Care Plans at KVM



Keilor Village Medical provides **Chronic Disease Management Plans** (Care Plans) for eligible patients.

There are two types of Care Plans:

* GP Management Plans (**GPMP**); and
* Team Care Arrangements (**TCA**)

Your [General Practitioner](https://www.ghfp.com.au/node/87) may suggest a GPMP if you have a chronic, or terminal, medical condition.

If you also have complex care needs and require treatment from two or more other health care providers, your GP may suggest a TCA as well.

If you have both a GPMP and TCA prepared for you by your GP, you are eligible for Medicare rebates for certain [allied health services](https://www.ghfp.com.au/node/71). The referral required is called an **Extended Primary Care (EPC) referral**.

What is a chronic medical condition?

A chronic medical condition is one that has been (or is likely to be) present for **six months or longer**. For example:

* Lung disease, including [asthma](https://www.ghfp.com.au/node/103)and COPD
* Cancer
* Heart disease, including coronary artery disease, heart failure, and [atrial fibrillation](https://www.ghfp.com.au/node/148)
* [Diabetes](https://www.ghfp.com.au/node/39)
* Arthritis
* [Chronic kidney disease](https://www.ghfp.com.au/node/19)
* Stroke
* [Osteoporosis](https://www.ghfp.com.au/node/151)
* Bowel disease, such as Crohn's, Ulcerative Colitis, and Coeliac Disease
* Neurological disease, such as epilepsy and Multiple Sclerosis
* and more...

What is a GP Management Plan?

A GP Management Plan (GPMP) can help people with chronic medical conditions by providing an organised approach to care. A GPMP is a plan of action you have agreed upon with your GP. This plan:

* identifies your health and care needs
* sets out the services to be provided by your GP, and
* lists the actions you can take to help manage your condition.

What are Team Care Arrangements?

If you have a chronic medical condition and complex care needs requiring [multidisciplinary care](https://www.ghfp.com.au/node/71), your GP may also develop Team Care Arrangements (TCA). These will help coordinate more effectively the care you need from your GP and other health or care providers.

TCAs require your GP to collaborate with at **least two other care providers** who will give ongoing treatment or services to you. Let your GP or nurse know if there are aspects of your care that you do not want discussed with other health care providers.

Review of GPMPs and TCAs

Once a plan is in place, it should be regularly reviewed by your GP. This is an important part of the planning cycle, where you and your GP check that your goals are being met and agree on any changes that might be needed. It's recommended that we review your care plans every **3 to 6 months**.

EPC Referrals

If you have both a GPMP and TCAs prepared for you by your GP, you may be eligible for Medicare rebates for specific individual [allied health services](https://www.ghfp.com.au/node/71)that your GP has identified as part of your care. Eligible patients may access Medicare rebates for up to **5 allied health services (in total) in a calendar year**. The need for these services must be directly related to your chronic (or terminal) medical condition. Your GP needs to provide EPC referrals for each allied health provider.

The allied health disciplines that are eligible for EPC referrals are:

* [Exercise Physiologist](https://www.ghfp.com.au/node/58)
* Psychologist
* Occupational Therapist
* Diabetes Educator
* Dietitian
* [Physiotherapist](https://www.ghfp.com.au/node/202)
* [Podiatrist](https://www.ghfp.com.au/node/190)
* Osteopath
* Speech Pathologist
* Mental Health Worker
* Aboriginal Health Worker
* Audiologist

Clients registered at Keilor Village Medical for GPMP & TCA’s may be eligible for review of their plans up to four times in one calendar year. **It is essential that you call the clinic on 9331 6967 to speak to our friendly team about organising a Care Plan Review in such situations.**

If you have type 2 diabetes and your GP has prepared a GPMP, you can also be referred for certain allied health services provided in a group setting (e.g., Kieser exercise classes).

**Please note, Mental Health Care Plans are separate to GPMPs and TCAs, and the information listed here does not apply to Mental Health Care Plans. You will need to speak to your KVM GP about a referral beyond the initial ten consultations under the 2020 revised Medicare rules for Psychology.**

**Medicare is complicated! Please talk to your GP about which Care Plans and referrals you may be eligible for!**

What does it cost?

There may be a small out of pocket cost for plans prepared by our GP’s that require nurse input to collect health information. Please check with the clinic before you make your booking with the nurse/GP or GP.

Allied Health visits are billed according to the individual provider and are **usually** not bulk-billed.

How to arrange a Care Plan appointment at Keilor Village Medical

**Please make an appointment with your GP to discuss whether you're eligible for a GPMP and/or TCA.**

When booking your Care Plan appointment, our Reception team will usually book you in with the Practice Nurse and your GP on the same day. Some GP’s will still be able to prepare the plan on a day where the nurse is not rostered on and will usually be bulk billed.

Care Plan appointments typically take about 1 hour.

Craig Rayner

Practice Manager

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