



**The Hon Greg Hunt MP  
Minister for Health and Aged Care**

Ref No: MC21-013951

Mr Will Doolan  
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06 AUG 2021

Dear Mr Doolan

**Australian Government response to recommendations arising from findings without inquest into death of Aisha Devi Beck and findings with inquest into death of Aziza Beck**

I refer to your correspondence of 5 May 2021 to the Minister for Government Services, Senator the Hon Linda Reynolds CSC, concerning Coroner Magistrate English's findings without inquest into the death of Mrs Aisha Devi Beck and findings with inquest into the death of Aziza Beck (Court References: COR 2017 000485 and COR 2017 000486).

The Australian Government offers its sincere condolences to Mr Beck and all family and friends impacted by the deaths of Mrs Beck and Aziza Beck. The Government would also like to thank Coroner English for conducting the inquiry into this tragic event.

Coroner English recommended the Australian Government consider proposals from the Royal Australian College of General Practitioner (RACGP) to add a specific Medicare item for longer sessions with patients with mental health conditions, and that funding be provided for telehealth consultations for patients who have been prescribed psychotropic medication. This recommendation was made under section 72(2) of the *Coroners Act 2008* (Vic).

This recommendation falls within my portfolio responsibilities as the Minister for Health and Aged Care.

**Recommendation: the Australian Government consider the RACGP proposals to change the Medicare system to add a specific item for longer sessions for patients with mental health conditions**

***This recommendation is under consideration by the Australian Government***

The RACGP has made several submissions<sup>1</sup> to mental health reform and pre-Budget processes advocating for additional Medicare Benefits Schedule (MBS) items to deliver longer mental health consults. The content of each of these submissions is broadly consistent and proposes alignment of the MBS items and rebates for mental health consults by GPs with those for physical health conditions, such as chronic diseases.

The Government will consider proposed changes to the MBS to add an item number for longer mental health consults. It is important to note there are four existing time-tiered GP consultation items which can be used for any presentation to a GP, including mental health.

<sup>1</sup> See further: RACGP (2021). "All Reports and Submissions." Retrieved 16 July 2021, from <https://www.racgp.org.au/advocacy/reports-and-submissions/view-all-reports-and-submissions>.

Changes to the MBS must be well-researched, have a sound evidence base and most importantly, should improve patient outcomes. The RACGP proposals must therefore be considered in the context of the findings of recent enquiries and reviews relating to the MBS and mental health.

The MBS Review Taskforce (Taskforce) delivered its final report to Government in December 2020. The Taskforce was supported by working groups and committees comprised of experts to provide specialised, targeted advice. This included a Mental Health Reference Group (MHRG) and a General Practice and Primary Care Clinical Committee (GPPCCC). The RACGP made submissions to the GPPCCC and the MHRG as well as the broader MBS Review. Each submission broadly recommended aligning the MBS items for GP mental health consults with those for consults relating to physical health<sup>2</sup>.

The final report of the Taskforce recommended research be undertaken into the appropriateness of the MBS items for all time-tiered consults for GPs, including their length, content and rebate amounts (recommendation 8). This includes MBS items for mental health consults. The Taskforce also recommended a new MBS item for a 60-minute consult be created (recommendation 9). This did not specifically refer to mental health. The Taskforce's recommendations are currently under consideration by Government.

The Government is undertaking a comprehensive evaluation of the Better Access to Psychiatrists, Psychologists and General Practitioners through the MBS (Better Access) initiative as recommended by Productivity Commission (PC) in its inquiry into Mental Health. The evaluation will further consider relevant recommendations of the Taskforce in the context of assessing whether Better Access improves patient outcomes and increases access to mental health care. Clinical experts, including GPs and stakeholders such as the RACGP, will provide advice throughout the evaluation.

The evaluation also provides an opportunity to further consider the final report of the Productivity Commission Inquiry into Mental Health. While the PC made no specific recommendations relating to MBS items for GP mental health consults, it noted the MBS item structure could act as a disincentive for GPs to spend more time with patients presenting with mental health concerns<sup>3</sup>.

**Recommendation: Funding be provided for telehealth consultations for telehealth consultations for patients who have been prescribed psychotropic medication**

*This recommendation has been implemented by the Australian Government*

All Australians, including people who are prescribed psychotropic medications, continue to have access to a range of telehealth services. From 13 March 2020, in response to the COVID-19 pandemic, the Government progressively introduced temporary COVID-19 items on the MBS for a range of video and phone attendances. As part of the 2021–22 Budget, the Government extended these telehealth items to 31 December 2021.

The temporary telehealth services, which include general practice, allied health and specialist services, complement the existing specialist MBS video conference items, to support people in all areas across Australia by providing ongoing access to essential Medicare funded health services in their homes and reducing the risk of exposure to COVID-19 within the community. In addition, there are a broad range of MBS-funded services that can support a patient with mental health conditions to consult with a range of medical practitioners in their consultation rooms.

<sup>2</sup> See further: RACGP (2021). "All Reports and Submissions." Retrieved 16 July 2021, from <https://www.racgp.org.au/advocacy/reports-and-submissions/view-all-reports-and-submissions>.

<sup>3</sup> Productivity Commission (2020). Productivity Commission Inquiry Report Mental Health. Canberra, 1: 26.

The Government continues to work with peak bodies to co-design permanent post-pandemic telehealth, as part of broader primary health reform, to modernise Medicare and provide flexibility of access to primary and allied health care services.

A central theme underpinning Coroner English's findings is the importance of all Australians having access to preventative, compassionate and effective mental health care when they need it. To this end, the Government is investing a record \$2.3 billion through the 2021–22 Budget for the National Mental Health and Suicide Prevention Plan to lead landmark reform in mental health support and treatment. This includes \$15.9 million to support GPs and other medical practitioners by providing specialised training and resources to enhance their capacity to address the mental health concerns of their patients.

For anything further on this matter, please contact Ms Anthea Raven, Assistant Secretary of the Mental Health Access Branch in my Department on (02) 6289 5609 or by email at: [anthea.raven@health.gov.au](mailto:anthea.raven@health.gov.au).

Yours sincerely



Greg Hunt

cc: The Hon David Coleman MP, Assistant Minister to the Prime Minister for Mental Health and Suicide Prevention