Queensland GP Alliance Position Statement
Commonwealth Budget 2011
Cuts to General Practice Mental Health Rebates

Background to the Qld GP Alliance:

The Queensland GP Alliance was formed in 2003. It provides a unified voice for General Practice in Queensland and progresses key strategic priorities in a coordinated and collaborative manner. The Queensland GP Alliance’s member organisations are:

- General Practice Queensland (GPQ);
- Australian Medical Association Queensland (AMAQ);
- Royal Australian College of General Practitioners (RACGP);
- Rural Doctors Association of Queensland (RDAQ);
- Health Workforce Queensland;
- Australian College of Rural and Remote Medicine (ACRRM); and
- Academic General Practice.

Concerns of the Qld GP Alliance:

Medicare patient rebates for General Practice mental health services were cut in the May 2011 Commonwealth Budget.

From November 2011 many people with mental illness will no longer be able to afford to see their GP for mental health plans because the Medicare rebates will be between 25 per cent and 50 per cent lower than they are currently.

The Budget cuts could significantly reduce mental health services provided in the community by GPs.

The Qld GP Alliance would like to emphasise the following points:

- In relation to patient out-of-pocket costs – the cuts to the rebate will directly affect the affordability of care and patients’ willingness and capacity to seek services.
- The cuts will have a deleterious impact in rural and remote communities – Maintaining Better access at its pre-Budget levels would complement new initiatives in Access to Allied Psychological Services (ATAPs) in rural and remote communities; however, these cuts will make it harder to develop appropriate packages of coordinated mental health care for people in need in these communities.
- The cuts will have a negative impact in Queensland communities that are recovering from recent natural disasters – there needs to be a spread and variety of mental health services across primary health care services to assist with timely and effective recovery – Better Access is an important component of this spread and variety.
- The cuts will have an undermining effect on GPs continuing involvement in mental health care – the reduced fee will affect GPs’ willingness and predisposition to
increase their activity and deepen their skills and knowledge in mental health service delivery. GPs are best placed to deal with mental health issues associated with chronic disease, and the GP is sometimes the only continuous health professional that the patient (who has mental health problems spanning many years) sees.

- There are clear and present risks for children and young people – vulnerable and hard-to-reach populations will find it harder to gain access to services; these funding cuts will provide a powerful disincentive to young people and families with young children.
- The cuts will place more pressure on the public system to see these patients and many public systems do not have adequate allied health services; waiting lists for the vulnerable will increase and could lead to adverse outcomes for anyone who is fragile or unstable.
- The reduction in the number of available visits to psychologists is arbitrary and unwarranted. Mental health patients develop bonds and significant trust and dependency on some psychologists. Forcing patients to change to ATAPS or public sector psychologists against their wishes once their 10 visits are used up (instead of the current 12, and an extra 6 if extraordinary circumstances prevail, giving a maximum of 18), and having to re-establish a trusting relationship is often too hard for this group of people; once again this could lead to adverse patient outcomes.

The feedback to GP Alliance Members from general practices across Queensland is that people with mental illness will be severely disadvantaged by the new arrangements.

The Queensland GP Alliance believes that the funding for GP mental health plans should be restored to its pre-Budget levels, and that GPs should be given more support to play a greater role in mental health. GPs are in the best position to coordinate a patient’s lifetime journey through the establishment of comprehensive and continuous whole patient mental health care.

(4 August 2011)