

# SUBMISSION

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## AMA submission to the MBS Health Assessment Items Review

By email: [MBSHealthAssessmentReview@health.gov.au](mailto:MBSHealthAssessmentReview@health.gov.au)

### Introduction

The Australian Medical Association (AMA) consistently advocates for a holistic approach to healthcare and supports the development of a more streamlined MBS system that does not compromise in meeting the health needs of Australians. General health assessment items are effective, comprehensive services that instigate patient care pathways tailored to the individual, capable of responding to specific health needs.

Under the ongoing review of MBS items, as well as the implementation of the Strengthening Medicare agenda, the government and the Department of Health and Aged Care have embarked on a broad schedule of changes, many of which bear directly upon the work of general practitioners.

This busy schedule of reform, including *MyMedicare* implementation, the streamlining of chronic disease management items, and the broad reviews of workforce incentives and scope of practice, requires time to adequately observe the impacts of policy changes to medical practice and engage in thorough consultation with stakeholders to perform adequate review of their success. GPs must also expend a great deal of energy adjusting to the changes and the implications to their service delivery.

The AMA is concerned that by adding significant review of health assessment items at this time, the department may be overambitious in implementing numerous, broad reforms in a short period of time.

In this review, the department proposes three different approaches to reforming health assessment (HA) items. In simple terms:

1. Minimal adjustments in alignment with clinical practice.
2. Moderate changes that will involve combining/consolidating some existing items and removing others.
3. A significant overhaul redistributing the function of a number of health assessment items into specific health check items where it is proposed those outcomes may be more effectively achieved.

The AMA supports minor adjustments to specific health assessment items to ensure they are used effectively, in line with the minimum approach suggested. Additionally, we are open to discussing some aspects of the moderate approach. In particular, the AMA is supportive of the recommendation

to combine chronic disease, type 2 diabetes and heart health checks into one health assessment item and looks forward to exploring this further with the department. Such a change could streamline the HA environment while still allowing patients clinically appropriate access to comprehensive assessments.

The AMA's core position is that health assessment items must remain general in application and support longer consultations that will allow GPs and their teams to spend the time required with patients for holistic and comprehensive care.

Given usage data for MBS items is limited to merely communicating the number and frequency of a particular service, the AMA considers the views of clinicians are essential in determining the utility and impact of the health assessment items. With consideration for the RACGP preventive health guidelines from which the recommendations have primarily been drawn, our input on this policy is critically informed by our own members' clinical input regarding the value and scope of health assessment items.

The AMA does not support significant changes to health assessment items, particularly proposals to alter the structure of these items into narrow, disease-specific streams that create navigation challenges for patients and health providers alike.

The AMA acknowledges practitioners' and patients' awareness and understanding of some health assessment items is highly variable. This is reflected in low uptake or repeat uses of health assessment services by some patients and practitioners. We are open to discussing changes which may streamline and simplify health assessments, while supporting the objectives of the Strengthening Medicare Taskforce Report and ensuring GPs and patients have access to comprehensive health assessment items. The AMA envisions health assessments taking on a greater role as practices move to a multidisciplinary team-care model, providing a framework and set of outcomes to drive patient-centred care.

Potential shortcomings or underperformance associated with health assessments should be addressed through greater effort to educate patients and practitioners regarding the intent and flow-on healthcare benefits inherent in this care pathway.

### **Benefits of health assessment items**

Preventive healthcare is an essential component in our health system in dealing with the increasing burden of chronic disease and the health system's capacity to meet demand. Structured approaches to preventative care, which are well-resourced and include health literacy programs to improve patient and provider awareness of programs, are essential to managing the pressures facing our healthcare sector.

In the past, the AMA criticised the National Preventive Health Strategy. Despite the strategy's emphasis on the burden of chronic disease, it omitted the importance of GP-led early intervention. Early action on chronic disease is enabled by providing additional supports for patients to access screening, including screening for hypertension, diabetes and cardiovascular conditions. It is the role of general practice to coordinate and ensure continuity of care throughout the investigation and management of a patient's potential or known health issues.

The consultation paper recognises that in addition to health assessment items much preventive healthcare is incidental in practice. It is embedded in everyday conversations between practitioners and patients about lifestyle factors. This activity is not well-recognised but remains integral to patient health outcomes over time.

Changes to health assessment items should act to normalise health checks for patients as an annual (or regular interval) consultation with their GP that informs their engagement with other health providers. Establishing health assessments as a regular, comprehensive health service will not cease the everyday conversations between providers and their patients that prompt appropriate action but will formalise a process that supplies patients with understanding and encourages them to engage productively as managers of their own health.

The department cites reported data that demonstrates a high proportion of health assessments are performed by a minority of practitioners. Some 33 per cent of providers delivered 83 per cent of time-tiered health assessments, which may indicate the need for greater education and clarification on the purpose and utility of the health assessment items.

The AMA is comfortable with the time-tiered nature of the most commonly used health assessment items and the frequency of their application. However, we recognise variation across health assessment items may lead to confusion and are open to further discussions about improving this. However, we would not support broad measures to remove time-tiered health assessment items.

Health assessments provide protected, extended consultations to explore complex health problems and strategise a treatment pathway, including social prescribing to assist the patient with their healthcare. Protected, extended consultation times permit practitioners to perform comprehensive reviews with vulnerable patients, who are the chief cohort targeted through health assessments and the patients most likely to possess the most complex of health concerns.

Should changes be adopted, it is essential that provisions for practice nurses to assist with health assessments are retained. The AMA welcomes additional supports to the preparation of relevant patient medical records prior to health assessment consultations to ensure they are thorough.

To support continuity of care, we suggest patients registered through *MyMedicare* be required to access health assessment items through the practice where they are registered. This approach is in line with forecast changes to the chronic disease management items.

### **Health assessments should remain general and non-specific**

The AMA considers structuring health assessment items specific to disease does not align with the provision of comprehensive GP care. It is impractical on a system level and our clinicians advise this approach does not bring about the intended patient health outcomes.

Refinements could be made to existing health assessment items to ensure the most clinically relevant investigation into health issues is undertaken, resulting in tailored, culturally sensitive and effective preventive activities.

Cited data indicates most time-tiered health assessments are long (45 minutes or more) or prolonged (60 minutes or more) and conducted mostly with older Australians among whom we see a greater prevalence of complex health conditions requiring ongoing monitoring.

It is possible to deduce from the data that more general health assessments are serving the intended purpose in their current format by capturing the most vulnerable patient cohorts and directing them to the specific care pathways to manage their conditions.

### **Scope of practice for health assessment items should not be broadened**

The AMA strongly encourages the department to ensure health assessment items continue to support the central role of the GP for comprehensive care.

GPs have the broadest diagnostic and initial health management range of any practitioner. As such, they are best placed to coordinate and review patient pathways, from diagnosis to treatment, including oversight of multidisciplinary team care. GPs are specifically trained in the generalist skills to deliver the complex consultations that support longitudinal care.

While the coordinated care and supportive services rendered to GPs by practice nurses and other team members are essential to the quality of healthcare general practices provide, the AMA cannot support fragmenting the provision of health assessments by broadening the scope of eligibility for health assessment provision. Effective coordination can already be achieved through practice collaboration and structured referrals.

We look forward to continuing, more detailed conversations about how to ensure health assessment items remain fit-for-purpose in allowing patients to access comprehensive, preventative healthcare with their usual general practitioner.

#### **Contact**

[president@ama.com.au](mailto:president@ama.com.au)

See Also:

[AMA submission to the Department of Health on the MBS Heart Health Assessment Items \(2020\)](#)