



Primary Source Mental Health

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From the Principal Network Adviser

Mental Health was one of the 'big ticket' items in this year's Federal Budget with the announcement of a \$1.5 billion mental health reform package over five years. Within the package there are six priority areas and 19 budget measures so I thought it timely to devote this edition to provide an overview of the budget highlights for mental health, changes to the Better Access Program and the implications for primary health care.

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Key features of the Federal Budget.

Here's a summary of the key features of the Budget measures that apply to the mental health sector:

- whole of government approach with funding administered through a range of government departments and programs delivered across sectors and through government, non-government and community organisations [ie Medicare Locals, GPNs, NGOs and community organisations]
- a focus on services for people with serious and debilitating mental illness being delivered in primary health care and in a holistic manner
- a lifespan approach with measures focusing on children, young people and adults [with the exception of a notable absence of services for older people]
- emphasis on the social determinants of mental health such as social connectedness, economic participation and lack of discrimination through investing in strategies and programs that enhance social inclusion
- changes to the Better Access Program to offset savings to fund other components of the package



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The mental health component of the budget has been driven by the outcomes of the Evaluation of the *Better Access Program* and through extensive stakeholder and consumer and carer consultations. The evaluation of Better Access indicated that the initiative has increased access to treatment from 35% of those requiring mental health care in 2007 to an estimated 46% today. However, the evaluation also showed that the program was still not reaching vulnerable groups such as:

- people in rural and regional Australia and low income areas;
- men;
- Indigenous Australians;
- young people under 25;
- other disadvantaged groups.

Changes to this Program announced in the Budget included reductions in the rebates GPs can claim for completing a mental health treatment plan and reducing the number of allied health sessions from 12 to 10 in a calendar year.

Stakeholder and consumer feedback has been strong in advocating for addressing the needs of people with serious mental illness [low prevalence disorders] and the services provided for them in primary care in addition to focusing on people with high prevalence disorders such as anxiety and depression.

While the budget has been well received in the broader mental health sector, the general practice sector has reacted strongly to the changes in the Better Access program regarding them as 'devaluing' the role of the general practitioner as pivotal to coordinating care for people with mental health problems in the primary care context. [Don't erode GP capacity in mental health care](#) is AGPN's media release on this issue. It highlights the Network's disappointment in the Federal Government's budget measure to cut back the rebate for mental health care plans done by GPs

\$1.5 billion five year mental health reform package

The components of this package focus on six priority areas: These are:

Improving outcomes for people with severe and debilitating mental illness [\$571.3million]

- \$343.8 million for coordinated care and flexible funding. This will enable a single point of contact [care facilitator] to coordinated clinical and non-clinical services
- \$ 19.3 million for expansion of Day -to- Day Living Program
- \$208.3 million for Expanding Personal Helpers and Mentors program and respite services. This will include 425 new PHaMS workers and provide 1,100 more families access to respite services

Strengthening Primary Mental Health Care Services [220.3 million]

- \$205.9 million to expand the Access to Allied Psychological Services [ATAPS] program focusing on 'hard to reach groups' such as children, Indigenous Communities and socioeconomically disadvantaged communities. This is in addition to the extra funds for Flexible Care Packages made available in the previous budget.
- \$14.4 million for the establishment of a central mental health online portal for easy access to online psychological therapies

Strengthening the focus on the Mental Health needs of children, families and youth [\$491.7 million]

- \$197.3 million to provide additional and sustainable youth mental health services. This will include funding for a further 30 *headspace* sites building on the current 30 and the 30 funded in the 2010-11 Budget. This will bring headspace services up to 90 across Australia
- \$222.4 million with matched funding from the states and territories to establish a further 12 Early Psychosis Prevention and Intervention [EPPIC] Centres
- \$11 million to establish an Expert Group on Child Mental Health and a Health and Wellbeing Check for three year olds
- \$61 million for an additional 40 Family Mental Health Support Services to provide assistance and support to children at risk of mental illness through counselling, family support and enhancing connectedness with family and school

Strengthening social and economic participation [\$2.4 million]

- \$2.4 million to employment services to better equip them to help people with mental illness into jobs

A National Partnership Agreement on Mental Health [\$201.3 million]

The Australian Government is committed to working in partnership with the states and territories. A national funding pool to address service gaps in the areas of accommodation support and presentation to Accident and Emergency Departments will be established for which states and territories can competitively tender.

