5　The encounters

This chapter describes the content and type of encounters recorded in the 10th year of the BEACH program. Data about the encounters are also reported for each year from 1998–99 to 2007–08 in the 10 year report *General practice activity in Australia 1998–99 to 2007–08: 10 year data tables* available from <www.aihw.gov.au/publications/index.cfm/subject/19> (AIHW catalogue number GEP 23).

5.1　Content of the encounters

In 2007–08, details of 95,898 encounters (weighted data) were available from 953 GPs. The content of these encounters is summarised in Table 5.1. Reasons for encounter (RFEs) and problems managed are expressed as rates per 100 encounters. Each management action is presented in terms of both a rate per 100 encounters and a rate per 100 problems managed, with 95% confidence limits.

- On average, patients put forward 153 RFEs and GPs managed about 151 problems per 100 encounters.
- New problems accounted for nearly 40% of all problems, being managed at a rate of 58 per 100 encounters.
- Chronic problems accounted for 35% of all problems managed, managed at a rate of 52 chronic problems per 100 encounters.
- Work-related problems were managed at a rate of 2.8 per 100 encounters.
- Medications were the most common treatment choice (68 per 100 problems managed), and most of these were medications prescribed (rather than supplied or advised), at a rate of 54.5 per 100 problems managed.
- Clinical treatments (such as advice and counselling) were provided at a rate of 22.8 per 100 problems.
- There were eight referrals for care elsewhere for every 100 problems managed, most often to medical specialists (5.3 referrals per 100 problems) and less frequently to allied health professionals (2.3 referrals per 100 problems).
- GPs placed 28.5 orders for pathology tests and 6.3 imaging tests in the management of every 100 problems (Table 5.1).

Table 5.1: Summary of morbidity and management

Variable	Number	Rate per 100 encounters (*n* = 95,898)	95% LCL	95% UCL	Rate per 100 problems (*n* = 145,078)	95% LCL	95% UCL
General practitioners	953	—	—	—	—	—	—
Encounters	95,898	—	—	—	—	—	—
Reasons for encounter	146,696	153.0	151.1	154.8	—	—	—
Problems managed	145,078	151.3	149.2	153.4	—	—	—
New problems	55,300	57.7	56.3	59.1	38.1	37.1	39.1
Work-related	2,719	2.8	2.6	3.1	1.9	1.7	2.0
Chronic problems	50,132	52.2	50.4	54.1	34.6	33.6	35.5
Medications	98,439	102.7	100.3	105.0	67.9	66.5	69.2
Prescribed	79,051	82.4	80.3	84.6	54.5	53.2	55.8
GP-supplied	9,702	10.1	9.5	10.7	6.7	6.3	7.1
Advised OTC	9,686	10.1	9.3	10.9	6.7	6.2	7.2
Other treatments	49,130	51.2	48.9	53.6	33.9	32.4	35.3
Clinical*	33,121	34.5	32.5	36.5	22.8	21.6	24.1
Procedural*	16,009	16.7	15.9	17.5	11.0	10.5	11.6
Referrals	12,008	12.5	12.0	13.0	8.3	8.0	8.6
Specialist*	7,647	8.0	7.6	8.3	5.3	5.1	5.5
Allied health services*	3,305	3.4	3.2	3.7	2.3	2.1	2.4
Hospital*	381	0.4	0.3	0.5	0.3	0.2	0.3
Emergency department*	210	0.2	0.2	0.3	0.1	0.1	0.2
Other medical services*	83	0.1	0.1	0.1	0.1	0.0	0.1
Other referrals*	382	0.4	0.3	0.5	0.3	0.2	0.3
Pathology	41,375	43.2	41.3	45.0	28.5	27.4	29.6
Imaging	9,143	9.5	9.2	9.9	6.3	6.1	6.5
Other investigations	934	1.0	0.9	1.1	0.6	0.6	0.7

*   Includes multiple ICPC-2 or ICPC-2 PLUS codes (see Appendix 4, <www.aihw.gov.au/publications/index.cfm/subject/19>).

Note: LCL—lower confidence limit; UCL—upper confidence limit; OTC—over-the-counter.

5.2 Encounter type

During the first 7 years of the BEACH program, where one (or more) MBS/DVA item number(s) was claimable for the encounter the GP was instructed to record only one item number. Where multiple item numbers (for example, an A1 item such as 'standard surgery consultation' and a procedural item number) were claimable for an encounter the GP was instructed to record the lower of the item numbers (usually an A1 item number).

From the 2005–06 BEACH data year, changes to the BEACH form were made to capture practice nurse activity associated with the GP–patient consultations. One of these changes was to allow GPs to record multiple (up to three) Medicare item numbers per encounter.

