

PracSavvy

Clinical Systems Support and Training

www.pracsavvy.com.au

May 2022 — Newsbrief

Welcome to this month's PracSavvy, quite possibly the last one issued whilst under a Federal Liberal government, sigh!

The big issue over the next few weeks is practices completing their transition to [Medicare Web Services](#) versions of their software, with the deadline being, a rapidly approaching 19th June. Now I've referred to this before and I know an increasing number of my customers are part of a large corporate who will have these issues in hand and therefore don't need to worry too much, but I'm going to spell out what's required anyway.


Best Practice users: If you are running Saffron SP3, then chill, your work here is done, although you may want to get hold of the 3.1 release becoming available in a few days, as it contains a few tidy-ups and minor bug fixes. If you are running Saffron SP2, then you are mostly there, just wait for 3.1 and ensure it is installed by June 19th at the latest. If you are running an earlier version than Saffron SP2, make sure you upgrade to Saffron 3.1 by the date mentioned. Additionally, before you do this, ensure that your [practice Proda account](#) is set up and that that you have individuals attached to it who have the [assigned attributes](#) to [configure a B2B device](#) as soon as you have done the upgrade. If you don't do this, none of your Medicare functionality will be available. (Note that a B2B device is not a *physical* device)

Additionally, any practice who is not already running Saffron SP3 should locate or [apply for their AIR LOCATION provider number](#) so that they can insert it into BP and ensure their AIR upload access continues to work.

Medical Director users: On the face of it, a much simpler pathway, MD users need to ensure that they have upgraded to version 4.2 by the 19th of June. This release isn't available to the mainstream yet, although they *may* have been contacting practices individually and offering them the upgrade. MD also claims that there is no real Proda configuration to be done as they will handle this behind the scenes. The *glass half full and someone has spat in it* side of me wonders whether it will really be this easy and also why 4.2 hasn't been released yet. Maybe, I'm just paranoid.

On a topical note, I'd just like to mention that all the technology and tools used to create this newsletter have been ethically sourced (I paid for them!) On subsequent pages you will see that I've run a bit of an audit on specialist healthlink addresses (EDI's) and also found some new recipients, both Specialist and Allied Health who are happy to receive electronic correspondence. So, plenty of changes for your address books, and my little contribution to lowering Australia's outrageous [fax machine emission levels](#), and a reason for me to feel slightly less guilty about my ginormous TV and petrol powered, polar-bear pulverising Subaru!

On an ever so briefly more serious note, Primary Health Tasmania (PHT) have released their latest [Tasmanian needs assessment document](#), and it's a pretty detailed piece of work. In an unprecedented double mention for PHT, I'd like to announce that they have comfortably won the award for *Most Niche Training Opportunity*, with this item in their recent newsletter.

| | |
|---|----------------------|
|  | education and events |
| Webinar: Healthy ageing of rural Tasmanian lesbians | |
| Dr Ruby Grant, senior lecturer in Sociology at the University of Tasmania, will discuss findings from her research with rural Tasmanian lesbians over the age of 55 about | |

I mean really? Is it just me?.....It is just me isn't it?

One thing that caught my eye this week was the website for the [Australian Society of General Practice](#). Showing the usual tech awareness of GPs, they grabbed a ".com.au" domain rather than something more appropriate like ".health", but I'm probably nerding out here. Financials are not my wheelhouse really but practices may well be interested in their brand new [recommended GP Fee list](#), designed as a way to help practices who are transitioning from being bulk-billing. Their [MBS Items cheat sheet](#) may also be of interest.

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The [Practice Owners National conference](#) is in Hobart this year from the 14th to 15th May, and I'm sure there will be much of interest for in terms of presentations, networking and the usual tech stalls and demonstrations.

A friend of mine described a particular [mindfulness course](#) she did a couple of years ago as "life-changing". She is not at all prone to hyperbole, and the course is available free to Tasmanians.

Primary Health Tasmania fund evidence based, group programs teaching Mindfulness Based Cognitive Therapy to adult Tasmanians at risk of or experiencing mild to moderate levels of stress, anxiety and depression.

These courses are offered state-wide, online and in person, free of charge. The next in person southern course will run in Rosny (close to public transport and at an accessible premise) on Friday mornings from July 22 10am-12:30 for 8 consecutive weeks. This course will be facilitated by a Clinical Psychologist and as an educational group program, is not suitable for people with severe symptoms.

Applications are essential and applicants will be screened for suitability. Self referrals only via the website www.mindfulnessaus.com.au or by calling 0488 064 228.

For detailed program information, dates of upcoming courses or to arrange a visit to your practice, contact admin@mindfulnessaus.com.au

eReferral

As mentioned on the first page, I did an audit of e-referrable practitioners over the last few weeks. As well as some changes, there are some brand new practices now available.

