

Allied Health Pathways

On average approximately 33,000 "other providers" are registered for billing MBS items, of these almost 25,000 are Allied Health professionals

Over the last year more than 12.4 million MBS services were billed by "other providers"

More than \$1.3billion in benefits were billed by this group of providers since April 2008.

Allied Health

To understand the variety of Allied Health providers and their experiences we defined who they are against some characteristics. These are described below each persona.



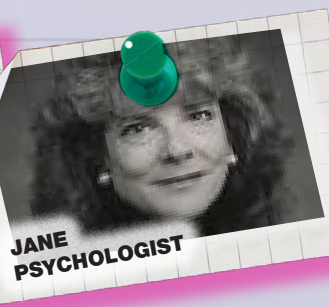
**ANDREW
PHYSIOTHERAPIST**



**ROBYN
PHYSIOTHERAPIST**



**AMANDA
PSYCHOLOGIST**



**JANE
PSYCHOLOGIST**



**JANET
PODIATRIST**



**MARK
PODIATRIST**

Type of Allied Health Practice	Physiotherapist	Physiotherapist	Psychologist	Psychologist	Podiatrist	Podiatrist
Extent of exposure/caseload interaction with Medicare system	EPC less than 5% ie 1 in 20 clients	10-15% ie 1 in 10 clients	All patients are private	50% ie 1 in 2 clients	5-10% ie upto 1 in 10 clients	Nil
Extent of exposure/caseload interaction with DVA	15-20% ie 1 in 5 clients	40-50% ie 1 in 2 clients	25% ie 1 in 25 clients	25% ie 1 in 25 clients	20% ie Up to 1 in 5 clients	10% ie Upto 1 in 10 clients
Practice nature (Public or Private)	Private	Private	Private	Private	Private	Private
Gender (male, female)	Male	Female	Female	Female	Female	Male
Location (Rural, Metro, suburban)	Metro	Outer suburban	Metro	Metro	Outer suburbs	City
Mobility (Service point delivery) (Home visits, Mobile, Multi-site, single site)	95% clinical at same location	80% mobile in particular goes to nursing homes	100% single site	100% single site	Main practice one clinic and Aged care visits	Consult at single point, surgery at multiple hospitals
Patients socio-economic background	White-collar	Elderly, retirees and veterans	High income earners	Low to middle income	Mixed community	Upper income
Income level (Range \$)	\$100,000	\$50,000	\$120,000	\$65,000	\$70,000	\$150,000
Specialisation (None, Specify)	N/A	Geriatric	Clinical	General	N/A	Surgical
Practice Composition (Solo or group)	Group	Solo	Group	Solo	Group of 3	Solo
Extent of support (None, Some administrative, Practice Management)	Internal Practice Manager and admin support	Self	Practice Manager and staff	None	Full support and admin at clinic	Admin support
Hours in Practice (Full time, Part time)	Full time	Part time	Full time	Full time	Full time	Full time
Level of integration with other health providers (Stand alone, multi-site)	Strong network, standalone practice	Small referral base	Ad hoc - as required	Ad hoc - as required	Good	Limited
Years Experience (Years)	10 years	15 years	10 years plus	10 years	7 years	20 years
Extent of IT system support in Practice (Paper based, paperless, hybrid)	Practice Management system in place	Paper based	Paperless - IT systems	Hybrid	Hybrid	Hybrid
Billing Mix (Bulk bill, no bulk bill, hybrid)	Nil	5%	Nil	30-40%	80%	Nil

Allied Health

To understand the variety of Allied Health providers and their experiences we defined who they are against some characteristics. These are described below each persona.



