

I would like to submit my request for a one tier psychologist funding model.

I am a board approached practicing psychologist and have not seen any evidence that supports a two tiered model, when I am able to supervise clinical psychologists who access a higher rebate while being under-experienced.

I have worked in public and private sectors, across adolescent, Aboriginal, young adult and chronic pain cohorts - and am yet to see any reliable data that reflects the need for a two tiered system.

I would also like to submit my opinion that telehealth be continued in a bid to offer more access, equitable service and reliable support for anyone in Australia regardless of their location (i.e rural and regional Australia).

I would also like to submit additional requests to be considered:

- Simplify the process of accessing a psychologist. This includes simplifying referrals, reviews, letters back to referrers, and upgrading the MBS to reduce the burden on psychologists. Psychologists should also not be held financially accountable for referral errors by medical practitioners
- Broaden MBS rebatable sessions to psychologists to incorporate vital prevention and early intervention strategies in addition to responding to mental illness as well as couples counselling and family therapy
- Re-instatement of self-referral processes integral for client's sense of autonomy, important for psychological recovery, to increase access to psychological services. In this model, the psychologist is once again, as had been in earlier times, relied upon to liaise and communicate with the client's treating medical practitioner/s as appropriate and as per the privacy and informed consent legislations