

# National Healthcare Agreement: PI 32: Proportion of people with a mental illness with GP treatment plans, 2011 QS

## Identifying and definitional attributes

<b>Metadata item type:</b>	Quality Statement
<b>METEOR identifier:</b>	448200
<b>Registration status:</b>	<ul style="list-style-type: none"><li>• <a href="#">Health</a>, Superseded 04/12/2012</li></ul>

## Relational attributes

<b>Indicators linked to this Quality statement:</b>	<a href="#">National Healthcare Agreement: PI 32-Proportion of people with mental illness with GP treatment plans, 2011</a> <a href="#">Health</a> , Superseded 31/10/2011
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## Data quality

<b>Quality statement summary:</b>	<ul style="list-style-type: none"><li>• The numerator data used to calculate this indicator are from an administrative data collection designed for payment of subsidies to patients and has accurate data on the number of services provided.</li><li>• There are issues with the consistency of the numerator and denominator for this indicator, as they are drawn from differently defined populations and different data sources.</li><li>• As of 1 July 2009, a diagnosis of mental illness was required to access GP Mental Health Treatment Plans. Therefore 2008-09 and 2009-10 data are not directly comparable.</li></ul>
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**Institutional environment:** The MBS claims data are an administrative by-product of Medicare environment Australia's administration of the Medicare fee-for-service payment systems.

Medicare Australia collects the MBS data under the Medicare Australia Act 1973. These data are then regularly provided to DoHA.

The ABS is Australia's official national statistical agency. The ABS operates within a framework that includes the Australian Bureau of Statistics Act 1975 and the Census and Statistics Act 1905. For more information see the ABS Institutional Environment.

The numerator for this indicator was prepared by DoHA, the denominator was prepared by the ABS — both were quality-assessed by the Australian Institute of Health and Welfare (AIHW). The AIHW calculated the indicator based on the numerator and denominator supplied by DOHA and ABS, respectively. DoHA drafted the initial data quality statement (including providing input about the methodology used to extract the data and any data anomalies) and then further comments were added by the AIHW and ABS, in consultation with the Department. The AIHW did not have the relevant datasets required to independently verify the data tables for this indicator. For further information see the AIHW website.

**Timeliness:** MBS data

The indicator relates to all claims processed in the 2009-10 financial year.

National Survey of Mental Health and Wellbeing 2007

The SMHW was conducted from August to December 2007, and adjusted to generate 2009 prevalence estimates.

**Accessibility:** Medicare claims statistics are available at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/Medicare+Statistics-1> [https://www.medicareaustralia.gov.au/statistics/mbs\\_item.shtml](https://www.medicareaustralia.gov.au/statistics/mbs_item.shtml)

Disaggregations by SEIFA and remoteness area are not publicly available elsewhere.

National Survey of Mental Health and Wellbeing 2007 information is available at: <http://www.abs.gov.au/ausstats/abs@.nsf/PrimaryMainFeatures/4327.0?OpenDocument>  
<http://www.abs.gov.au/ausstats/abs@.nsf/PrimaryMainFeatures/4326.0?OpenDocument>

**Interpretability:** Information is available for MBS data from:

<http://www.health.gov.au/internet/mbsonline/publishing.nsf/content/medicare-benefits-schedule-mbs-1>

Information is available for the National Survey of Mental Health and Wellbeing from National Survey of Mental Health and Wellbeing: Summary of Results (cat. no. 4326.0). It contains a Summary of Findings and tables with footnoted data to aid the interpretation of the survey results. The supporting documentation released with the survey data can assist in understanding the relationships between data variables within the dataset and in comparisons with data from other sources.

**Relevance:**

There are issues with the consistency of the numerator and denominator for this indicator, as they are drawn from differently defined populations and different data sources.

MBS data

MBS data relates to mental health-specific Medicare services for which claims data are available.

