

(Extract Summary) Draft Guidelines for Afterhours Services (Medicare Local)

As part of the reform process, the Australian Government announced the establishment of Medicare Locals. Medicare Locals will improve coordination and integration of primary health care in local communities, address service gaps, and make it easier for patients to navigate their local health care system. Medicare Locals will reflect their local communities and health care services in the composition of their governing bodies, which will include consumers, doctors, nurses, allied health and state-funded community health providers.

Medicare Locals will be established in three stages. The first tranche of Medicare Locals (approximately 15) will begin operating from 1 July 2011. A second tranche of approximately 15 Medicare Locals will commence from 1 January 2012, with the remainder starting from 1 July 2012.

A key role for Medicare Locals will be to identify the afterhours primary health needs of their local community and address gaps in local health services. As each Medicare Local is established it will be tasked with a range of afterhours primary care responsibilities so that local communities across Australia have better, more consistent access to afterhours care.

Background – Afterhours Services

The Australian Government currently makes a number of grants and incentives available to support the provision of afterhours primary care services. These include:

- grants to support the viability of afterhours GP services through the General Practice Afterhours (GPAH) Program;
- incentive payments through the Practice Incentives Program (PIP) to encourage general practices to ensure quality afterhours services for their patients; and
- higher Medicare Benefits Schedule (MBS) rebates for afterhours consultations by GPs and other medical practitioners.

Reforms to Afterhours Primary Care

The Australian Government has committed to improving access to afterhours primary care services by:

- establishing a new national afterhours telephone-based GP medical advice service as an add-on service to the nurse triage, information and advice services currently being provided by the National Health Call Centre Network (NHCCN) trading as *healthdirect Australia*;
- expanding the new national afterhours telephone-based GP medical advice service to allow capacity for online triage and basic medical advice via videoconferencing; and
- devolving responsibility for the planning and funding of local face-to-face afterhours services to Medicare Locals.

National telephone-based GP medical advice service

From 1 July 2011, patients who cannot access their usual GP, are not sure what they should do and require afterhours medical advice can speak to a GP over the telephone, when necessary. Patients who call *healthdirect Australia* during the afterhours period will initially be triaged by a registered nurse as they are now. If the nurse determines that the patient will benefit from a GP telephone consultation the caller will be transferred to a telephone-based GP or will be advised that a GP will call them back. All other patients will be provided with health advice by the nurse and/or directed to appropriate care, including seeing their usual GP the next day, if necessary.

Videoconferencing

From 1 July 2012, the new telephone-based afterhours GP medical advice service will be expanded to allow the capacity for online triage and basic medical advice via videoconferencing. This videoconferencing capability was announced as part of the *Connecting Health Services with the Future* telehealth initiative.

Medicare Locals and afterhours primary care

A mandatory role and responsibility of each Medicare Local is to address the afterhours primary care needs of their region. Each Medicare Local is responsible for planning and funding afterhours services within their region and accordingly will receive Australian Government funding on a non-competitive basis.

Stage One

For the purposes of Afterhours Primary Care, *stage one* is the period between establishment of a Medicare Local and 30 June 2013.

During the first six month period, Medicare Locals will be expected to undertake a thorough needs assessment to identify priority afterhours primary care gaps within their region. This process will identify those areas where patients can readily access quality afterhours services and those areas where services are limited or non-existent, and the reasons behind these circumstances.

Stage Two

From 1 July 2013, the grants currently available under the GPAH Program and the incentive payments available through the PIP Afterhours Incentive will be discontinued. The funding previously made available through these programs, together with additional funding from the Commonwealth, will be redirected through Medicare Locals. Medicare Locals will implement the plan for the second stage from 1 July 2013.

Existing Australian Government funding arrangements

The Australian Government currently supports afterhours service provision through:

- incentives to general practice through the PIP;
- grants offered under the GPAH Program; and
- afterhours items available under the MBS for afterhours services.

Details of how these arrangements will change throughout the period of establishment to 30 June 2013 –

Australian Government afterhours arrangement	Before 1 July 2013	After 1 July 2013
Practice Incentives Program (PIP) Afterhours Incentive	Remains unchanged	Afterhours Incentive payments through the PIP will cease from 1 July 2013. From this date, funding previously allocated to the PIP will be redirected through Medicare Locals to implement their stage two plans.
GPAH Program	Grants under the GPAH Program will no longer be offered after 1 July 2012. Until then, grants under the GPAH Program will be available only in those regions where Medicare Locals have not yet been established. All existing GPAH Program grants will be honoured.	All existing GPAH Program grants will be honoured.
MBS items for afterhours services	MBS rebates and billing arrangements will not be altered as part of this initiative.	MBS rebates and billing arrangements will not be altered as part of this initiative.

Funding Agreements with service providers

Medicare Locals are responsible for administering funding to suitable service providers. Funding arrangements between Medicare Locals and local service providers will include reporting mechanisms to allow the Medicare Local to ensure that providers are meeting agreed objectives and are adhering to the Guiding Principles.

Afterhours Incentive payments through the PIP will cease from 1 July 2013. From this date, funding previously allocated to the PIP will be redirected through Medicare Locals to implement their stage two afterhours plans.

Grants under the GPAH Program will no longer be offered after 1 July 2012. Until then, grants under the GPAH Program will be available only in those regions where Medicare Locals have not yet been established. All existing GPAH grants will be honoured. Irrespective of whether they receive funding from a Medicare Local, eligible health professionals will continue to be able to access MBS items for afterhours services as they do now. MBS rebates and billing arrangements will not be altered as part of this initiative.

Detail document on Guidelines for the establishment and initial operation for Medicare Locals is available at www.yourhealth.gov.au.

All correspondence with the Department in relation to these Guidelines should be directed to: afterhoursreform@health.gov.au