



CCM Overview, Changes, Tips and Discussion Points

GCPHN Engagement Officers

Meet your GCPHN Engagement Officers



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Gold Coast Primary Health Network (GCPHN) provides support to General Practice, the cornerstone of primary health care, to promote best practice methods and improved quality management. We provide a team of dedicated support officers ready to help answer your questions and are happy to come out to the practice or offer support over the phone. Depending on the support you require, we may connect you with a Primary Care Engagement Team member who specialise in digital health, quality improvement and development, Primary Sense or COVID-19 response. We also engage with local hospital services, other health care providers, and the community to enhance patient outcomes and reduce avoidable hospital admissions.



Digital Health



General support
for practices
and RACHs



Training
events



MyMedicare



Resources to
support
patient care



Quality
Improvement



Primary
Sense



Finding local
health services



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Chronic Conditions Management (CCM) Overview of Changes – Effective July 1, 2025

★ Old MBS Items Cease:

- GP Management Plans (721), Team Care Arrangements (723), and Reviews (732) have ceased

★ New Items Introduced:

- Any TCA/GPMP booked in for a review after 1 July 2025 need a GP Chronic Condition Management Plan (GPCCMP) – Item 965
- GPCCMP Review – Item 967

★ Fee Structure:

- \$156.55 for both preparation and review (GPs)
- \$125.30 for prescribed medical practitioners

★ Simplified Referrals:

- Referral letter replaces EPC; no longer require 2 collaborating providers

★ Eligibility:

- Patients with a condition lasting ≥6 months or terminal
- MyMedicare registration preferred for continuity of care with the same provider


Claiming MBS Item # 965

- Patients cannot be registered in MyMedicare on the same day a 965 is claimed
- Patients booked in for review appointments need to have a 965 **BEFORE** a 967 can be claimed
- Allied health referrals do not need to specify number of visits however they can
- Co-claiming questions – AskMBS@health.gov.au











Team Roles & Responsibilities

Role	Responsibilities
GPs	Prepare/review GPCCMP, refer to allied health, lead care planning
Practice Nurses	Assist in plan preparation/review, patient education, data entry
Admin Staff	Manage MyMedicare registrations, appointment scheduling, reminders
Practice Managers	Oversee workflow integration, ensure billing accuracy, support staff training
Allied Health Providers	Receive direct referrals, provide feedback to GPs
Chronic condition management is a team effort.	

 **Tip:** Document team roles and review them monthly to ensure clarity and accountability

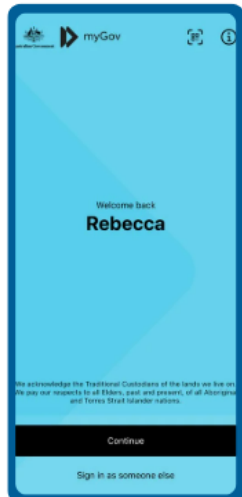


Tips

-  Update Clinical Software
-  Update practice website and patient facing resources
-  Train staff on new workflows and responsibilities
-  Educate patients about the benefits of registering in MyMedicare at your practice
-  Ensure the team has access to check MyMedicare registrations 1 day prior
-  Review MBS descriptors and update billing cheatsheet
-  Document changes in quality improvement template, schedule regular team check-ins to monitor progress
-  Use Primary Sense to identify eligible patients with 1 chronic condition and track care plan reviews


Patients Viewing MyMedicare Registration

- HPOS will only show what patients are currently registered at your practice – download list & upload to practice software
- MyHealth Record will show where a patient is currently registered
- Patients can view their MyMedicare Registration using the MyGov App or Express Plus App
- Pre-populate Patient Registration Form for regular patients + discuss with patients



Step 1

Open and sign into the [myGov app](#) on your phone

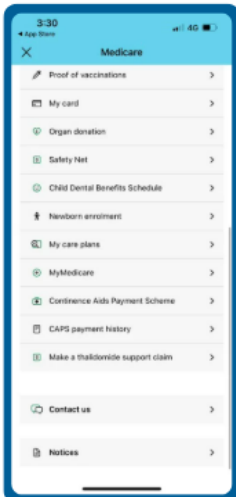


Step 2

Click [Services](#) on the bottom right-hand side of the screen.

Select [Medicare](#)

Scroll down to [MyMedicare](#)



Step 3

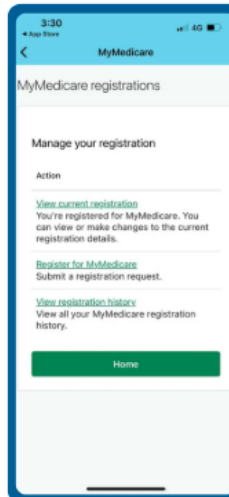
Select [MyMedicare registration history](#)

Click [View current registration](#)

Step 4

To change your MyMedicare Registration to your preferred General Practice and Practitioner

Click [Register for MyMedicare](#) and follow the prompts





Discussion Points for Practice Meetings

- ? What changes do we need to make to our current care planning process?
- ? How will each team member contribute to the new workflow?
- ? What are the benefits of MyMedicare for our patients and practice?
- ? How can we ensure patients are registered and eligible BEFORE consultations?
- ? What support or resources do we need to implement these changes smoothly?
- ? How will we monitor the impact of these changes on revenue and patient outcomes?

Bulk Billing Webinar

Learn what to expect in the Bulk Billing Practice Incentive Program (BBPIP) and expanded access to Bulk Billing Incentives commencing on 1 November 2025.

Upcoming webinars hosted by the Department of Health, Disability and Ageing

- [Wednesday 6 August, 4pm - 5pm AEST](#)
- [Friday 8 August, 1pm - 2pm AEST](#)

Digital Readiness Assessment

- If you have not done the Digital Readiness Assessment please do so.
- This enables us identify areas for support at your General Practice
- On completion, complementary corporate licence to CDM Plus

One-third of registered patients did not receive the care planning service required for the practice and provider to be eligible to receive the Q4 GPACI payment (payment is \$75+32.50).

- Practices flagged in HPOS (OMO log in) must provide at least **one** care plan service per patient by **30 September** to maintain GPACI/MyMedicare eligibility.
- Check your Accreditation tab and ADD new accreditation details; lapsed re-accreditation may result in up to **12 months of ineligibility**.
- [Use GPACI forecasting tool](#)

For deceased patients:

- They must be withdrawn from GPACI, but **DO NOT** remove the Responsible Provider or delete the GPACI record from their MyMedicare profile unless the incentive was added in error.
 - If withdrawing a deceased patient from MyMedicare, do not delete the GPACI incentive.
- **Care planning items include:**
 - Comprehensive medical assessment
 - Contribution to, or review of, multidisciplinary care plan
 - Residential medicine management review
 - Coordinating or participating in a multidisciplinary case conference