



Supporting practices through the new Chronic Condition Management changes

Medical Business Gervices

Acknowledgement of Country

In the spirit of reconciliation, Cubiko, MediCoach and Medical Business Services acknowledge 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



Chris Smeed CEO & Founder of Cubiko



Nick Adams COO at Cubiko



Kim Poyner Founder of MediCoach



Riwka Hagen Founder of Medical Business Services





Your GPCCMP Compass



North: Better patient care Enhanced health outcomes

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South: Operational Efficiency Streamlined workflows



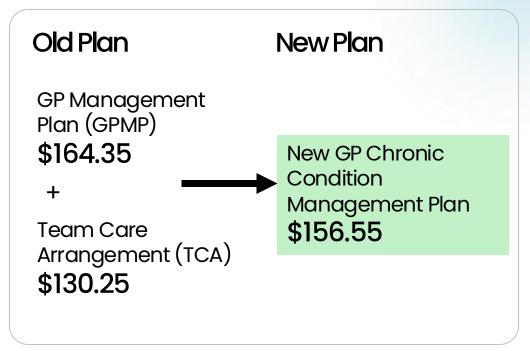


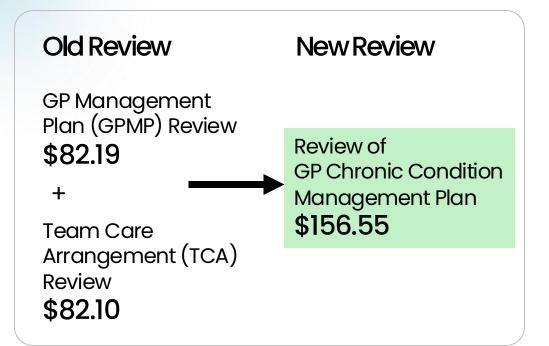
West: Implementation Path Clear transition steps





What is changing









What is changing

- Equal fees for creation and reviews
- No annual plan rewrites needed just quarterly reviews

Referral letters replace TCA forms

WyMedicare patients use registered practice only



What stays the same

- Same eligibility (chronic condition 6+ **Å**[§ months or terminal)
- Same allied health service allocations (5 individual, 10 Aboriginal and Torres Strait Islander)
- Same clinical judgment determines patient suitability

Same bulk billing incentives and co-claiming restrictions



Better patient care

Enhanced health outcomes

"55% of patients with a GPMP didn't receive even one review in 12 months"

MBS Review Taskforce – General Practice and Primary Care Clinical Committee Report (Phase 2, 2018)



One Integrated Plan = Better Care

Before

- Fragmented Approach
- GPMP created separately
- TCA requires 2+ provider consults
- Patient bounced between processes

After

- Living Document Approach
- Single GPCCMP that grows with patient
- Create once, only reviews needed
- Nurse expertise recognised
- Quarterly reviews, never stale
- One document, continuous improvement



Sarah's story

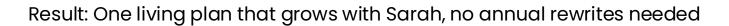
Meet Sarah - 65, with diabetes and arthritis requiring complex care coordination

Old way

- GP creates GPMP in January
- Waits to coordinate TCA with physio and dietitian
- TCA finally completed in March
- First allied health visit in April
- Plan sits static until next year's rewrite

New Way (Living Document)

- GPCCMP created in one visit in January
- Immediate referrals to allied health
- March review: Plan updated as diabetes improves
- June review: Arthritis flares, plan adapts
- September review: New goals added as fitness improves
- 10997 nurse support (FTF & telephone) to set lifestyle goals and to increase movement









The MBS now clearly specifies: "reviews can be conducted once every 3 months if clinically relevant."



Chronic conditions don't wait



Evidence-based frequency



Better outcomes, fewer crises





MyMedicare and Bulk Billing

MyMedicare Requirements

Patients registered with MyMedicare must access GPCCMP through their registered practice only.

This secures patient retention for chronic care and prevents service access at other practices.

Non-MyMedicare Patients

Can access GPCCMP services at any General Practice but should be with usual GP.

