A guide to care plans

- Do you have complicated health conditions that need a lot of help?
- Have you been living with these conditions for a long time?
- Ask your doctor about creating a care plan that involves a team of allied healthcare providers

What is a care plan?

A care plan helps doctors and other healthcare providers coordinate the treatment and support you need to manage your health condition. Your care plan lists your medical conditions, the types of services you will receive to treat those conditions, as well as who will provide those services and when.

You can choose who provides your healthcare – let your doctor or nurse know who your preferred providers are when they create your care plan.

What costs are involved?

If you need help from your doctor and two or more other healthcare providers, you might be eligible for a *team care arrangement*. That means your care plan will include a referral to your chosen healthcare providers. It will also include five Medicare vouchers to pay for appointments with those providers.

For example, your care plan might include Medicare vouchers for two physiotherapy appointments, two podiatry appointments and one appointment to a dietitian. At Latrobe Community Health Service, we call this a *care plan with Medicare vouchers*.

If you receive a care plan with Medicare vouchers, you can access five allied health appointments each calendar year (from January to December) at no cost to you. Medicare pays for these appointments. If you attend more than five appointments in a calendar year, you will be asked to pay for each additional appointment.

If your referral is for Latrobe Community Health Service, speak to our friendly Client Services team to find out how much you can expect to pay if you need more than five appointments in one year.

How do I book an appointment using Medicare vouchers?

When your care plan is created, ask for a copy for yourself. This should include the page that lists how many Medicare vouchers you have, what allied health services these can be used for, and where your doctor has referred you – this should be your chosen provider if you have one.

Your chosen provider will also need a copy of your care plan and vouchers page so they can book your appointments. Please make sure your care plan is signed by your GP, dated and addressed to your chosen provider. At Latrobe Community Health Service, we will phone you to book an appointment once we receive your referral, which must include the copy of your care plan and the Medicare vouchers page. You are also welcome to phone us at any time to reschedule or cancel an appointment. Phone 1800 242 696.

What if my needs change?

You cannot use your Medicare vouchers for services that are not included in your care plan. But if your health condition or care needs change, you can ask your doctor to update your care plan. That means that if you need to see a podiatrist instead of the physiotherapist, you can. Just remember to cancel any appointments booked under your original care plan if you no longer want to attend those appointments and don't want to be charged a fee.

Your chosen provider will need a copy of your new care plan, including the updated referrals and assigned Medicare vouchers before they can book your appointment. Ask for a copy, and for your GP to send one to your chosen provider.

How long does my care plan last?

Your care plan remains valid as long as it reflects your current healthcare needs. If your needs change, you can request a new care plan with Medicare vouchers from your doctor. If you use all of your vouchers in one calendar year, and still require appointments under your care plan the following year, you can ask your doctor for a new referral with five more Medicare vouchers.

If you don't use all of your vouchers in one calendar year, your leftover vouchers will count towards the five Medicare vouchers you're eligible for in the following year.

So, if you use three vouchers one year, you can use the remaining two the next year, but your new referral will only include three vouchers for the rest of that year.

How do I keep track of my appointments?

Medicare keeps a record of how many vouchers you have used, and how many you have remaining. If you lose count of your appointments, you can call Medicare to find out how many vouchers you have left.

Phone Medicare's 24/7 help line on 132 011.



CALL US 1800 242 696



Community Health Service