

Mental Health Care Plans Item 2710

This is a way to access a Medicare rebate when seeing a psychologist. It requires a certain number to be claimed through Medicare by your GP, and creating a referral to the psychologist of your choosing. Here at ASFMC we can book this type of visit as a triple appointment (45 mins) costing \$220, which attracts a \$150 rebate, meaning that you are \$70 out of pocket. For us to fulfil Medicare's requirements we must achieve the following:

- recording the patient's agreement for the GP Mental Health Care Plan;
- taking relevant history (biological, psychological, social) including the presenting complaint;
- conducting a mental state examination;
- assessing associated risk and co-morbidity;
- making a diagnosis and/or formulation; and
- administering an outcome measurement tool

We then need to generate a formal plan which include various treatment options, including appropriate support services and agreeing on goals of treatment with the patient. Psycho-education and crisis intervention need to be discussed and documented. As you can see, we need to cover many items in the 45 minute appointment to fulfil the requirements.

Once a 2710 GP Mental Health Care Plan is claimed with Medicare, you are entitled to 6 sessions with a psychologist of your choosing, and you get a \$88 rebate back from each session.

If you have a valid health care card (HCC) our local Division funds a MAHS program to facilitate access to allied health professionals (including psychologists). This entitles you to 5 free sessions if a GP writes a referral—this does not have to be a special appointment type. The Better Mental Health Outcomes (BMHO) is no longer funded by the government. If you have previously accessed this scheme, our local Division is still funding the 5 free sessions through the psychologist of your choosing, but no new patients are eligible. The 2710 is the only option left to better facilitate access to psychologists - but you can always see a psychologist privately with no referral required.

SICKNESS CERTIFICATES will not be issued unless a doctor has been consulted in relation to that illness, and cannot be back dated. In particular I remind patients that back dating certificates is at the GP's discretion and we have no obligation to do so. **Just because you request a medical certificate does not automatically mean you will be given one.**

Please remember to ask during your consult with the doctor if you feel a medical certificate may be required. Due to the time it takes that doctor to revisit the file and reprint or adjust the certificate we have decided to add a charge for this service to both cover time and stationary costs. **This will be \$10 which is not covered by medicare.**

ASFMC provides an **after-hours service** for existing patients only and this is a fee paying service at \$160 depending on what service is provided. The rebates from medicare mean that patients get \$112.50 back for visits to the clinic after hours before 11pm at night. After 11pm at night the rebate only increases to \$132.55 but our fee is \$235.

We have the facilities to plaster fractures, suture wounds, give IV fluids or antibiotics and many other types of care. None of the above is free - we cover our cost, as we also have to purchase these products. Please be mindful that ASFMC can defer treatment if we feel accounts will not be paid. The Emergency Department at the Alice Springs Hospital or the ASAP clinic on campus are the other after-hour options.

ALICE SPRINGS FAMILY MEDICAL CENTRE

17 Stuart Highway
PO Box 4246
Alice Springs NT 0871

Phone: 08 8952 7774
Fax: 08 8952 6774
E-mail: admin@alicefamilymedical.com.au
Website: www.alicefamilymedical.com.au



ALICE SPRINGS FAMILY MEDICAL CENTRE

NEWSLETTER 2/07

Well it is winter in Alice Springs and I cannot remember it being this cold in my 9 years in Alice Springs. The Advocate newspaper stated it was the coldest June Sunday on the 17th in the last 50 years at only 8 degrees C. No wonder weeding in the rain at the practice on that day felt so terrible!!!

Management at ASFMC wish to congratulate Jodie (our receptionist) and her partner Brendan on the birth of their healthy baby boy on the 19th July. In the meantime Meri will be holding the reception fort—with some help from Susie (practice manager/practice nurse, odd job everything woman!!). Due to staffing pressures for the next 2 months we may need to adjust our hours slightly.

This newsletter is an opportunity for us to both inform and educate our patients about some upcoming changes to practice policy and topics of interest.

Please respect the no smoking policy on the entire grounds of the clinic.



Proud to be working with the community
to improve Central Australian Health

**17 Stuart Highway
Entrance off Kekwick Ave
Parking at rear
Phone 08 8952 7774 ALL HOURS**

NATIONAL BOWEL CANCER SCREENING

Bowel cancer is the most common internal cancer affecting both sexes and the second most common cause of cancer related death after lung cancer. About 90 Australians die of bowel cancer every week. Many of these deaths could be prevented by early detection and treatment.

The Australian Government has allocated many millions of dollars to phase in a National Bowel Cancer Screening Program. Earlier this year in May we sent letters to patients in the age range of 55—65 years to inform them of this upcoming program. However due to monetary constraints, the invitation will only be sent to patients who **turn 55 OR 65 years of age between 1/05/06 and 30/06/08.**

Those people outside that age range cannot take part in the free screen.