Analyses by State/Territory, remoteness and SEIFA are based on postcode of residence of the client as recorded by Medicare Australia at the date of last service received in the reference period. As clients may receive services in locations other than where they live, this data does not necessarily reflect the location in which services were received. Further, all MBS services received by clients who moved residences during the reference period are allocated to the postcode of their address at the date the last service was received.

This measure does not include claims that are reimbursed through the Department of Veterans' Affairs (DVA). For 2009-10, it is estimated that DVA clients comprised less than 1 per cent of clients with a GP mental health treatment plan. The DVA, AIHW and DOHA have been working collaboratively to achieve alignment of DVA and MBS data and it is anticipated that DVA data will be included in this PI for the next reporting cycle.

National Survey of Mental Health and Wellbeing 2007

The National Survey of Mental Health and Wellbeing (SMHWB) was conducted with a representative sample of people aged 16–85 years who lived in private dwellings across Australia.

The survey provides information on diagnostic prevalence of mental disorders in the Australian population as assessed for the last 12 months using the World Health Organization's (WHO) Composite International Diagnostic Interview.

This survey only captures common/high prevalence mental disorders by three major disorder groups — Anxiety disorders (eg Social Phobia), Affective disorders (eg Depression) and Substance Use disorders (eg Alcohol Harmful Use). It does not capture low-prevalence disorders, such as psychosis.

**Accuracy:**MBS data

As with any administrative system a small degree of error may be present in the data captured.

Medicare claims data used for statistical purposes are based on enrolment postcode of the patient. This postcode may not reflect the current postcode of the patient if an address change has not been notified to Medicare Australia.

Financial-year data are based on the date on which a Medicare claim was processed by Medicare Australia, not when the service was rendered. The use of data based on when the claim was processed rather than when the service was rendered produces little difference in the total number of persons included in the numerator for the reference period.

People who received more than one GP Mental Health Treatment Plan (MBS items 2702 and 2710) are counted once only in the calculations for this indicator.

National Survey of Mental Health and Wellbeing 2007

Data measuring the size of the population with mental illness for the denominator were not available for the specified time point. Synthetic estimates of the population with a mental illness were derived by applying national level age and sex-specific rates of persons with any 12 month mental disorder from the 2007 Survey of Mental Health and Wellbeing to the 30 June 2009 ERPs in various strata (SEIFA quintiles, remoteness, etc). This methodology assumes that age and sex-specific rates of persons with a mental disorder are consistent across geography and over time.

Estimated Resident Population

ERPs were not available for the 16–85 age range specified for this indicator. Therefore, the ERPs for the 16–84 age range were used and the numerator adjusted accordingly.

Cells have been suppressed to protect confidentiality (where the presentation could identify a patient or a single service provider), where rates are likely to be highly volatile (for example, the denominator is very small), or data quality is known to be of insufficient quality.

**Coherence:**MBS data

As of 1 July 2009 a diagnosis of mental illness was required to access these plans, and the item name changed to GP Mental Health Treatment Plan. During 2008-09, a diagnosis of mental illness was not required to access a GP Mental Health Care Plan. Therefore 2008-09 and 2009-10 data are not directly comparable.

As of 1 January 2010, a new item (2702) has been introduced for patients of GPs who have not undertaken mental health skills training. Changes have been made to the existing item 2710 to allow patients of GPs who have undertaken mental health skills training to access a higher rebate. As both of these items relate to the preparation of a GP mental health treatment plan they are both included in 2009-10 data.

National Survey of Mental Health and Wellbeing 2007

The data are not comparable with data previously published using the National Survey of Mental Health and Wellbeing 2007, as the data have been adjusted to reflect the population in 2009.

**Relational attributes**

**Related metadata references:**

Supersedes [National Healthcare Agreement: P32-Proportion of people with mental illness with GP care plans, 2010 QS](#)

- [Health](#), Superseded 08/06/2011

Has been superseded by [National Healthcare Agreement: PI 32-Proportion of people with a mental illness with GP treatment plans, 2012 QS](#)

- [Health](#), Retired 14/01/2015

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