ANDREA
SOCIAL WORKER



ANTONIA
SOCIAL WORKER



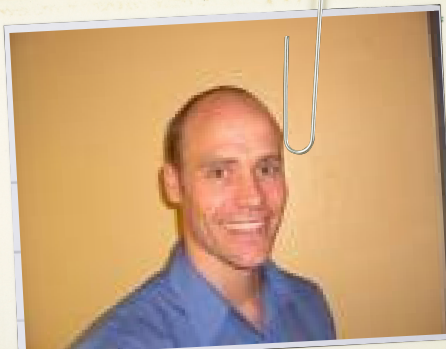
MELANIE
DIETITIAN



JULIE
DIETITIAN

Type of Allied Health Practice	Social Worker	Social Worker	Dietitian	Dietitian
Extent of exposure/caseload interaction with Medicare system	50% ie 1 in 2 clients	85% ie 4 in 5 clients	70% ie 7 in 10 clients	10% ie 1 in 10 clients
Extent of exposure/caseload interaction with DVA	5% ie 1 in 20 clients	10% ie 1 in 10 clients	15% ie 1 in 3 clients	10% ie 1 in 10 clients
Practice nature (Public or Private)	Private	Private	Private/Mixed	Private - Self employed
Gender (male, female)	Female	Female	Female	Female
Location (Rural, Metro, suburban)	Metro	Rural	Regional	Metro
Mobility (Service point delivery) (Home visits, Mobile, Multi-site, single site)	Multiple locations	One location	Multiple locations	Multi-clinics
Patients socio-economic background	Low to medium income	Low to medium income	Middle income	Middle to upper
Income level (Range \$)	\$60,000	\$90,000	\$50,000	\$120,000 +
Specialisation (None, Specify)	N/A	N/A	General	General
Practice Composition (Solo or group)	Solo	Group	Solo	Group
Extent of support (None, Some administrative, Practice Management)	Self	2 days a week admin support	Limited/Self	Practice manager and admin staff
Hours in Practice (Full time, Part time)	Full time	Full time	Part time	Full time
Level of integration with other health providers (Stand alone, multi-site)	Standalone practice, interacts with GP's	Stand alone interacts with Psychiatrists and GP's	Work in GP sites	Standalone and work with GP's and other allied health
Years Experience (Years)	15 years	24 years	2 years	20 years
Extent of IT system support in Practice (Paper based, paperless, hybrid)	Paper based	Paper based	Paper based	Hybrid
Billing Mix (Bulk bill, no bulk bill, hybrid)	20%	10%	50%	Nil

Allied Health Persona: Physiotherapist - Andrew



Background	I am 35 years old. I graduated with a Bachelor of Physiotherapy with 5 years hospital experience. I have since then attained post grad qualifications and now employed in a private practice which has 4 other physio's. I enjoy cricket and eating pizza and beers with the boys.
Drivers and motivations	I am motivated to work in the clinic. I am interested in sports physio and setting up my career to move into the business management and ownership aspects of the practice.
Strengths	I enjoy working with people. I play a strong education role in the practice. I have strong clinical reasoning and have great people management skills.
Desired work experience	I am after clinical variation. I really like to learn from my colleagues and I am hungry for knowledge.
Daily interactions	I mostly interacts with clients. Limited admin work because of admin staff. I create written communication with referrers and have verbal communication with insurers. I also interact with my colleagues as much as I can on a daily basis.
Challenges	I have huge time pressures. The client expectations keep me constantly pressured. The ability to achieve positive clinical outcomes and paperwork obligations is a real tension!
Go about work	Structured time management.
Biggest concern?	Client numbers mean income. The more clients I can see the more income I can make. The longer the sessions the less time for more clients.
Training / Development	I am poorly trained in admin. But I am well trained clinically. I do all of my clinical education in my own time.
Support	I use my internal network: the Practice Manager, my colleagues and if I need to I will use the web and search for answers. I am part of a professional association -

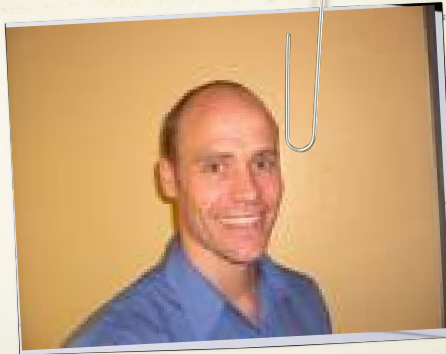
Allied Health Persona: Physiotherapist - Robyn



Background	I have been in the hospital environment for 10 years. I work part-time in a clinical practice. I am 45 years old. I have always had an interest in helping older people.
Drivers and motivations	Financial independence. I love working in clinical settings because of the interactions I have with clients.
Strengths	I am very patient and have strong empathy with my clients. I am often receiving compliments from my clients.
Desired work experience	I love people interaction. I enjoy being part of a community- especially the nursing homes I attend to on a regular basis.
Daily interactions	There are many types of people that I interact with on any typical day, these include: aged care managers and staff from nursing homes, clients, Medicare, DVA, Occupational Therapists.
Challenges	I find administration tasks a hard thing to squeeze into my day. I rarely have time during the day to do these things. My cash flow is also something which I keep on top of. I also have a challenge understanding the health system especially when policy and business rules change.
Go about work	I am self structured, and work flexible hours. I am mobile so I need to be flexible.
Biggest concern?	Client health is my number one concern. Then after that bad debt accruing - impacting my income.
Training / Development	I do not get any training.
Support	I am independent so I use my personal networks to get the support I need. I am part of a professional association.

Allied Health Professional Physiotherapist Typical Day

No one day is the same for a Physiotherapist. The main focus is seeing clients and maximising time with them. This is income source.
A big determinant of how many clients can be seen is based on the types of appointments, as illustrated below.



My feelings

Time

Typical daily activities:

Onsite

I am in my room for most of the day.

