Indigenous primary health care: PI07b-Proportion of regular clients with a chronic disease for whom a GP Management Plan (MBS Item 721) was claimed, 2015-2017

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Indigenous primary health care: PI07b-Proportion of regular clients with a chronic disease for whom a GP Management Plan (MBS Item 721) was claimed, 2015-2017

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Pl07b-Proportion of regular clients with a chronic disease for whom a GP Management Plan (MBS Item 721) was claimed, 2015-2017
METEOR identifier:	686438
Registration status:	<u>Health!</u> , Superseded 17/10/2018 <u>Indigenous</u> , Superseded 17/10/2018
Description:	Proportion of regular clients who are Indigenous, have a chronic disease and for whom a GP Management Plan (MBS Item 721) was claimed within the previous 24 months.
Rationale:	Effective management of chronic disease can delay the progression of disease, decrease the need for high-cost interventions, improve quality of life, and increase life expectancy. The development of a GP Management Plan is one way in which the client and primary health care provider can ensure appropriate care is coordinated.
Indicator set:	Indigenous primary health care key performance indicators (2015-2017) Health!, Superseded 17/10/2018 Indigenous, Superseded 17/10/2018

Collection and usage attributes

Computation description:	Proportion of regular clients who are Indigenous, have a chronic disease and for whom a GP Management Plan (MBS Item 721) was claimed within the previous 24 months.
	'Regular client' refers to a client of an Australian Government Department of Health- funded primary health care service (that is required to report against the Indigenous primary health care key performance indicators) who has an active medical record; that is, a client who has attended the Department of Health-funded primary health care service at least 3 times in 2 years.
	GP Management Plan (MBS Item 721): The Chronic Disease Management (CDM) Medicare items on the Medicare Benefits Schedule (MBS) enable GPs to plan and coordinate the health care of patients with chronic or terminal medical conditions (DoH 2014). GP Management Plans, for the purpose of this indicator, are defined in the MBS (Item 721).
	Presented as a percentage.
	Calculated separately for each chronic disease type:
	A) Type II diabetes
	Exclude Type I diabetes, secondary diabetes, gestational diabetes mellitus (GDM), previous GDM, impaired fasting glucose, impaired glucose tolerance.
	B) Cardiovascular disease
	C) Chronic obstructive pulmonary disease
	D) Chronic kidney disease
	At this stage, this indicator is only calculated for Type II diabetes as currently this is the only relevant chronic disease type with an agreed national definition.
Computation:	(Numerator ÷ Denominator) x 100
Numerator:	Calculation A: Number of regular clients who are Indigenous, have Type II diabetes and for whom a GP Management Plan (MBS Item 721) was claimed within the previous 24 months.

-Data Element / Data Set

Person-diabetes mellitus status, code NN

Data Source

Indigenous primary health care data collection

NMDS / DSS

Indigenous primary health care NBEDS 2017-18

Guide for use

Type II diabetes only.

- Data Element / Data Set-

Person-GP Management Plan (MBS Item 721) indicator, yes/no code N

Data Source

Indigenous primary health care data collection

NMDS / DSS

Indigenous primary health care NBEDS 2017-18

-Data Element / Data Set-

Person-Indigenous status, code N

Data Source

Indigenous primary health care data collection

NMDS / DSS

Indigenous primary health care NBEDS 2017-18

Guide for use

The implementation start date for this data element in the Indigenous primary health care NBEDS 2017-18 is 1 December 2017.

-Data Element / Data Set-

Person-regular client indicator, yes/no code N

Data Source

Indigenous primary health care data collection

NMDS / DSS

Indigenous primary health care NBEDS 2017–18

Guide for use

The implementation start date for this data element in the Indigenous primary health care NBEDS 2017-18 is 1 December 2017.

Denominator:	Calculation A: Total number of regular clients who are Indigenous and have Type II diabetes.
Denominator data elements:	Data Element / Data Set
	Person-diabetes mellitus status, code NN
	Data Source
	Indigenous primary health care data collection
	NMDS / DSS
	Indigenous primary health care NBEDS 2017–18
	Guide for use
	Type II diabetes only.

-Data Element / Data Set-

Person-Indigenous status, code N

Data Source

Indigenous primary health care data collection

NMDS / DSS

Indigenous primary health care NBEDS 2017-18

Guide for use

The implementation start date for this data element in the Indigenous primary health care NBEDS 2017-18 is 1 December 2017.

– Data Element / Data Set–

Person-regular client indicator, yes/no code N

Data Source

Indigenous primary health care data collection

NMDS / DSS

Indigenous primary health care NBEDS 2017-18

Guide for use

The implementation start date for this data element in the Indigenous primary health care NBEDS 2017-18 is 1 December 2017.

Disaggregation:	1. Sex: a) Male b) Female
	2. Age: a) 0-4 years b) 5-14 years c) 15-24 years d) 25-34 years e) 35-44 years f) 45-54 years g) 55-64 years h) 65 years and over
Disaggregation data elements:	Data Element / Data Set Person—age, total years N[NN]
	Data Source
	Indigenous primary health care data collection
	NMDS / DSS
	Indigenous primary health care NBEDS 2017–18

- Data Element / Data Set	
Data Liement / Data Set	
Person—sex, code X	
Data Source	
Indigenous primary health care data collection	
NMDS / DSS	
Indigenous primary health care NBEDS 2017–18	
Guide for use	
The implementation start date for this data element in the Indigenous primary health care NBEDS 2017-18 is 1 December 2017.	

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Person
Format:	N[N].N

Indicator conceptual framework

Framework and	<u>Continuous</u>
dimensions:	

Data source attributes

-Data Source-

Indigenous primary health care data collection

Frequency

6 monthly

Data custodian

Australian Institute of Health and Welfare.

Accountability attributes

Further data development /	Further work is required to reach agreement on national definitions for other chronic
collection required:	diseases including cardiovascular disease, chronic obstructive pulmonary disease
	and chronic kidney disease.

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
	Australian Government Department of Health
Origin:	DoH (Australian Government Department of Health) 2014. Chronic Disease Management (formerly Enhanced Primary Care or EPC) — GP services. Canberra: DoH. Viewed 28 October 2014,
	http://www.health.gov.au/internet/main/publishing.nsf/ Content/mbsprimarycare-chronicdiseasemanagement.

Relational attributes

Related metadata references:	Supersedes Indigenous primary health care: PI07b-Proportion of regular clients with a chronic disease for whom a GP Management Plan (MBS Item 721) was claimed, 2015-2017 Health!, Superseded 25/01/2018 Indigenous, Superseded 27/02/2018
	Has been superseded by Indigenous primary health care: PI07b-Proportion of regular clients with a chronic disease for whom a GP Management Plan (MBS Item 721) was claimed, 2018-2019 Health!, Superseded 16/01/2020 Indigenous, Superseded 14/07/2021
	See also Indigenous primary health care: PI07a-Number of regular clients with a chronic disease for whom a GP Management Plan (MBS Item 721) was claimed, 2015-2017 Health!, Superseded 17/10/2018 Indigenous, Superseded 17/10/2018