

## 5 The encounters

This chapter describes the content and type of encounters recorded in the 11th year of the BEACH program. Data about the encounters are also reported for each year from 1999–00 to 2008–09 in the 10-year report *General practice activity in Australia 1999–00 to 2008–09: 10 year data tables*.<sup>1</sup>

### 5.1 Content of the encounters

In 2008–09, details of 96,688 encounters (weighted data) were available at 1,011 GPs. The content of these encounters is summarised in Table 5.1. Reasons for encounter (RFEs) and problems managed are expressed as rates per 100 encounters. Each management action is presented in terms of both a rate per 100 encounters and a rate per 100 problems managed, with 95% confidence limits.

- On average, patients gave 157 RFEs and GPs managed about 155 problems per 100 encounters.
- Chronic problems accounted for 36% of all problems managed, managed at a rate of 55 chronic problems per 100 encounters.
- New problems accounted for 37% of all problems, being managed at a rate of 57 per 100 encounters.
- Work-related problems accounted for 2% of all problems managed.
- Medications were the most common treatment choice (69 per 100 problems managed). Most of these medications were prescribed (rather than supplied or advised), at a rate of 56 per 100 problems managed.
- Clinical treatments (such as advice and counselling) were provided at a rate of 22 per 100 problems.
- For every 100 problems managed there were nine referrals for care to other providers, most often to medical specialists (six referrals per 100 problems) and less frequently to allied health professionals (three referrals per 100 problems).
- GPs ordered 30 pathology tests and six imaging tests in the management of every 100 problems (Table 5.1).

**Table 5.1: Summary of morbidity and management**

Variable	Number	Rate per 100 encounters (n = 96,688)	95% LCL	95% UCL	Rate per 100 problems (n = 149,462)	95% LCL	95% UCL
General practitioners	1,011	—	—	—	—	—	—
Encounters	96,688	—	—	—	—	—	—
Reasons for encounter	151,282	156.5	154.7	158.2	—	—	—
Problems managed	149,462	154.6	152.6	156.5	—	—	—
New problems	55,459	57.4	56.0	58.7	37.1	36.2	38.0
Work-related	2,733	2.8	2.6	3.0	1.8	1.7	2.0
Chronic problems	53,264	55.1	53.4	56.8	35.6	34.8	36.5
Medications	102,737	106.3	104.0	108.5	68.7	67.5	70.0
Prescribed	83,509	86.4	84.1	88.6	55.9	54.5	57.2
GP-supplied	10,670	11.0	10.2	11.8	7.1	6.6	7.6
Advised OTC	8,557	8.9	8.3	9.4	5.7	5.3	6.1
Other treatments	49,048	50.7	48.5	52.9	32.8	31.5	34.1
Clinical*	32,867	34.0	32.1	35.9	22.0	20.8	23.2
Procedural*	16,181	16.7	16.0	17.5	10.8	10.4	11.3
Referrals	13,251	13.7	13.2	14.2	8.9	8.6	9.2
Specialist*	8,699	9.0	8.7	9.3	5.8	5.6	6.0
Allied health services*	3,745	3.9	3.6	4.1	2.5	2.3	2.7
Hospital*	317	0.3	0.3	0.4	0.2	0.2	0.2
Emergency department*	199	0.2	0.2	0.2	0.1	0.1	0.2
Other medical services*	48	0.1	0.0	0.1	0.0	0.0	0.0
Other referrals*	243	0.3	0.2	0.3	0.2	0.1	0.2
Pathology	44,066	45.6	43.8	47.4	29.5	28.4	30.5
Imaging	9,469	9.8	9.4	10.2	6.3	6.1	6.6
Other investigations	954	1.0	0.9	1.1	0.6	0.6	0.7

\* Includes multiple ICPC-2 or ICPC-2 PLUS codes (see Appendix 4, <[www.aihw.gov.au/publications/index.cfm/subject/19](http://www.aihw.gov.au/publications/index.cfm/subject/19)>).

Note: LCL—lower confidence limit; UCL—upper confidence limit; OTC—over-the-counter.

## 5.2 Encounter type

During the first 7 years of the BEACH program, where one (or more) MBS/DVA item number was claimable for the encounter the GP was instructed to record only one item number. Where multiple item numbers (for example, an A1 item such as ‘standard surgery consultation’ and a procedural item number) were claimable for an encounter the GP was instructed to record the lower of the item numbers (usually an A1 item number).

From the 2005–06 BEACH data year, changes to the BEACH form were made to capture practice nurse activity associated with the GP–patient consultations. One of these changes was to allow GPs to record multiple (up to three) Medicare item numbers per encounter.

For comparability with earlier years, in Table 5.3 and Table 5.4 only one item number per Medicare/DVA-claimable encounter has been counted. Selection of one item number was undertaken on a priority basis: consultation item numbers override incentive item numbers,

which override procedural item numbers, which override other Medicare item numbers. Table 5.5 provides a breakdown of all item numbers recorded by the GPs. Chapter 13 gives a more specific description for each of the practice nurse Medicare item numbers recorded.

