

How do GPs refer patients to the Access to Allied Psychological Services (ATAPS) project?

GPs need to have completed a **GP Mental Health Treatment Plan** (MBS Item 2710 or 2702) in conjunction with a mental health outcome measurement tool (eg K10 or Edinburgh Postnatal Depression Scale) prior to referring patients to ATAPS.

GPs should then complete the ATAPS Referral Form and forward this directly to the psychologist selected from the ATAPS Psychologists Directory.

Is a GP Mental Health Treatment Plan required?

Yes, the patient must have a current GP Mental Health Treatment Plan in place.

Can a patient receive a 2nd Referral or 3rd Referral for ATAPS psychology services?

Yes, patients can have a 2nd ATAPS Referral for a further 6 sessions if required (a total of 12 psychology sessions per calendar year). Under exceptional circumstances the patient may be referred for a 3rd ATAPS Referral (a total of 18 sessions per calendar year).

What do GPs have to do for a 2nd Referral for their patient?

GPs need to see the patient and complete a **Review of Mental Health Treatment Plan** (MBS Item 2712 completed 1 – 6 months after Item 2710 or 2702) or GP Mental Health Care Consultation (MBS Item Number 2713) or a Standard Consultation. A new ATAPS Referral Form for a further 6 sessions is completed and forwarded to the psychologist selected from the ATAPS Psychologists Directory. The referral process remains the same for 2nd and 3rd referrals.

Can a patient be referred to ATAPS if they have already received psychology services under the Better Access (Medicare) program?

Yes, continue with current GP Mental Health Treatment Plan (MBS Item 2710 or 2702) and complete either a Review of GP Mental Health Treatment Plan (MBS Item 2712) or GP Mental Health Care Consultation (MBS Item 2713) or Standard Consultation. An ATAPS Referral Form should then be completed and forwarded directly to a psychologist selected from the ATAPS Psychologists Directory.

Referral to the ATAPS Project and Better Access (Medicare rebated) may occur within the one calendar year provided the total number of services provided under both programs does not exceed the maximum allowable in a calendar year (a total of 18 sessions for each program) and patients are not referred to both programs concurrently.

Does the patient claim a Medicare Rebate for ATAPS Psychologists Services?

No, the patient does not pay fees to the psychologist. The psychologist's fees are paid by GP Network Northside through funding from the Commonwealth Department of Health & Ageing. The ATAPS agreement with psychologists prevents any co-payment or gap fees being charged to the patient, when referrals are made to psychologists on the ATAPS Psychologists Directory.

Is a new GP Mental Health Treatment Plan required for a new calendar year?

No, a new GP Mental Health Treatment Plan (MBS Item 2710 or 2702) is not required if the patient's condition has not significantly changed. The GP sees the patient, completes either a Review of GP Mental Health Treatment Plan (MBS Item 2712) or GP Mental Health Care Consultation (MBS Item 2713) or Standard Consultation, then completes a new ATAPS Referral Form for the new year.