

From: kim.stabler@medicareaustralia.gov.au
Sent: Monday, 13 October 2008 12:26 PM
To: Jo-Anne Tamlyn; christine@chronicillness.org.au
Subject: Follow up from CCCG meeting in June [SEC=UNCLASSIFIED]

Dear Jo-Anne and Christine

Please find below Medicare Australia's response to your questions regarding Indefinite Referrals.

Also attached is a brief article which is more general and which was published in a recent edition of the FORUM Magazine.

Response to email regarding indefinite referrals:

There are two types of referrals, standard referrals and indefinite referrals.

Standard referrals:

- referrals from General practitioners (GPs) are valid for 12 months (unless GP referral indicates more or less, for example 3, 6 or 18 months) referrals from specialists and consultant physicians are valid for 3 months standard referrals expire after 12 months, 3 months or a nominated period by a GP

Indefinite referrals:

- can only be written by a GP
- indefinite referrals are valid indefinitely

The Medicare guidance for health professionals on indefinite referrals is correct and states the following:

Indefinite referrals - when to write one General practitioners are entitled to write indefinite referrals for the ongoing treatment of patients with chronic conditions. Specialists and consultant physicians are reminded to accept the validity of indefinite referrals and not to make unnecessary requests to referring practitioners for new referrals.

Issue: Despite this clear guidance, your members are reporting a range of issues with their GPs refusing to write indefinite referrals and, more frequently, specialists refusing to accept indefinite referrals.

Examples of issues raised and Medicare response:

Example 1. GP refusal to issue indefinite referrals to diabetes specialists:

"I was refused an indefinite referral from my GP to my endocrinologist and my ophthalmologist because she insisted that I needed to see her every three months as part of the GP cycle of care. Luckily for me my GP was ill when I went to get my last referral and the locum gave me an indefinite referral without question (I had to ask for it, but no debate was entered into)".

Medicare response:

Some patients may see the referral system as inconvenient, however, the general practitioner is in the best position to recognise conditions affecting the patient's health which might be outside the direct area of concern of the specialist, and can coordinate care for all of the patient's health needs.

General practitioners have the option of referring patients to specialists and consultant physicians for an indefinite period, which is of benefit to patients with a medical condition that requires long-term management. The decision to issue an indefinite referral is a matter for the referring practitioner based on individual patient circumstances.

Example 2. Specialists refusing to accept indefinite referrals:

"I see my ophthalmologist annually. I have an indefinite referral, but he insists on getting a new one each time because I don't see him frequently enough. This means I have to co-ordinate getting one at my endocrinologist or I have to pay to get one from my GP. In addition, because I only see him annually, he

charges me a new consult fee rather than a follow up consult ... I've complained a couple of times, but he says he's got no money and he's really good at his job..."

Medicare response:

The specialist should not request a new referral when in receipt of a indefinite referral. The indefinite referral remains valid and covers all subsequent attendance, whether the subsequent attendance are frequently or not.

When a patient presents with an indefinite referral, the indefinite referral covers the condition listed on the referral and the condition present at the time of the initial attendance. Any new condition that was not present at the initial attendance is considered a new course of treatment and a new referral should be obtained. Medicare Australia advises referring practitioners against writing new referrals for patients who have an existing referral still valid for the same condition/s.

In regards to the specialist charging a new consult fee rather than a follow up consult. The referral provided to the specialist is an indefinite referral that remains valid for the same condition. Initial consultations are only payable where there is a new course of treatment (unrelated condition).

For information and assistance please call Medicare Australia on - Patient enquiry line: 132 011, or Provider enquiry line: 132 150.

Example 3. Receptionist tells patient, as next appointment is longer than 9 months a new referral is required:

"My GP and specialist have both told me I shouldn't need to keep getting referrals but when it comes down to the receptionist at the specialist, if my next appointment is longer than 9 months, then I need a new referral. They just say its Medicare's policy."

Medicare response:

The receptionist appears to be misunderstanding indefinite referrals and as a result, misinterpreting section 6.7.4 regarding referrals outlined on page 10 in the 1 November 2007 Medicare Benefits Schedule (MBS).

A response would be; "I have an indefinite referral, not a standard referral".

The information outlined in the MBS under section 6.7.4 applies to expired referrals and does not apply to indefinite referrals as the requirements listed under b) has not been met, as indefinite referrals remain current/valid.

6.7 Definition of a Single Course of Treatment

6.7.4 However, where the referring practitioner:-

- a) deems it necessary for the patient's condition to be reviewed; and
- b) the patient is seen by the specialist or the consultant physician outside the currency of the last referral; and
- c) the patient was last seen by the specialist or the consultant physician more than 9 months earlier the attendance following the new referral initiates a new course of treatment for which

Medicare benefit would be payable at the initial consultation rates.

This means that (due to the wording "and"), all the conditions outlined at a), b) and c) above must be met before an initial consultation can be claimed. As indefinite referrals are valid indefinitely, the patient would not be seen outside the currency of the referral.

Example 4.

"I go to an eye doctor in Geelong (for annual diabetic retinopathy screening). I was always told by them to go to my GP and get a referral. I thought this was bizarre as Type 1 diabetes doesn't go away - so why do I have to keep getting a letter requesting treatment every year? It was also a massive waste of time and energy going to a GP when your GP and home are up to 110k away from where you work."

Medicare response:

You could ask your GP. GPs have the option of referring patients to specialists and consultant physicians for an indefinite period, which may be of benefit to you if your medical condition requires long-term management. The decision to provide you with an indefinite referral rests with your GP based on your circumstances.

For information and assistance please call Medicare Australia on - Patient enquiry line: 132 011, or Provider enquiry line: 132 150.

Example 5.

"I was at my endocrinologist last week, she told me I'd need a new version of my indefinite referral because I had a new GP."

Medicare response:

Changing your GP or consulting a new GP, does not require a new version of your indefinite referral. Your indefinite referral remains valid where the specialist attendances are for the same medical condition. The written specialists report should be addressed to your new GP.

Example 6.

"Both my endocrinologist and ophthalmologist require a new referral every 12 months and I get charged an 'initial consultation' fee for that visit as well, which is more expensive".

Medicare response:

GPs have the option of referring patients to specialists and consultant physicians for an indefinite period. The decision to issue an indefinite referral is a matter for your GP based on your circumstances. You could ask your GP.

For information and assistance please call Medicare Australia on - Patient enquiry line: 132 011, or Provider enquiry line: 132 150.

2. General Article which appears in a recent edition of FORUM Magazine.

When to write an indefinite referral GPs can write indefinite referrals for the ongoing treatment of patients with chronic conditions. An indefinite referral is appropriate where a chronically ill patient is in the continuing care and management of a specialist or consultant physician for a specific condition, for example, glaucoma. If an indefinite referral is already in existence, the specialist should not request a new referral and a referring practitioner should not issue one, unless a new condition has developed.

Important: The renewal of a referral for the same condition does not indicate the start of a new course of treatment where the specialist can itemise another initial consultation. In the continuing management and treatment of the condition, the new referral is to facilitate the payment of benefits at the specialist or consultant referred rates, rather than the unreferred rates. However, there is an exemption (see explanatory note 6.7.4 of the MBS Book).

*Where do I go for more information? Medicare Benefits Schedule (links from our website to the MBS Online) medicare.prov@medicareaustralia.gov.au Call Medicare Australia on 132 150**

I hope this information is helpful to you and your members.

Kind regards
Kim Stabler
Qld Mgr, Marketing & Communications
Medicare Australia