



Facts about...

GP MANAGEMENT PLAN & TCA

DID YOU KNOW?

- If you have a chronic condition you may be eligible for a GP Management plan which involves a team of professionals working with you to effectively manage your condition.
- A GP Management Plan can help you to better understand your condition and result in a plan based on your care goals and priorities.

WHAT IS A GP MANAGEMENT PLAN?

The GPMP is a written set of goals to help you manage your chronic condition. A GPMP involves your Doctor and Practice Nurse developing a written plan of management in consultation with you.

WHY SHOULD I HAVE A GP MANAGEMENT PLAN?

A GPMP is important as it will give you a better understanding of your care needs. The plan will co ordinate the care you receive more effectively, particularly when you need to access a number of services. A GPMP aims to ensure everyone involved in your care works together to help you manage your condition.

WHO IS ELIGIBLE FOR A GP MANAGEMENT PLAN?

Only people with a chronic or terminal medical condition that has been present, or is likely to be present for 6 months or longer. For example Diabetes, Asthma, Arthritis, COPD and Heart Disease.

WHAT HAPPENS IF I AM ELIGIBLE?

When your GP decides you are eligible, you and your GP will decide;

- What your health problems and needs are?
- What goals you would like included in the plan?
- What, if any, other health care services you need?

The Practice Nurse will assist in the process. You may also wish to have your regular carer or family member present when preparing a plan. When preparing a plan, GPs will consider your physical, psychological and social needs.

HOW OFTEN SHOULD THIS BE DONE?

Reviewing a GPMP is just as important as preparing it. After preparing a plan, you and your GP will decide when you should review it. A review of your plan will usually take place 6 months after the plan has started. An earlier review can be arranged if your condition changes significantly.

WHAT IS A TEAM CARE ARRANGEMENT (TCA)?

After preparing your GPMP, your Doctor may identify that your management goals are complex enough that you could benefit from the input of other Health Care Providers (HCPs). In this case, your Doctor may recommend a TCA. A TCA involves at least two other health care professionals, in addition to your Doctor. With your consent, your GP will ask all the relevant health providers to form a team and work together in developing a plan based on your care goals and priorities.

HCPs WHO MAY BE PART OF YOUR TCA.

A list of private HCPs that can be nominated by your Doctor and that can provide services for people with a TCA are:

- Aboriginal Health Worker
- Audiologist
- Chiropractor
- Chiropodist
- Diabetes Educator
- Dietician
- Podiatrist
- Exercise Physiologist
- Mental Health Worker
- Occupational Therapist
- Physiotherapist
- Speech Pathologist

ARE THERE MEDICARE REBATES?

People with a GPMP and TCA are eligible for five (5) rebates *in total* per calendar year for services provided by "private" health care professionals, as above. The health care professionals must be registered with Medicare. Medicare has to approve the claim made by your GP before you can claim your rebate. There is no coverage for out of pocket expenses for public services or costs above the Medicare rebate.

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