

COMMONWEALTH BUDGET INITIATIVES

August 2023



Leadership



Collaboration



Respect



Accountability



Innovation

| Announcement | Impact | Effective date |
|--|---|---|
| Strengthening Medicare | | |
| <p>Bigger incentives to bulk bill and more affordable care.</p> <ul style="list-style-type: none"> 14 new bulk billing MBS items. Seven of these new items will be able to be co-claimed with certain telehealth items (patient has to be registered for MyMedicare). | <p>The GP incentive scheme will triple the rebate to GPs who are able to bulk bill from \$10 to \$30 in regional towns and from \$12 to \$39 in remote communities.</p> <p>The tripling of the bulk billing incentive applies to:</p> <ul style="list-style-type: none"> all face-to-face general practice consultations more than six minutes in length all telehealth general practice services which are between 6-20 minutes in length (Level B consultations) longer telehealth general practice consultations where a patient is registered with their GP through MyMedicare <ul style="list-style-type: none"> MMM1: \$6.60 to \$20.65 MMM2: \$10.05 to \$31.40 MMM3: \$10.65 to \$33.35 MMM4: \$10.65 to \$33.35 MMM5: \$11.35 to \$35.40 MMM6: \$11.95 to \$37.40 MMM7: \$12.70 to \$39.65 <p>The tripling of the bulk billing incentive applies to:</p> <ul style="list-style-type: none"> All face-to-face and telehealth general practice services between 6-20 minutes long All other face-to-face general practice consultations. <p>Incentives will cover general face-to-face and telehealth consultations, including home visits for people who are homebound and consultations in residential aged care facilities.</p> | 1 November 2023 |
| <p>New MBS items</p> <p><i>MBS indexation</i></p> <p>Annual fee indexation will be applied to:</p> <ul style="list-style-type: none"> most of the general medical services items most diagnostic imaging services (but excluding nuclear imaging services) pathology items in Group P12 (74990, 74991, 75861, 75862, 75863 and 75864). | <p>New Medicare rebate for consultations of 60 minutes or longer, to give GPs the support to provide care to people with chronic conditions and complex needs.</p> <p>Extension of the heart health check and new patient clinical services including:</p> <ul style="list-style-type: none"> genetic testing for childhood hearing loss genetic testing for haematological malignancies profiling tests to determine a patient's risk of recurrent breast cancer testing for the diagnosis of mitochondrial disease. | <p>1 November 2023</p> <p>Extend beyond June 2023</p> |
| <p>60-day prescriptions of PBS medicines</p> | <p>From 1 September 2023, many patients living with an ongoing health condition who are stable on their current treatment will be able to receive twice the medication for the cost of a single prescription.</p> | 1 September 2023 |

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| | <p>This will apply to more than 300 common medicines listed on the pharmaceutical benefits scheme (PBS) and will be implemented in three stages over 12 months.</p> <p>When fully implemented on 1 September 2024, the changes will mean millions of Australians with ongoing health conditions will save money and time with 60-day prescriptions.</p> | 1 September 2024 |
| Wound care <i>Chronic Wound Consumables Scheme</i> | <p>The scheme will cover the cost of wound consumables used by patients with chronic wounds and diabetes aged 65+ or 50+ years for First Nations Peoples.</p> <ul style="list-style-type: none"> While the detail is to be determined, the initial thinking from government is, that a participating GP will request wound consumables for the patient from a Chronic Wound Consumables schedule, which are then delivered to the patient to bring with them into the practice for application. This measure includes education and training for healthcare professionals on chronic wound management, with these programs to be made available prior to the implementation date. | 1 May 2025 |
| Aged Care <i>New General Practice in Aged Care incentive payment</i> | <p>Incentive payment for GPs and practices for providing their Residential Aged Care Facility (RACF) patients who are registered with MyMedicare with bundled care, consisting of at least two care planning items (health assessment, contribution to a RACF care plan and/or case conferencing services) in the previous 12 months and at least three face-to-face visits every quarter.</p> <p>Introduction of a new General Practice in Aged Care incentive payment for services provided to patients in Residential Aged Care Facilities (RACFs).</p> <ul style="list-style-type: none"> Funding for PIP Aged Care Access Initiative (ACAI) will be extended for one year until 1 August 2024. Initial advice indicates that the existing ACAI will eventually be discontinued with the ACAI funding re-invested into this new program. Under the new funding arrangements, it is anticipated that a GP will receive a \$300 per patient SIP annually (paid quarterly) over and above any MBS billings if they deliver a defined mix of services to enrolled patients (which includes a monthly visit). Similarly, \$130 per patient will go to the practice via the PIP. Rural loadings based on Modified Monash Model will apply to these payments. There is the potential for some flexibility in the program to cater for other team member's attendance and for providers that do not have general practice accreditation but deliver GP services to RACF residents. The usual RACF MBS fee for service items plus the triple bulk billing incentive remain available. Some funding will be allocated for PHNs to commission services in areas where GPs are not generally accessible. | <p>RACF residents can register from 1 October 2023</p> <p>Incentive payments commence 1 August 2024</p> |

