

## **Two tiered system for psychologists:**

I am a clinical psychologist in a regional city. GPs here have relatively few options regarding where to send their patients who have very complex psychiatric conditions requiring psychological treatment. Our city has a high proportion of pensioners and, of course, those with significant mental health problems are very often unemployed and struggling financially. Due to the higher rebate available for clinical psychologists, I am able to bulk bill these patients.

I pride myself on offering these disadvantaged people high quality, evidenced-based assessment and treatment. If the two tiered system was abolished it would no longer be viable for me to offer bulk billing. Instead, my practice would have more room for those with less severe complaints but in a position to afford to pay a rather large gap.

The GPs who rely on my service would have to send the high-complexity patients to the local community health centre where they will be put on a long waiting list and then seen by a generic counsellor. Alternatively they might try the ATAPS route where they may get a counsellor or junior general psychologist. The patient will miss out on receiving treatment from a clinical psychologist trained and experienced in formulating treatment plans based on complex psychiatric presentations.

From a justice and equity viewpoint I urge you to keep the two tiered system in place.

## **Reduction in Session Number:**

Currently I am able to see these patients for 12 sessions per year, or under special circumstances for 18 sessions. Reducing the number of sessions to 10 will disadvantage this population further. The conditions being treated are not straight forward and they require intensive, sustained treatment.

I urge you to keep the number of sessions as they are presently.