

7 May 2019

Mr James Downie CEO  
Independent Hospital Pricing Authority  
PO Box 483  
DARLINGHURST NSW 1300

By email to: [enquiries.ihpa@ihpa.gov.au](mailto:enquiries.ihpa@ihpa.gov.au)

Dear Mr Downie

**Re: The draft Independent Hospital Pricing Authority (IHPA) Work Program 2019-20.**

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to provide feedback into the public consultation on the draft *IHPA Work Program 2019-20* (the IHPA Work Program).

The RANZCP is the principal organisation representing the medical speciality of psychiatry in Australia and New Zealand and is responsible for training, educating and representing psychiatrists on policy issues. The RANZCP represents more than 6500 members, including more than 4900 qualified psychiatrists, and is guided on policy matters by a range of expert committees.

The RANZCP supports the outline of priorities and deliverables provided in the draft IHPA Work Program for 2019-20. The focus on mental health care services, in particular through work on the Australian Mental Health Care Classification Version 2, is strongly supported by the RANZCP. We also support the inclusion of mental health patients in the specifications for the hospital acquired complications (HAC) list.

The RANZCP has welcomed the opportunity to provide input into various areas of work currently undertaken by the IHPA, especially the Clinical Refinement project, and we are eager to see the outcomes of this project. We welcome opportunities to continue collaborating with the IHPA on relevant activities in the IHPA Work Program.

However, there are issues not covered in the IHPA Work Program, which the RANZCP has ongoing concerns around. This includes the ambiguity and overlap between psychogeriatric care types and mental health care types, particularly sub-acute and non-acute care. The interface between mental health services for the elderly and acute adult and geriatric medical service pathways can lead to the disadvantage of mental health services for the elderly. When applying costs to these areas, these costs can only be identified using models which are better applied to mental health rather than general health which impacts on sustainability and funding for mental health services.

As proposed in your letter, dated 1 February 2019, regarding the RANZCP's response to the Pricing Framework for Australian Public Hospital Services 2019-20, we welcome the opportunity to set up meetings with IHPA and relevant members around pricing approaches for consultation-liaison psychiatry and mother and baby units. We have advised our relevant committees, being the Faculty of Consultation-Liaison Psychiatry and Section of Perinatal and Infant Psychiatry, that the IHPA will be in touch to discuss these further.

To discuss any of the items raised in this letter and to schedule a meeting, please contact Rosie Forster, Executive Manager of Practice, Policy and Partnerships via [rosie.forster@ranzcp.org](mailto:rosie.forster@ranzcp.org) or by phone on (03) 9601 4943.

Yours sincerely



Dr Kym Jenkins  
**President**

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