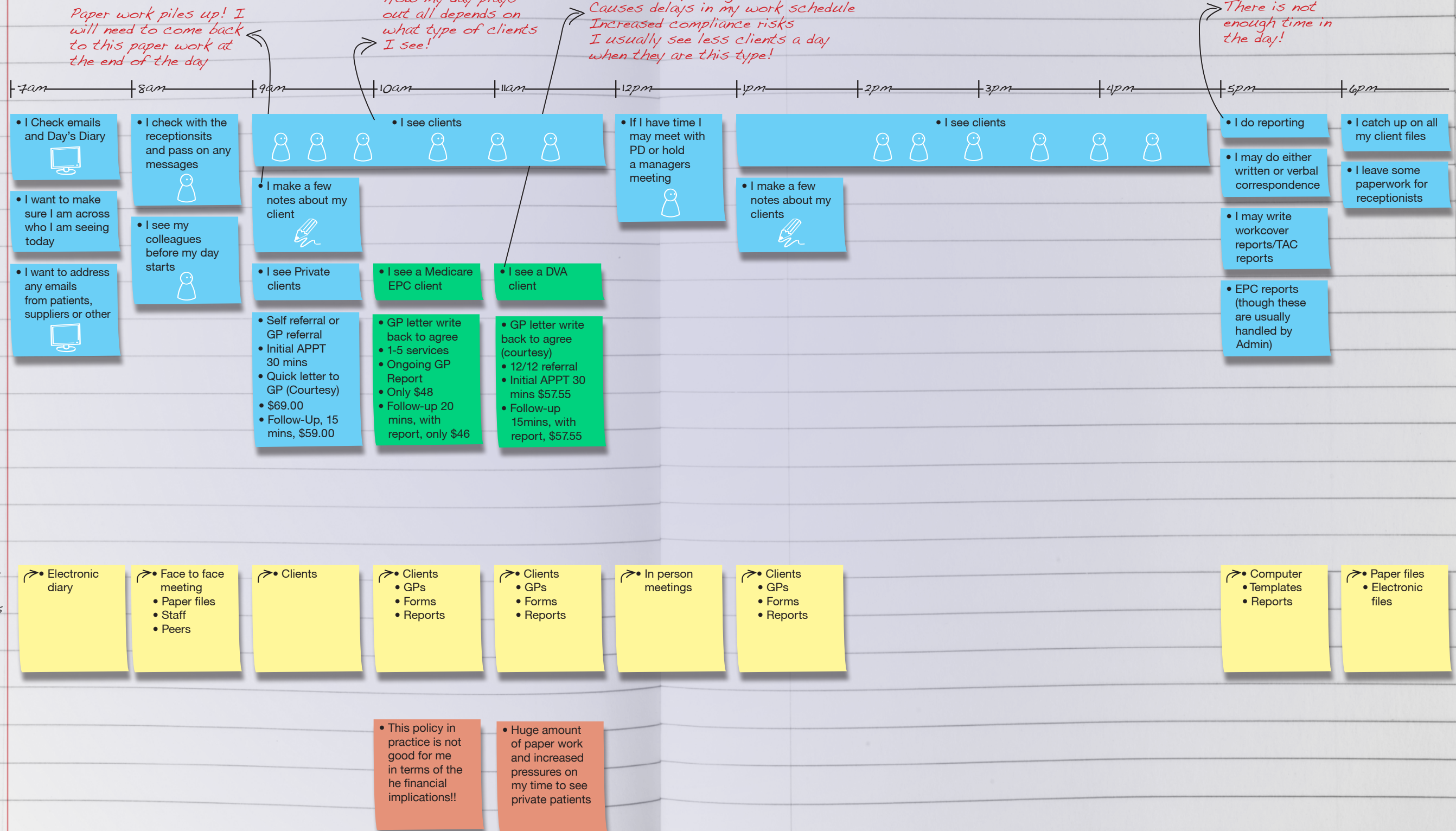
Offsite

Interactions

- ☐ people
- ☐ paper products
- ☐ online products
- ☐ services

➔ - comes to me
↪ - I initiate

Issues/risks



Notes

- ☐ Introduction of Enhanced Primary Care program has meant an increased burden on my day!
- ☐ The paper work is incredible.
- ☐ The interactions with GP's could be much better.
- ☐ The Medicare and DVA programs mean a new type of client - usually a more complex client ie with chronic conditions!
- ☐ Accessing information is ad hoc and not uniform - not clear across providers
- ☐ We have no time to research information
- ☐ We tend to look to our peak body for information
- ☐ We prefer to use "client" not patient.

Allied Health Persona: Psychologist - Jane



Background	I am a 45 year old psychologist in private practice in Frankston. I have been in private practice for 10 years after working for the health department.
Drivers and motivations	I am motivated to assist people improve their lives. I love being able to help people and the freedom private practice gives - to do all sorts of therapy to help people.
Strengths	I am highly motivated. I am very organised and is very good with people.
Desired work experience	I am after flexibility. I work for myself and I like this flexibility to be involved in other activities in my life. I also get a great deal of satisfaction through my work helping people.
Daily interactions	I mostly interacts with my clients. I also interacts with other psychologists, GPs and other referrers e.g. insurance companies, work cover etc. If I have to I will call a government hotline.
Challenges	I balance between work and life. Earning good income is a challenge - balancing appointments with clients as well as finding time to respond to phone calls, emails, contacting GP's. I also finds clients who are referred by some referrers more difficult than others, more because there is usually multiple needs which I cannot address on my own.
Go about work	I have diary appointments. I do a lot of organising e.g. bookkeeping. I have 50 min appointments. I juggle my time between clients, maintaining files, writing reports, phone calls and business matters.
Biggest concern?	Doing a good job. Making sure I have a steady stream of income and sources of referral. Juggling family and work commitments.
Training / Development	As a private practitioner I have to identify and pay for my own ongoing training to meet my professional development and ethical requirements.
Support	I use my peers and professional groups. I also refer to family and friends. I am part of the Australian Psychological Society (APS) and I gets materials from them. I also use their resources such as the web site and APS Advisors.

