

4.1 General practitioner mental health treatment plans

Context

This data item examines the number of mental health treatment plans prepared by general practitioners. These data are sourced from the MBS and show the number of plans prepared per 100,000 population.

General practitioners are often the first contact for people needing mental health support. Reforms in 2006 aimed to increase access to mental health care by introducing Medicare reimbursement for general practitioner mental health services. However, debate is ongoing about the relative importance of mental health treatment plans compared with other interventions such as referral to specialist services.¹

Mental health treatment plans provide a structured framework that general practitioners can use to carry out early intervention, assessment and management of patients with mental disorders. Importantly, they also provide referral pathways to other health professionals.²

Preparing a mental health treatment plan involves assessing the patient and then developing content. An important component of the plan is follow-up of the treatment, especially for people with depression and anxiety. If completed as indicated, the plans represent evidence of clinician concern with, and willingness to address, mental health. That is, they are a sign of good mental health practice. The plans are the gateway to access psychological therapy interventions, which evidence suggests are underused in some communities.³ An evaluation of MBS-funded mental health treatment plans found that treatment rates for Australians with mental illness increased as a result. However, it also found that some groups such as young people aged less than 15 years, men, people living in rural and remote regions and people living in areas of high socioeconomic disadvantage are not accessing the services they need.¹

The data includes MBS items relating to general practitioner preparation of mental health treatment plans. They do not include MBS items for mental health plan reviews or other general practitioner attendance for mental health, or services provided through the program Access to Allied Psychological Services.

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Magnitude of variation

In 2013–14, there were 965,946 MBS-funded services for the preparation of mental health treatment plans by general practitioners, representing 4,260 services per 100,000 people (the Australian rate).

The number of MBS-funded services for the preparation of mental health treatment plans by general practitioners across 325* local areas (SA3s) ranged from 354 to 7,427 per 100,000 people.

The number of services was **21.0 times higher** in the area with the highest rate compared to the area with the lowest rate. The average number of services varied across states and territories, from 1,705 per 100,000 people in the Northern Territory, to 4,769 in Victoria.

After excluding the highest and lowest results, the rate of services for the preparation of general practitioner mental health treatment plans across the 302 remaining local areas was **3.5 times higher** in one local area compared to another.

The lowest rates of general practitioner prepared mental health treatment plans were in remote SA3s in the Northern Territory, Queensland and Western Australia. Rates were higher in areas along the east coast of Australia, and around capital cities, especially in outer suburbs.

The highest rates of general practitioner prepared mental health treatment plans were in major cities and inner regional areas. Rates decreased with increased distance from urban centres. In major cities and inner and outer regional areas, rates were lower in areas of high and low socioeconomic status.

Interpretation

Potential reasons for the variation include differences in:

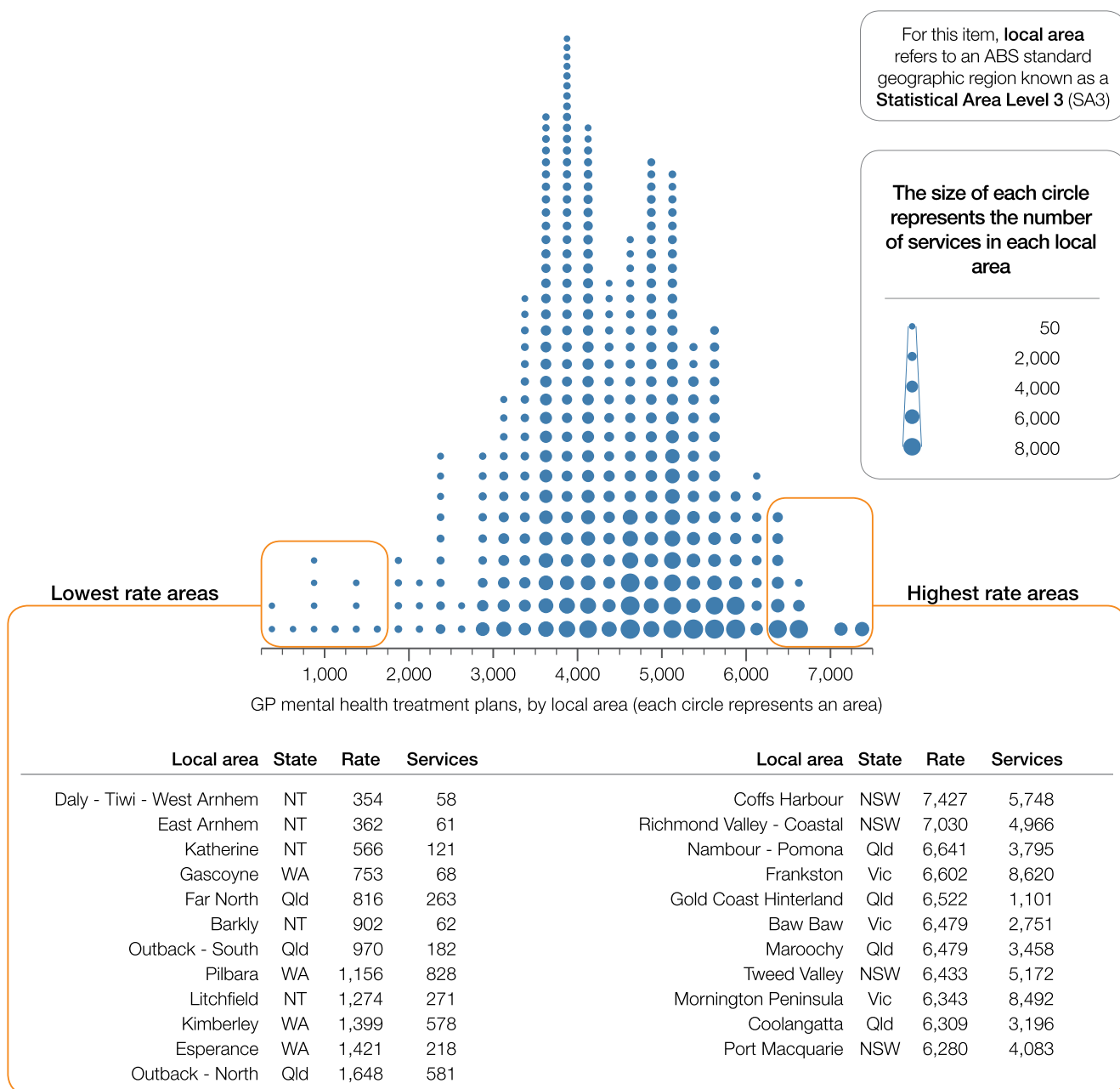
- patterns of relative access to general practitioners, specialist psychiatrists, psychologists, mental health nurses and allied health professionals
- decision-making criteria between clinicians and patients about the need for mental health treatment plans.

To explore this variation, further analysis could focus on:

- longitudinal analysis of the number of new general practitioner mental health treatment plan preparations each year (including the proportion of first-time users)
- patients who had mental health treatment plans prepared who also received follow-up services from a general practitioner
- patients who had mental health treatment plans prepared who also accessed allied psychological services through the plan (as provided by appropriately qualified psychologists, social workers and occupational therapists)³
- comparing the Bettering the Evaluation and Care of Health (BEACH) data for the number of people general practitioners see with mental health problems to determine whether general practitioners in remote areas treat fewer people with mental health problems, or if these general practitioners are just not developing mental health plans for their patients.

*There are 333 SA3s. For this item, data were suppressed for 8 SA3s. This is because of confidentiality requirements given the small numbers of services in these areas.

Figure 63: Number of MBS-funded services for the preparation of mental health treatment plans by general practitioners per 100,000 people, age standardised, by local area, 2013–14



Notes:

Rates are standardised based on the age structure of the Australian population in 2001.

State/territory and national rates are based on the total number of services and people in the geographic area.

