



AAPM Approved 2024 5 CPD Points

apm Australian Association of Practice Management

MyMedicare General Practice Aged Care Incentive

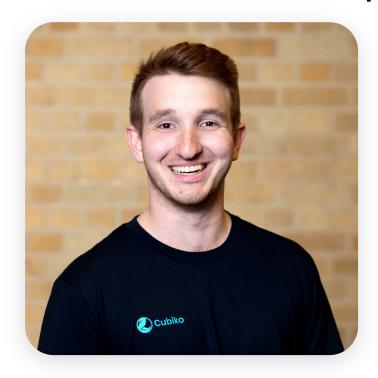
Acknowledgement of Country

In the spirit of reconciliation, Cubiko acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and community. We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.

Gaagal by Miimi and Jiinda



Meet our presenters



Rob Dickson



Dr Janice Tan





Housekeeping

- Please change your chat from 'Host and Panelists' to 'Everyone' so that everyone can view and join in the conversation.
- If you have a question, please add it to the Q&A area at the bottom of your screen. This helps ensure that we can see and answer your questions.
- This session will be recorded. A copy of the recording will be sent out later today, along with any links or resources shared in today's session.





Session Overview

- How you can use your practice data to assess the impact of the upcoming MyMedicare changes
- The workflows you can implement to identify which patients you may want to register with MyMedicare
- The details of the new General Practice in Aged Care Incentive, including how it works and how you can benefit your patients.
- Methods for monitoring and tracking progress of the General Practice in Aged Care Incentive.
- Strategies for utilising the General Practice in Aged Care Incentive to maximise patient care and optimise income for your practice.





Disclaimer

Neither Janice or I (or Cubiko / MedicalDirector) are government agencies. We have gathered various government sources to provide you information regarding the incentive. It is best to consult the sources directly.

It is always best to understand that this information and advice is general in nature and to please refer to government advice.

Top tip: If you're unsure, reach out to your PHN. They can support you.





MyMedicare Timeline

July 2023

Practices can register for MyMedicare October 2023 Register patients with MyMedicare November 2023 Registered patients unlock extended telephone consults and triple bulkbilling incentive for telehealth consults FY2023-24 Stakeholder engagement for frequent Hospital Users Incentive to begin FY2024-25 Frequent Hospital Users Incentive to begin across 9 PHNs initially August 2024 Aged Care Incentive program is slated to begin

November 2024

Changes to CDM care. A registered patient with MyMedicare can only receive CDM care from their registered practice.







Do you currently have General Practitioners at your practice who provide services to patients at an RACF?

> Yes

> No





General Practice in Aged Care Incentive (GPACI)

- Quarterly incentive payments in registered General Practitioner & practice (rural loadings for MMM3-7)
- Eligible patients based on permanently live in a Residential Aged Care Facility ٠ (RACF), register with MyMedicare and link to eligible provider.
- Patients then need to have the GPACI indicator selected on their MyMedicare profile by their practice
 - Patients can be registered from 1 July 2024
- Practices will need to;
 - Link Providers and their MyMedicare patients to their practice
 - Select the GPACI indicator on their MyMedicare profiles
 - Link patients to responsible providers •

https://www.health.gov.au/sites/default/files/2024-05/general-practice-in-aged-care-incentive-fact-sheet_0.pdf





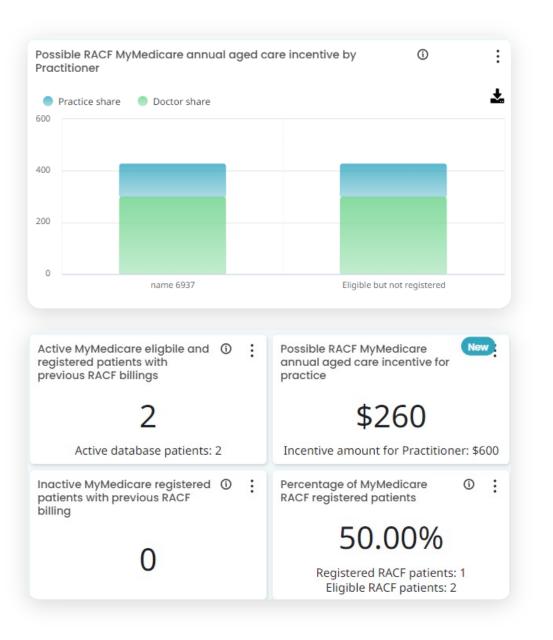


GPACI Payments

- Replacing current PIP / SIP for RACF Patients
- Provider & patient must be eligible
- \$300 per patient per year paid to the registered provider paid quarterly
- \$130 per patient per year paid to the registered practice paid quarterly