Medicare Australia will send an invitation via mail to participate in the screen. If you chose to take up the offer, a test kit will be sent to you via mail. This simple test can be done at home and then sent by post to a lab for analysis. The results will be sent to ASFMC if you nominate us as your primary care provider.

Bowel cancer is a malignant growth that develops most commonly inside the large bowel. Most bowel cancers develop from tiny growths called polyps. Not all polyps are cancerous, but if polyps are removed your risk of bowel cancer is reduced. It is difficult to know exactly what causes bowel cancer. However, for most people it is their **age and diet** that contribute to the development of bowel cancer.

Symptoms do not always occur with bowel cancer. They can include bleeding from the rectum or any sign of blood after a bowel motion; a recent or persistent change in your bowel habit, eg. Constipation is severe, or looser motions, or increased frequency of motions; unexplained tiredness or abdominal pain. If you have these symptoms it does not mean you have bowel cancer; but it is extremely important you discuss them with your usual doctor.

National Bowel cancer Screening Program Info
1800 118 868 or www.cancerscreening.gov.au

Who is at risk??

Both men and women >50 years of age are at risk. Other risks include having inflammatory bowel disease such as ulcerative colitis or Crohn's disease, or polyps (adenomas) or having a first degree relative who has had bowel cancer or polyps. A significant family history is if your relative with bowel cancer was < 50 years when diagnosed, or if you have more than one relative with bowel cancer. More than 75 % of people who develop bowel cancer do not have a family history.

Bowel cancer can develop without any warning signs. The cancer can grow on the inside wall of the bowel for several years before spreading to other parts of the body. Often very small amounts of blood leak from these growths and pass into the bowel motion before any symptoms are noticed. Screening is done by using a test called FOBT. FOBT stands for Faecal Occult Blood Test. If you do a FOBT every 2 years you can reduce your risk of dying from bowel cancer by up to 33%. If no blood is found in the samples your FOBT is negative. However this does not mean that you do not have, or can never develop, bowel cancer, since some bowel cancers do not bleed, or only bleed on and off. If no blood is detected, you will be advised to repeat a FOBT every 2 yrs. If blood is found in the samples, your FOBT is positive. About 1 in 14 people will have a positive result indicating the presence of blood. There are many other reasons that can cause a positive test, such as haemorrhoids, polyps or inflammatory bowel conditions, but you will need to be investigated. You will need to discuss the result with your doctor, but the next step is usually a colonoscopy (a camera to see up into the bowel which is done locally at the Alice Springs Hospital).

At ASFMC we have decided to provide **INSURE kits** which are a way other people outside that age range can screen for bowel cancer. The NHMRC and WHO recommend that all people over the age of 50 years should be offered FOBT each year as clinical trials have shown that screening reduces the risk of bowel cancer. There is no faecal handling, as Insure is a unique brush sample collection, requiring only a sample of toilet water from near the stool. **The cost of the test is \$34 which is paid directly to Insure**, and results are forwarded directly to the patient. If you use this service we rely on you to tell us the result.

Human Papillomavirus (HPV)

This is the name for a group of viruses that can cause skin warts, genital warts and some cancers. Anyone who has ever had sexual contact could have HPV. It is so common that close to 90% of people will have had genital HPV infection at some time in their lives. There are certain types of HPV that can lead to cervical cell changes that may lead to cervical cancer.

Regular pap smears are still essential because the HPV vaccine does not prevent all cervical cancers. Pap smears detect abnormal changes to cells in the cervix so treatment can start before cancer develops.

ASFMC offered a "HPV vaccine Clinic" similar in style to our first "Mini-Flu Clinic" to women aged between 15—26 years of age. Interest was high and we ended up immunising 50 women on Thursday 12th July and another 35 women on the following Thursday. **The vaccine is still free**, but an appointment will be required with either a GP (standard consult \$60—rebate \$32.10) or with **Susie our practice nurse (cost \$20 with a rebate of \$10.60, out of pocket expense of \$9.40).**

I am not aware of other facilities in town offering it for FREE except for the schedule that started in the high schools. I do not believe \$9.40 is too high a price to pay; yet we have had women state they will not take up the offer outside of the limited "free places". That is only a choice you can make—but I question the wisdom??

A letter or e-mail will be distributed later in August to remind those who used our first FREE clinic in July to ensure the second dose is given in a timely manner—recommended after 2 months. We plan on offering our FREE HPV clinic again on a Thursday afternoon in mid September, so stay tuned. The third and final vaccine clinic to be held at ASFMC will likely be done in mid January 2008. If you did not receive the first vaccine the HPV immunisations can be given at any time, so you may want to consider utilising Susie as our practice nurse, as it is the most effective way (in time and cost) to catch up on the schedule.

The new Gardasil vaccine is most effective when all 3 doses have been given ie. The full course needs to be complete.