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## Small change could make huge difference to mental health care access

A small regulatory change to make it compulsory for private hospital day and community based mental health programs to be available under private health insurance could address a key issue from today's Productivity Commission report – access to care.

Commenting on the draft report Australian Private Hospitals Association (APHA) Acting CEO Lucy Cheetham said the Commission had identified an issue that has long been a barrier to private hospitals providing broader models of care.

The Commission called for: The Australian, State and Territory Governments should reconfigure the mental health system to give all Australians access to mental healthcare, at a level of care that most suits their treatment needs (in line with the stepped care model), and that is timely and culturally appropriate.

“The Commission is exactly right to point to the ‘missing middle’ in mental health services. People with severe mental health conditions need a range of well-coordinated supports and help prevent them from deteriorating to the point where they need acute hospital care. They also need co-ordinated, multidisciplinary care to support them after discharge from hospital,” she said.

“Thankfully, this could reasonably easily be addressed, at least in part, by making a small regulatory change and extending the default minimum benefit private health insurers must pay on overnight care to day and community out-reach programs as well.

“While the default benefit for overnight care is still very low, it is mandatory for all private health insurance policies and does mean that in a time of crisis patients can go to their hospital of choice.

“However, it does not apply to day programs or hospital out-reach programs and is a barrier to innovative programs being established in the private hospital sector. Our private mental health hospitals are in the perfect position to provide this comprehensive care model with significant expertise built in the treatment of high prevalence disorders over decades, their existing relationship with the patient's treating psychiatrist as well as their established and trusted therapeutic relationships with patients, their carers and their family,” she said.

Ms Cheetham said a program like Toowong Private Hospital's award winning Mobile Recovery Support Service is only available to Bupa members, but if a default benefit existed the hospital could offer it to all patients who need it.

“This is real patient-centred care, where the kind of services you can access are not dictated by the private health insurance fund you belong to. If your insurer has not contracted with a private hospital to offer day services, you cannot access it. No contract means no cover, even if you have top level Gold policy,” she said.

She said APHA also welcomes calls by the Productivity Commission to increase the number of training places for psychiatrists including positions in the private sector.



Australian  
Private Hospitals  
Association



Toowong Private Hospital's Mobile Recovery Support Service: <http://phnews.org.au/toowong-private-outreach-program-wins-global-prize/>

Read the Productivity Commission report: <https://www.pc.gov.au/inquiries/current/mental-health/draft>

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The Australian Private Hospitals Association (APHA) is the peak industry body representing the private hospital and day surgery sector. The private hospital sector treats 4.5 million patients a year, including treatment of a third of chemotherapy, 60 percent of all surgery, 74 percent of all elective musculoskeletal surgery and 80 percent of rehabilitation.