Bulk Billing

GPCCMP items eligible for single bulk billing incentives Included in expanded Bulk Billing Practice Incentive Program (November 2025)



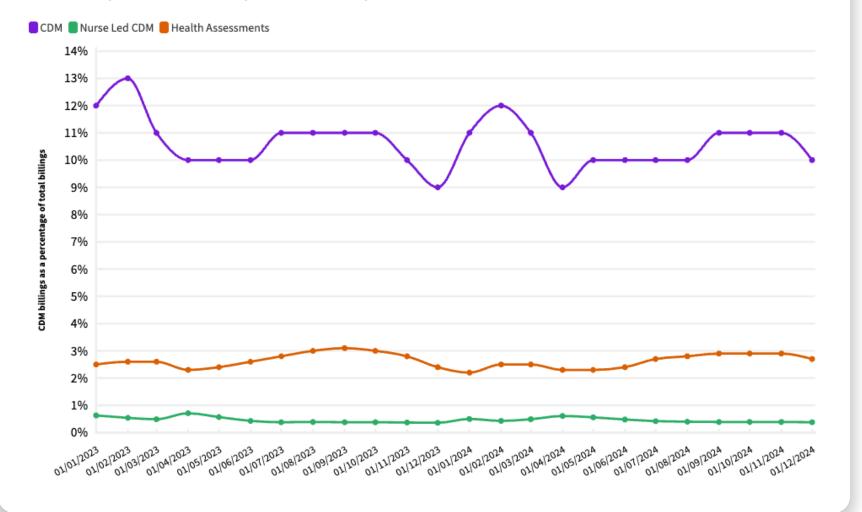


Financial Optimisation

Improved practice revenue



CDM billings as a percentage of total billings



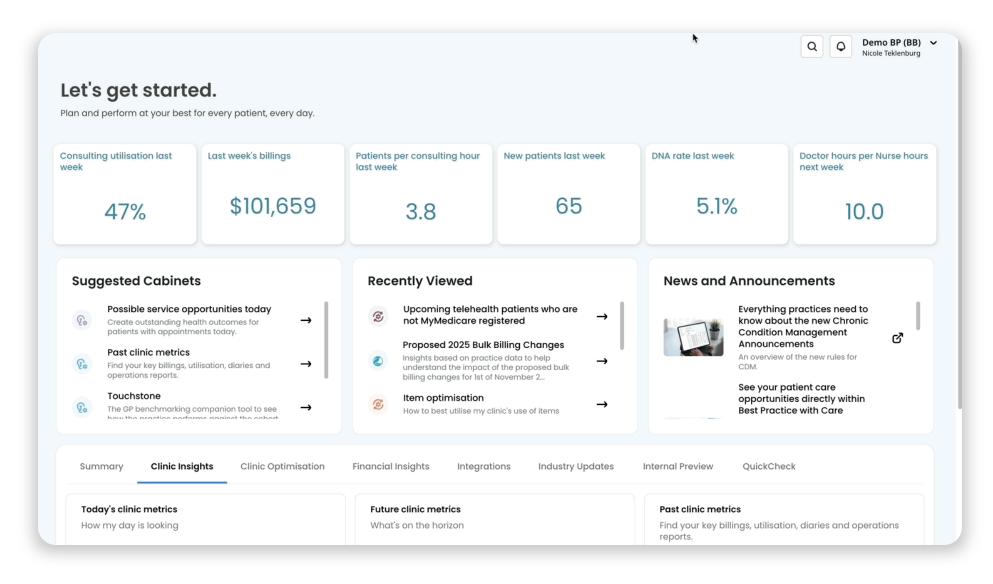














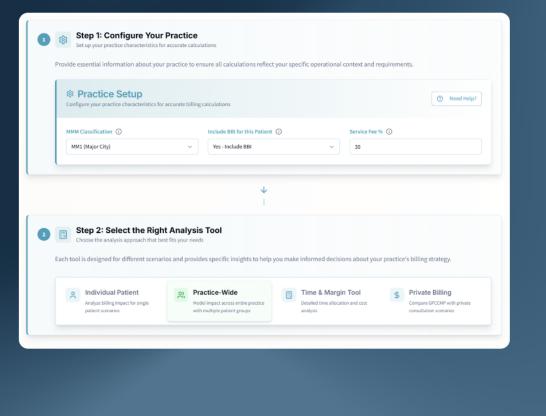


Featured Resource

Free CDM to CCM billings forecast tool

We know the shift from CDM to GPCCMP can feel like a big change That's why we created this tool: to give you clarity, confidence, and a simple way to see how the changes might affect your practice.

