

Medicare and Private Health Insurance Rebates

MEDICARE

Depending on their needs, patients can qualify for access to psychology services under one of four different referrals or management plans from their GP, paediatrician or psychiatrist. More information can be provided by your GP or by contacting Medicare on 13 20 11 or visiting their website. Make sure you apply through Medicare for the Extended Medicare Safety Net (EMSN) as an individual or family so your expenses count towards your threshold. The requirements, codes and rebates relevant to psychology treatment are outlined below. You may qualify for one or more of the following plans.

1. Mental Health Treatment Plan (2717)

This treatment plan is available for individuals who qualify for a clinically diagnosable disorder that interferes with their cognitive, emotional or social abilities. This plan can be set up by your GP and allows you to claim a rebate for up to ten psychological therapy sessions per calendar year. The Medicare rebate provided is \$84.80 per session provided in clinic and \$106.55 per school visit or out of office session provided. When booking an appointment with your GP, you will need to request a longer appointment and notify them that you will be requiring a Mental Health Treatment Plan to be written. If obtaining a plan for your child, most GP's will request that you bring your child to the appointment.

Alternatively, a basic referral letter from your current paediatrician or psychiatrist, addressed to the psychologist you will be seeing, will allow you to access the same number of sessions and amount of rebate as a Mental Health Treatment Plan. Usually you do not require an appointment with your paediatrician or psychiatrist to obtain this referral letter – most will write one upon request in writing or over the phone.

2. Helping Children with Autism Program

This supports children with autism or any pervasive developmental disorder (PDD) and their families and carers, for children under the age of 13 years. It allows for Medicare rebates for the following services:

- Psychologists and other health professionals (including speech pathologists, occupational therapists) to provide assessment services and collaborate with the child's paediatrician and/or psychiatrist on the diagnosis and development of the treatment and management plan (up to 4 services in total per child)
- Psychologists and other health professionals to provide early intervention treatment services following diagnosis (up to 20 services in total per child)

The Medicare rebate for the psychological assessment and treatment under this plan is \$84.80 per session. Families who reside in an outer regional or remote area may be eligible for a one-off payment of \$2,000 per eligible child to cover the additional expenses associated with accessing early intervention services. Eligibility for this payment is based on the Accessibility/Remoteness Index of Australia classification and must be applied for through Medicare.

3. Better Start for Children with Disability Initiative

This plan provides early intervention funding for children who are aged under 6 years old and have been diagnosed with cerebral palsy, Down syndrome, Fragile X, moderate or greater hearing or vision impairments (including deafblindness), Prader Willi, Williams, Angelman, Kabuki Make Up, Smith-Magenis, CHARGE, Cornelia de Lange or Cri du Chat syndromes or microcephaly. The funding provides up to \$12,000 (up to a maximum of \$6,000 per financial year) to be used for services such as speech pathology, audiology, occupational therapy, physiotherapy, optometry, psychology, orthoptics and services of teachers for the deaf. This early intervention funding can be used until the child turns 7 years old and is to be developed by a GP or specialist/consultant physician.

Those who are older than 7 years old may be eligible for Medicare rebates for:

- Psychologists and other health professionals (including speech pathologists, occupational therapists) to provide assessment services and collaborate with the child's paediatrician and/or psychiatrist on the diagnosis and development of the treatment and managements plan (up to 4 services in total per child)

- Psychologists and other health professionals to provide early intervention treatment services following diagnosis (up to 20 services in total per child, per year)

The Medicare rebate for the psychological assessment and treatment under this plan is \$84.80 per session, and patients need to have a referral from their GP under the Better Start for Children with Disability Initiative.

Families who reside in an outer regional or remote area may be eligible for a one-off payment of \$2,000 per eligible child to cover the additional expenses associated with accessing treatment services. Eligibility for this payment is based on the Accessibility/Remoteness Index of Australia classification and must be applied for through Medicare.

4. Chronic Disease Management (CDM) – GP Management Plan and Team Care Arrangements

This treatment plan is available to individuals living with a chronic and/or complex medical illness and is set up by your GP. This plan allows you to claim a rebate for up to five visits a year (in total) to certain allied health professionals, including psychologists. The Medicare rebate provided is \$52.95 per session.

Extended Medicare Safety Net (EMSN)

All individual out-of-pocket-costs for eligible Medicare out-of-hospital services contribute towards reaching an annual safety net threshold. Families need to register with Medicare as a group for all of their out-of-pocket expenses to count towards the Extended Medicare Safety Net. Once the annual threshold of out-of-pocket costs has been reached, Medicare pays for 80% of out-of-pocket costs for eligible Medicare out-of-hospital services for the remainder of the calendar year. The out-of-pocket cost is the difference between the fee charged by the health practitioner and the standard Medicare rebate received by the patient from Medicare.

The thresholds set by Medicare are:

- \$610.70 for Commonwealth concession card holders and those who receive Family

Tax Benefits (Part A)

- \$1,221.90 for all other singles and families

Carer's Allowance

Carer's Allowance is an income supplement available to people who provide daily care and attention in a private home to a person with a disability or severe medical condition. To be eligible for the Carer's Allowance, a person must be providing daily care and attention to a person with a medical condition who is either:

- aged 16 years or over and whose disability or severe medical condition is permanent or present for an extended period of time (as assessed under the Adult Disability Assessment Tool through Centrelink).

- a dependent child under the age of 16 years whose disability or medical condition appears on the List of Recognised Disabilities or qualifies under the Disability Care Load Assessment made by Centrelink.

If you are eligible for a Carer's payment from Centrelink, you will also receive an additional annual payment of \$1,000.

For a list of recognised disabilities visit the guide to the revised lists of recognised disabilities on the Department of Families, Housing, Community Services and Indigenous Affairs website.

To find out more information about your eligibility for the Carer's Allowance, please visit your local Centrelink office or call 132 717.

PRIVATE HEALTH INSURANCE

As there are different levels of cover within each health fund, it is important that you contact your Private Health Insurance Provider prior to coming in to the SCDC to find out the details of your cover for psychology. When you come in for your appointment, let admin know the following details:

- ❖ Are you covered for psychology under your Private Health Insurance?
- ❖ Is your cover broken up for each person in the family or provided as a whole family?
- ❖ Are there different rebates for different sessions e.g. Do you get a higher rebate for an initial appointment compared to a subsequent appointment?
- ❖ Does your cover cap at a certain amount or number of sessions e.g. Are you allocated \$300 of total rebates or it is an unlimited cover?

This information is based on information from the Australian Government Department of Health and Ageing and Medicare Australia. To the best of our knowledge the material is accurate at this time.

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