The term local area refers to an ABS standard geographic region known as a Statistical Area Level 3 (SA3).

MBS statistics exclude services provided free of charge to public patients in hospitals, to Department of Veterans' Affairs beneficiaries, some patients under compensation arrangements and through other publicly funded programs.

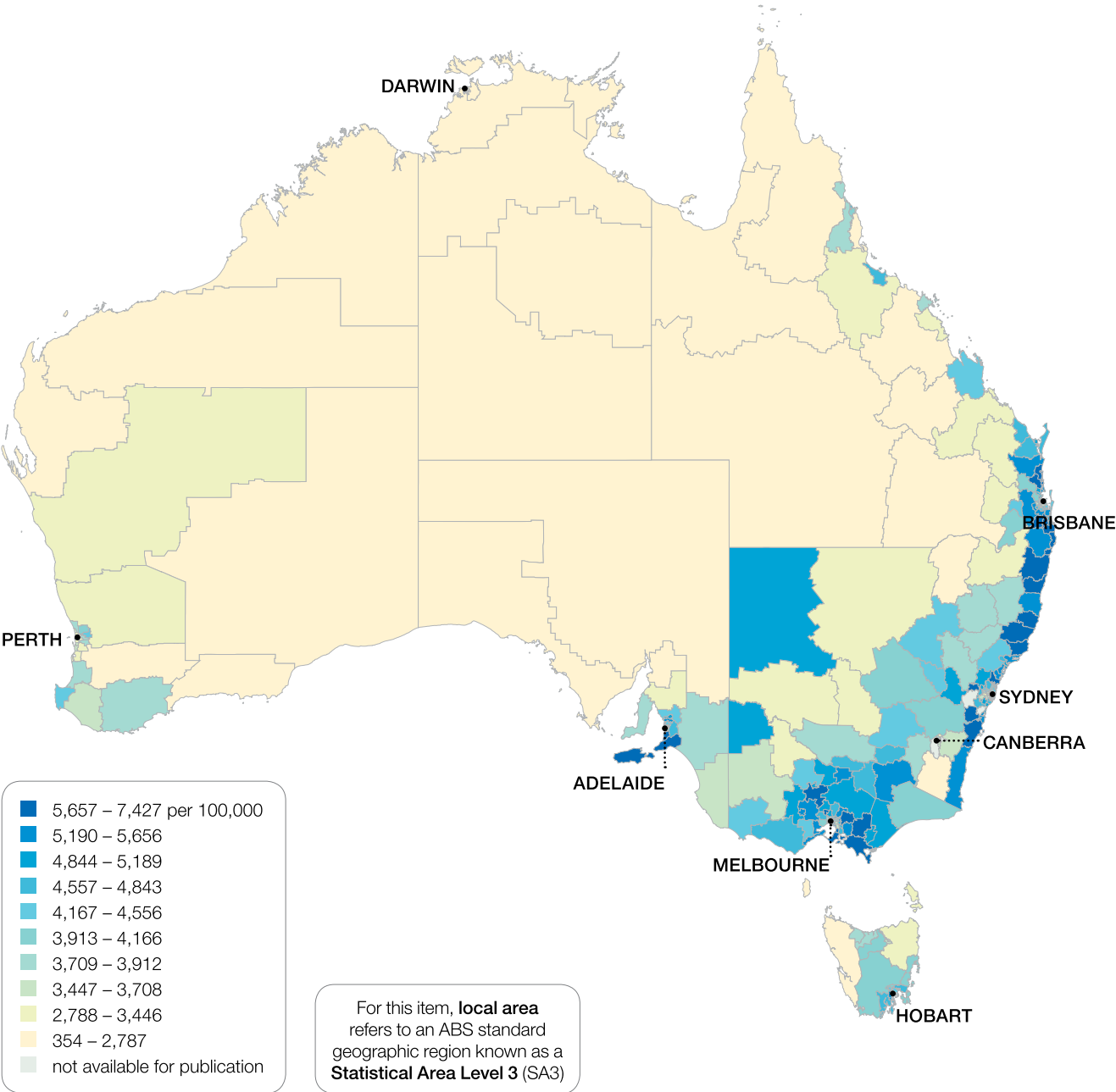
SA3 analysis excludes approximately 1,240 services from GPO postcodes 2001, 2124, 3001, 4001, 5001, 6843 but these data are included in state/territory and national level analysis.