Allied Health Persona: Psychologist - Amanda



Background	I am a 55 year old psychologist. I own my own practice in Toorak. I employee 10 psychologists and 2 administrative staff. I like to write for journals about managing business in this area.
Drivers and motivations	To help people is number one. I also love seeing my practice grow and the financial rewards that come with this.
Strengths	I have excellent business skills and I am a very good communicator. I know how to support my staff and provide a great place to work.
Desired work experience	My experience is around running a successful business. At the core of this is being able to help and motivate people.
Daily interactions	I interacts with my clients, staff, the other psychologists. Also my marketing consultant, bookkeeper and accountant. I delegate a lot to my staff.
Challenges	Maintaining integrity of the business. Providing peer support and leadership to my staff, as well as see clients! I am constantly thinking about maintaining and looking for good staff members to employ - both clinical and administrative.
Go about work	I have admin support to organise my day. The range of activities I do includes making and taking phone calls relating to clients, holding business meetings, weekly staff meetings, organising procedures and reports.
Biggest concern?	My biggest concern is making sure the business runs smoothly. I am also concerned about staff leaving because good staff take so long to train! Also keeping up-to date with new information and technology affecting my business.
Training / Development	I maintain my professional development through adjunct courses and affiliation with the Australia Psychologist Society (APS). Amanda pays for all her own development.
Support	I refer to peers, professional groups and the group practice. I also use the APS as an authoritative source.

Allied Health Professional Psychologist Typical Day

No one day is the same for a Psychologist. They experience many events which can interrupt the "ideal" day. This pathway draws on a few example events. There are many more "extras" they have to deal with.



Notes

- Recognise that clients who come with a Mental Health Care Plan are complex cases
- How can we reduce the reporting burden associated with care plans?
- It's frustrating not to receive the plan from the GP
- I have a strong need to see clients - paperwork gets in the way!
- More clients are able to afford access to our services, this means our client base is changing. We are starting to see more complex cases.
- Our day to day practice has changed - filing, processing, QA etc
- Making time for professional meetings is important but hard to get to

My feelings

Time

Typical daily activities:

