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Re: Proposed changes to the two-tier system for psychologists

I am writing because I am very concerned about the impact of proposed changes to the current two-tier system for psychologists. I am currently a privately practicing clinical psychologist who provides bulk billing services to clients who hold some form of concession card (health care card, student card, etc). These clients make up approximately 95% of my clientele. If the proposed changes are made, I will no longer be able to bulk bill my clients as these payments would not enable me to cover my private practice expenses to which I have already committed. I would have to cease bulk billing my clients and start charging them the private fee I currently charge non-concession card holders. This would mean that the majority of my clients could no longer afford to see me and would be forced to wait on the waiting list for government mental health services. The majority of these clients, however, would not meet the criteria for government services, despite the severity of their illnesses, due to the acute nature of their illness.

What is confusing to me is that these are the very people that the 'Better Access' initiative was design to assist. This is not a situation that would be confined to me alone. The majority of private practicing psychologists who bulk bill would no longer be able to afford to do this. This creates a major gap in the provision of psychological services, a gap that was proposed to be filled by the 'Better Access' initiative in the first place. The other significant gap in mental health service provision is for those in the community presenting with the most complex and severe presentations. This is the unique specialised training of the Clinical Psychologist. I wonder what incentive there will be for future 'in training' psychologists to do their 6 to 8 years of university training as a 'clinical psychologist' if they are not adequately remunerated for doing so.