For more technical information please refer to the Technical Supplement.

Sources: National Health Performance Authority analysis of Department of Human services Medicare Benefits statistics 2013–14 (data supplied 12/08/2014) and Australian Bureau of Statistics Estimated Resident Population 30 June 2013.

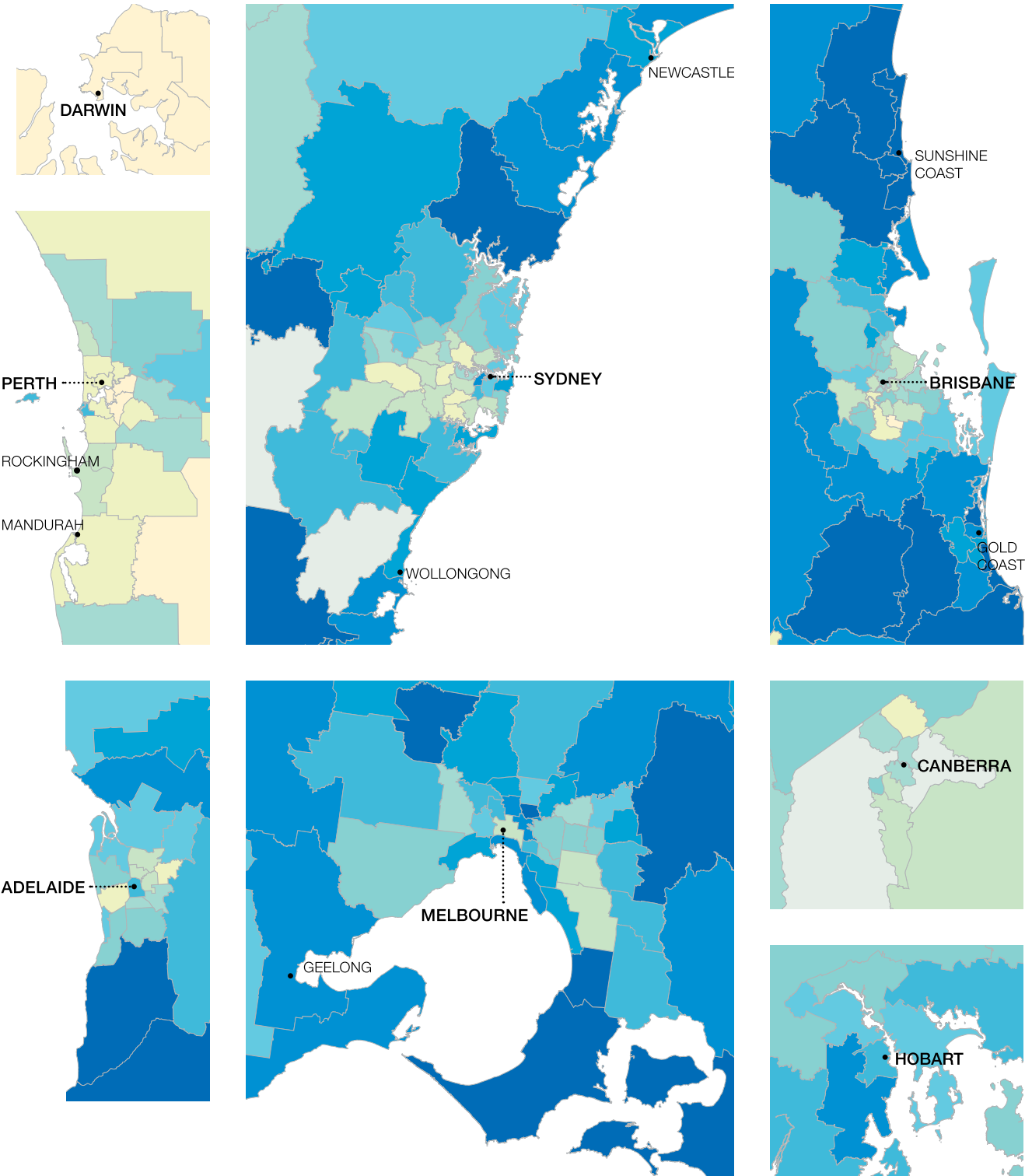
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Figure 64: Number of MBS-funded services for the preparation of mental health treatment plans by general practitioners per 100,000 people, age standardised, by local area, 2013–14