In Table 5.3 and Table 5.4 for comparability with previous years only one item number per Medicare/DVA-claimable encounter has been counted. Selection of one item number was undertaken on a priority basis: consultation item numbers override incentive item numbers,

which override procedural item numbers, which override other Medicare item numbers. Table 5.5 provides a breakdown of all item numbers recorded by the GPs. Chapter 13 gives a more specific description for each of the practice nurse Medicare item numbers recorded.

Table 5.2 provides an overview of the MBS/DVA item numbers recorded in BEACH in 2007–08. Overall there were 83,418 encounters where at least one MBS/DVA item number was recorded. Only one item number was recorded at three-quarters of BEACH encounters said to be claimable from the MBS/DVA.

Table 5.2: Overview of MBS items recorded

Variable	Number	Per cent of encounters
Encounters at which one MBS item was recorded	63,131	75.7
Encounters at which two MBS items were recorded	18,912	22.7
Encounters at which three MBS items were recorded	1,376	1.6
Total encounters at which at least one item was recorded	**83,418**	**100.0**

Note: Eleven encounters at which only a bulk-billing item number was recorded are not included in this table.

Table 5.3 reports the breakdown of encounter type (by payment source), counting a single Medicare item number per encounter (where applicable).

- Indirect encounters (where the patient was not seen by the GP) accounted for 1.4% of all encounters.

- Direct encounters (patient was seen by the GP) accounted for 98.6% of all encounters.

- Direct encounters where the GP indicated that no charge was made occurred infrequently, at a rate of 0.4 per 100 encounters.

- About 97% of all direct encounters were claimable either through Medicare or the DVA.

- Encounters payable through workers compensation accounted for 2.3% of encounters.

- Encounters payable through other sources (including hospital paid encounters) accounted for 0.7% of encounters.

- There were 27 encounters where the only item recorded related to practice nurse activity, but the GP had indicated that she or he had seen the patient him/herself. There were 14 encounters at which a practice nurse item was recorded and the GP had indicated that they had not seen the patient. These were counted as indirect encounters.

Table 5.3: Type of encounter

Type of encounter	Number	Per cent of all encounters[a] (*n* = 95,858)	95% LCL	95% UCL	Per cent of direct encounters (*n* = 86,359)
General practitioners	953	—	—	—	—
Indirect encounters[b]	1,225	1.4	1.2	1.6	—
Practice nurse only items (indirect encs)	14	0.0	0.0	0.0	—
Direct encounters	86,359	98.6	98.4	98.8	100.0
No charge	386	0.4	0.4	0.5	0.4
MBS/DVA items of service (all)[b][c]	83,418	95.2	94.9	95.6	96.6
MBS/DVA items of service (GPs only)	83,376	95.2	94.8	95.5	96.5
Practice nurse only items (direct encs)	27	0.0	0.0	0.1	0.0
Workers compensation	2,000	2.3	2.1	2.5	2.3
Other paid (hospital, state, etc.)	577	0.7	05	0.8	0.7
Practice nurse only items (unspecified)	2	0.0	0.0	0.0	—
Subtotal	*87,586*	—	—	—	—
Missing[d]	8,311	—	—	—	—
Total encounters	**95,898**	—	—	—	—

(a)   Missing data removed from analysis.

(b)   Six encounters involving chronic disease management or case conference items were recorded as indirect encounters.

(c)   Includes 14 indirect encounters at which a practice nurse item only was recorded and 2 unspecified encounters at which a practice nurse item was recorded.

(d)   If the 'Patient not seen' box was ticked, and MBS items other than chronic disease management items or case conference items were recorded, those items were included as missing data.

Note: LCL—lower confidence limit; UCL—upper confidence limit; MBS—Medicare Benefits Schedule; encs—encounters; DVA—Australian Government Department of Veterans' Affairs.

Table 5.4 provides a summary of the MBS items recorded in BEACH, counting one item number only, using the same method described for Table 5.3. This provides comparable data to those reported in previous years.

- Standard surgery consultations accounted for the majority (82.1%) of MBS/DVA-claimable consultations, at a rate of 78.2 per 100 encounters.

- Almost 1 in 10 MBS/DVA encounters were long surgery consultations.

- Short and prolonged surgery consultations, home visits and residential aged care consultations were relatively rare. Very few encounters occurring in hospitals were recorded.

- Chronic disease management items, health assessments and GP mental health care items were all recorded rarely. There were six case conferences recorded during the 2007–08 BEACH year.