Onsite

I am in my room for most of the day

Offsite

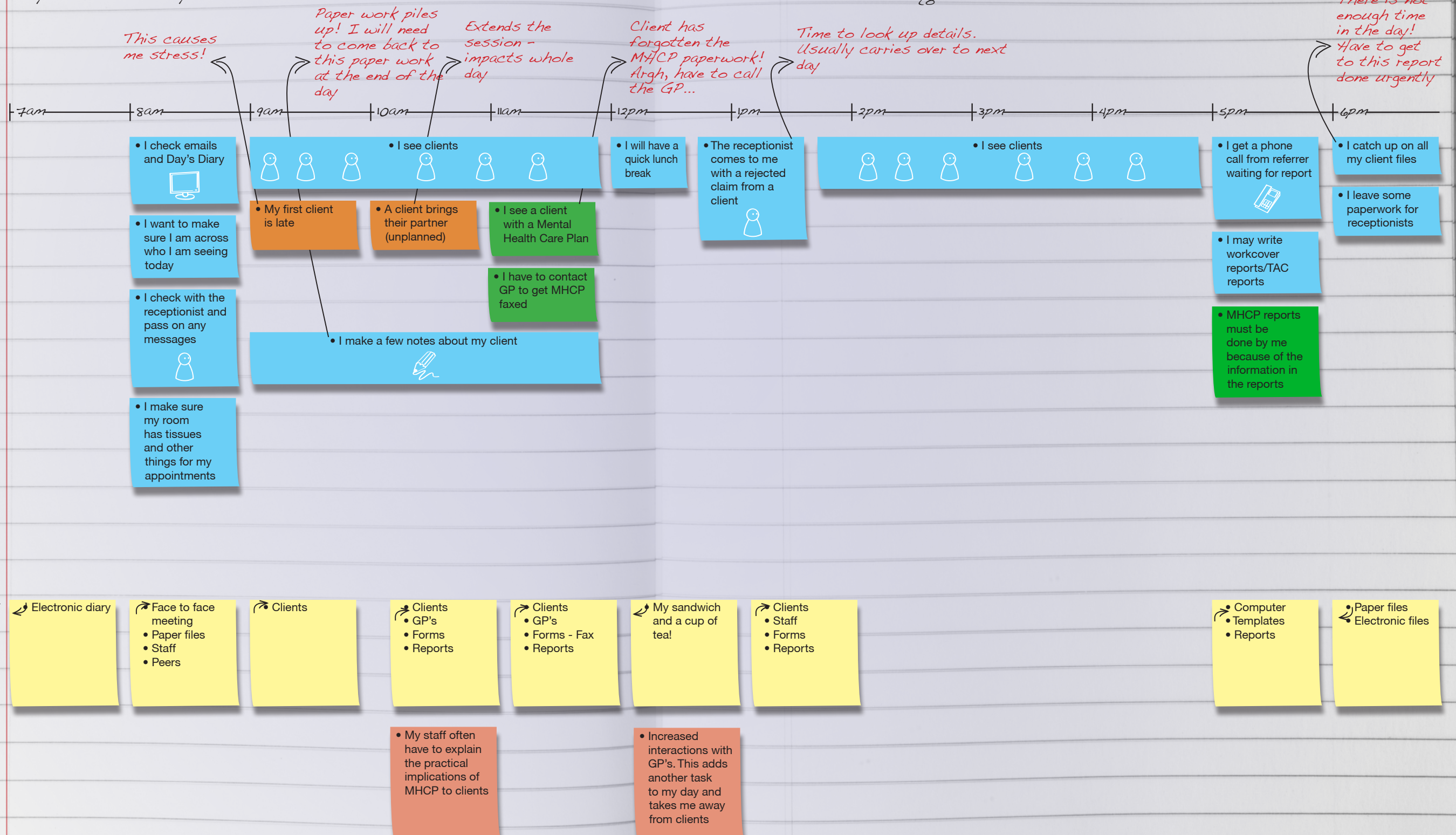
Interactions

- people
- paper products
- online products
- services

→ - comes to me

↪ - I initiate

Issues/risks



Allied Health Persona: Podiatrist - Janet



Background	I am a 30 year old podiatrist working in a group podiatry practice with 2 others. I have 7 years experience as a podiatrist and have been working in this practice for 3 years. I like playing volleyball on weekends.
Drivers and motivations	I enjoy the interaction with my regular clients and my ability to work autonomously. I like the ability to help relieve the clients pain.
Strengths	I was top of my class in my undergraduate studies. I am committed to continuous professional development. I am technically very strong. I interact well with clients.
Desired work experience	I like the experience and a varied workload with a degree of flexibility in my work schedule. I enjoy providing support to the new grad who recently began working in the practice.
Daily interactions	I interact with clients, referrers, colleagues, administration staff and practice manager.
Challenges	A key challenge is ensuring my knowledge is up to date. Developing treatment plans that is within the clients budget is always a challenge.
Go about work	I work to an appointment schedule.
Biggest concern?	Completing administration tasks! E.g. EPC letters and other letters to referrers.
Training / Development	I am personally responsible for my personal development.
Support	I go to my employer, other podiatrists, colleagues and the internet. I am a member of Australian Podiatry Association in my home state. I also use their resources such as the web site.

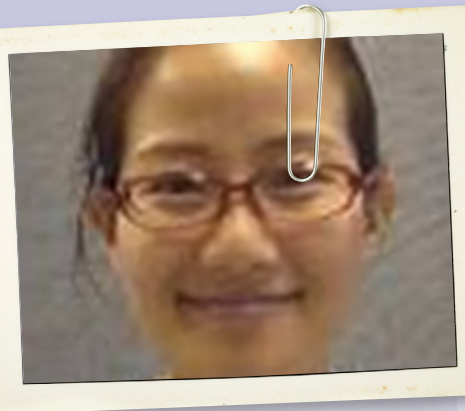
Allied Health Persona: Podiatrist - Mark



Background	I am 49 years old. I am a podiatrist surgeon. I graduated 25 years ago and specialised 15 years ago. I work for myself. I like playing cards and a small scotch once a month!
Drivers and motivations	I want to be the best at what I do and ensure podiatry can provide complete foot-care for my clients.
Strengths	I am a specialist. I am a leader in my field. I have the tenacity to lead the life of a surgeon.
Desired work experience	I expect varied surgical case load.
Daily interactions	I interacts with clients, other podiatric surgeons, administrative staff, insurers.
Challenges	Barriers to practices include public sector access, funding, awareness. Also access to modalities necessary for best practice.
Go about work	I consult from a central location. Surgery is performed in 2-3 different private hospitals, 2 days per week. Meetings, organising procedures and reports.
Biggest concern?	My biggest concern is the inability to provide service in public hospitals and with all operations ensuring good client outcomes.
Training / Development	I have ongoing training through overseas trips to specialist conferences. I also train other podiatric surgeons for registration.
Support	I use my professional associations, colleagues, international network and the university researchers in my field.

Allied Health Professional Podiatrist Typical Day

No one day is the same for a Podiatrist. There are unexpected events and they do their best to fit it all in. Introduction of Enhanced Primary Care Program has meant an increased burden on these health professionals.



