

Example Better Access Patient / Practitioner Journey

Refer to [Note AN.0.78 - Better Access Initiative](#) for more information.



The patient has no prior mental health history, however, has had sustained low moods for 6 weeks and is not coping with the stress of day-to-day life. They need help.

The patient visits their MyMedicare registered practice or their usual medical practitioner to discuss their mental health needs.

The patient's GP undertakes an assessment and determines that the patient has a mental disorder. The GP prepares a Mental Health Treatment Plan (MHTP) and determines moderate intervention support is required. The patient is provided with a referral into Better Access.

The GP will claim the relevant MHTP preparation MBS item for this appointment (refer [Note AN.0.56 - GP Mental Health Treatment Plans and Consultation](#)).

The patient undergoes an initial course of treatment with an allied health professional (maximum of six services). The allied health professional develops a report for the referring GP.

The allied health professional will claim the relevant MBS item for these appointments (refer [Note MN.6.2 - Provision of Psychological Therapy](#) OR [Note MN.7.4 - Provision of Focussed Psychological Strategies](#)).

The patient returns to their GP to review their MHTP. If the patient requires additional mental health support through Better Access, they can be referred for an additional course of treatment (up to a maximum of 10 services annually).

Alternately, depending on the patient's individual support needs, the GP may refer the patient to other relevant services, including Medicare Mental Health Centres, Primary Health Networks or relevant digital supports.

Both MHTP Reviews and ongoing mental health consultations for the patient are claimed using GP time-tiered professional (general) attendance items (refer [Note AN.0.9 - Using time-tiered professional \(general\) attendance items](#)).



Australian Government

Department of Health, Disability and Ageing