



**CPD requirements for psychologists providing Focussed
Psychological Strategies (FPS) Medicare items
under the Better Access initiative**

Frequently Asked Questions

Annual cycle ends each year on 30 June

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Frequently Asked Questions

CPD requirements for Psychologist Medicare FPS providers

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- Who will be monitoring and auditing compliance with the CPD requirements?
- How long am I required to keep the FPS CPD records in case of audit?
- What if I don't have time to undertake CPD before the 30 June deadline each year?
- I also provide other Medicare services under other government initiatives. If I lose my FPS billing rights, will I lose my billing rights to provide these items as well?

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- Under what circumstances can psychologists receive a reduction in the number of hours of FPS CPD they must undertake?
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FPS CPD requirements

- Do I have to complete 10 hours of FPS CPD on top of the 30 hours required for the Psychology Board of Australia?
- Why are the FPS CPD requirements on a different cycle to the Psychology Board of Australia?
- Do I have to write a journal entry for FPS CPD like that required by the Psychology Board of Australia for its mandatory CPD requirements?
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Types of CPD activities allowed

- What FPS-related CPD activities are allowed?
- The requirements state that undertaking CPD activities related to psychopathology and assessment, diagnosis and commencement of a treatment plan are allowable for meeting the FPS CPD requirements. Does this apply to all disorders or just those in the DSM-IV?
- Do FPS CPD activities have to be formally approved to be allowed?
- Can the APS provide guidance about whether a particular activity would be deemed to be FPS-related?
- How can I evaluate whether an activity meets requirements for FPS CPD?

CPD for other Medicare services

- I also provide autism and pregnancy services under Medicare. Are there CPD requirements to provide these items?
- Do psychologists who provide clinical psychology Medicare items have to meet CPD requirements?

Deadlines, monitoring and auditing

1. Who will be monitoring and auditing compliance with the CPD requirements?

The new CPD requirements for FPS providers will now be monitored by Medicare Australia. The Department of Health and Ageing has advised that further information on the audit process will be provided to Medicare FPS providers prior to the commencement of audits.

2. How long am I required to keep the FPS CPD records in case of audit?

You must keep a record of the required Medicare CPD activities and provide this if requested for audit purposes. Records of CPD activities must be retained for two years. Records from the APS online CPD logging system can be used to demonstrate compliance if you are audited.

3. What if I don't have time to undertake CPD before the 30 June deadline each year?

If you do not comply with this requirement you will lose billing rights to provide FPS items under Medicare and your clients will no longer be able to access a Medicare rebate for the services you provide. Psychologists who lose their Medicare billing rights to provide FPS items can have this reinstated once they meet the FPS-related CPD requirements for the previous cycle (10 hours). They will still be required to meet the full requirements for the new cycle by the end of that cycle.

4. I also provide other Medicare services under other government initiatives. If I lose my FPS billing rights, will I lose my billing rights to provide these items as well?

If you do not comply with the FPS-related CPD Medicare requirements you will only lose your billing rights to provide FPS items. Your rights to provide other Medicare services such as those under the *Helping Children with Autism* initiative will not be affected.

Pro rata arrangements for FPS CPD requirements

5. Under what circumstances can psychologists receive a reduction in the number of hours of FPS CPD they must undertake?

Psychologists who gain their Medicare Provider number with Medicare Australia part-way through the course of a Medicare CPD cycle will have their CPD requirement adjusted on a *pro rata* basis. The amount of CPD will be calculated from the 1st of the month immediately after the month the psychologist first obtained his or her Medicare Provider number. The CPD requirement will be one-twelfth of the yearly requirement for each month.

Part-time FPS providers are required to meet the same CPD requirements as full-time FPS providers (10 hours per annual cycle).

6. As I only provide Medicare services on a part-time basis, am I eligible for a reduction in the required number of FPS CPD hours?

Part-time FPS providers are required to meet the same CPD requirements as full-time FPS providers (10 hours per annual cycle).

FPS CPD requirements

7. Do I have to complete 10 hours of FPS CPD on top of the 30 hours required for the Psychology Board of Australia?

The 10 hours of FPS CPD can count towards the 30 hours of CPD required by the Psychology Board. However, if you want it to count you must ensure you fulfil the other Psychology Board CPD requirements (such as journal entry for each CPD activity).

8. Why are the FPS CPD requirements on a different cycle to the Psychology Board of Australia?

The FPS CPD requirement has been imposed by Medicare Australia and therefore the cycle for meeting this requirement aligns with the Government's financial year (1 July to 30 June the following year). The APS is advocating strongly for this to align with the Psychology Board annual cycle for the convenience of practitioners.

9. Do I have to write a journal entry for FPS CPD like that required by the Psychology Board of Australia for its mandatory CPD requirements?

This CPD journal entry requirement is not a requirement of Medicare Australia. However, if you are counting your FPS CPD towards meeting the CPD requirements of the Psychology Board, you will need to comply with the journal requirement.