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| Practice Incentives Program (PIP) <i>Quality Improvement incentive extension</i> | PIP QI payments will be extended for an additional year to 30 June 2024, and a review of all general practice incentive programs will occur. | To 30 June 2024 |
| <i>Indigenous Health Incentive (IHI)</i> | National campaign to increase First Nations Australians' health assessments; improve administration and coordination of health assessments; linkages with allied health service and update eligibility for outcome payments under the PIP IHI to include all MBS items for the preparation and review of a Mental Health Treatment Plan. | Commencement date not yet advised. |
| MyMedicare | | |
| Voluntary Patient Enrolment | <p>Practices must be accredited or working towards accreditation against the RACGP Standards for General Practice, or the National Safety and Quality Primary and Community Healthcare Standards or be eligible for a temporary exemption (details to be finalised).</p> <ul style="list-style-type: none"> Ahead of patient enrolments, practices wanting to participate in MyMedicare are encouraged to register on the Organisation Register. GPs who do not have a PRODA account but intend to participate will need to register for one. Practices on the Organisation Register, via HPOS, can link to MyMedicare (by selecting the MyMedicare tile). <p>Under the scheme, patients will be able to enrol with a participating general practice, with the option to nominate a preferred GP at the practice.</p> <ul style="list-style-type: none"> Patients can register either in practice or via the Medicare app. MyMedicare will be integrated with practice software over time to further streamline the registration process. There is no payment for enrolling a patient to MyMedicare but it unlocks the ability to provide longer MBS funded telephone consultations, triple bulk billing incentive for longer MBS telehealth consultations (Levels C, D and E) for children under 16, pensioners, and concession card holders, access to additional funding streams for providing care to RACF patients and patients who frequently attend hospitals, and ensures that enrolled patients access chronic disease management through the practice they are enrolled with. | <p>General Practices can enrol from 1 July 2023</p> <p>Patients can enrol from 1 October 2023</p> |
| | <p>Funding packages available for general practices to connect frequent hospital users to a general practice for comprehensive care to reduce the likelihood of hospital re-admission.</p> <ul style="list-style-type: none"> This will commence in nine Primary Health Network (PHN) areas and, scale up over three years to all 31 PHN areas. The proposal is based on existing and successful models such as the one in Brisbane Metro North Health, where PHNs and Local Hospital Networks work together to identify suitable patients. | <p>Will be rolled across three years, to commence July 2024 – Geographical roll-out to be determined.</p> |