Table 5.2 provides an overview of the MBS/DVA item numbers recorded in BEACH in 2008–09. Overall there were 86,118 encounters where at least one MBS/DVA item number was recorded. A single item number was recorded at three-quarters of BEACH encounters said to be claimable from the MBS/DVA.

**Table 5.2: Overview of MBS items recorded**

<b>Variable</b>	<b>Number</b>	<b>Per cent of encounters</b>
Encounters at which one MBS item was recorded	64,602	75.0
Encounters at which two MBS items were recorded	20,178	23.4
Encounters at which three MBS items were recorded	1,337	1.6
<b>Total encounters at which at least one item was recorded</b>	<b>86,118</b>	<b>100.0</b>

Table 5.3 reports the breakdown of encounter type (by payment source), counting a single Medicare item number per encounter (where applicable).

- Direct encounters (patient was seen by the GP) accounted for 98.6% of all encounters.
- Indirect encounters (where the patient was not seen by the GP) accounted for 1.4% of all encounters.
- Direct encounters where the GP indicated that no charge was made occurred infrequently, at a rate of 0.5 per 100 encounters.
- About 95% of all direct encounters were claimable either through Medicare or the DVA.
- Encounters payable through workers compensation accounted for 2.2% of encounters.
- Encounters payable through other sources (including hospital paid encounters) accounted for 0.8% of encounters.

**Table 5.3: Type of encounter**

Type of encounter	Number	Per cent of all encounters <sup>(a)</sup> (n = 96,688)	95% LCL	95% UCL	Per cent of direct encounters (n = 89,185)
General practitioners	1,011	—	—	—	—
Indirect encounters <sup>(b)</sup>	1,303	1.4	1.2	1.7	—
Practice nurse only items (indirect encs)	9	0.0	0.0	0.0	—
Direct encounters	89,185	98.6	98.3	98.8	100.0
No charge	424	0.5	0.4	0.6	0.5
MBS/DVA items of service (all) <sup>(b)(c)</sup>	86,118	95.2	94.8	95.6	—
MBS/DVA items of service (GPs only) <sup>(b)</sup>	86,069	95.1	94.7	95.5	—
MBS/DVA items of service (GPs only and direct encounters)	86,068	95.1	94.7	95.5	96.5
Practice nurse only items (direct encs)	36	0.0	0.0	0.1	0.0
Workers compensation	1,950	2.2	2.0	2.3	2.2
Other paid (hospital, state, etc.)	707	0.8	0.5	1.0	0.8
Practice nurse only items (unspecified)	3	0.0	0.0	0.0	—
<i>Subtotal</i>	<i>90,491</i>	—	—	—	—
Missing	6,197	—	—	—	—
<b>Total encounters</b>	<b>96,688</b>	—	—	—	—

(a) Missing data removed from analysis.

(b) Two encounters involving chronic disease management or case conference items were recorded as indirect encounters.

(c) Includes 36 indirect encounters at which a practice nurse item only was recorded and 3 unspecified encounters at which a practice nurse item was recorded.

Note: LCL—lower confidence limit; UCL—upper confidence limit; MBS—Medicare Benefits Schedule; encs—encounters; DVA—Australian Government Department of Veterans' Affairs.

Table 5.4 provides a summary of the MBS items recorded in BEACH, counting one item number only, using the same method described for Table 5.3. This provides comparable data about item numbers recorded to those reported in previous years.

- Standard surgery consultations accounted for the majority (84%) of MBS/DVA-claimable consultations, and accounted for 80% of all recorded encounters.
- Almost 8% of MBS/DVA encounters were long surgery consultations.
- Very few recorded encounters occurred in hospitals. Short and prolonged surgery consultations, home visits and residential aged care consultations were all relatively rare.
- Chronic disease management items, health assessments and GP mental health care items were not recorded often. Only 1% of encounters were claimed as GP mental health care items.

**Table 5.4: Summary of MBS/DVA items recorded (counting one item number per encounter only)**

MBS/DVA item	Number	Rate per 100 encounters <sup>(a)</sup> (n = 96,688)	95% LCL	95% UCL	Per cent of Medicare-paid GP items (n = 86,069)
Short surgery consultations	1,387	1.5	1.3	1.8	1.6
Standard surgery consultations	72,235	79.8	78.9	80.8	83.9
Long surgery consultations	6,588	7.3	6.8	7.8	7.7
Prolonged surgery consultations	389	0.4	0.3	0.6	0.5
Home visits	767	0.9	0.7	1.0	0.9
Hospital	165	0.2	0.1	0.3	0.2
Residential aged care facility	1,082	1.2	0.9	1.5	1.3
Health assessments	295	0.3	0.3	0.4	0.3
Chronic disease management items	811	0.9	0.8	1.0	0.9
Case conferences	12	0.0	0.0	0.0	0.0
GP mental health care	867	1.0	0.8	1.1	1.0
Incentive payments	147	0.2	0.1	0.2	0.2
Other items	1,325	1.5	1.2	1.8	1.5
Surgical	285	0.3	0.2	0.4	0.3
Therapeutic procedures	340	0.4	0.3	0.5	0.4
Acupuncture	261	0.3	0.2	0.4	0.3
Other items	438	0.5	0.2	0.7	0.5
<b>Total MBS/DVA items of service (GPs only)</b>	<b>86,069</b>	<b>95.1</b>	<b>94.7</b>	<b>95.5</b>	<b>100.0</b>

(a) Missing data removed from analysis.