Notes

- Recognise that Clients who come with an EPC are complex cases
- How can we reduce the associated reporting burden?
- Delay income: uncertainty with payment through billing Medicare directly with annual method and through Ezyclaim due to other allied health providers utilising visits or eligibility issues. This could be resolved further with Medicare online billing

My feelings

Time

Typical daily activities:

Onsite

I am in my room for most of the day

Offsite

Interactions

- people
- paper products
- online products
- services

→ - comes to me

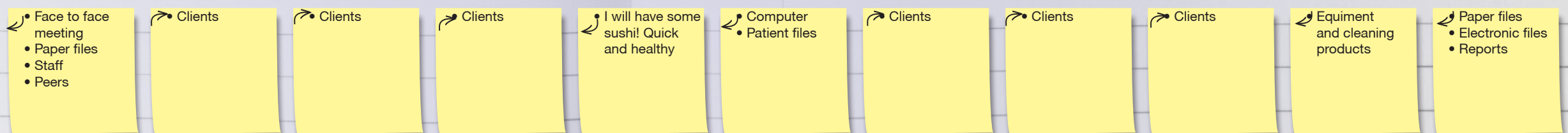
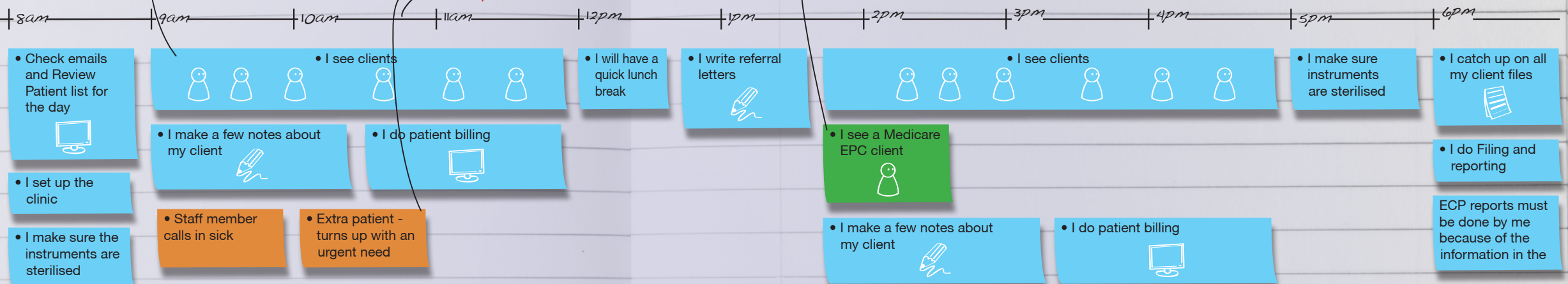
↪ - I initiate

Issues/risks

Depending on the type of client: direct, or referral, or EPC, this shapes my day

I have to make time in the diary! I push other clients back.

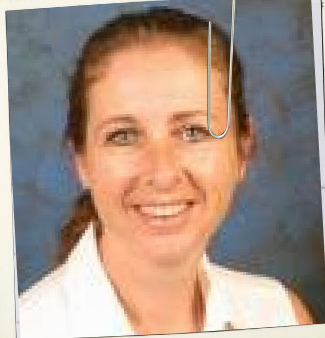
Increased time burden
Increased admin burden
Increased reporting burden
Causes delays in my work schedule
Increased compliance risks



My staff often have to explain the practical implications of EPCs to clients

Increased interactions with GP's. This adds another task to my day and takes me away from clients

Allied Health Persona: Social Worker - Andrea



Background	I am 40 years old. I work on my own in a part-time private practice. I studied social work after working outside health field for some years. I love my two children and two cats.
Drivers and motivations	I have a strong sense of social justice. I got this from my parents growing up. I have a desire to make a difference. I have a belief in bringing contextual understanding into my work.
Strengths	I have a high level of education. I have a high level of clinical skills. I have strong engagement skills. I am committed to providing a professional service. I have strong networks.
Desired work experience	I seek to make a difference to my clients which brings me satisfaction. I am after creating a context which clients feel respected and valued.
Daily interactions	I interact with my clients, GP's, community agencies, families and public health administrators.
Challenges	I run a paper based business, I avoid using software applications or the internet. I am challenged staying up to date with my paper work - letters, reports, assessments. I also have to deal with GP's misunderstanding my role in helping clients. I also find being financially viable a challenge. My lack of admin support tests my time allocation to clients versus admin work. Also balancing family life with long hours and work.
Go about work	I make my own appointments, phone calls and admin. Most of my day is spent with clients. Paperwork, phone calls are all done after hours.
Biggest concern?	My biggest concerns are inequity of Medicare rebate which impacts my financial viability. Ethical dilemmas created by this i.e. don't want to discriminate between patients. The ongoing misunderstanding about social workers role.
Training / Development	I must keep up with CPE requirements by going to conferences, workshops to maintain 75 points per year. I also read, conduct supervision of others, and when I can do some short post grad courses.
Support	I seek out my peers, attend conferences, and read material from Australia Association of Social Workers.

Allied Health Persona: Social Worker - Antonia

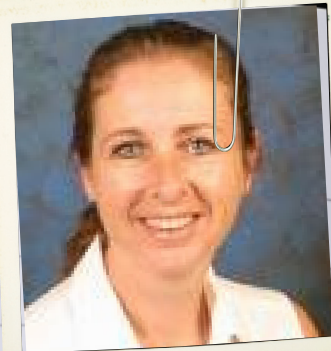


Antonia (third from left).

