

NEW Eating Disorder Medicare changes are here!

A monumental day, a landmark achievement and a significant move forwards in the treatment of eating disorders in Australia. On 1st November 2019, the Australian Government has introduced 64 new Medicare item numbers for the treatment of eating disorders. This means that patients with eating disorders (who fulfil the eligibility criteria) will have access to an evidence-based, best practice model of treatment, known as an Eating Disorder Plan (EDP). We applaud the Federal Government for this historic reform, which vastly improves access to evidence-based treatment, and will ultimately save many lives. The plan can include up to 20 Medicare-subsidised sessions with a dietitian and up to 40 sessions with a mental health clinician over a 12 month period.

If you are concerned that you or someone you care about is experiencing an eating disorder, it's important to make an appointment with a medical practitioner. For most people this will be a GP, but it also includes paediatricians and psychiatrists.

Rachael Bradford, Director and Accredited Practising Dietitian of **Eat and Enjoy Nutrition** welcomes this landmark change and welcomes any new or existing clients under the new Eating Disorder Plan. Rachael has 23 years' experience in the world of eating disorders, working with preadolescents, adolescents, adults and families. She helps her clients realise that recovery is possible, and empowers them to live their life free from an eating disorder. Her compassion, empathy, nutritional support and guidance form the foundation to navigate her client's path to normalised eating again. Here, she provides a summary of what the changes entail as succinct as is possible.

The short of it

On suitable referral from a medical practitioner (GP, Psychiatrist or Paediatrician), a patient can be provided with an Eating Disorder Plan (EDP), patient will be able to:

- access MBS rebates for up to maximum of 40 psychotherapy sessions with a mental health professional in a 12 month period (inclusive of any sessions provided under the Better Access plan provided in the same 12 month period)
- access MBS rebates for up to a maximum of 20 dietetic services with a dietitian in a 12 month period (inclusive of any sessions provided under the Chronic Disease Management Plan provided in the same 12 month period)
- review of the patient by the General Practitioner following each 10th psychotherapy sessions will be required to assess, review and access up to the 40 psychotherapy sessions
- one individual assessment of the patient is required by a Paediatrician or Psychiatrist any time before the 20th psychotherapy session
- telehealth sessions are available for both psychotherapy sessions and dietitian sessions if the practitioner's service location is outside 15km radius of patient's place of residence
- a patient needs to fulfil the eligibility criteria to access the EDP and services
- if a patient does not meet the eligibility criteria, they may still be able to access treatment under the existing Better Access to Mental Health scheme and/or Chronic Disease Management Plan.

it is expected that practitioners (qualified mental health professional and qualified dietitian) providing services under these items should have appropriate skills, knowledge and experience to provide eating disorders treatment.

The long of it

Who can assess a patient for an Eating Disorder Plan?

Eligibility can be assessed by the GP (item 90250-90253) or by a Psychiatrist (item PSY1) or Paediatrician (PAED1).

Who is Eligible for an Eating Disorder Plan?

- An individual who has a clinical diagnosis of anorexia nervosa OR
- An individual has a clinical diagnosis of bulimia nervosa, binge eating disorder or other specified feeding or eating disorder (OSFED) and meets the following eligibility criteria:
 - 1. Global EDE-Q score of 3 or higher; and
 - 2. the patient's condition is characterised by rapid weight loss, or frequent binge eating or inappropriate compensatory behaviour as manifested by 3 or more occurrences per
 - 3. the patient has **AT LEAST TWO** of the following indicators:
 - Clinically underweight with a body weight less than 85% of expected weight where weight loss is directly attributable to the eating disorder.
 - b) Current or high risk of medical complications due to eating disorder behaviours or symptoms.
 - Serious comorbid medical or psychological conditions significantly impacting on medical or psychological health status and function.
 - Overnight inpatient admission for an eating disorder in the previous 12 months.
 - Inadequate treatment response to evidence-based eating disorder treatment over the past six months despite active and consistent participation.

What dietetic treatment services are eligible under the Eating Disorder Plan?

Provision of eating disorder dietetic services by a suitably trained Accredited Practising Dietitian (82350 and 82351) are for patients with anorexia nervosa and other patients with complex presentations of diagnosed eating disorders who meet the eligibility requirements and would benefit from a structured approach to the management of their treatment needs in the community setting. It is expected that dietitians who provide services under these items are suitably trained and have appropriate skills, knowledge and experience to provide eating disorders treatment.

Dietitians provide nutritional assessment, eating plans, and nutritional education. Dietitians are vital in the process of nutritional rehabilitation and the development of healthy eating patterns. They work with the person with the eating disorder to identify fears of food, and discuss the consequences of not eating well. They also work with the individual to recognize feelings of physical hunger and fullness and a healthy response to these.

Note: The 20 dietetics sessions can be used at any point throughout the 12 month period. For an appropriate EDP referral, dietitians are eligible to provide up to 20 Medicare subsidised sessions of at least 20 min duration. All eating disorder specific dietetic sessions at Eat and Enjoy Nutrition are longer than this time, and there will be a gap payment charged.

