Chapter 1: Background

The Better Access initiative

The Better Access to Psychiatrists, Psychologists and General Practitioners through the Medicare Benefits Schedule (Better Access) initiative is one of 18 Australian Government initiatives introduced under the Council of Australian Governments (COAG) National Action Plan on Mental Health 2006-2011.

Better Access was introduced in response to low treatment rates for mental disorders, and its ultimate aim is to improve outcomes for people with such disorders by encouraging a multi-disciplinary approach to their mental health care. Underpinning this aim are the following objectives:

- Encouraging more GPs to participate in early intervention, assessment and management of patients with mental disorders and streamlining access to appropriate psychological interventions in primary care;
- Encouraging private psychiatrists to see more new patients;
- Providing referral pathways for appropriate treatment of patients with mental disorders, including by psychiatrists, GPs, clinical psychologists, registered psychologists and other appropriately trained allied mental health professionals; and
- Supporting GPs and primary care service providers with education and training to better diagnose and treat mental illness.

Better Access takes the form of a series of new item numbers which have been added to the Medicare Benefits Schedule (MBS), supported by a range of education and training activities for relevant providers. The specific MBS items numbers include:

- **GP items numbers:** These reimburse GPs for preparing (2710 and 2702\(^a\)) and reviewing mental health treatment plans (2712) and providing mental health care consultations (2713);
- **Psychiatrist items numbers:** These reimburse psychiatrists for conducting an initial consultation with a new patient in their consulting rooms, in a hospital or at the patient’s home (296, 297 and 299, respectively), for providing and reviewing a patient assessment and management plan (291 and 293, respectively); and
- **Allied health professional item numbers:** These reimburse clinical psychologists for delivering psychological therapy (80000, 80005, 80010, 80015 and 80020), registered psychologists for providing focused psychological strategies (80100, 80105, 80110, 80115 and 80120), selected occupational therapists for providing focused psychological strategies (80125, 80130, 80135, 80140 and 80145) and selected social workers for providing focused psychological strategies (80150, 80155, 80160, 80165 and 80170).

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\(^a\) 2702 was introduced later than the other item numbers, in January 2010. It enables GPs who have not completed accredited mental health skills training to prepare a mental health treatment plan. It attracts a lower rebate than 2710, which is only available for use by GPs who have completed accredited mental health skills training.
Evaluation of the Better Access initiative

An evaluation framework was developed at the commencement of the Better Access initiative to guide the evaluation of the initiative. In 2009, the Department of Health and Ageing commissioned an evaluation of the Better Access initiative and appointed a Project Steering Committee to provide advice to the evaluation. The objective of the evaluation was to assess the overall appropriateness, effectiveness and impact of the initiative, specifically addressing the following evaluation questions:

- To what extent has the Better Access initiative achieved its objectives?
- To what extent has the Better Access initiative been an effective response to the need for primary mental health care for people with high prevalence mental disorders?

The evaluation framework included six original components (A-F), and a seventh (A.2) was subsequently added. These components were as follows:

- **Component A**: A study of consumers and their outcomes;
- **Component A.2**: A study of consumers and their outcomes (focusing on the occupational therapy and social work sectors);
- **Component B**: Analysis of Medicare Benefits Schedule (MBS) and Pharmaceutical Benefits Scheme (PBS) administrative data;
- **Component C**: An analysis of allied mental health workforce supply and distribution;
- **Component D**: Stakeholder consultations;
- **Component E**: Evaluation of main education and training projects; and
- **Component F**: An analysis of the second National Survey of Mental Health and Wellbeing (NSMHWB), completed in 2007

The Centre for Health Policy, Programs and Economics was contracted to undertake Component A, which was designed to profile the consumers who had received Better Access services from clinical psychologists, registered psychologists, GPs and psychiatrists, and examine the outcomes of their care. Our team employed a novel methodology under which participating psychologists, GPs and psychiatrists recruited consumers when they first presented for services provided via the item numbers. We collected socio-demographic, clinical and treatment data relating to these consumers during the course of their care, via a purpose-designed minimum dataset. We also collected outcome data (based on assessments with standardised outcome measures) via the minimum dataset. We also conducted interviews/surveys with consumers and providers to explore their experiences with receiving and delivering care through Better Access, respectively.
The current report

Chapter 2 of the current report provides an overview of the methodological approach we took to the evaluation. Chapter 3 describes the various study samples. Chapter 4 profiles Better Access consumers in terms of their clinical and treatment characteristics. Chapter 5 presents data on the outcomes of Better Access care for consumers. Chapter 6 describes consumers' experiences with receiving care through Better Access, and Chapter 7 describes providers' experiences with delivering this care. Chapter 8 provides a discussion of these findings in the context of what they mean for the Better Access initiative.