Allied Health Practitioners - additions:

| | | | | |
|-----------|------------|----------------------------|----------|--|
| Berny | Carroll | Mental Health Social Work | linkyhsv | Headspace Hobart |
| Bec | Pettit | Mental Health Social Work | linkyhsv | " |
| Andrew | Jones | Psychology | linkyhsv | " |
| Abbey | Lack | Psychology | linkyhsv | " |
| Dan | Tucker | GP-Skin | tamaskin | Tamar Skin Clinic |
| Alison | Timms | GP-Skin | tamaskin | " |
| Karren | Tepper | Psychology | lmc32lmc | Wellington Street Clinic |
| Annabel | Butler | Pelvic Floor Physiotherapy | ewhealth | Eternal Womens Health |
| Janet | Fraser | Pelvic Floor Physiotherapy | ewhealth | " |
| Alyssa | Kerr | Pelvic Floor Physiotherapy | ewhealth | " |
| Emma | Richardson | Clinical Psychology | ewhealth | " |
| Mikalha | George | Psychology | ewhealth | " |
| Cheryl | McKay | Psychology | ewhealth | " |
| Erin | Kelly | Psychology | fertasma | Fertility Tasmania |
| Maria | Kallas | Physiotherapy | allcarep | Allcare Physiotherapy |
| Phil | Ladlow | Physiotherapy | allcarep | " |
| Jason | Rogers | Physiotherapy | allcarep | " |
| Chrissy | Tadros | Physiotherapy | allcarep | " |
| Brice | Pennicott | Physiotherapy | allcarep | " |
| Amy | Lau | Physiotherapy | allcarep | " |
| Stephanie | Bodak | Physiotherapy | allcarep | " |
| Estelle | Leray | Physiotherapy | allcarep | " |
| Sam | Cannamela | Physiotherapy | allcarep | " |
| Frances | Roberts | Physiotherapy | allcarep | " |
| Isabella | Man | Physiotherapy | allcarep | " |
| James | Cherry | Exercise Physiology | allcarep | " |

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eReferral

Allied Health Practitioners - deletions:

| | | | | | |
|-----------|-------------|---------------------------|----------|--------------------------|--------|
| Elizabeth | Schultz | Exercise Physiology | glebehfp | Glebe Hill FP | Delete |
| James | Fitzpatrick | Physiotherapy | glebehfp | " | Delete |
| Natalie | Fitzgerald | Psychology | linkyhsv | Headspace Hobart | Delete |
| Jesse | Greenwood | Psychology | linkyhsv | " | Delete |
| Thalia | Papadakis | Psychology | linkyhsv | " | Delete |
| Graham | Hall | Psychology- Clinical | linkyhsv | " | Delete |
| Katie | Ling | Psychology- Clinical | linkyhsv | " | Delete |
| Denys | Volkovets | GP-Skin | tamaskin | Tamar Skin Clinic | Delete |
| Corrina | Tay | Mental Health Social Work | lmc32lmc | Wellington Street Clinic | Delete |

Specialists - Additions:

| | | | | | |
|--------|----------|------------|------------------------------------|---|----------|
| Dr | Joseph | Mathews | Cardiology | Calvary Cardiac Centre | chctlvcs |
| Mr | Dan | Bunker | Plastic and Reconstructive Surgery | CPR Surgery (N) | cprsurg |
| Dr | Sally | Abell | Endocrinology | Eternal Womens Health | ewhealth |
| Dr | Gaurie | Palnitkar | Respiratory and Sleep Medicine | Hobart Cardio & Med Specs | hcardiol |
| Dr | Ryan | Endall | Endocrinology | " | hcardiol |
| Dr | Steve | Mokrzecki | Gynaecology and Obstetrics | Hobart Ob-Gyn | hobartog |
| Dr | Michael | Thompson** | Endocrinology | " | hobartog |
| Dr | Matt | Holmes | Paediatric Medicine | Hobart Paediatric Group | hobpaedg |
| Dr | Natalie | Morgan | Paediatric Medicine | " | hobpaedg |
| Dr | Rebecca | Tay | Medical Oncology | Icon Cancer Centre - MO | iconhobm |
| Dr | Ian | Byard*** | Medical Oncology | " | iconhobm |
| A/Prof | Michael | Jones | Radiation Oncology | Icon Cancer Centre - RO | iconhobr |
| Dr | Niles | Nelson | Haematology | St John's Sessional Suites | chctlvcs |
| Dr | Timothy | Hasted | Gynaecology and Obstetrics | " | chctlvcs |
| Dr | Sunit | Sarkar | Medical Oncology | " | chctlvcs |
| Dr | Gaushi | Sivarajah | General Surgery | Watson Orthopaedics | jmillsdr |
| Dr | Nick | Davies | Urology | Davies Urology | daviesur |
| Dr | Irena | Nikakis | Gynaecology and Obstetrics | Fertility Tasmania | fertasma |
| Dr | Sajid | Patel | Gynaecology and Obstetrics | " | fertasma |
| Dr | Ryan | Endall | Endocrinology/Andrology | " | fertasma |
| Dr | Vaishali | Bhalerao | Gynaecology and Obstetrics | " | fertasma |

