

IMPORTANT INFORMATION

REQUIREMENTS FOR SERVICES UNDER A MENTAL HEALTH TREATMENT PLAN

The Federal Department of Health administers the Medicare Benefits Schedule (MBS) which specifies requirements that must be met before psychologists can provide services for clients to claim Medicare rebates under their Mental Health Treatment Plan (MHTP). I am legally required to abide by them and cannot make exceptions. These requirements include a specified form of documentation and the MBS specifies that the lack of that documentation precludes me from applying the Medicare Item for that session. It also precludes me from applying that item retrospectively.

Required Documentation

A formal medical referral must be provided at your first session. This is simply a letter or note from your doctor which meets the following requirements.

- The referral letter from your referring doctor must state that they are referring you under a Mental Health Treatment Plan (your doctors may use an acronym like MHTP).
- The MBS also requires the following information be included in the referral:

There is no single template for referrals; however referrals should include the following information:

- Patient's name
- Patient's date of birth
- Patient's address
- Diagnosis
- List of any current medications
- Number of sessions the patient is being referred for.

<https://www1.health.gov.au/internet/main/publishing.nsf/Content/mental-ba-fact-prof>

- **The referral must be addressed to either 'Luisa Dal Molin', 'Inner Actions', or more generally 'To the Psychologist'.** (I am not allowed to accept referrals addressed to other practitioners. If you would like to have your referral redirected to me, please call your doctor and ask that the referral to be readdressed to me.)
- **The referral must be signed by your doctor.** Be aware that some receptions print off letters from the practice database and that these letters are not necessarily signed. You need to ensure that your doctor signs the referral.
- Some doctors will give their patients a copy of the MHTP. You can bring this with you to the first appointment, however, it isn't a requirement that I have a copy of the plan. The MHTP is not a substitute for the referral.

Further Sessions After a Review

For clients who have accessed sessions under their existing MHTP and have gone back to their doctor for a review, **please ensure that your doctor signs and dates any documentation approving or authorising further sessions under your MHTP**. You will need to provide that documentation at the first session following your review.

Attending your First Session

Please ensure that these requirements are met and that you bring all the required documentation with you to your appointment. Lack of correct documentation will prevent me from applying the Medicare item for the session. Again, I emphasise that it cannot be applied retrospectively.

Where the document is not available at the session

If you do not bring the necessary documentation to the session you will need to cover the fee as a private client. The costs may be covered by your private health insurance (where extras are included - you will need to check this with your individual insurance fund). Please be aware that I do not have access to information about individual private health insurance policies and cannot action private health insurance rebates.

Thank you for your patience with this process. While it is cumbersome, it is a requirement established by the Health Department for services provided under an MHTP and I am required to comply with it.

Luisa Dal Molin
Inner Actions