Sources: National Health Performance Authority analysis of Department of Human services Medicare Benefits statistics 2013–14 (data supplied 12/08/2014) and Australian Bureau of Statistics Estimated Resident Population 30 June 2013.

The number of MBS-funded services for the preparation of mental health treatment plans by general practitioners across 325 local areas (SA3s) ranged from 354 to 7,427 per 100,000 people. The number of services was **21.0 times higher** in the area with the highest rate compared to the area with the lowest rate.

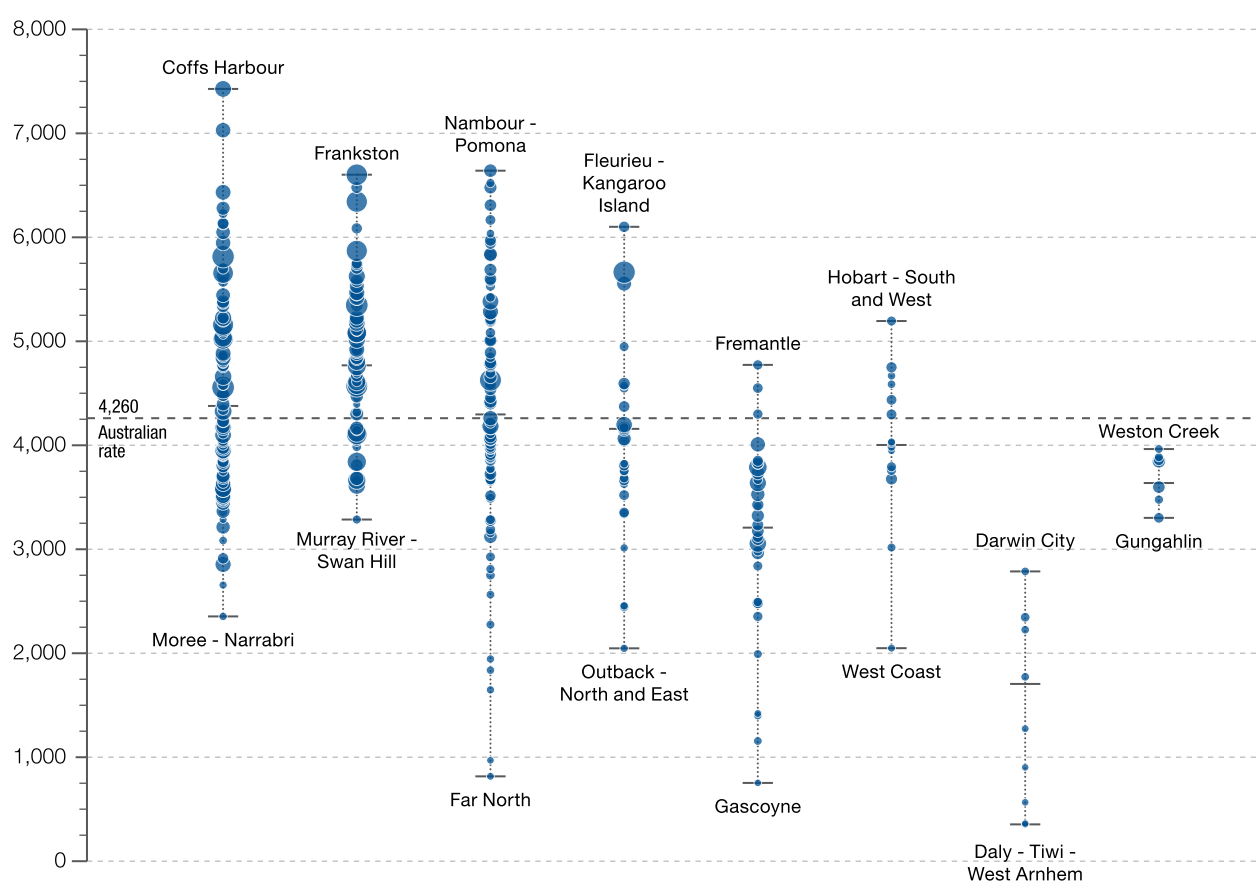


Sources: National Health Performance Authority analysis of Department of Human services Medicare Benefits statistics 2013–14 (data supplied 12/08/2014) and Australian Bureau of Statistics Estimated Resident Population 30 June 2013.

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Figure 65: Number of MBS-funded services for the preparation of mental health treatment plans by general practitioners per 100,000 people, age standardised, by local area, state and territory, 2013–14

	NSW	Vic	Qld	SA	WA	Tas	NT	ACT
Highest rate	7,427	6,602	6,641	6,101	4,773	5,195	2,787	3,964
State/territory	4,378	4,769	4,297	4,158	3,208	4,003	1,705	3,637
Lowest rate	2,354	3,286	816	2,047	753	2,049	354	3,302
No. services	315,682	269,058	196,570	66,406	80,751	19,098	4,266	14,090



For this item, **local area** refers to an ABS standard geographic region known as a **Statistical Area Level 3 (SA3)**