Try it out







Operational Efficiency

Streamlined workflows

The new GPCCMP system dramatically reduces administrative burden across your practice workflow.



Administrative Time Savings

Streamlined Documentation Process

Before: Multiple Document Juggling

- Coordinate TCA with 2+ providers (phone calls, emails, delays)
- Separate billing for each component
- Multiple templates to manage

After: One Integrated Workflow

- Single GPCCMP creation (15 minutes)
- No provider pre-coordination required
- One billing process
- One template format



Care Planning Workflow







Extended Workflow







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5		KELLY, A	(56yrs - Mogill)		Potential new CDM co	are plan			10/06/2025		
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Cubiko	Send Care Prompts		Best Practice
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Implementation Path

Setting sun on old processes: Your transition roadmap





Now to June 30, 2025

Preparing your practice

Templates and Documents	Systems	Processes
Most PMS will provide updates	Practice management	New billing workflows
•	software updates	Staff training checklists
Custom templates		
need manual updating	New workflows and reminder systems	 Patient communication templates
	MyMedicare integration	





Staff Training Priorities

Building Your Team's Confidence

GPs/PMPs Need to Know

New GPCCMP requirements and documentation

MyMedicare patient identification

When to use creation vs review items

Quarterly review clinical framework

Cubiko CPD

Practice Nurses

Formal role in GPCCMP preparation

Documentation requirements

How their input adds value

Review preparation workflows

Lifestyle support and health coaching role

Patient engagement

Reception/Admin

New appointment types and scheduling

MyMedicare registration support

Billing changes and coclaiming rules

Patient communication messaging







Go-Live Phase

- New GPCCMP items available use for all new CDM plans



Monitor billing processes closely

Old items (721, 723, 732) CEASE - cannot be billed



ς^δ Support staff training on new workflow





Patient Communication

Core Messages

Your care plan is getting simpler and better

More regular check-ins keep you on track

Your nurse will be providing more regular check ins with you to better support your lifestyle and health management

Communication Channels

Practice newsletter updates

Appointment booking conversations

Consultation discussions

Waiting room posters, website & social media

MyMedicare Support

Explain registration benefits

Provide enrolment assistance

Address patient concerns promptly



July 1, 2027

Full Transition Complete

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All patients must have GPCCMP for continued access

Hedication management reviews require GPCCMP





Your Compass Points Summary

NORTH: Better Patient Care

- One plan replaces GPMP + TCA complexity
- Living document with quarterly reviews
- Nurse expertise formally recognised

EAST: Financial Optimisation

- New items available July 1, 2025
- Simplified processes
- Quarterly reviews now possible

SOUTH: Operational Efficiency

- Potential revenue increase with additional reviews
- Equal fees for creation and review (\$156.55)
- Revenue depends on reviews

WEST: Implementation Path

- 2-year transition period provides flexibility
- Staff training is essential
- Start gradually with willing patients





Staying on course

Resources available to support your GPCCMP journey

GPCCMP Comparison Tool Analyse financial impacts and understand the benefits for your specific practice context.

Training Materials Comprehensive staff education resources to ensure everyone is confident and prepared. Work

Workflows & Cheat Sheets

Streamline implementation with ready-to-use process guides and quick reference tools.

Visit <u>www.cubiko.com.au/gpccmp</u> to access these resources and keep your transition on track.







Bookmark the Resource Hub

Keep up to date with all things GPCCMP

https://www.cubiko.com.au/gpccmp/





Accessing Additional Support

Contact Cubiko, Medical Business Services and MediCoach



Cubiko



Medical Business Services



MediCoach







Tune into 🛞 Medicubes





FAQ





