media Article Allegations – Team Care Arrangements

Question reference number: HSW 72

Senator: Bernardi

Type of question: Written

Date set by the committee for the return of answer: 29 March 2012

Number of pages: 1

Question:

Dr Webber pointed to general practice management plans (GPMPs) and team care arrangements (TCAs) as being particularly vulnerable to exploitation by fraudsters.

- a) Have these items been used by people to defraud the Medicare system in the last five years? If so, how many instances have occurred?
- b) Are you aware of any instances similar to the one that Dr Webber mentions, where corporate owners have business plans based on a certain number of these items claimed every week?
- c) Do you agree with Dr Webber's claim that fraudulent claims regarding both the GPMP and TCA cost the system several hundred million dollar per year? If not, what is your estimation of this cost?

Answer:

- a) To date, the department has found no instances of fraudulent claiming under GP Management Plans and Team Care Arrangements.
- b) The department has, to date, no evidence to suggest any particular corporate organisation or owner has a business plan in place, as described by Dr Webber.
- c) The department, through audit activity, has not found any significant non-compliance in relation to the billing of Chronic Disease Management MBS items, including GP Management Plans and Team Care Arrangements.