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| | <ul style="list-style-type: none"> Further consultation will be undertaken to co-design the program, with some indicative funding figures having been provided by the Department of Health and Aged Care in response to early questions. While these are obviously subject to final program design, per eligible patient payments are as follows: <ul style="list-style-type: none"> 1st year \$2000 2nd year \$1500 3rd year \$1000 \$500 bonus for keeping people out of hospital. | |
| Nursing/ midwifery | | |
| Primary Care and Midwifery Scholarships program | Establish 1850 Primary Care and Midwifery Scholarships, supporting registered nurses and registered midwives in post-graduate study to improve their skills in nurse practitioner and endorsed midwife roles. | Commencement date not yet advised. |
| Nursing placements | <p>Expand the nursing workforce to improve access to primary care:</p> <ul style="list-style-type: none"> 6000 clinical placements to provide nursing students with practical experience of primary healthcare nursing, to help meet future demand in primary care incentives to encourage 500 nurses back into the primary care workforce. | Commencement date not yet advised. |
| Digital health package | | |
| My Health Record upgrade | <p>To make the Australian Digital Health Agency an ongoing entity that delivers important digital health infrastructure.</p> <p>Funding to support the digital sharing of pathology and diagnostic imaging information and transition My Health Record to 'a data-rich platform'.</p> <p>Investment in the technology to make My Health Record 'easier to use, compatible systems that health practitioners are already using and to connect the health system.'</p> | Over the next 2 years |
| Workforce | | |
| Scholarships | Scholarships for nursing, midwifery, First Nations health, includes support for <i>international medical graduates</i> to address current workforce shortages. | Commencement date not yet advised. |
| New pre-fellowship program for non-vocational doctors (rural) | A new pre-fellowship program for non-vocational doctors will be established to support international medical graduates to work in primary care and remain in rural communities. | Commencement date not yet advised. |
| Extension to Single Employer Model (SEM) for Rural regions | GP registrars in regional, rural and remote locations will be able to deliver services in community-based medical practices without losing employment benefits as they move between employers, through an extension of the Single Employer Model trials. | Commencement date not yet advised. |
| Workforce Incentive Program (WIP) | <p>Flexible funding for multidisciplinary team-based models of care will be given a boost through an increase to the Workforce Incentives Program (WIP).</p> <ul style="list-style-type: none"> The maximum funding cap lifted to \$130,000 per practice. | August 2023 |

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| | <ul style="list-style-type: none"> Unlike previous years, the WIP will be indexed each year. Small and medium practices will receive a 30% increase to their incentive payments (subject to the operation of the maximum funding cap). The benefit to larger practices will be limited, essentially only receiving the benefit of the increased cap. A streamlining of the eligibility tiers will see more general practices eligible for the maximum payment. | |
| Workforce | | |
| PHN commissioned allied health, nurse, midwife services for solo GP practices | PHNs will be funded to commission multidisciplinary care from allied health, nurses and midwives to support smaller or solo primary care practices, to increase patient access and improve the management of chronic conditions. | Commencement date not yet advised. |
| Nurse practitioners | <p>Medicare patient rebates for care provided by nurse practitioners will be increased by 30%.</p> <p>The government will also enable nurse practitioners and participating midwives to prescribe PBS medicines and provide services under Medicare without the need for a legislated collaborative arrangement.</p> | 2023-24 budget |
| Vaping, tobacco and stronger preventative health | | |
| Action to reduce smoking and vaping rates | Action to reduce smoking and vaping rates, both of which lead to nicotine addiction and poorer health. Investment in new education programs and campaigns to discourage people from starting smoking and encourage quitting. | 2023–24 Budget |
| National Lung Cancer Screening Program | <p>Investing in a new National Lung Cancer Screening Program to provide screening to eligible current and former smokers. Eligible Australians aged between 50 and 70 years with a history of cigarette smoking, can have scans every two years, including through mobile screening services for some regional areas.</p> <p>The new program will be co-designed with First Nations Australians to ensure it is accessible to those most at-risk of lung cancer.</p> | From July 2025 |
| National Immunisation Program (NIP) | | |
| Pharmacists | Pharmacists will be funded to administer vaccinations to eligible people listed on the National Immunisation Program (NIP). | 1 September 2023 |
| Shingles Vaccine | <p>The Australian Immunisation Register (AIR) and other systems will be enhanced to allow the Department of Health and Aged Care to provide payment to pharmacists who administer NIP listed vaccines.</p> <p>The Shingrix vaccine will be added to the NIP as a standard vaccine (as an alternative to Zostavax) and will be funded under the NIP for the following cohorts:</p> <ul style="list-style-type: none"> 18+ years immunocompromised individuals at high-risk of shingles 50+ years Aboriginal and Torres Strait Islander people 70+ years non-Indigenous people. | 1 September 2023 |

For more information

- [Murray PHN - Strengthening Medicare – Commonwealth Initiatives](#)
- [Australia's Primary Health Care 10 Year Plan 2022–2032](#)
- [Strengthening Medicare Taskforce](#)
- [Stakeholder pack – Budget 2023–24](#)

Contact details

Murray PHN will continue to distribute information on the 2023–24 Budget initiative as it becomes available. To subscribe to regular updates, [register here](#) for the GP Update newsletter.

Or for more information or support, email: mymedicare@murrayphn.org.au

Important note

Information is correct at the time of publishing (July 2023) and may be subject to change. This document will be updated as further information is provided. To access the most up-to-date version, visit: murrayphn.org.au/initiatives

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