What psychological treatment services are eligible under the Eating Disorder Plan?

Psychological treatment services delivered under the EDP must be delivered by a suitable qualified mental health clinician listed to provide services under the MBS. This may include a suitably trained Clinical Psychologist, Registered Psychologist, Accredited Mental Health Social Worker or Accredited Mental Health Occupational Therapist, or with a General Practitioner who meets the General Practice Mental Health Standards Collaboration requirements and is entered on the Register as being eligible to render a Focused Psychological Strategy service.

Evidence-based treatments that have been approved for use by practitioners delivering psychological treatment in this context under the EDP are:

- Family Based Treatment for Eating Disorders (EDs) (including whole family, parent Based Therapy, parent only or separated therapy)
- Adolescent Focused Therapy for EDs
- Cognitive Behavioural Therapy (CBT) for EDs (CBT-ED)
- CBT-Anorexia Nervosa (AN) (CBT-AN)
- CBT for Bulimia Nervosa (BN) and Binge-eating Disorder (BED) (CBT-BN and CBT-BED)
- Specialist Supportive Clinical Management (SSCM) for EDs
- Maudsley Model of Anorexia Treatment in Adults (MANTRA)
- Interpersonal Therapy (IPT) for BN, BED
- Dialectical Behavioural Therapy (DBT) for BN, BED
- Focal psychodynamic therapy for EDs

What is the approved model of care for patients with an Eating Disorder Plan? The Eating Disorders Items Stepped Model of Care

The eating disorder items support a STEPPED MODEL for best practice care of eligible patients with eating disorders that comprise:

- assessment and treatment planning services;
- provision of and/or referral for appropriate evidence based eating disorder psychological and dietetic treatment services; and
- regular review and ongoing management to ensure the patient accesses the appropriate level of intervention to meet their needs.

STEP 1 ASSESSMENT AND PLANNING – Managing Practitioner (GP (mostly) or consultant psychiatrist or paediatrician is also eligible for assessing patient)

An eligible patient receives an eating disorder plan (EDP) from the GP (mostly) or consultant psychiatrist or consultant paediatrician to access dietetic and/or psychological services. If the managing practitioner is of the opinion that the patient is likely to receive more than 20 EDPT services, a referral to the Specialist (Psychiatrist or Paediatrician) – required by visit 20 EDPT should occur at STEP 1 to be put on an appointment waiting list.

Preparation of EDP (if meet eligibility criteria), entitles patient to

- up to 4 x 10 Medicare subsidised sessions for psychological therapy
- Up to 20 Medicare subsidised sessions for dietetic services

STEP 2 COMMENCE INITIAL COURSE OF TREATMENT

Commencement of psychological & dietetic services with qualified and suitably trained Mental Health Clinician and Accredited Practising Dietitian. Once an eligible patient has an EDP in place, the 12 month period commences, and the patient is eligible for an initial course of treatment, up to 20 dietetic services and 10 EDPT services. (A patient will be eligible for an additional 30 EDPT services in the 12 month period, subject to reviews from medical practitioners to determine appropriate *intensity of treatment.)*

STEP 3 -FIRST REVIEW (managing practitioner review and progress for an additional 10 EDPT services). It is expected that the managing practitioner will be reviewing the patient on a regular, ongoing and as required basis. However, a patient must have a review of the EDP, to assess the patient's progress against the EDP and/or update the EDP, before they can access the next course of treatment (10 EDPT) services. The first review should be provided by the patient's managing practitioner.

STEP 4 FORMAL SPECIALIST AND PRACTITIONER REVIEW To continue beyond 20 EDPT services a patient must have two additional reviews before they can access more than 20 EDPT services. One review (the 'second review') must be performed by a medical practitioner in general practice who is expected to be the managing practitioner), and the other (the 'third review') must be performed by a consultant paediatrician or consultant psychiatrist. Should both recommend the patient requires more intensive treatment, the patient would be able to access an additional 10 EDPT.

STEP 5 ACCESS TO MAXIMUM INTENSITY OF TREATMENT (continue beyond 30 EDPT services) To access more than 30 EDPT treatment services in the 12 month period, patients are required to have an additional review (the 'fourth review') to ensure the highest intensity of treatment is appropriate. Subject to this review, a patient could access the maximum of 40 EDPT treatment services in a 12 month period. The fourth review should be provided by the patient's managing practitioner, where possible.

Within the EDP, an integrated team approach is strongly encouraged, whereby a patient's family and/or carers should be involved in the treatment planning and discussions where appropriate. The family can be involved in care options throughout the diagnosis and assessment, and are usually the support unit that help to bridge the gap between initial diagnosis and eating disorder specific treatment.

Useful Links

Eating Disorders Qld: PDF Guide

Eating Disorders Victoria: Visual Guide to Navigating Changes

The Butterfly Foundation: A Quick Guide for Consumers

National Eating Disorders Collaboration: Guide for Practitioners

Inside Out: Guide for Consumers

Inside Out: Guide for Health Professionals

