Navigating the new MBS Eating Disorder items

Dr Gabriella Heruc
Accredited Practising Dietitian
Past President, ANZAED
Overview of the Eating Disorder Management Plan (EDMP)

- From 1 November 2019, new Medicare Benefits Schedule (MBS) items were introduced to support a model of evidence-based care for patients with anorexia nervosa and eligible patients with complex presentations of other eating disorders
- Eligible patients receive a Medicare rebate for:
  - the development of an eating disorders plan by a medical practitioner (including a GP, a psychiatrist or paediatrician)
  - regular GP reviews of their progress against the treatment plan
  - formal specialist review by a psychiatrist or paediatrician
  - up to 40 sessions of evidence-based eating disorder psychological treatment with a mental health professional (in 12-month period)
  - up to 20 dietetic services (in a 12-month period)
- The new items provide for both face-to-face services and telehealth consultations
When does a patient meet criteria for an EDMP?

1. Patients with a diagnosis of anorexia nervosa OR
2. Patients who meet the *eligibility criteria (on next slide)* and have a diagnosis of:
   a) bulimia nervosa
   b) binge-eating disorder
   c) other specified feeding or eating disorder
When does a patient meet criteria for an EDMP?

Eligibility criteria:

1. A person must have a global EDE-Q score of ≥3; and
2. The condition is characterised by rapid weight loss, frequent binge eating or inappropriate compensatory behaviours (greater than 3 times per week); and
3. A person must have at least two (2) of the following indicators:
   a) Clinically underweight with a body weight <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 and symptoms
   c) Serious comorbid medical or psychological conditions significantly impacting on medical or psychological health status with impacts on function
   d) The person has been admitted to hospital for an eating disorder in the previous 12 months
   e) Inadequate treatment response to evidence-based eating disorder treatment over the past 6 months despite active and consistent participation
When a patient presents to the GP . . .

Patient presents to GP

- GP to manage patient
- GP refers to specialist psychiatrist or paediatrician
When a patient does not meet criteria for an EDMP

GP to manage patient

Patient does not meet criteria for ED pathway

Patient meets criteria for Chronic Disease Management Plan & Team Care Arrangements (items 721 & 723)

Patient can access up to 5 allied health services (including dietetics item 10954)

Any claims for 10954 in the 12 months of the EDMP count to the allocation of 20 dietetic services
GP to manage patient

Patient does not meet criteria for ED pathway
  Patient does meet criteria for Better Access to MH services with diagnosed mental disorder
  GP creates MH treatment plan
  (items 2700, 2701, 2715, 2717)

Psychological therapy/FPS services (up to 6 services)
  Any Psychological therapy/ FPS claims in the same 12-month period after the start of an EDMP count to the max. allocation of 40 EDPT services in 12 months
  The MH clinician can assess if patient meets ED criteria and recommend to GP

GP review (item 2712)

Psychological therapy/ FPS services (up to 4 additional)

GP review (item 2712)
Who decides if a person is eligible for an EDMP?

- Eligibility can be assessed by the GP (item 90250-90254) or by a Psychiatrist (90260-2) or Paediatrician (90261-3). It is their responsibility to either conduct assessments or to review the results of assessments conducted by others.
- Allied Health professionals may contribute assessment information but are not eligible to make the decision about eligibility.
- Practitioners should consider relevant diagnostic criteria in the Diagnostic and Statistical Manual of the American Psychiatric Association – 5th Ed. (DSM-5)
- Clinicians must adequately document and justify their clinical judgments as per usual practice.
Patient meets criteria for ED Treatment Pathway

<table>
<thead>
<tr>
<th>GP Eating Disorder Plan (90250-7)</th>
<th>Psychiatrist Eating Disorder Plan (90260-2)</th>
<th>Paediatrician Eating Disorder Plan (90261-3)</th>
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</thead>
<tbody>
<tr>
<td>ED Psychological Services (EDPT) (up to 10 services) – report to GP after session 1 &amp; 10</td>
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<td>Medical practitioner review (90264-9)</td>
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<td>EDPT Services (up to 10 additional services, total 20) – report to GP</td>
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<tr>
<td>Patient must be reviewed by both GP and specialist to be eligible for &gt;20 EDPT services in 12 mths</td>
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<td>GP Review (90264-5) AND R/V of Psychiatrist ED Plan or EDP prepared by another practitioner (90266/8) OR R/V of Paediatrician ED Plan or EDP prepared by another practitioner (90267/9)</td>
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Patient meets criteria for ED Treatment Pathway

- GP Eating Disorder Plan (90250-7)
- Psychiatrist Eating Disorder Plan (90260-2)
- Paediatrician Eating Disorder Plan (90261-3)

Dietetic services (82350-1) (max. 20 services in 12 months)

Report back to GP as requested by referring practitioner & as clinically indicated, mandatory report after 1st & last services
Telehealth services

- Different specific item numbers for each treating service provider
- Patients are eligible if:
  - the patient is not an admitted patient of a hospital
  - the service is provided to the patient individually
  - the attendance is by video conference
  - the patient is located within a telehealth eligible area (Modified Monash Model areas 4-7)
  - the patient is, at the time of the attendance, at least 15 kilometers by road from the treatment provider
Eating Disorder Dietetic items

- The EDMP must state that the patient needs dietetic services for treatment of their eating disorder
- Max. 20 dietetic services in a 12-month period (in-person or telehealth)
- Dietitian must provide a written report back to referring GP or specialist after first and last service, or more often if clinically necessary. Written reports should include:
  - any investigations, tests, and/or assessments carried out on the patient;
  - any treatment provided; and
  - future management of the patient's condition or problem
- The report to the Practitioner must be kept for 2 years from the date of service
Eating Disorder Psychological Treatment (EDPT) Services

- The EDMP must state that the patient needs psychological services for treatment of their eating disorder
- Max. 40 psychological services in a 12-month period (in-person or telehealth)
  - Check patient eligibility and sessions used to date through Health Professionals Online System (HPOS)
Eating Disorder Psychological Treatment (EDPT) Services

Eligible treatments:
• Family Based Treatment (FBT) for Eating Disorders
• Adolescent Focused Therapy for Eating Disorders
• Cognitive Behaviour Therapy for Eating Disorders (CBT-E)
• Cognitive Behaviour Therapy for Anorexia Nervosa (CBT-AN)
• Cognitive Behaviour Therapy for Bulimia Nervosa and Binge Eating Disorder (CBT-BN or CBT-BED)
• Specialist Supportive Clinical Management (SSCM) for Eating Disorders
• Maudsley Model of Anorexia Treatment in Adults (MANTRA)
• Interpersonal Therapy (IPT) for Bulimia Nervosa and Binge Eating Disorder
• Dialectical Behaviour Therapy (DBT) for Bulimia Nervosa and Binge Eating Disorder
• Focal Psychodynamic Therapy for Eating Disorders
Reference Websites

- MBS factsheets:  
- MBS online item number search:  
- ANZAED, NEDC, Butterfly FAQs:  
- Federal register of legislation:  
- For consumers and carers:  

Feedback is being collated and provided to the Government by ANZAED and Butterfly Foundation: http://www.anzaed.org.au/mbsfeedback/