Note: LCL—lower confidence limit; UCL—upper confidence limit; MBS—Medicare Benefits Schedule; DVA—Australian Government Department of Veterans' Affairs.

Table 5.5 provides the distribution of all Medicare item numbers recorded across Medicare item number groups. Overall, there were 108,970 MBS item numbers recorded in BEACH in 2008–09. At encounters where at least one MBS item was recorded an average of 1.3 items were written.

Surgery consultations (including short, standard, long and prolonged) were the most commonly recorded type of item number, at 94% of the encounters where at least one item was recorded. They accounted for 74% of all MBS items recorded in BEACH.

The second most commonly recorded were items for bulk-billed incentive payments, which accounted for 16% of all items recorded. Items for hospital, residential aged care and home visits were together recorded at one in every 50 encounters (1.8%). Practice nurse items (including practice nurses conducting health assessments) were recorded at 2.2% of all encounters. For a more detailed breakdown of practice nurse item numbers, and related data on practice nurse activity, refer to Chapter 13.

**Table 5.5: Medicare item number distribution across item number groups**

Items/encounters	All MBS items <sup>(a)</sup>		At least one item recorded <sup>(b)</sup>			
	Number	Per cent	Number	Per cent	95% LCL	95% UCL
Surgery consultations	80,599	74.0	80,599	93.6	93.0	94.2
Hospital, residential aged care and home visits	2,015	1.8	2,015	2.3	2.0	2.7
Health assessments	353	0.3	353	0.4	0.3	0.5
Chronic disease management items (including case conferences)	1,367	1.3	962	1.1	1.0	1.3
Incentive payments	171	0.2	171	0.2	0.2	0.2
Acupuncture	269	0.2	269	0.3	0.2	0.5
Bulk-billed incentive payment	17,825	16.4	17,825	20.7	18.8	22.6
Practice nurse services—health assessments	3	0.0	3	0.0	0.0	0.0
Practice nurse services—other	2,435	2.2	2,415	2.8	2.4	3.2
Allied health items	2	0.0	2	0.0	0.0	0.0
Diagnostic procedures and investigations	438	0.4	431	0.5	0.4	0.6
Therapeutic procedures	429	0.4	429	0.5	0.4	0.6
Surgical operations	1,256	1.2	1,223	1.4	1.2	1.6
Diagnostic imaging services	9	0.0	9	0.0	0.0	0.0
Pathology services	274	0.3	265	0.3	0.2	0.4
GP mental health care items	982	0.9	982	1.1	1.0	1.3
Other items	543	0.5	542	0.6	0.4	0.9
<b>Total items/encounters</b>	<b>108,970</b>	<b>100.0</b>	<b>86,118</b>	<b>—</b>	<b>—</b>	<b>—</b>

(a) Up to three MBS items could be recorded at each encounter. Missing data removed from analysis.

(b) Identifies encounters where at least one item from a MBS group was recorded.

Note: LCL—lower confidence limit; UCL—upper confidence limit; MBS—Medicare Benefits Schedule.

## 5.3 Consultation length

In a subsample of 34,783 BEACH encounters containing start and finish times for all MBS/DVA-claimable encounters, the mean length of consultation in 2008–09 was 14.6 minutes (95% CI: 14.4–14.9). The median length was 13.0 minutes (results not tabled).

For A1 MBS/DVA-claimable encounters, the mean length of consultation in 2008–09 was 14.4 minutes (95% CI: 14.2–14.6), and the median length was 13.0 minutes (results not tabled). Methods describing the substudy from which data on consultation length are collected are described in Section 2.4. The determinants of consultation length have been investigated by Britt et al. (2005) in *Determinants of consultation length in Australian general practice*.<sup>53</sup>

## 5.4 Changes in the encounters over the decade 1999–00 to 2008–09

An overview of changes in general practice encounters over the decade can be found in the companion report *General practice activity in Australia 1999–00 to 2008–09: 10 year data tables*.<sup>1</sup> In summary, between 1999–00 and 2008–09 there were increases in:

- the rates of patient reasons for encounter
- the number of problems managed per 100 encounters
  - the number of new problems, and the number of chronic problems managed per 100 encounters
- the number of GP-supplied medications, procedures, referrals (in particular to specialists and allied health professionals), and orders for pathology, imaging and other investigations per 100 encounters.

Decreases over the 10 years occurred in the rate of prescribed medications and referrals to hospital. The rates of recorded standard surgery and long surgery consultations decreased, as did home visits. Encounters where health assessments or chronic disease management items were claimable increased.