

Enhanced access to GP-led team-based care

Key Issues

From 1 January 2020, the new Workforce Incentive Program will streamline existing GP, nursing and allied health incentive programs, replacing the General Practice Rural Incentive Program (GPRIP) and the Practice Nurse Incentive Program (PNIP).

This new program will also extend subsidy support to assist general practices to employ other health professionals, including non-dispensing pharmacists.

However, payments under the current incentives are not indexed. This means the incentive payments do not keep pace with inflation and thus become less effective as an incentive over time.

Patient consideration

An effective way to deliver quality care is through GP-led multidisciplinary care teams.

Planned multidisciplinary team-based care has been demonstrated to improve outcomes in patients with chronic disease in primary care.

If appropriately funded, the new Workforce Incentive Program has the potential to improve quality of care for patients through GP-led team-based care.

Government consideration

The costs of running a medical practice are inextricably linked to the cost of wages and the Consumer Price Index (CPI). With wages increasing around 2% per annum and CPI increasing on average by 2.1% over the last 10 years, the non-indexation of incentive payments overtime significantly decreases their value and effectiveness.

With a move towards GP-led multidisciplinary team care, allied health practices, which are typically small or solo operations, are increasingly co-locating with medical practices.

Likewise, the growing burden of chronic disease and ageing population, along with a recognition of the benefits of care planning, means general practices are also recruiting “in-house” allied health providers who contribute to the patient’s health care management.

Capping the funding that a practice is eligible for inhibits the capacity of practices to evolve and expand the range of health care services they can provide to meet their patients’ health care needs.

If the value of the incentives provided by the Government are not maintained in real terms then, year on year, the Government is effectively disinvesting in both general practice and rural health. Caps on incentive payments restrict the capacity of practices to grow and enhance practices’ health care team.

AMA position

The AMA calls on the major parties to support enhanced access to GP-led team-based care for patients by lifting the caps on subsidies available through the incoming Workforce Incentive Program, better supporting the employment of nurses, pharmacists, and allied health professionals in general practice.

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