



Health Provider Partnership Forum (HPPF) MEETING SUMMARY - 22 MARCH 2024

Agenda Item	Discussion
<p>1. Open meeting; Action Items Update</p>	<p>HPPF Chair opened the meeting and provided an update on 5 action items:</p> <p>Occupational Therapy Australia requested a review of the Open Arms Provider Notes Leonie Nowland, First Assistant Secretary, Open Arms responded to Occupational Therapy Australia’s email on 8 March 2024. CLOSED</p> <p>Inform HPPF members of DVA feedback mechanisms. Link sent to DVA online feedback form, which covers Open Arms, fraud, privacy, complaints, compliments or other feedback. CLOSED</p> <p>Australian Medical Association asked what the clinical eligibility is for prescribing a Continuous Glucose Monitor. Secretariat circulated resources out of session on 14.03.2024. CLOSED</p> <p>Members requested to be included in feedback process for Compensation Medical Form Review Project. Package 3 of compensation forms review project circulated to member as inclusion for feedback along with the Business Improvement CBD email on 06/02/2024. CLOSED</p> <p>Format of HPPF meetings to be reviewed to explore a more open forum for discussion and feedback from members. The HPPF meeting format has been restructured to allow time for more interactive open communication. CLOSED</p>
<p>2. Wellbeing Policy Branch update</p>	<p>Acting Assistant Secretary and Director from DVA Health and Wellbeing Policy Branch provided the following Health Policy update:</p> <p><u>Defence and Veteran Mental Health and Wellbeing Strategy</u></p> <ul style="list-style-type: none"> • Defence and DVA are working together to develop a new joint <i>Defence and Veteran Mental Health and Wellbeing Strategy 2024-2029</i> for veterans’ lifetime mental health • The Strategy will strengthen the coordinated approach between Defence and DVA to improve veteran mental health and wellbeing



- The draft goals include:
 - Promote and assist wellbeing
 - Improve mental health and wellbeing through prevention and early intervention
 - Facilitate timely access to quality care and support
 - Use high quality evidence and data to drive positive outcomes
 - Grow a positive and connected Defence and veteran community

- Anticipated Action Plans that will sit beneath the Strategy
 - An Action Plan detailing actions within DVA's remit
 - An Action Plan detailing actions within Defence's remit
 - A joint Defence and DVA Action Plan focussing on Suicide Prevention and Postvention

- Consultation is ongoing, with the draft strategy being considered for review in May 2024, and the final strategy looking to be released midyear.

Coordinated Veterans Care Program (CVC)

- Abt Associates (Abt) have been engaged to conduct an evaluation of the CVC program
- HPPF members were invited to provide feedback on the program at the 22 November 2023 HPPF Meeting.
- An out-of-session paper on the CVC evaluation was sent in early March. Feedback due **5:00pm AEDT, 3 April 2024.**

MyMedicare Initiative

- MyMedicare opened for patients to voluntarily register with a DVA Veteran Card or Medicare card on 1 October 2023.
- Benefits include longer telehealth consultations, tripled Veterans' Access Payment, and greater continuity of care.
- To be eligible, patients must have 2 face to face DVA or Medicare funded consultations, at the same practice in the previous 24 months.
- The General Practice Aged Care Incentive will be rolled out from September 2024.



