

Information for General Practices

Aim

The ACT Primary Care Pilot is a trial of a collaborative intervention involving primary health care, community-based care and the public health system to support general practices to optimise wellbeing and reduce the need for patients to go to the emergency department or hospital.

The Pilot aims to improve the health outcomes of participating patients through the early recognition of their potential deterioration, the provision of a holistic care plan inclusive of health and social services, and free at point-of-care treatment for the patient.

The Pilot is enabled by Commonwealth funding to ACT Health and is a collaboration between Capital Health Network (ACT's Primary Health Network), Canberra Health Services (CHS) and ACT Health.

It comprises:

- Funding for GPs to provide free at point-of-care appointments and administrative time for participating patients.
- A Liaison and Navigation Service (LaNS) team at CHS to assist with care co-ordination activities in partnership with participating ACT general practices.
- Virtual access to public medical specialists for GPs at participating practices for advice regarding specific Pilot patients.
- Enhanced timely access to allied health services at public community health centres for participating patients.

Liaison and Navigation Service (LaNS)

- Consists of a team of nurses, allied health professionals and administration staff who provide holistic care coordination and navigation, including health, community and social services.
- Work with participating patients and their supports to identify goals and form a plan for managing their health and wellbeing.
- Assist participating patients to navigate the health system and empowers them to improve skills and confidence in self-management.
- May also identify suitable patients based on hospital data.

General Practice

- Identify and nominate [eligible patients](#) (5-25 patients per 12-week cycle, up to 50 per practice during the Pilot).
- Contribute to care planning with LaNS for each participating patient and attend care planning sessions with LaNS and the participating patient.
- Provide free at point-of-care appointments for Pilot patients as per their care plan.
- Provide appropriate access, care and referrals as necessary.
- Participate in specialist shared care programs as appropriate.

Participating patient benefits

Access to the LaNS team and an individualised care plan to be delivered over a 12-week period. The intervention may include:

- Complex case management
- Care coordination, liaison, and navigation
- Health coaching
- Routine GP appointments
- Enhanced access to free public allied health services
- Phone/virtual advice for the GP from a public medical specialist to assist with patient management.

Practices will receive:

- Block funding to cover the administrative cost of selecting patients.
- Per patient funding for care co-ordination activities, free at point-of-care GP appointments* and GP time in accessing the medical specialist virtual service (*dependent on chosen funding model).

Option A (fully funded)		Option B (bulk billed appointments)	
Initial block payment on engagement to cover the cost of selecting patients and set up activities. Provides for up front practice manager, practice nurse and GP time plus practice administration.	\$3,550	Initial block payment on engagement to cover the cost of selecting patients and set up activities. Provides for up front practice manager, practice nurse and GP time plus practice administration.	\$3,550
Block payment (on engagement).	\$2,000	Block payment (on engagement).	\$10,875
Block payment (6 months).	\$2,000	Block payment (6 months).	\$10,875
Per patient enrolment payment to cover care coordination activities and GP time in accessing the medical specialist telephone/virtual advice service, engagement with other health practitioners and practice administration.	\$510 per patient	Per patient enrolment payment to cover care coordination activities and GP time in accessing the medical specialist telephone/virtual advice service, engagement with other health practitioners and practice administration.	\$510 per patient
Appointment payments to cover the cost of 5 long appointments.	\$1,210 per patient	Appointments are bulk billed by the practice.	Medicare benefit

Benefits to practices

- Access to supplementary care coordination for participating patients in your practice, reducing your time spent phoning, organising and following up.
- Access to care co-ordinators within the public health system to make connections and improve communication.
- Access to health coaching for your participating patients to improve their skills and confidence in managing their own health.
- Improved communication and co-ordination between the health and social services that your participating patients access.
- Access to advice from non-GP specialists to help you manage individual participating patients' condition(s) and supporting upskilling opportunities.
- Practice Payments to support the care co-ordination activities and participating patient visits while participating in the Pilot.
- Practices wishing to use DHR Link to access hospital clinical data about participating patients will be supported to do so.

How to participate

- A limited number of practices (up to 15) will be selected to participate following an Expression of Interest process.
- Practices will register for the Pilot in stages across the first 9 months of the Pilot.
- After commencing, practices will continue participating in the Pilot program for the duration of the Pilot.
- Pilot services will run for up to 18 months.

For further information please see [Frequently Asked Questions](#) or contact tenders@chnact.org.au.

If you would like to be part of the Pilot, please register your [Expression of Interest](#) or contact tenders@chnact.org.au.