

Chronic Disease Management services in Australia

Chronic conditions are a leading cause of poor health, disability and premature death in Australia. Chronic Disease Management (CDM) services help people with chronic conditions to manage their condition. CDM services are GP services on the Medicare Benefits Schedule (MBS) that are available to people with a chronic or terminal medical condition. This includes conditions such as asthma, cancer, cardiovascular disease, diabetes, musculoskeletal conditions or stroke.

CDM services cover the coordination, creation and review of several care planning tools, which include (Figure 1).

Figure 1: CDM and Medicare-subsidised allied health services Medicare-subsidised allied health services **General Practitioner Management Plan** (GPMP) which is a plan of action agreed Individual allied health services between a patient and their GP. The plan: • Aboriginal and Torres Strait Islander health services • identifies the patient's health and care needs · Diabetes education services • sets out the services to be provided by the GP Audiology • lists the actions the patient can take to help · Exercise physiology manage their condition. Dietetics · Mental health services Occupational therapy Team Care Arrangements (TCAs) which provide Physiotherapy Medicare-subsidised care for patients with Podiatry complex care needs requiring multidisciplinary care. Patients can receive 5 services per calendar People with Chiropractic services year from selected allied health care providers a chronic Osteopathy for individual treatment services. or terminal Psychology medical Speech pathology condition Multidisciplinary Care Plans* (MCP) are **Group allied health services** (for those with type 2 diabetes) prepared for a patient by a health or care provider often for patients in a Residential Aged Diabetes education services . Care Facility and describes the treatment and Exercise physiology services to be provided to the patient by the Dietetics collaborating providers. GPMP = GP Management Plan (MBS item number: 721,229); TCA = Team Care Arrangement (723, 230); MCP = Multidisciplinary care plan (729, 231, 731, 232).

Use of CDM and Medicare-subsidised allied health services: quick facts

* Includes people with a chronic or terminal medical condition living in both the community and residential aged care.



In 2019, the rate of patients using CDM services was **highest** among patients **aged 75–84**



Close to **\$1.5 billion** was paid by Medicare for CDM and allied health services in 2019

How does the use of Chronic Disease Management and Medicare-subsidised allied health services vary?

In 2019, over 1 in 7 Australians (3.8 million) accessed CDM services and around 2.4 million also accessed Medicare-subsidised allied health services. In general, more women than men were accessing CDM and allied health services. The rate of patients claiming CDM services increased with age, with rates highest among patients aged 75–84. For Medicare-subsidised allied health services, the rates were highest among those aged 85 years and over.



GPMP was the most used CDM service nationwide and its use varied across geographical area:

- New South Wales (NSW) had the highest age-adjusted rate (115 per 1,000 population) and the Australian Capital Territory (ACT) the lowest (61 per 1,000 population).
- The highest age-adjusted rate by Primary Health Network (PHN) area and Statistical Area Level 3 (SA3) were in NSW – The North Coast (145 per 1,000 population) and Port Macquarie (181 per 1,000 population). The lowest age-adjusted rate by PHN was in the ACT (63 per 1,000 population) and the lowest age-adjusted rate by SA3 was in Manjimup (WA) (15 per 1,000 population).
- The age-adjusted rate by remoteness area was higher in Major cities (106 per 1,000 population) and lowest in Very remote areas (84 per 1,000 population).

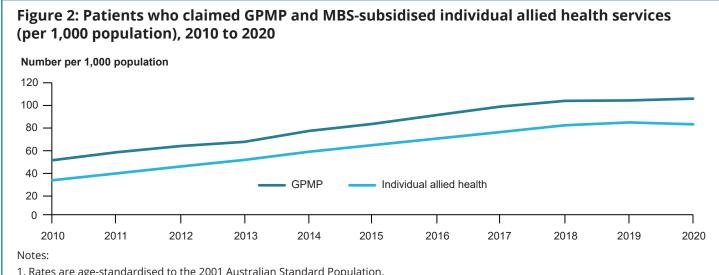
Podiatry was the most used Medicare-subsidised individual allied health service (45 patients per 1,000 population). The age-adjusted rate of patients claiming podiatry was highest in Major cities and Inner regional areas (38 per 1,000 population) and lowest in Very remote areas (8 per 1,000 population).

How much did the Australian Government spend on Chronic Disease Management and Medicare-subsidised allied health services in 2019?

Close to \$1.5 billion was paid by Medicare for CDM and allied health services in 2019. The majority of the spending was on individual allied health services (\$446 million), followed by GPMP services (\$420 million). Podiatry services had the highest proportion of the individual allied health spending (42%, \$189 million), followed by physiotherapy services (34%, \$152 million).

More people are accessing Chronic Disease Management and Medicare-subsidised allied health services over time

The use of CDM and Medicare-subsidised allied health services increased steadily over the last decade. The rate of patients claiming GPMP services has doubled from 52 per 1,000 population in 2010 to 104 per 1,000 population in 2018 (Figure 2). The rate of patients claiming individual allied health services more than doubled from 34 per 1,000 population in 2010 to 85 per 1,000 population in 2019. The rate of patients claiming for both GPMP and individual allied health services has remained steady between 2018 and 2020.



- 1. Rates are age-standardised to the 2001 Australian Standard Population.
- 2. Data are reported by calendar year in which the service was provided (1 January 2010 to 31 December 2020) for claims processed by 30 June 2021.
- 3. GPMP = GP Management Plan (MBS item number: 721, 229); Individual allied health (10950, 10951, 10952, 10953, 10954, 10956, 10958, 10960, 10962, 10964, 10966, 10968, 10970).

For more information, see the full report *Use of Medicare Chronic Disease Management and allied health services*.