Background	I am 47 years old. I have been a social worker for 25 years. I have been with the private medical practice Sparrow Health for 17 years. I love my job.
Drivers and motivations	I am driven by a sense of social justice. I see my services as an alternative to pathologizing.
Strengths	I am flexible and approach my work with patience and wisdom. I have a good ability to connect clients and GPs. I committed to providing training. My many years experience means I can give a variety of clinical responses. I am committed to ongoing education.
Desired work experience	I am after positive interactions with my clients and other professionals. I like to collaborate and get good outcomes. I also like to facilitate learning.
Daily interactions	I interact with colleagues, administrative assistance, clients, GP's and commonwealth agencies.
Challenges	I find paperwork, especially letters to GPs and chasing GPs for 27105 time consuming! Finding time for lunch most days is a challenge! I try to provide support to high need clients in between other clients appointments. I feel like every day is because before and after work I have family commitments.
Go about work	I see my clients, speak to GPs on the phone, writes letters using a PC. I run training on set days, as well as informal training. I conduct research projects to understand changes.
Biggest concern?	My biggest concern is inequity. The inadequacy of the public mental health system. And obviously time - lack of it!
Training / Development	Peer support, conferences, reading. I learn by developing and delivering training modules for public mental health.
Support	Colleagues, G.Ps and Supervisor.

Allied Health Professional Social Worker Typical Day

No one day is the same for a Social worker. There are unexpected events and they do their best to fit it all in. They care about helping their clients. Their time is pressured - to balance care with efficiency.
Every cancelled appointment is lost income (or delayed until service is given). This pathway shows some types of events for social workers.



Notes

- I'm looking for simpler ways to report and communicate progress to GPs on their 2710 clients.
- The new and better 2710 plans are commonly used in our practice and by GPs referring mostly because of rebate difference for clients and with upto 12 sessions.
- We operate in a context of social justice and our clinical therapeutic services are very important
- Increased workloads and you don't get paid!
- How can we make it easier for clients?

My feelings

Time

Typical daily activities:

Onsite

I am in my room for most of the day

Offsite

Interactions

- people
- paper products
- online products
- services

→ - comes to me

↪ - I initiate

Issues/risks

I have already been running around this morning with my family

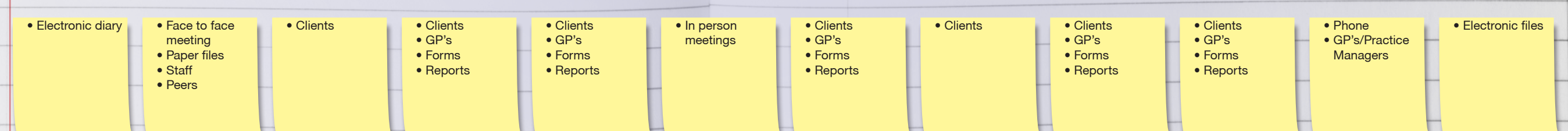
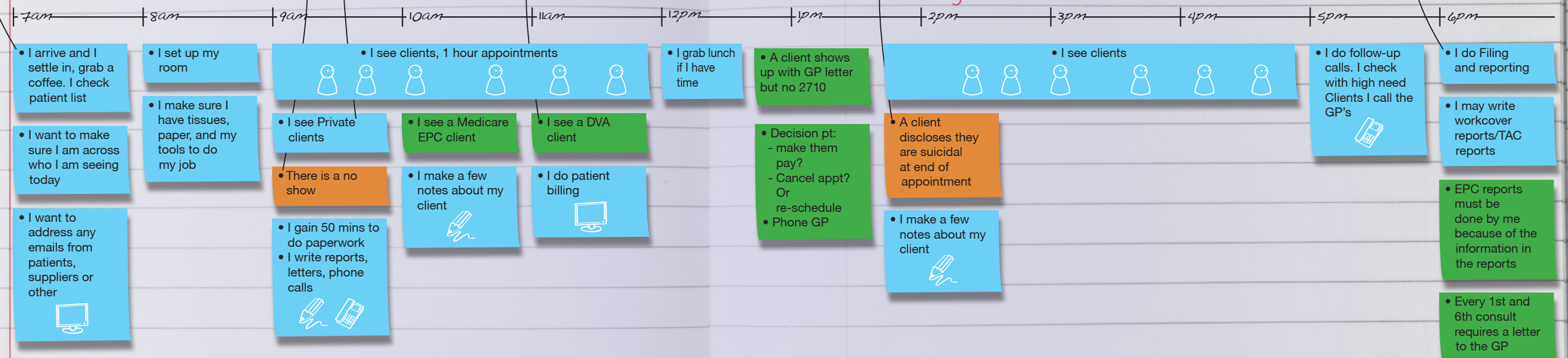
I can do paperwork!

How my day plays out all depends on what type of clients I see!

Increased time burden
Increased admin burden
Increased reporting burden
Causes delays in my work schedule
Increased compliance risks

I go overtime
I must help them immediately
I know I have clients waiting

There is not enough time in the day!