10. Does the FPS CPD requirement need to be active CPD or involve peer consultation?

No. Medicare does not stipulate any of the requirements that are involved in the Psychology Board CPD requirements. However, as advised in the previous question, if you want to count the Medicare CPD towards meeting any of the Psychology Board CPD requirements, you must ensure it meets the stipulated requirements.

Types of CPD activities allowed

11. What FPS-related CPD activities are allowed?

CPD activities undertaken must be relevant to delivering FPS services. Therefore CPD activities need to enhance the skills required to deliver the FPS treatments allowable under the Better Access initiative (as listed in the Medicare Benefits Schedule), which are:

- Psychoeducation
- Motivational interviewing
- Cognitive behaviour therapy, including:

- Behavioural interventions
- Cognitive interventions
- Relaxation strategies
- Problem-solving skills training
- Anger management
- Stress management
- Communication training
- Social skills training
- Parent management training
- Interpersonal therapy (especially for depression)
- There is also flexibility to include narrative therapy for clients of Aboriginal and Torres Strait Islander descent.

In addition to the skills to effectively deliver FPS treatments, practitioners also require skills to undertake a full assessment of the client to form a diagnosis and commence treatment planning. Relevant training in psychopathology can therefore be counted towards the CPD requirements. CPD activities can also include training in different modalities and delivery such as working with groups.

12. The requirements state that undertaking CPD activities related to psychopathology and assessment, diagnosis and commencement of a treatment plan are allowable for meeting the FPS CPD requirements. Does this apply to all disorders or just those in the DSM-IV?

CPD undertaken must be relevant to the ‘mental disorders’ listed as eligible for treatment under the Better Access initiative, as follows.

<ul style="list-style-type: none"> ● Chronic psychotic disorders ● Acute psychotic disorders ● Schizophrenia ● Bipolar disorder ● Phobic disorder ● Generalised anxiety disorder ● Adjustment disorder ● Unexplained somatic complaints ● Depression ● Sexual disorders ● Conduct disorder ● Bereavement disorder ● Post-traumatic stress disorder 	<ul style="list-style-type: none"> ● Eating disorders ● Panic disorder ● Alcohol use disorders ● Drug use disorders ● Mixed anxiety and depression ● Dissociative (conversion) disorder ● Neurasthenia ● Sleep problems ● Hyperkinetic (attention deficit) disorder ● Enuresis (non-organic) ● Obsessive compulsive disorder ● Mental disorder, not otherwise specified
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Dementia, delirium, tobacco use disorder and mental retardation are not regarded as mental disorders under the Better Access initiative.

13. Do FPS CPD activities have to be formally approved to be allowed?

CPD activities do not need to be formally approved but the relevance to delivering FPS Medicare items must be able to be justified. Acceptable CPD activities where the content is related to FPS can include formal postgraduate education, workshops, seminars, lectures, journal reading, writing papers, receipt of supervision and peer consultation, and online training programs.

14. Can the APS provide guidance about whether a particular activity would be deemed to be FPS-related?

It is up to the judgement of the individual psychologist as to whether the content of a CPD activity is relevant to providing FPS items, and this will need to be justified if the psychologist is selected for an audit. The APS is not able to make this judgement on behalf of the psychologist to assist in choosing an activity. The merits of the justification for selecting the CPD activity as FPS-related will be considered by the APS if the psychologist is audited.

15. How can I evaluate whether an activity meets requirements for FPS CPD?

The individual psychologist must determine whether the content of a CPD activity is an eligible FPS CPD activity. In some instances it may be that only part of a CPD activity meets the requirements. In this situation the psychologist can claim just the hours for the relevant section of a workshop or other CPD activity. Using the set of questions below for each CPD activity may assist you in making a judgment on whether an activity meets FPS CPD requirements.

- Does the CPD provide training on one of the FPS allowable under the Better Access initiative as listed in the Medicare Benefits Schedule (see Question 11)?
- Does the CPD relate to one of the 'mental disorders' listed as eligible for treatment under the Better Access initiative as listed in the Medicare Benefits Schedule (see Question 12)?
- Is the CPD relevant to the assessment of clients in order to determine a diagnosis and/or treatment planning under the Better Access initiative?
- Is the CPD relevant to assessment and treatment of eligible disorders under the Better Access initiative with different client types such as children and adolescents, or different modalities such as working with groups?
- Does the CPD enhance your ability to provide services under the Better Access initiative?

CPD for other Medicare services

16. I also provide autism and pregnancy services under Medicare. Are there CPD requirements to provide these items?

At this stage there are no CPD requirements associated with providing Medicare services other than those under the Better Access initiative.

17. Do psychologists who provide clinical psychology Medicare items have to meet CPD requirements?

These psychologists have been required to meet CPD requirements to maintain eligibility to provide clinical psychology Medicare items since the beginning of the Better Access initiative. The CPD requirements for psychologists providing clinical psychology Medicare items are those needed to maintain eligibility for membership of the APS College of Clinical Psychologists and Psychology Board area of practice endorsement in clinical psychology. These requirements are 16 hours of clinical psychology-related CPD activities per annual cycle.