

Practice Incentives Program Asthma Incentive Guidelines – October 2013

Introduction

The Practice Incentives Program (PIP) is aimed at supporting general practice activities that encourage continuing improvements and quality care, enhance capacity and improve access and health outcomes for patients.

For more information on the incentives that the PIP offers and overall PIP eligibility, go to the *PIP guidelines* at humanservices.gov.au/healthprofessionals then **Incentives and Allowances > Practice Incentives Program > Forms and guidelines**

The PIP Asthma Incentive

The PIP Asthma Incentive aims to encourage GPs to better manage the clinical care of people with moderate to severe asthma.

Generally, patients are assessed as having moderate to severe asthma if they meet the following criteria:

- symptoms on most days, or
- use of preventative medication, or
- bronchodilator use at least three times per week, or
- hospital attendance or admission following an acute exacerbation of asthma.

Payments and requirements

The PIP Asthma Incentive has two components—the sign-on payment and the service incentive payment.

Table 1: Payments and requirements of the PIP Asthma Incentive

Component	Payment	Activity required for payment
Sign-on payment	\$0.25 per SWPE*	One-off payment to practices that: <ul style="list-style-type: none">• use a patient register, and a recall and reminder system• agree to use the asthma cycle of care
Service incentive payment	\$100 per patient per year	Payment to GPs for each completed cycle of care for patients with moderate to severe asthma.

*Standardised Whole Patient Equivalent (SWPE) is used to measure practice size and includes a weighting factor for the age and gender of patients. As a guide, the average full-time GP has a SWPE value of around 1000 SWPEs annually.

Sign-on payment

A one-off sign-on payment of \$0.25 per SWPE is made to practices that register for the PIP Asthma Incentive. The payment is made to practices in the next quarterly payment following sign-on.

To sign on for the PIP Asthma Incentive, practices must:

- participate in the PIP;
- register for the PIP Asthma Incentive;
- maintain a patient register, and a recall and reminder system, for their patients with moderate to severe asthma; and

- agree to implement a cycle of care for their patients with moderate to severe asthma.
- The register, and the recall and reminder system, must:
- include a list of all known patients with asthma attending the practice, including the patient's name, an identifier (e.g. the practice's patient reference number) and contact details; and
- be kept active.

The registers can be electronic or paper-based and can be held either at the practice or at the Medicare Local. If a Medicare Local based register is used, patient consent is required.

Service Incentive Payment

A Service Incentive Payment (SIP) of \$100 per year is paid to GPs for each cycle of care completed for a patient with moderate to severe asthma. GPs must be working at a PIP practice that is signed on for the PIP Asthma Incentive. SIPs are paid quarterly.

The asthma cycle of care for a patient with moderate to severe asthma must be delivered within a 12 month period and include the three steps of assessment, planning and review. The assessment and planning steps can be conducted in one consultation, if practical.

At a minimum, the asthma cycle of care must include:

- at least two asthma related consultations within 12 months for a patient with moderate to severe asthma;
- at least one of these consultations (the review consultation) to have been planned at a previous consultation;
- documented diagnosis and assessment of the patient's level of asthma control and severity of asthma;
- review of the patient's use of, and access to, asthma related medication and devices;
- provision to the patient of a written asthma action plan (if the patient is unable to use a written asthma action plan, then discussion with the patient of other methods of providing an asthma action plan, and note the discussion in the patient's medical record);
- provision of asthma self-management education to the patient; and
- a review of the written or documented asthma action plan.

Applying

Claiming a sign-on payment

Practices can apply for the PIP Asthma Incentive sign-on payment when they apply for the PIP:

- through Health Professional Online Service (HPOS), at humanservices.gov.au/HPOS, or
- by completing the *PIP Cervical Screening, Asthma and Diabetes Incentives* application form, at humanservices.gov.au/healthprofessionals then **Incentives and Allowances > Practice Incentives Programs > Forms and guidelines** and sending it along with the required supporting documentation, to:

Mail: Incentive Programs

Department of Human Services
GPO Box 2572
ADELAIDE SA 5001

Fax: 1300 587 696

The practice's authorised contact person must complete and sign the application form.

Claiming a SIP

GPs must use one of the following asthma specific Medicare Benefits Schedule (MBS) item numbers when the minimum requirements of the asthma cycle of care have been completed for a patient with moderate to severe asthma. This will indicate the requirements have been met and trigger a payment.

The MBS item numbers are from Group A18 or A19 of the MBS: 2546, 2547, 2552, 2553, 2558, 2559, 2664, 2666, 2668, 2673, 2675 or 2677.

The SIP is in addition to the consultation fee. The patient rebate (or direct bill payment) for the Asthma Incentive MBS attendance items is the same as the usual MBS attendance items.

Note: GPs should use the usual MBS item numbers for all other consultations except for the consultation that completes the asthma cycle of care.

For more information on MBS item numbers, call **132 150***.

If we don't have a GPs bank details, a *SIP banking details* form will be sent to the GP's main PIP practice location for completion. Once bank account details have been registered, all future SIPs will be paid directly into the nominated bank account.

Obligations

The practice must:

- be able to substantiate its claims for payments, which may include evidence of its patient register, and recall and reminder system, and the completion of cycles of care for patients with moderate to severe asthma;
- give information to us as part of the ongoing audit process to verify that the practice has met eligibility requirements
- make sure the information given to us is correct, and
- advise us of any changes to practice arrangements. This can be done:
 - online via HPOS. Changes via HPOS are immediate and can be made up to, and on, the relevant point in time date
 - by completing the *PIP Change of Practice Details* form, or
 - by advising us in writing by no later than seven days prior to the relevant point in time date.

Refer to the *PIP guidelines* for more information.

The point in time date corresponds to the last day of the month before the next PIP quarterly payment.

On joining the PIP, the practice must nominate an authorised contact person(s), who will confirm, on the practice's behalf, any changes to information for PIP claims and payments.

Appeals process

The PIP has an established appeals process. To ask for a review of a decision, the authorised contact person or the owners of the practice must write to us within 28 calendar days of the date of the letter informing the practice of the decision. Human Services will review the decision and advise the practice in writing of the outcome.

More information

Online: humanservices.gov.au/healthprofessionals then Incentives and Allowances > Practice Incentives Program

Email: pip@humanservices.gov.au

Call: 1800 222 032** between 8.30am to 5.00pm Monday to Friday Australian Central Standard Time.

*Call charges apply.

**Call charges apply from mobile and pay phones only.

Disclaimer

These guidelines are for information purposes and provide the basis on which PIP payments are made. While it is intended that the Australian Government will make payments as set out in these guidelines, the making of payments is at its sole discretion. The Australian Government may alter arrangements for the Practice Incentives Program at any time and without notice. The Australian Government does not accept any legal liability or responsibility for any injury, loss or damage incurred by the use of, reliance on, or interpretation of the information provided in these guidelines.