



**Submission from**  
The Australian Association of Social Workers

**Australian Competition & Consumer  
Commission (ACCC)**

**Report to the Australian Senate on  
Private Health Insurance**

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Enquiries regarding this submission can be directed to:

Senior Manager, Social Policy and Mental Health:

Stephen Brand

Email: [stephen.brand@aasw.asn.au](mailto:stephen.brand@aasw.asn.au)

Phone: 02 6232 3916

AASW Chief Executive Officer:

Glenys Wilkinson

Email: [ceo@aasw.asn.au](mailto:ceo@aasw.asn.au)

Phone: 02 6232 3900

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Level 4

33-35 Ainslie Place

CANBERRA CITY ACT 2601

PO Box 4956

KINGSTON ACT 2604

## Table of Contents

<b>Introduction .....</b>	<b>3</b>
<b>Background .....</b>	<b>3</b>
<b>Terms of Reference to ACCC Enquiry .....</b>	<b>4</b>

## Introduction

The Australian Association of Social Workers (AASW) provides the following submission to the Australian Competition & Consumer Commission (ACCC) inquiry into anti competitive behaviour involving private health funds which reduces the extent of health cover for consumers and increases their out of pocket medical and other expenses.

Accredited Mental Health Social Workers (AMHSWs) are not included in the list of allied health providers who are identified by the Funds as 'Ancillary Providers'. This means that consumers who are insured for 'extras' are not able to claim against their insurance for provision of services by AMHSWs. **The AASW asserts that this places AMHSWs at a competitive disadvantage and many consumers at a disadvantage both financially and in terms of receiving assistance for health related psychological and social problems for which they have been referred.** Social workers are well qualified to provide interventions in this regard and indeed do so in a number of government funded programs.

## Background

Since 2004, the Australian Government has formally recognised the expertise of mental health social workers, alongside those of colleagues in psychology, in the '*Chronic Disease Management*' program for the provision of counselling services under Medicare. Mental Health social work services were further recognised in 2006 under the '*Better Access*' initiative (providing Focused Psychological Strategies) and the provision of '*Non-directive pregnancy support counselling*' services funded by Medicare Australia. AMHSWs are recognised providers under the '*Access to Allied Psychological Services*' (ATAPS) funded by the Government via Medicare Locals and Divisions of General Practice. Many AMHSWs are also registered providers of counselling and psychological services for Employee Assistance Programs, Department of Justice (Victim Support Agency), Department of Veterans Affairs and the Transport Accident Commission VIC). Other similar programs in other states also recognise AMHSWs.

AMHSWs are educated in university schools of social work which are accredited by the AASW and trained under supervision. Social Workers possess a distinctive body of knowledge and skill in order to assess, diagnose, and ameliorate problems, disorders, and conditions that interfere with healthy bio-psychosocial functioning of individuals, couples, families, and groups of all ages and backgrounds.

AMHSWs predominantly practice in the private sector. They have played a significant role in the provision of counselling and psychological services for many years. Like registered psychologists, AMHSWs have experience in assessing and working effectively with people experiencing anxiety, depression and life crises using interventions such as cognitive behaviour therapy, interpersonal therapy and stress reduction techniques. They have a breadth of experience in assessing and working with clients to bring about positive change.

A survey conducted by the AASW showed that nearly 50% of AMHSWs in private practice have over twenty (20) years experience and approximately 80% have over ten (10) years

experience. Of this group, approximately two thirds have more than ten (10) years experience working in the mental health field directly. The majority of practicing AMHSWs have undertaken postgraduate education and training to enhance their knowledge and skills in mental health.

The AASW is tasked by Medicare Australia to accredit Social Workers to practice as AMHSWs. This is a statutory role played by the AASW and to achieve this accreditation status, social workers have to meet a series of criteria set and accepted by Medicare Australia.

To maintain their accreditation, AMHSWs must:

- Maintain their membership of the AASW so they continue to adhere to the national complaints management system and are covered by professional insurance;
- Comply with the AASW's Continuing Professional Education program with a focus on mental health specific knowledge and skills development.

This ensures high standards of practice, commitment to ongoing professional development and requirements of ethical practice which, if in breach, can be formally sanctioned.

AMHSWs are granted a Medicare Provider number allowing their clients to claim under the Better Access program. Medibank Private and Bupa's eligibility requirement for psychologists to participate in their ancillary programs is also a Medicare Provider Number.

## Terms of Reference of ACCC Inquiry

- I. Examples where allied health care providers offer the same or similar services as other providers and are not recognised by health funds,

*Please see attached a letter sent from an AMHSW private practitioner from Tasmania that is a good example of the 'same or similar service as other providers and not recognised by health funds'.*

2. In each instance referred to, whether this lack of recognition is warranted. In particular, are there any regulatory, medical or other reasons for this lack of recognition?

*The private funds only require registered psychologists to be registered with Medicare to provide services under the Better Access Program for them to be eligible to claim via a members 'extras' insurance. See these two websites:*

<http://www.medibank.com.au/Health-Covers/Information-For-Health-Care-Providers/Ancillary-Provider-Recognition.aspx>

<http://www.bupa.com.au/for-providers/ancillary/traditional-therapies>

*The Medicare descriptors for the services that the clients of registered psychologists and AMHSWs use to claim a Medicare rebate are exactly the same, word for word.*

*They are based on the provision of 'Focused Psychological Strategies' and are clearly defined by Medicare. There is, therefore, no logical reason why AMHSWs should not also be identified by the Funds as 'Ancillary Providers'.*

3. Whether this lack of recognition places allied health care providers at a competitive disadvantage. If so, how are allied health care providers disadvantaged by the practices of health funds?

*There is no doubt that AMHSWs are placed at a competitive disadvantage as a result of this anomaly. This lack of recognition by the Funds means that clients referred by a GP to a particular AMHSW practitioner and who carry private health insurance at 'extras' level cannot claim for services provided and would therefore be 'out of pocket'. GPs are significantly less likely to refer to AMHSWs due to their patients' inability to claim.*

4. Whether this lack of recognition results in a reduction in the extent of health cover or an increase in the out-of-pocket medical expenses of consumers. If so, what is the detriment or loss suffered by consumers?

*If the client is referred to the practice and the psychologists have a waiting list but the AMHSW does not, the client is clearly disadvantaged because they will have to pay the entire amount to be seen straight away or wait to see the registered psychologist when they can be seen. A client who is 'extras insured' and has been referred under the Better Access program but whose annual session limit under that program has been reached cannot then continue to see the same practitioner without paying the full fee. This is seriously therapeutically disadvantaging the client as a therapeutic relationship has been developed during the Better Access funded sessions. The therapeutic relationship is crucial to the success of the intervention.*

There are many examples of this occurrence happening in private practice. The AASW would like to ask the ACCC to allow private practitioner AMHSWs to give verbal evidence to your inquiry. This could be arranged via teleconference or Skype.

Please do not hesitate to contact our Senior Manager, Social Policy and Mental Health, Mr Stephen Brand on 02 6232 3916 or 0418 682 011 or email at [Stephen.brand@asw.asn.au](mailto:Stephen.brand@asw.asn.au) Mr Brand is based in our Canberra office.