

Solving the Medicare maze



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The Commonwealth recognises the importance of diabetes and the cost to the individual, their family and the health care system and as a response has established systems to help general practitioners improve diabetes care in their practices.

GPs sometimes don't use the system because it can be complicated and many people with diabetes don't even know about it.

HOW CAN MEDICARE HELP YOU?

There are two key components:

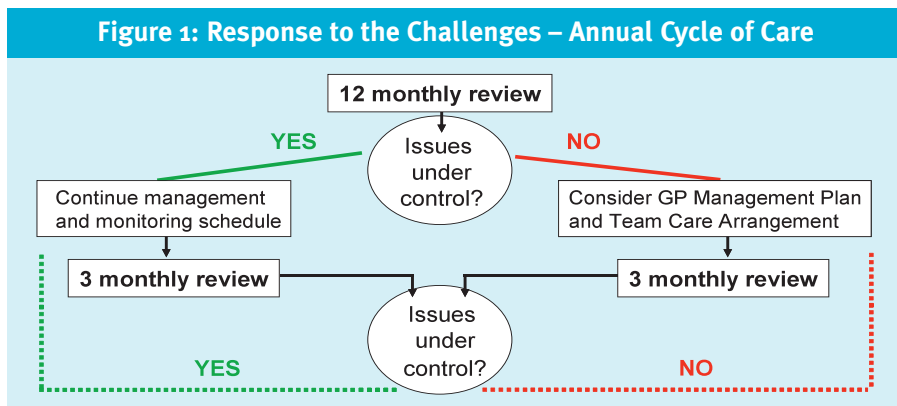
1. The GP Management Plan (GPMP)

This is a plan to improve your diabetes care. It is usually triggered by a problem. For example, one of the ABCs may not be on target (Table 1), there may be a problem with medication or a new condition might affect your diabetes. You and your GP can work out what's new and agree on a plan and a timetable to improve things.

If the problem cannot be fixed by you and your GP then you need to move on to the next step.

2. Team Care Arrangement (TCA)

This is a more complete plan which involves you, your GP and the other health professionals. You and your GP will



work out what you need and where to get it. Your GP sends the plan to Medicare and you get Medicare rebates for seeing the health professionals. However, there may be a gap between the fee charged and the Medicare rebate, so check beforehand so you don't get a nasty surprise.

Both the Management Plan and Team Care Arrangement take time and you may need to schedule a special appointment where long-term concerns about your diabetes can be discussed and addressed.

The annual cycle of care involves you and your GP meeting about every three months for a 'diabetes first' consultation (Figure 1).

For you, the Management Plan and Team Care Arrangement allow you extra time with your GP. The Team Care Arrangement also gives you Medicare rebates to see other health professionals. For your GP, the new system means that the extra time spent in planning your care is actually paid for by Medicare.

WHAT ELSE IS AVAILABLE?

Another useful element of your diabetes care is the Home Medication Review (HMR). If you take five or more medications your GP can refer you to a pharmacist who will visit you at home and look at all the medications you take.

All medications can cause side effects. One medication can affect another and you may be taking different medications which do the same thing (e.g. Diaformin

and Diabex which are both metformin). You may be taking medications at the wrong time or be feeling like you are taking medications all day.

The pharmacist can work with your doctor to pick out the important medications for you to take and those that aren't necessary or could cause problems. The pharmacist can help make your timetable simpler, for example, they may develop a plan where you take all your pills once or twice a day rather than constantly throughout the day.

THE BOTTOM LINES

If you know your ABCs are on target – great, keep them there.

If you don't know your ABCs – ask and write them in your record book.

If your ABCs aren't on target – ask your GP if you need a GP Management Plan or Team Care Arrangement.

Don't keep doing the 'diabetes as well' visits. Do a 'diabetes first' visit and prioritise your diabetes care. **G**

Table 1: ABCs

Risk factor	Target
A1c	< 7%
BP	< 130 / 80
Cholesterol	< 4mmol/L
Salicylates	aspirin 75 - 150mg/ day
Smoking	QUIT

Figure 2: GPMP/TCA/HMR/Medicare Plus – a guide

GPMP health plan:	GP
TCA comprehensive plan:	GP, other health professionals
HMR medication review at home:	pharmacist, GP
SIP cycle annual cycle of diabetes care	
Medicare Plus rebates for professional visits	