The size of each circle represents the number of services in each local area

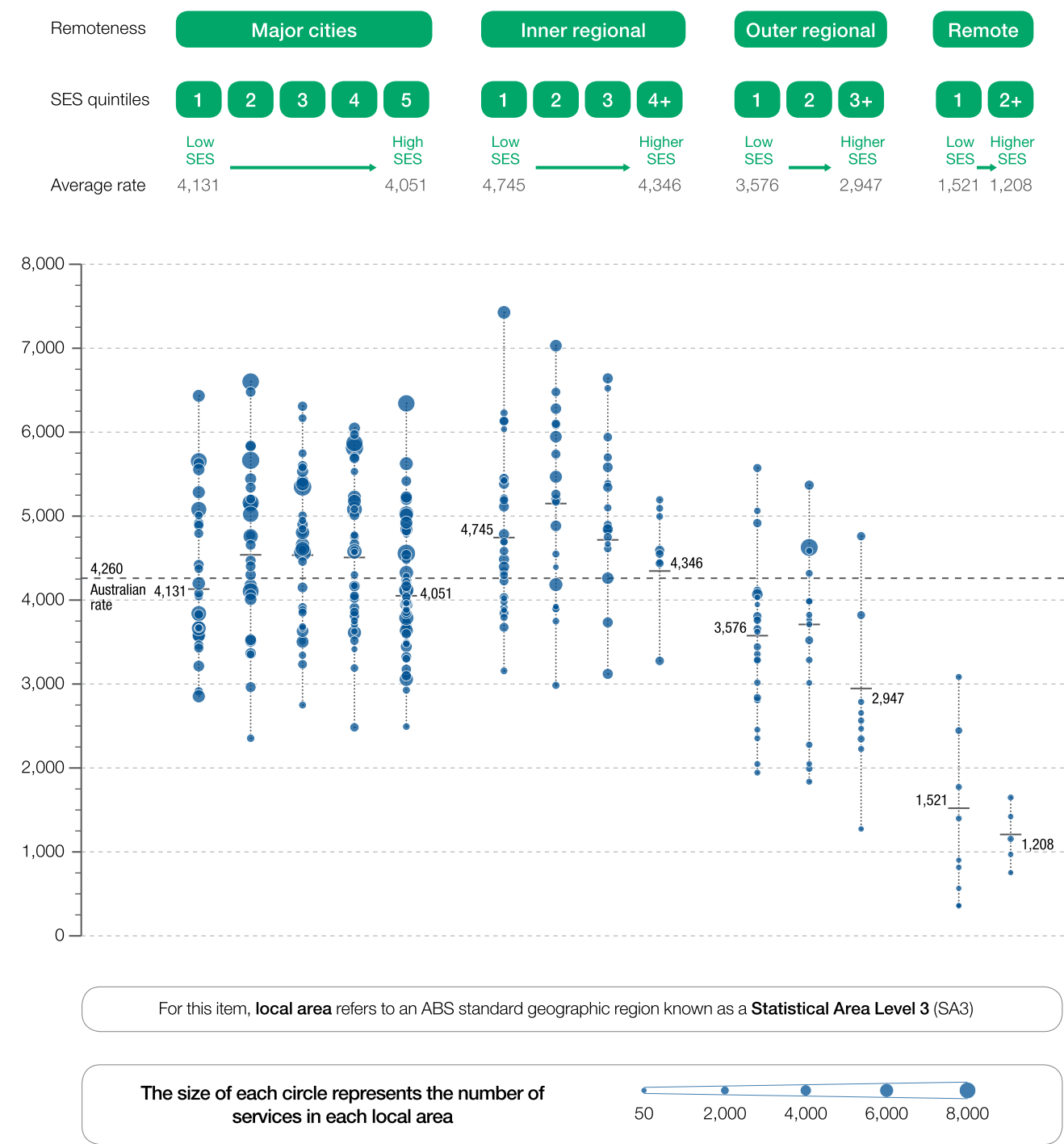


Notes:

Rates are standardised based on the age structure of the Australian population in 2001.
State/territory and national rates are based on the total number of services and people in the geographic area.

Sources: National Health Performance Authority analysis of Department of Human services Medicare Benefits statistics 2013–14 (data supplied 12/08/2014) and Australian Bureau of Statistics Estimated Resident Population 30 June 2013.

Figure 66: Number of MBS-funded services for the preparation of mental health treatment plans by general practitioners per 100,000 people, age standardised, by local area, remoteness and socioeconomic status (SES), 2013–14



Notes:
Rates are standardised based on the age structure of the Australian population in 2001.
The national rate is based on the total number of services and people in Australia.
Average rates are based on the total number of services and people in the local areas within each group.

Sources: National Health Performance Authority analysis of Department of Human services Medicare Benefits statistics 2013–14 (data supplied 12/08/2014) and Australian Bureau of Statistics Estimated Resident Population 30 June 2013.

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Resources

- Australian Institute of Health and Welfare. *Mental health services – in brief 2014*. Cat. no. HSE 154. 2014. Available at: www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129549620.
- Royal Australian College of General Practice. *The General Practice Mental Health Standards Collaboration*. Available at: <http://www.racgp.org.au/education/gpmhsc/>.
- Meadows GN, Enticott JC, Inder B, Russell GM, Gurr R. *Better access to mental health care and the failure of the Medicare principle of universality*. The Medical Journal of Australia. 2015;202(4):190–94.

1 Pirkis J, Harris M, Hall W, Ftanou M. Evaluation of the better access to psychiatrists, psychologists and general practitioners through the MBS initiative: summative evaluation. Melbourne: The University of Melbourne Centre for Health Policy, Programs and Economics, 2011.

2 Department of Health. Better access to psychiatrists, psychologists and general practitioners through the MBS (better access) initiative. 2014. (Accessed 31 August 2015 at: www.health.gov.au/internet/main/publishing.nsf/Content/mental-ba).

3 Dolja-Gore X, Loxton DJ, D'Este CA, Byles JE. Mental health service use: Is there a difference between rural and non-rural women in service uptake?, *Aust. J. Rural Health*, 22, 92–100, 2014