This policy in practice is not good for me from a financial perspective!!

I want to make the right decision about my client. It would be better if paperwork could be accessed another way?

It is so hard to get hold of GP's

Allied Health Persona: Dietitian - Melanie



Background	I am 25 years old, from Ballarat and have just moved back home after completion of my degree. This is my first job as a dietitian and have been approached by a GP to start a clinic in his practice.
Drivers and motivations	I want to help people overcome their health problems through evidence based practice. I like helping people sift through information and misinformation.
Strengths	I am enthusiastic, passionate, and have loads of energy. I understand nutrition of diet and disease relationships.
Desired work experience	I am fresh from Uni, a masters in Nutrition of dietetics. I want to live my studies! I want clients and real cases to start making a difference. I am after a good working relationship with the GP and his practice.
Daily interactions	I check the Dietitians in the Private Sector Interest Groups (DIPSIG) via email on a daily basis. I interact with the GP and his admin staff on a client basis. My clients are often older who have type 2 diabetes, hypercholesterolemia, hypertension of which require weight management.
Challenges	I have little professional supervision and support from other dietitians. I have assistance with making appointments but make my own payments, accounting, marketing, reports and business analysis. I am a sole trader and have limited support from external experts. Time management and understanding policies/procedures and requirements to ensure compliance concern are ongoing challenges. In addition poor understanding of financial performance challenges sustainability of business. I have a paper based records system and use fax/copy machine to cope materials for my clients
Go about work	I pay the GP a percentage of my billings in exchange for rooms and a small amount of admin support. I get copies of resources ready prior to start of every day. I do 4-8 hours of sessions across a variety of practices. I allocate 1 hour per client when they are new, then 30 mins there after. I rely on GP referrals. I do paperwork at home.
Biggest concern?	My biggest concerns are keeping up referrals, managing finances, keeping up to date with clinical knowledge. I get pressure from the GP's to take on DVA and Medicare clients - I find this hard to manage.
Training / Development	Degree in Science and Masters in Dietitian. I take responsibility for my own continuing professional development through participation in the Accredited Practising Dietitian (APD) program which involves setting goals and completing CPD learning activities
Support	I am part of the Dietitians Association of Australia (DAA)

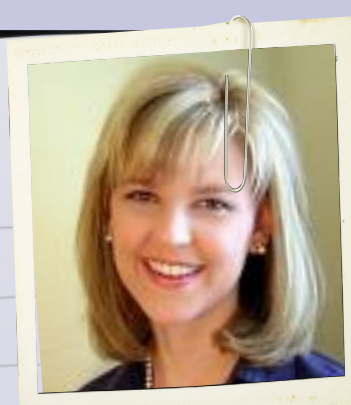
Allied Health Persona: Dietitian - Julie



Background	I am 40 years old with 3 children, a cat and husband John. I have worked in the public hospital system for 15 years before starting in private practice. I made this move so I could make my own hours and be there while the children grow up. I have been in private practice for 5 years. I run my own practice.
Drivers and motivations	I care about my family and keeping a good work life balance. I also am motivated by financial success.
Strengths	I have a strong business acumen. My experience of practising as dietitian gives me a wealth of knowledge. I am an excellent time manager and manage staff with care.
Desired work experience	I am after a well managed business - all my staff, other dietitians, admin staff follow good business practice.
Daily interactions	I interact with my employees, clients (both referred and direct), G.P's, specialists and fellow Accredited Practising Dietitians (APD) through the DAA regarding both clinical and business management questions.
Challenges	GP's have expectations that I will bulk bill. My practice does not do this for financial reasons. I find it challenging that clients do not know what Medicare funds. I have to educate my staff on Medicare and DVA programs. Some clients rather see me than my staff. Changes in GPs mean continuous education re Medicare and billing. Clients fail to keep follow-ups despite making promises to be there - causes hold-ups for other clients!
Go about work	I see my clients from a range of new to repeat. I see a range of medical conditions diets, weight loss, eating disorders. Medicare is a bit of an inconvenience due to clients and GPs needing education by me. Reporting is computer generated.
Biggest concern?	The sustainability of my practice and work life balance.
Training / Development	I have peer support through my networks and the DAA.
Support	I have a Practice Manager and admin support. I also use Practice management software. The server is integrated with client notes.

Allied Health Professional Dietitian Typical Day

No one day is the same for a Dietitian. They experience unexpected events and they do their best to fit it all in. A typical day is a mixture of referrals, new clients and repeat clients. Introduction of Enhanced Primary Care Program has meant increased burden on these health professionals.



Notes

- Help me help my clients manage their EPC sessions across multiple Allied health providers!
- I find the balance between paperwork and remuneration not there for Medicare clients
- There is a lot of interaction needed between us and referring GP. It is hard sometimes to get hold of them.
- If I have staff I will get them to follow-up with the client. This puts pressure on my staff.

My feelings

Time

Typical daily activities:

Onsite

I am in my room for most of the day

Offsite

Interactions

- people
- paper products
- online products
- services

→ - comes to me
↔ - I initiate

Issues/risks

