



MEDIA RELEASE

For immediate release

MBS reform – a first step in the right direction

Today the Federal Government announced changes to the Medicare Benefits Schedule (MBS) in a first step to simplify the schedule, remove red tape and to encourage preventative care. The changes will be introduced in May 2010.

The Royal Australian College of General Practitioners (RACGP) welcomes the Government's commitment to Medicare reform but encourages the Government to look at other significant changes, including higher rebates for high quality general practice care.

A recent Australian Institute of Health and Welfare (AIHW) report confirmed that the complexity of work being delivered by Australian GPs has dramatically increased in the past 10 years. Yet since 2000, workforce data shows that GP supply has decreased by 2%, while specialist supply has increased by 17%. We need to do more to attract the next generation of doctors to general practice.

Dr Chris Mitchell, RACGP President, said that Australian GPs need an MBS that supports high quality care general practice care.

"Australian GPs welcome the Government's commitment; we have long been advocating for important reforms to reduce red tape and to simplify and streamline the MBS," said Dr Mitchell.

"We really appreciate the clarity on the level B, C and D items, including the opportunity to provide preventive advice.

"However the 2% increase in rebates for the long consultation items (Level C and Level D) while welcome still does not provide sufficient incentives for longer and more comprehensive consultations and will do little to assist GPs to direct bill the most disadvantaged in our community."

"We also welcome that the prolonged attendance items will be amended to allow one or more medical practitioners to each itemise for items 160-164 for simultaneous attendance on one patient at risk of imminent death. More than one practitioner is often required to provide safe care in these emergencies.

"The changes to the GP Management Plans (GPMP) and Team Care Arrangements (TCA) have been clarified with Medicare and we have received confirmation that if both GPMP and TCA are done on the same day they can still be billed separately. We believe further work on the chronic disease item numbers is required.

"In summary, we welcome the simplification as the first step in health reform as we work to an MBS that:

- supports our patients, especially those who are most vulnerable;
- provides for the longer consultations that our patients need; and

- will allow us to do the work that we do best: focusing on prevention.

The RACGP is committed to working with the Australian Government on implementing reforms to the MBS that improve care for our patients while cutting red tape for our profession.

For more information about the changes, visit www.health.gov.au/mbsonline and www.health.gov.au/mbsprimarycareitems.

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About the RACGP

The Royal Australian College of General Practitioners (RACGP) sets and maintains the standards for quality clinical practice, education and training, and research in Australian general practice, and represents Australia's urban and rural general practitioners.

Visit www.racgp.org.au.