Those interested in GP activity at residential aged care facilities will find more information in O'Halloran et al. *General practitioner consultations at residential aged-care facilities*.[55]

Table 5.4: Summary of MBS/DVA items recorded (counting one item number per encounter only)

MBS/DVA item	Number	Rate per 100 encounters[a] (n = 95,858)	95% LCL	95% UCL	Per cent of Medicare-paid GP items (n = 83,376)
Short surgery consultations	990	1.1	0.9	1.3	1.2
Standard surgery consultations	68,455	78.2	77.0	79.3	82.1
Long surgery consultations	8,231	9.4	8.8	10.0	9.9
Prolonged surgery consultations	559	0.6	0.5	0.8	0.7
Home visits	822	0.9	0.5	1.3	1.0
Hospital	130	0.1	0.1	0.2	0.2
Residential aged care facility	1,007	1.2	0.9	1.4	1.2
Health assessments	294	0.3	0.3	0.4	0.4
Chronic disease management items	451	0.5	0.4	0.6	0.5
Case conferences	6	0.0	0.0	0.0	0.0
GP mental health care	682	0.8	0.7	0.9	0.8
Incentive payments	129	0.1	0.1	0.2	0.2
Other items	1,620	1.8	1.4	2.3	1.9
Total MBS/DVA items of service (GPs only)	**83,376**	**95.2**	**94.8**	**95.5**	**100.0**

(a)   Missing data removed from analysis.

Note: LCL—lower confidence limit; UCL—upper confidence limit; MBS—Medicare Benefits Schedule; DVA—Australian Government Department of Veterans' Affairs.

Table 5.5 provides the distribution of all Medicare item numbers recorded across Medicare item number groups. Overall, there were 105,081 MBS item numbers recorded in BEACH in 2007–08. An average of 1.1 items was recorded at encounters where at least one MBS item was recorded.

Surgery consultations (including short, standard, long and prolonged) were the most commonly recorded type of item number, at 94% of the encounters where at least one item was recorded. They accounted for 74.5% of all MBS items recorded in BEACH.

The second most commonly recorded were items for bulk-billed incentive payments, which accounted for 16.0% of all items recorded. Items for hospital, residential aged care and home visits were together recorded at one in every 50 encounters (2%). Practice nurse items were recorded at 2.0% of all encounters (Table 5.5). For a more detailed breakdown of practice nurse item numbers, and related data on practice nurse activity, refer to Chapter 13.

Table 5.5: Medicare item number distribution across item number groups

Items/encounters	All MBS items[a]		At least one item recorded[b]			
	Number	Per cent	Number	Per cent	95% LCL	95% UCL
Surgery consultations	78,235	74.5	78,235	93.8	92.9	94.6
Hospital, residential aged care and home visits	1,959	1.9	1,959	2.3	1.8	2.9
Health assessments	356	0.3	356	0.4	0.4	0.5
Chronic disease management items (including case conferences)	878	0.8	648	0.8	0.6	0.9
Incentive payments	141	0.1	141	0.2	0.1	0.2
Acupuncture	228	0.2	228	0.3	0.1	0.4
Bulk-billed incentive payment[c]	16,819	16.0	16,813	20.2	18.1	22.2
Practice nurse services	2,073	2.0	2,047	2.5	2.1	2.8
Diagnostic procedures and investigations	545	0.5	540	0.6	0.5	0.8
Therapeutic procedures	417	0.4	415	0.5	0.4	0.6
Surgical operations	1,335	1.3	1,291	1.5	1.3	1.8
Diagnostic imaging services	10	0.0	10	0.0	0.0	0.0
Pathology services	256	0.2	253	0.3	0.2	0.4
Other items	1,076	1.0	1,072	1.3	0.8	1.8
GP mental health care items	753	0.7	753	0.9	0.8	1.0
Total items/encounters	**105,081**	**100.0**	**83,376**	**—**	**—**	**—**

(a)   Up to three MBS items could be recorded at each encounter. Missing data removed from analysis.

(b)   Identifies encounters where at least one item from a MBS group was recorded.

(c)   Includes 10 encounters with only a bulk-billing service item recorded at the encounter.

Note: LCL—lower confidence limit; UCL—upper confidence limit; MBS—Medicare Benefits Schedule.

5.3 Consultation length

In a subsample of 29,956 BEACH encounters containing start and finish times for all MBS/DVA-claimable encounters, the mean length of consultation in 2007–08 was 15.1 minutes (95% CI: 14.8–15.3). The median length was 13.0 minutes (results not tabled).

For A1 MBS/DVA-claimable encounters, the mean length of consultation in 2007–08 was 14.8 minutes (95% CI: 14.6–15.1), and the median length was 13.0 minutes (results not tabled). Methods describing the substudy from which consultation length data are collected are described in Section 2.4. The determinants of consultation length have been investigated by Britt et al. in *Determinants of consultation length in Australian general practice*.[56]