Chronic Disease Management Medicare Items: Sample Flow Charts
FOR PATIENTS WITH CHRONIC AND COMPLEX CONDITIONS

NB: REFER TO THE MEDICARE BENEFITS EXPLANATORY NOTES FOR DETAILS OF REQUIREMENTS
NB: CHECK THAT NO EPC/CDM ITEM NUMBERS HAVE BEEN CLAIMED IN THE LAST 12 MONTHS

1st CDM VISIT VISIT

Preparation of GP Management Plan (GPMP)

MBS # 721: MBS Fee $127.70

Check that no EPC/CDM care plans have been claimed in the past 12 months or other CDM items in last 3 months

Record the patient's agreement to the service.

Key steps include:

- Assess patient and identify all health care problems and needs
- Agree on health management goals with patient
- Confirm actions to be taken by patient
- Confirm treatments and necessary arrangements
- Document all this in plan including review date
- Offer copy of plan to patient and add to their records
- GP to claim for item after all required steps completed

GP determines if patient requires multidisciplinary team-based care and would benefit from Team Care Arrangements (TCA). GP and patient set date for TCA.

Suggested PN or AHW Tasks

For example, assist in:

- assessing patient
- checking patient needs
- self management information and other patient education
- preparing information for GPMP
- documenting GPMP

2nd CDM VISIT

Preparation of Team Care Arrangements (TCA)

MBS # 723: MBS Fee $101.15

Check that no EPC or TCA care plans have been claimed in the past 12 months or TCA reviews in last 3 months

Record the patient's agreement to the service.

Key steps include:

- Discuss/agree with patient who else will be in TCA
- Confirm patient agrees to share relevant information
- Contact/confirm other providers to be involved in TCA
- Confirm treatments and goals with other providers
- Document all this in TCA including review date
- Offer copy of plan to patient and add to their records
- GP to claim for item after all required steps completed

GP sets date for Review of TCA.

Suggested PN or AHW Tasks

For example, assist in:

- checking patient needs
- self management information and other patient education
- contacting other providers
- facilitating communication with GP
- preparing information for TCA
- documenting TCA

Ongoing Management – Normal Consultation Items

Referral to Medicare Allied Health (where applicable) using appropriate forms

REVIEW VISITS

REVIEW OF GPMP/TCA

MBS # 725/727: Fee $63.85 ea

Review recommended @ 6 monthly intervals (minimum interval 3 monthly, or less in exceptional circumstances)