Estimating the Incentive

- Look at how many RACF patients you service for your practice.
 - Tip: Permanent RACF patients not those who have visited respite.
- Break down by each GP and practice amounts
- Calculate patients to PIP/SIP (\$130/\$300)
- Potential value of the incentive

Is it worth it for GPs at your practice, your practice and **your patients**?





Will General Practitioners at your practice be taking up the new GPACI?

> Yes

> No







Servicing Requirements for GPACI

Eligible providers and practices are required to meet the servicing requirements for payment:

- Two eligible care planning services over a 12-month period
- Two eligible regular visits per quarter
 - Each in a separate calendar month
 - Delivering at least eight regular services in a 12-month period





Telehealth and Care Support

Services must be delivered under the responsibility and direction of the responsible provider.

At least one of the regular visit (per quarter) must be provided by the responsible provider.

A second visit (per quarter) can be delivered by the responsible provider or another member of the patient's care team.

This includes:

- An alternate provider within the same practice
- GP registrar
- Nurse practitioner
- Aboriginal and Torres Strait Islander health practitioner or health worker.

Practices located in Modified Monash Model (MMM) areas MMM 4 - 7 will be able to provide 4 four regular visits per 12 - month period by eligible telehealth MBS items where they are unable to attend a face-to-face service.





Care planning services for GPACI

The responsible provider must deliver at least two eligible care planning services within a 12-month period.

Eligible care planning includes a range of Medicare Benefits Schedule (MBS) and Department of Veterans' Affairs (DVA) items in the following categories:

- Comprehensive medical assessment (HAs -701, 703, 705, 707)
- Contribution to, or review of, multidisciplinary care plan (731)
- Multidisciplinary care conference (GP arranged or participated) (735, 739, 745)
- Residential Medication Management Review. (900 / 903)

Note: We are doing a webinar on MMRs July 11th

Disclaimer: These item numbers may be subject to change.





Regular Services for GPACI

Two eligible regular visits per quarter

- Each in a separate calendar month
- Delivering at least eight regular services in a 12-month period
- Level A 90020 (\$19.60) Level B - 90035 (\$42.85) Level C - 90043 (\$82.90) Level D - 90051 (\$122.15) Level E - 90054 (\$197.90)

Note: <u>The triple incentive does apply to RACF face-to-face general attendance consultations</u> <u>WAPHA have a great resource for RACF Services</u>

PSA: 3.5% MBS Indexation since July 1st (yesterday)





Potential Billings from RACF Services

Over 12 months, what are the potential billings from the services required to be eligible for the GPACI incentive payments?

Example: MMM1 practice, drill down to 1 General Practitioner for 1 patient Note: Rural loadings will apply to provider and practice incentive payments for Modified Monash Model (MMM) regions MMM 3 - 7.

Provider

\$300 GPACI Incentive Payment 2x Eligible Care Planning Services (731, 705) 2x Regular Visits per quarter (8x 90043 + BB incentive - 75870) Total Billings: \$80.20 + \$216.80 + \$663.20 + \$170.80 Total Income: \$300 + 65% of \$735.15 = **\$1,035.15 per patient per year**

Practice

\$130 GPACI Incentive Payment
35% of Billings
Total Income: \$130 + \$395.85 = \$525.85 per patient per year







DOWNLOAD

Achieving Financial Sustainability Workflow & Service Analysis Tool



Achieving Financial Sustainability: Workflows for your practice	
Financial Sustainability.	
Achieving the practice	
In an era of stagnant Medicare rebates and a sharp increase to way weble costs, running a financially sustainable General Practice is	
paramount.	
oonsumaale const paramount. Financial sustainability plays a key role in a practice being able to deliver high-quality health care services, while enabling medical professionals to maintain a skilled workforce and uphold exceptional standards of care.	
Maintain a skilled workdore an our Marcover, these practices play a piletal role in enhancing patient accessibility, ensuing that heathcare remains affordable and accessible to all, thus boistering the overall heath and visality of the community it	
serves.	
it's important to note that this process isn't static, expension billings and income vary – it operates in a continuous cycle.	
Where are you name	
Recent and you from	
Action what is possible	
F What is your meeting it	
Becker what is provided	





It's not all dollars and cents

Nearly 100 aged care facilities record COVID vax rates below 10%

With more than 450 active outbreaks at last count, experts say the 'disappointingly low' coverage is putting the already vulnerable at risk.



