As a psychologist with over 15 years experience dealing with a broad range of clients presenting with a multitude of issues, I request that you address the unfair and unwarranted 2 tier Medicare rebate system for psychological services under the Better Access program. The Better Access evaluation report (2011) found that:

- Most of the services provided to people in high levels of distress (ie, moderate to severe), received services provided by ‘generalist’ psychologists- not ‘clinical’ psychologists. Most service consumers (with high and very high levels of need) benefited from treatment provided by ‘generalist’ psychologists.

- The vast majority of consumers improved on their mental health outcome measures as a result of the services they received. Clients of ‘generalist’ psychologists showed higher levels of improvement on these measures than clients of ‘clinical’ psychologists.

- The 2011 Medicare data clearly shows that cases treated by ‘generalist’ psychologists were as severe as the cases treated by ‘clinical’ psychologists.

- Consumers attributed changes in their mental health to the care that they received - the vast majority (about 75%), said they would attribute changes wholly or partially to the provider. This would not be possible were ‘generalist’ psychologists as under-trained and under-skilled as he alleges.

- A higher proportion of ‘generalist’ psychologist clients reported “Good, satisfied, helpful or constructive advice/care” than did clients of ‘clinical’ psychologists.

- A higher proportion of ‘generalist’ psychologist clients reported “Client perception of mental health improvement” than did clients of ‘clinical’ psychologists.

- A higher proportion of ‘generalist’ psychologist clients reported “Client perception of improvements- health, lifestyle and sleep” than did clients of ‘clinical’ psychologists.

- A higher proportion of ‘generalist’ psychologists reported working primarily with CBT than did ‘clinical’ psychologists.

- A lower proportion of ‘generalist’ psychologist clients reported “Client perception of underlying causes still present” than did clients of ‘clinical’ psychologists.

As such, the existing 2 tier system not only discriminates against so called 'generalist' psychologists but also channels funds to so called 'clinical' psychologists who as the Better Access evaluation report found do not achieve the same satisfaction results as 'generalist' psychologists.

In the interest of better mental health for all Australians this existing system needs to be reformed.

yours sincerely,

Vic Val
Vic Val Psychology