

Michael Simon
(...)

To: the Senate Community Affairs Reference Committee

I am writing to you to express my concern about the cuts to the Medicare rebate for psychologists fees.

In the proposed 2011 Budget, which I believe will come into effect in November 2011, the government has cut the amount of Medicare rebate able sessions available to clients in a calendar year, from 18 to a maximum of 10. It would appear that it is suggested that psychologists patients do not require more than 10 appointments and if they do they will be required to pay out of their own pocket.

I find this extraordinary, given the need for increased mental health expenditure as a consequence of a range of issues including drug use, alcohol abuse and increased stress caused by a change in community attitudes. By requiring patients to either stop after 10 sessions or pay themselves, people with mental health issues will be excluded from access to assistance. That will mean that young people in particular, will be unable to get counselling at times when they need it most. What will be the fate of a depressed person who has suicidal ideation and who has already had 10 sessions. I ask the rhetorical question- Are they to be deprived of assistance?

I have had experience in trying to get mentally ill and depressed people into hospital to prevent them carrying out their depressed thoughts and at best they are given two nights. They are then on their own. One young person attended as a voluntary patient, stated he was hearing voices and was discharged and went back to his flat and shot his flat mate.

Surely the community has moved to a position that it is prepared to avoid such circumstances happening again. Those suffering suicidal ideation also have been lucky to get a bed and one young man had the CAT team assess him as being a severe risk, but due to the limited number of hospital beds was not able to be given a bed.

Psychiatrists are not always the right person for patients and many patients will only go to a psychologist. Those who eschew medication in particular will not attend a psychiatrist. Also there are not enough psychiatrists to treat the number of patients with ongoing needs.

Surely it is far better to have a funded psychologist freely available after 10 sessions, to assist the patient with difficult mental issues, that simply abandoning the funding leaving psychologists having to consult without fee or to turn away patients. It cannot be suggested psychologists are routing the system as the Medicare office has complete access to the charges as they are rebated at present. A quick audit would expose any over servicing.

I am also very concerned that the Medicare rebate amount for clinical psychologists will be cut from \$119.80 to \$81.60. Psychologists have to undertake an extensive education program at their own cost. They then are able to consult patients, who often are at the lower end of financial capacity. Many patients struggle with the difference between the rebate amount and the fee charged. Many psychologists have to give their own rebates so a person in need can continue with treatment.

It is in the community's interest to maintain proper funding for psychologists. They prevent self harming, and they keep patients who will otherwise have to be hospitalised out of the expensive hospital system.

I submit that rather than cutting fees, the rebate should be extended and the community will continue to benefit from reduced numbers of suicides and less people having to attend hospitals for treatment.

Yours faithfully

Michael Simon
3 August 2011