More than 3700 COVID-19 cases have been reported in 453 active outbreaks in RACFs as of 20 June.

https://www1.racgp.org.au/newsgp/clinical/covid-vax-rates-below-10-at-nearly-100-aged-care-f







Primary & Community

Tracking services provided

Looking at your RACF cohort use your data to see what services are being provided and when to ensure you stay compliant with GPACI.

MyMedicare Patient Cohorts					
My patients ①	:	My CDM patients ①	:	My RACF patients ①	:
26.36%		41.42%		50.00%	
Registered MyMedicare patients: 1,786 Eligible MyMedicare patients: 6,775		Registered CDM patients: 1,152 Eligible CDM patients: 2,781		Registered RACF patients: 1 Eligible RACF patients: 2	

	INTERNAL	Record no.	Patient	MyMedicare regis	Registered Practit	Next appt	Time	Appt with
1	613	35888	surname 1759, firstname 7522 (40yrs -	MyMedicare registered	name 6937	10/07/2024	10:20	firstname 2781
2	1659	23775	surname 9535, firstname 3681 (23yrs -		Eligible but not	No	No	No appointment

Last CDM billing	Last 900/903 (or e	Last HA billing	Last RACF billing	# F2F visits in 2 yrs	Last F2F visit
31/05/2024	No billing history	20/2/2020 (Age: 36)	31/05/2024	24	28/06/2024
04/02/2019	06/04/2020	Never had a health	07/12/2020	2	02/02/2024





BOOK A DEMO

Cubiko Online Demonstration for how we can help your practice manage MyMedicare



We'll connect y	ule a demo ou with a Cubiko expert who can out the platform and answer any	
i First name Jane Email	(2) (3) Last name Doe	
name@mypractice	Next	





Registering your RACF Patients for MyMedicare

- Admin most likely will be completed via the forms
- Check eligibility of patient 2 F2F visits in last 24 months
- Have a .rtf for the MyMedicare registration form, print off for team before going to the facility
- Practitioner discusses with patient, patient fills out if applicable
- Return back to practice and admin team enter details
- Upload Registered patients or manually tick in your PMS
- Assign program to the Patient in PRODA





DOWNLOAD

Effectively managing MyMedicare registrations workflow practice









Registering your practice for GPACI

On PRODA

- 1. Go to your Organisation Register
- 2. Click Associated Sites Tab
- 3. Click on your ID number
- 4. Go to Program Registration Tab
- 5. Click on drop down list
- 6. Select MyMedicare GPACI
- 7. Click add program.

Important note - You must have your bank details recorded for MyMedicare first.

To add bank details (if not recorded)

- 1. Under Program Registration Details
- 2. On the MyMedicare line click Details under Action Column
- 3. Scroll down to section Banking Details
- 4. Click Add
- 5. Then declare and save .

Note if you update or enter bank details today you cannot register for GPAIC Program until tomorrow

Thank you to Dianne Loubey for providing these steps in the Practice Managers Network Facebook group





