



You may have heard about the new Medicare item numbers for eating disorders effective from the 1st of November 2019.

Outlined in this Information Sheet are the key points - please note we are using the term patients to be consistent with the Medicare language.

While the program is not perfect, eating disorders are currently the only specific mental health diagnosis receiving dedicated funding through the MBS. This is largely due to significant funding from the national government and the Health Minister, The Honourable Greg Hunt. Over time, it is hoped that the program can be further developed within the MBS.

Reviewing this information may take some time!

WHAT WILL THE CHANGES BE?

In this national first, eating disorders will be the only mental health diagnosis attracting diagnosis specific MBS funding. The addition of [64 item numbers to the MBS Schedule for eating disorders](#) will specifically target severe and complex eating disorders.

On appropriate referral from a medical practitioner (General Practitioner, Paediatrician or Psychiatrist) under a Eating Disorder Plan (EDP), patients will be able to access MBS rebates for

- up to a maximum of 40 psychological treatment sessions with a mental health clinician in a 12 month period. These 40 sessions will be inclusive of any sessions provided under the Better Access plan provided in the same calendar year of the EDP being established.
- up to a maximum of 20 sessions with a dietitian in a 12 month period. These 20 sessions will be inclusive of any sessions provided by a dietitian under the Chronic Disease Management plan in the same calendar year of the EDP being established.

WHAT PATIENTS ARE ELIGIBLE FOR THE EDP?

An eligible patient for the EDP is a patient who

- 1. has a clinical diagnosis of Anorexia Nervosa (AN)**
- 2. has a clinical diagnosis of bulimia nervosa (BN), binge-eating disorder (BED), or other specified feeding or eating disorder (OSFED) AND meets the three eligibility criteria outlined below**

Having a score of 3 or more on the [Eating Disorder Examination Questionnaire 6th edition \(EDE-Q\)](#), and

the patient's condition is characterised by rapid weight loss, or frequent binge eating or inappropriate compensatory behaviour as manifested by 3 or more occurrences per week; **and**

And satisfy any 2 of the following:

body weight less than 85% expected weight, where weight loss is directly attributable to the eating disorder;

current or high-risk of medical complications due to eating disorder behaviours and symptoms;

serious co-morbid medical or psychological conditions significantly impacting on medical or psychological health status with impacts on function;

hospitalised for an eating disorder in the previous 12 months;

has experienced inadequate treatment response to evidence-based eating disorder treatment over the past six months despite active and consistent participation.



HOW MUCH IS THE MBS BENEFIT/REBATE?

MBS benefits for each of the item numbers can be found in the eating disorder [quick reference guide](#) at MBS Online

WHAT ABOUT PATIENTS WHO ARE NOT ELIGIBLE FOR THE EDP?

Patients not eligible for the EDP can still be considered for referral to mental health clinicians under 'Better Access' or 'Chronic Disease Management Plan', which supports access to psychological and dietetic services. GP's are the health professionals who facilitate referrals under the 'Better Access' and 'Chronic Disease Management' plans.

WHAT PRACTITIONERS AND WHICH PSYCHOLOGICAL TREATMENTS ARE ELIGIBLE FOR SERVICES DELIVERED UNDER THE EDP?

While there is a lot of misunderstanding on this point, in short, any practitioner who is eligible to provide services under "Better Access" or the "Chronic Disease Management Plan" is able to provide treatment under the EDP.

Psychological treatment services delivered under the EDP must be delivered by a suitably qualified mental health clinician listed to provide services under the MBS (registered psychologist, clinical psychologist, accredited mental health occupational therapist, accredited mental health social worker), or a general practitioner (GP) who meets the General Practice Mental Health Standards Collaboration requirements and is entered on the register to render Focused Psychological Strategy services.

Dietitian treatment services delivered under the EDP must be delivered by a suitably qualified dietitian who is listed to provide services under the MBS. Under the EDP, psychological treatment must involve the provision of any of the following mental health care management strategies:

- family based treatment (FBT)
- adolescent focused therapy (AFT)
- cognitive behaviour therapy (CBT)
- cognitive behavioural therapy for anorexia nervosa (CBT-AN)
- cognitive behavioural therapy for bulimia nervosa and binge eating disorder (CBT-BN and CBT-BED)
- specialist supportive clinical management (SSCM)
- maudslay model of anorexia treatment in adults (MANTRA)
- interpersonal therapy for bulimia nervosa and binge eating disorder
- dialectical behavioural therapy (DBT) for bulimia nervosa and binge eating disorder
- focal psychodynamic therapy

WHAT PRACTITIONERS AND WHICH PSYCHOLOGICAL TREATMENTS ARE ELIGIBLE FOR SERVICES DELIVERED UNDER THE EDP?

While there is a lot of misunderstanding on this point, in short, any practitioner who is eligible to provide services under "Better Access" or the "Chronic Disease Management Plan" is able to provide treatment under the EDP.

Patients receiving psychological treatment under the EDP should be engaged in [The Stepped Model \(page 3 for more detail\)](#), which governs the review process of the EDP and access to the psychological treatment services.

Step 1: **PLANNING** - EDP Established providing for dietetic services and/or psychological treatment services.

Step 2: **COMMENCE INITIAL COURSE OF TREATMENT** - dietetic services and up to 10 psychological treatment services.

Step 3: **FIRST REVIEW** - GP (or psychiatrist/paediatrician) review of the EDP before the patient can access more than 10 psychological treatment services.

Step 4: **SECOND REVIEW** - GP review of the EDP before the patient can access more than 20 psychological treatment services. AND **THIRD REVIEW**- Psychiatrist or Paediatrician review. Should the second and third reviews recommend ongoing treatment under the EDP, the patient will be able to access more than 20 psychological treatment services.

Step 5: **FOURTH REVIEW** - GP (or psychiatrist/paediatrician) review of the EDP before the patient can access more than 30 psychological treatment services, and thus gain access to the maximum of 40 psychological treatment services in a 12 month period.

Note: Dietetic services are not subject to such a structured review process, with the maximum number of 20 sessions able to be allocated to the EDP in the establishment of the EDP.

Within the EDP, an integrated team approach is strongly encouraged, whereby a patient's family and/or carers should be involved in the treatment planning and discussions where appropriate.