Ensuring quality, accountability and innovation in mental health services [\$12.2 million]

A new independent National Mental Health Commission will be established within the Office of Prime Minister and Cabinet. The role of the Commission will be to ensure greater accountability and transparency in the mental health system. Positioning it in the Prime Minister's portfolio gives it a whole of government approach and prominence at a national level.

Changes to the Better Access Initiative

The key changes to the Better Access Program announced in the Federal Budget 2011-12 include a reduction in the rebate GPs can access for completing a Mental Health Treatment Plan and reducing the cap on sessions

provided by Allied Health Professionals from 12 to 10 sessions in a calendar year. These changes will come into effect from November 1, 2011.

GP Rebates

The new fees will be aligned to Level C and D long consultations. There will still be a higher payment for those GPs who have undertaken the Mental Health Skills training.

Level C consultation : 20-39 mins

Level D consultation : 40 mins +

MBS Item	Current	Future
For GPs who have undertaken Mental Health Skills Training	\$163.35 (Item 2710)	Level D: \$126.43 Level C: \$ 85.92
For GPs who have not undertaken Mental Health Skills Training	\$128.20 (Item 2702)	Level D: \$99.55 Level C: \$67.65

Allied Health sessions

The cap for Allied Health sessions has been reduced from 12 to 10 sessions.

Implications for primary mental health care

The 2011-12 Federal Budget showed unprecedented investment in the primary mental health care sector with approximately one third of the new funding of \$1.5 billion [\$550 million] being directed through GPNs and Medicare Locals for ATAPS expansion and Coordinated Care. Medicare Locals would also be potentially eligible for *headspace* funding if located in areas that do not have a headspace service.

Substantial additional funds will also flow to Medicare Locals and GPNs via prior commitments of \$624 million in the 2010 Federal Budget and Taking Action to Tackle Suicide Election package as follows:

- \$118 million for Flexible Care Packages to provide clinical and non-clinical services for people with serious mental illness
- \$21.6 million to provide “additional services for children with mental health problems” under ATAPS
- \$23.6 million to provide “more psychological services for people who have attempted or at risk of suicide” over four years under ATAPS
- \$22 million over five years for community psychiatry services

Budget measure	Federal Budget 2010 & Tackling Suicide election commitments	Federal Budget 2011	Eligible organisations
Care Coordination		\$343.8 million	Budget 2011 to be tendered to MLs and NGOs
Flexible Care packages	\$58 million \$60 million Following 2012-13 will be redirected through Care Coordination		Budget 2010 and Taking Action to Tackle Suicide exclusive to first tranche of MLs
Care Coordination – Support for Day-to-Day Living and PHAMS		\$227.6 million	NGOs (MLs may be eligible too)
Strengthening PHC – ATAPS expansion	\$21.6 million for services to children \$23.6 million over suicide prevention	\$205.9 million	MLs only 2011-2012 GPNs and then transition to MLs
Community Psychiatry Services	\$22 million		MLs and GPNs MLs
Strengthening PHC – single mental health online portal		\$14.4 million	
Children and young people		\$491.7 million – headspace, EPPIC, three year old health check, family mental health support services	MLs and NGOs

Nominations open for the National Primary Health Care Awards

Australia's primary health service providers will now be able to achieve well earned recognition and rewards for outstanding performance through the inaugural [HESTA Primary Health Care Awards](#).

HESTA in conjunction with AGPN created these awards to mark excellence in primary health care.

ME Bank has provided \$30,000 in prize money for the awards which will culminate in an awards dinner at the AGPN's National Forum on Wednesday 16 November, to which finalists will be flown.

HESTA CEO Ms Anne-Marie Corboy said the awards were designed to recognise innovation and leadership.

"These are two fundamental elements of a skilled and responsive health workforce," Ms Corboy said.

AGPN CEO David Butt said the awards were timely in light of the incredible health reform agenda facing this sector.

"These awards recognise the role of all those who are usually the first the community turns to when they are sick or injured," Mr Butt said.

There are three categories for nominations:

Young leader

Individual distinction

Team excellence

Nominations can be made online at <http://www.phcawards.com.au/>

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