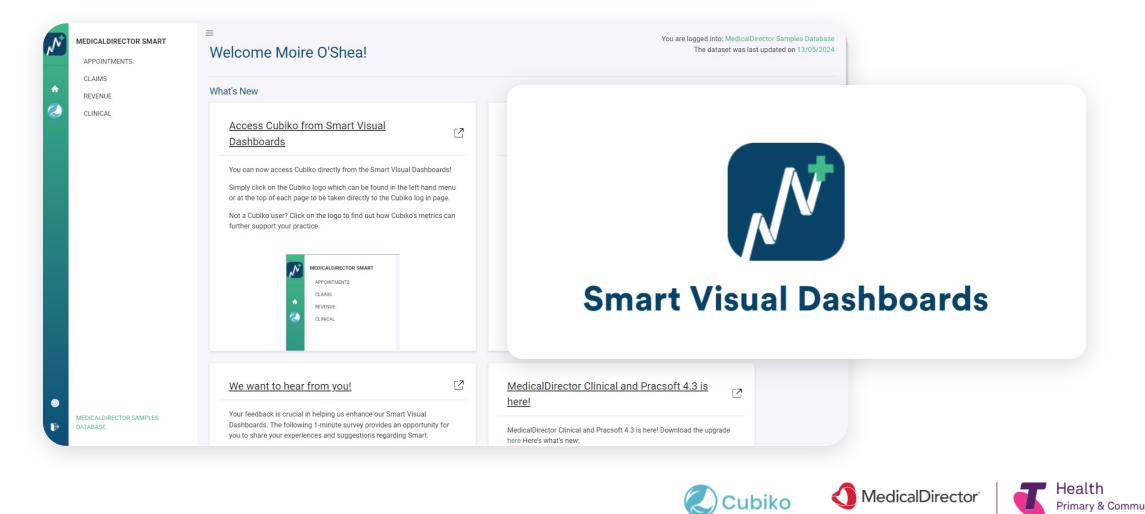
What Practice Management Software do you use?

- > Best Practice Software
- > MedicalDirector PracSoft or Helix
- > ZedMed
- > Other