<p>3. DVA's approach to fraud control and provider non-compliance</p>	<p>Assistant Director Fraud Policy and Engagement, and Intelligence Analyst from DVA's Integrity, Security and Property Branch presented on DVA's approach to fraud control and provider non-compliance.</p> <p>Key points:</p> <ul style="list-style-type: none">• DVA has a 3-tiered approach focusing on early intervention and prevention:<ul style="list-style-type: none">○ Rules○ Education○ Enforcement• Any suspected fraudulent behaviour should be reported. A tip-off can be submitted anytime to fraud.tipoff@dva.gov.au or by accessing the 'Reporting Fraud Form' on the DVA website• Tip-offs are confidential and people have the option to remain anonymous.• Alleged non-compliance is reviewed on a case by case basis, and is prioritised by assessing the seriousness, nature and circumstance of each matter.• Case outcomes can include a combination of actions including:<ul style="list-style-type: none">○ Provider engagement and education delivery○ Debt recovery○ Referrals to other departments and agencies○ Referral and engagement with DVA teams○ Referral for a formal fraud investigation• Where an intelligence assessment identifies a response to fraud is required, the matter is referred to the Department's Fraud Investigation team for a formal investigation.
<p>4. Update on psychedelics</p>	<p>Senior Medical Officer and Specialist Mental Health Adviser provided an update on DVA's approach to psychedelics.</p> <p>Key points:</p> <ul style="list-style-type: none">• The Australian Therapeutic Goods Administration (TGA) has announced that MDMA and psilocybin may be prescribed by authorised prescribers, with effect from 1 July, 2023. The decision allows for the delivery of MDMA-assisted psychotherapy for PTSD, and psilocybin-assisted psychotherapy for Treatment Resistant Depression (TRD).• Requirements include:



- Eligibility – all veterans are eligible for mental health treatments as long as they have a diagnosis. However, psychedelics are not a first line treatment, and other evidence based treatment must have first been trialled/considered.
- The prescriber needs to be an approved prescriber through the TGA.
- The treatment needs to be delivered in a safe way, legal and in line with peak professional and HREC guidelines.
- Key issues to highlight in relation to emerging treatments include:
 - People should always trial evidence based treatments as they have an established safety profile and we know these treatments work for many people.
 - The risks and benefits of emerging treatments need to be considered on a case by case basis - some psychedelics can cause increases in blood pressure or exacerbate psychotic symptoms. Eligibility criteria used for these studies can be quite restrictive, which limits the extent to which the findings from the studies can be generalised to the real world context.
 - Studies on these treatments are being conducted by experienced practitioners in highly controlled environments, so there are concerns around how safety and quality will be maintained in the broader community.
 - There is no consensus on appropriate treatment protocols with respect to the optimum dose or duration of treatment.
 - Also need to consider how the psychedelic and psychotherapy components will interact - the mindset of the patient and the physical and social environment in which the MDMA or psilocybin is taken will need to be considered.
- There is an ongoing need for further research in this space and DVA does not currently have an approved funding pathway for this emerging therapy.

For more information visit:

<https://www.dva.gov.au/get-support/health-support/health-services/mental-health-care/emerging-and-adjunct-treatments-common-mental-health-conditions-affecting-veterans-rapid-evidence>

<https://www.dva.gov.au/documents-and-publications/research-and-studies>



5. Open Discussion	<p>The Chair opened the floor for discussion and welcomed members to raise any topics or concerns. No topics or concerns were raised. The Chair provided the below updates:</p> <p>Veteran's Medicines Advice and Therapeutics Educations Services (MATES) The Chair informed members of the cessation of the Veteran's Medicines Advice and Therapeutics Educations Services (MATES) program due to data use concerns. DVA are exploring new ways to support the veteran community.</p> <p>Aged Care Task Force As a result of the growing demand and changes in client demographics, particularly the entry of Vietnam Veterans into aged care, DVA has established an Aged Care Task Force. This will give DVA the opportunity to deliver a structured approach to aged care services. Members will continue to be updated as the task force progresses.</p> <p>Royal Commission Update The Royal Commission is currently in its last hearing block which concludes at the end of March. The Royal Commission will hand down its report in September, which is expected to include recommendations that will impact on the health system for veterans. HPPF members will be notified of these recommendations.</p> <p>Veterans Legislation Reform A recommendation of the Royal Commission's Interim Report was to simplify and harmonise the veteran's entitlements, compensation and rehabilitation system which has been accepted. A single ongoing Act will provide coverage for all future claims for compensation from a future date, irrespective of when and where the veteran served. Grandparenting all existing arrangements to ensure there is no reduction in entitlements currently being or previously received by veterans. . Submissions on the draft legislation are open until the 28/04/2024.</p>
6. Closing comments	<p>The Chair thanked members for their attendance and contributions. Members were asked to complete a survey, providing feedback on the forum.</p>
9. Next Meeting	<ul style="list-style-type: none">• The next HPPF meeting is scheduled for 26 June 2024, held virtually.