** Also Hobart Cardiology and Medical Spec *hcardiol* *** Also Hobart Oncology *ianbyard*

Specialists - Deletions:

| | | | | | | |
|------|---------|-----------|-----------------------|---------------------------------|----------|--------|
| Dr | Gary | Girao | General Medicine | Calvary Medical Group | chctlvcs | Delete |
| Prof | Peter | Stanton | General Surgery | Calvary Surgical Suites | chctlvcs | Delete |
| Dr | Brent | Mitchell | Gastroenterology | Dr Brent Mitchell | bmitchel | Delete |
| Dr | Mathew | Wilkinson | Orthopaedic Surgery | Dr Matthew Wilkinson | matortho | Delete |
| Dr | Serena | Parker | Rheumatology | Hobart Cardio and Medical Specs | hcardiol | Delete |
| Mr | Frank | Kimble | Plastic Surgery | Hobart Inst of Plastic Surgery | hobplast | Delete |
| Dr | Helen | McCardle | Occupational Medicine | Hobart Occ Medicine | hobocmed | Delete |
| Dr | Mathew | Jose | Renal Medicine | Hobart Private - Suite 5 | gkirkInd | Delete |
| Dr | Malcolm | Turner | Rheumatology | Hobart Private - Suite 5 | gkirkInd | Delete |
| Dr | Michael | Dally | Radiation Oncology | Icon Cancer Centre Hobart | iconhobr | Delete |

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Covid

Certain practices face the challenge of needing to identify and deactivate patients who have attended purely for the purpose of getting a Covid vaccination. We shouldn't worry about them too much from a quality benchmark standpoint as QPIP measures and similar are most usually calculated on patients who have attended 3 or more times in the last 2 years. Never the less, we don't really want patients in our database who don't intend to use the practice going forward.

Best Practice users get a fair bit of help in this regard, with some [customised queries](#) created for copying or downloading in the online help. There is quite a treasure trove of covid related queries here, each of which can be downloaded to your desktop. Once downloaded, it's a matter of *Utilities..Search* from the main BP screen. From there, use the *Load Query* button, browse to your desktop, select the query and run it. I encourage you to check a couple of names from the list and if you are then happy, it's *File..Mark as Inactive* from the Database Search window.

These queries can't be perfect, for instance you may deactivate patients who have joined the practice but only attended for a vaccine(s) so far. But inactive patients can always be reactivated, and assistance like this provided by BP is one of the reasons why I rate it a far better product than MD these days.

For MD users, it's a lot more tricky, as they don't provide any specialised queries for importing. To generate a list that we can check, the PenCat tool is probably the best option, even if that means having to deactivate the patients one at a time.

One method might be to load your most recent data extract, go to the General Filter and make the *First Visit* parameter the first day you gave a Covid-19 vaccination. If you haven't been taking new patients since this time, this setting by itself may give you a good list. If you want to make extra sure, go to the *MBS Attendance filter* and tick the No box next to all of the non-vaccine related item numbers These filters should combine to give you everyone whose first visit was in the vaccine period and have only vaccine related billings.

General Filter window showing 'First Visit' selected and 'Date Range' set to 22/06/2021 to 01/05/2022.

MBS Attendance filter window showing 'All of selected' selected and a list of MBS Item Numbers with checkboxes for 'No'.

So hit the recalculate button, then go to the report area, *..Immunisations..Covid-19 Vaccine Administration..Select All...Export*. Please do a reasonable check on the list as PenCat can sometimes give errors, but if you are using MD this will be a pretty good start. Of course if you allocated a specific chart number to this type of patient at the beginning, then you could do the whole search within MD and deactivate in bulk. But you/I/we probably didn't think of that.

CTG

I have occasionally heard practice staff mentioning that the CTG co-payment checkboxes for Indigenous patients, are sometimes not checked, or even checked for non-indigenous patients. Different to the [Indigenous Health Incentive](#), eligibility for this incentive, since last year is enabled by [registration through HPOS/Proda](#), and is a lifetime status. As such the pharmacy is alerted to the patient's eligibility by their dispensing/billing software.

This means these checkboxes in the software are now redundant. Checking or unchecking them, much like learning French or kissing after sex, is a totally pointless exercise.

Templates

The following new or updated templates are available at my website [here](#):

- ◆ Cardiac Rhythm Diagnostics Holter monitor (Perth company)