



3 March 2023

Hon Mark Butler MP
Minister for Health and Aged Care
PO Box 6022
House of Representatives
Parliament House
Canberra ACT 2600
Via email: minister.butler@health.gov.au

Dear Minister

RE: Open letter – Concerns regarding the recent compliance letter campaign targeting co-claiming of chronic disease and practice nurse support services

I am writing to express my significant concerns regarding recent targeted compliance letters (refer to **Appendix A**) sent to almost 600 general practitioners (GPs). These letters were sent to GPs who co-claimed Medicare Benefits Schedule (MBS) item 10997 with a chronic disease management (CDM) service on more than 300 occasions in a 12-month period (and where this constitutes at least 50% of their total claims for CDM services).

Whilst the Royal Australian College of General Practitioners (RACGP) supports ethical and responsible billing practices, this recent compliance campaign has raised some significant concerns from our members.

Summary of member feedback:

- The combination of item numbers in question are legitimately able to be billed together. There is nothing in the relevant item descriptors, explanatory notes or AskMBS Advisory to suggest these items cannot be billed on the same day. Please refer to **Appendix B** for examples of MBS complexity regarding these items. GPs have followed these descriptors and are justifiably shocked to receive correspondence suggesting they are 'breaking rules'.
- This campaign harms the working relationship between GPs and practice nurses by creating an artificial impediment to patients accessing nursing care on the same day as GP care. Any move by the Department of Health and Aged Care (the Department) to penalise GPs for legitimately collaborating with nursing staff is clearly a retrograde step, and against advice in the [Strengthening Medicare Taskforce report](#). The campaign is occurring at a time when we are looking to strengthen multidisciplinary care in general practice, and the letters devalue the care provided by nurses as part of general practice teams.
- The wording of the compliance letter is problematic. It is unclear if the GPs in question have done the wrong thing and should repay funds, and the tone of the letter caused significant distress amongst our members. It has also created a massive amount of work in checking records, which takes healthcare providers away from their clinical duties. Especially at this time of increased demand for services and burnout of healthcare workers, our communities would expect the Department to be supporting, rather than undermining, the psychological safety of their highly valued GPs. Although only around 600 letters were sent, this campaign will have a ripple effect on the broader profession and further impact already low morale.
- There is significant risk that this compliance campaign will cause GPs to distance themselves from providing coordinated, chronic disease care through the MBS. Out-of-pocket costs will continue to increase and make essential healthcare inaccessible for our most vulnerable patients, and person-centred care will be eroded. In the medium- to longer-term, this will cost our communities greatly by placing a greater demand on secondary and tertiary health providers.

RACGP recommendations

I strongly urge you to reconsider the value and purpose of this compliance campaign. We realise that the letters have now been sent and it is not customary for the Department to rescind these, however the circumstances in this case warrant your intervention.



The RACGP calls on the Department to:

- remove the requirement for GPs to retrospectively review their claiming due to the ambiguity that currently exists around billing rules.
- issue straightforward guidance (e.g. fact sheets) on which CDM items can be co-claimed with item 10997. Vague language (e.g. 'may be', 'sometimes', 'not restricted') in explanatory materials should be avoided
- provide case scenarios of when it would be appropriate to co-claim CDM and practice nurse support items.
- only undertake compliance action if, after a reasonable period following the development of educational materials, concerns around claiming persist.
- make it clear in future targeted compliance letters that this activity is voluntary and an opportunity for providers to self-reflect on their billing. Using language such as 'you must repay' is unhelpful and leads to fear and anxiety.
- investigate options for automatically rejecting incorrect claims when they are submitted, rather than allowing these to be processed and leading GPs to believe they have billed correctly.

The RACGP has long advocated for Medicare compliance educative processes focusing on prevention of incorrect claiming, rather than punitive measures and blunt instruments which can distract providers from delivering appropriate and high-quality care to patients.

The RACGP met with the Department to discuss this latest letter campaign on 21 February 2023. We acknowledge the Department's ongoing willingness to engage with the RACGP on compliance activities, answer questions and receive feedback from our members. We are committed to further enhancing this relationship to ensure the compliance process is clearer for our members and they know exactly what they need to do at each stage of the process.

The RACGP hopes that the Review of Medicare Integrity and Compliance being led by Dr Pradeep Philip will address many of the issues around the design and scope of Medicare compliance activities, as well as the complexity of Medicare items. We look forward to continuing to engage constructively with the Department to minimise the impact of compliance processes for GPs who are acting in the best interests of their patients. We do not wish to see compliance activities erode trust between GPs and government when we are strengthening our relationship and actively contributing to reform in the healthcare sector.

I would welcome the opportunity to discuss this matter further. If you have any questions or concerns regarding this letter, please contact Michelle Gonsalvez, National Manager – Funding and Health System Reform, on (03) 8699 0490 or via michelle.gonsalvez@racgp.org.au.

Yours sincerely

Dr Nicole Higgins
President

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