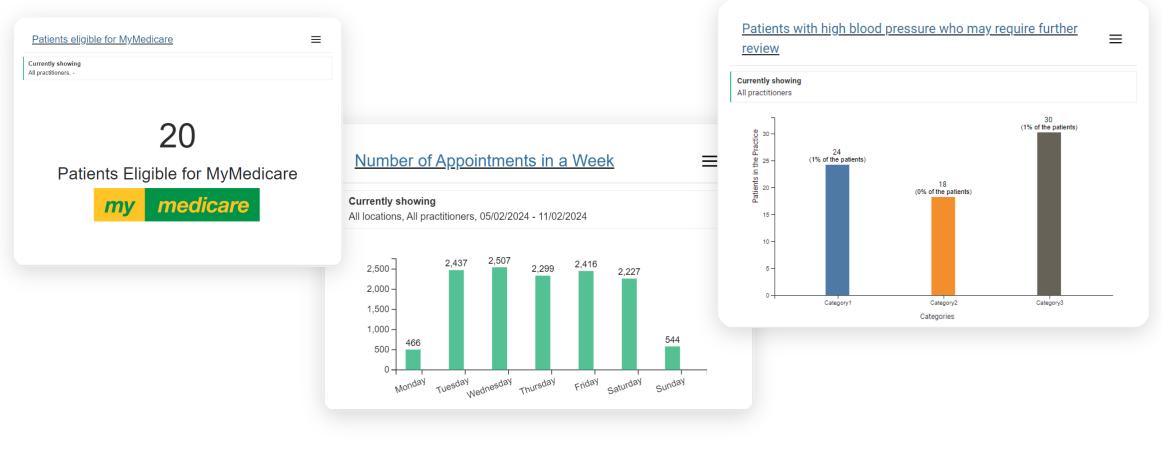


Introducing Smart Visual Dashboards - Free with MDC 4.3



Primary & Community

SVD displays various metrics important to running a GP practice







SVD helps with MyMedicare enrolment

LINICAL DASHBOA	.RD → PATIENT	TS ELIGIBL	E FOR MYMEDICARE							The datase	was last updated on
Patients	eligible fo	or My	Medicare								
All practitioners	~	Upco	ming Appt From:	Upcor	ning Appt To:	Careplan	Billed Or Not Billed	✓ Apply	0		
50 rows per page	~	Exp	ort								
Not Contacted Pat	ients (16) Conta	acted Patie	nts								
PATIENT RESPONSE EDIT	PATIENT	AGE 🗢	PATIENT CONTACT NUMBER	F2F VISITS WITHIN 24 MONTHS 🗘	TELEHEALTH CONSULTS	CHRONIC DISEASE DIAGNOSIS	CAREPLAN BILLED WITHIN 12 MONTHS	RACF STATUS 🗢	UPCOMING APPOINTMENT DATE 🗢	UPCOMING APPOINTMENT WITH \$	NUMBER OF DEPENDENTS
 Accepted Rejected 	Anna NoName13	53	0456789022	3	_	Y	N	N	10/07/2024 00:00:00	Dr Aasv	2
AcceptedRejected	Anna NoName14	54	0456789023	3	1	Y	Ν	Y	20/07/2024 00:00:00	Dr Aasv	3
 Accepted Rejected 	Anna NoName15	55	0456789024	3	2	Y	Y	N	30/07/2024 00:00:00	Dr Bber	4
AcceptedRejected	Anna NoName16	56	0456789025	3	3	Y	Y	Y	10/08/2024 00:00:00	Dr Bber	_
Accepted	Anna NoName17	57	0456789026	3	4	Ν	Ν	N	20/08/2024 00:00:00	Dr Aasv	1
Rejected											
Rejected Accepted Rejected	Anna NoName18	58	0456789027	3	5	Ν	Ν	Y	30/08/2024 00:00:00	Dr Aasv	2



Patients Eligible for MyMedicare	RESPONSE EDIT	PATIENT	AGE 🗢	NUMBER	MONTHS \$	WITHIN 2
my medicare	AcceptedRejected	Anna NoName13	53	0456789022	3	_
	AcceptedRejected	Anna NoName14	54	0456789023	3	1
	AcceptedRejected	Anna NoName15	55	0456789024	3	2
	AcceptedRejected	Anna NoName16	56	0456789025	3	3
	Accepted	Anna				







Guide to MyMedicare in MedicalDirector

PRACTICE MANAGEMENT LAST UPDATED: 21 / 05 / 24

MyMedicare administration in MedicalDirector: Your Essential Guide

Here you'll find everything you need to know about MyMedicare. You can also learn more about the MyMedicare program through a <u>series of short videos here.</u>

What is MyMedicare?



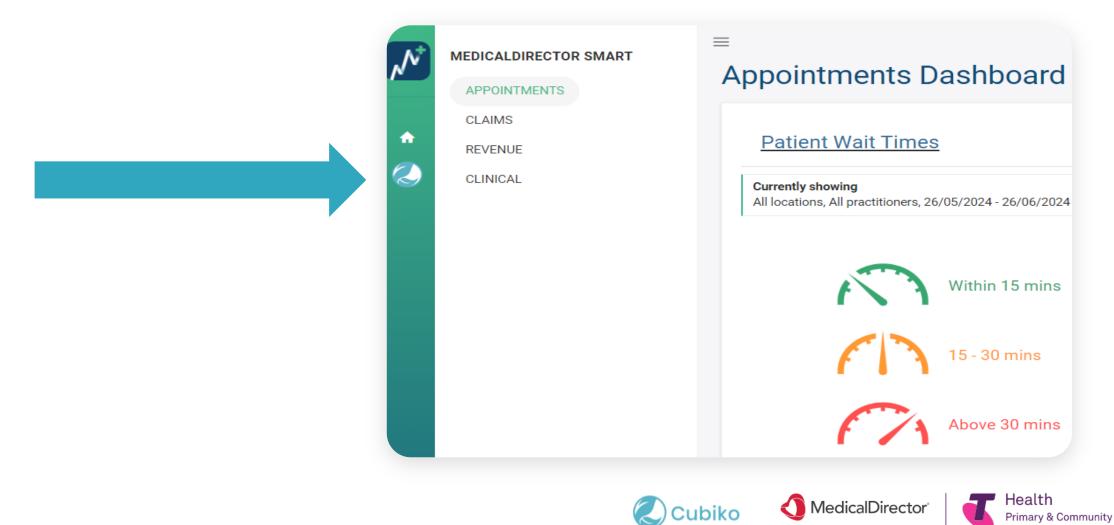
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Health Primary & Community

Can be accessed here: What is MyMedicare: Your MyMedicare Administration Guide | MedicalDirector

Single Sign On is available for integrated partners on SVD – including Cubiko!



Looking to the future with MedicalDirector and MyMedicare

- Come join our Smart Manager forum!
- MDC & Clinical Manager (Aged Care software) integration workflows
- Seeking further feedback and advice on further integrations

We look forward to hearing from you: ecosystem.solutions@medicaldirector.com









Rob Dickson



Dr Janice Tan



