

What is the Practice Incentives Program (PIP)?

The Practice Incentives Program (PIP) offers a suite of incentive payments that encourage general practices to provide quality care, enhance capacity and improve patient health outcomes.

The PIP is administered by Services Australia on behalf of the Department of Health. The incentives paid through the program are in addition to other income earned by practices and GPs, such as patient payments and Medicare rebates.

How does the PIP work?

Under the PIP, there are three payment streams:

- PIP Quality Stream.
- PIP Capacity Stream.
- PIP Rural Support Stream.

Under the three payment streams, there are seven individual incentives:

- [Indigenous Health Incentive](#)
- [Quality Improvement \(PIP QI\) Incentive](#)
- [After Hours Incentive](#)
- [eHealth Incentive](#)
- [Teaching Payment](#)
- [Procedural GP Payment](#)
- [Rural Loading Incentive](#)

Each incentive offers three types of payments:

- Practice payments – to practices contributing to quality care.
- Service incentive payments – to GPs for providing specific services to patients.
- Rural loading payments – to practices located outside a major metropolitan centre.

Eligibility criteria

To be eligible for the PIP, your practice must:

- be a general practice as defined by the RACGP
- be an open practice as defined by the PIP
- be accredited or registered for accreditation against the RACGP Standards for general practices
- maintain at least \$10 million in public liability insurance cover
- have professional indemnity insurance cover for all GPs and nurse practitioners.

How to register and apply

If your practice is eligible for the PIP, you can register through Health Professional Online Services (HPOS), using your PRODA account. You will need to upload the following documents:

- A signed [Practice Incentives practice ownership details and declaration form \(IP008\)](#) with a copy of your accreditation certificate.
- A signed [Practice Incentives individual GP or nurse practitioner details form \(IP003\)](#).

Once your practice is registered for the PIP, you can apply for the individual incentives online.

The PIP payments

The PIP payments are paid each quarter (February, May, August and November) into your nominated bank account when all the requirements for the entire quarter have been met.

The payments are intended to support practices with purchasing equipment, upgrading facilities or offering additional payments to doctors. However, practices can spend the payments any way they choose and the usual taxation rules apply.

Calculation of payments

The PIP practice payments are calculated based on a measure of practice size known as the Standardised Whole Patient Equivalent (SWPE), which represents the fraction of care provided to each patient, weighted for age and gender.

The SWPE reference period is a rolling 12 month period commencing 16 months prior to the payment quarter. MBS services provided by GPs and nurse practitioners are included in the SWPE.

Further information

For more information about the Practice Incentives Program (PIP), visit the [Services Australia website](#), email pip@servicesaustralia.gov.au or call the PIP enquiry line on 1800 222 032.

To find out more about the seven practice incentives and payments, refer to the table on the next page.

The seven practice incentives and available payments

Stream	Incentive	Activity	Payment amount
PIP Quality Stream	<u>Indigenous Health Incentive</u>	Sign-on Payment: once only payment to practices that agree to undertake specified activities to improve the provision of care to their Aboriginal and/or Torres Strait Islander patients with a chronic disease.	\$1,000 per practice
		Patient Registration Payment: payment to practices for each Aboriginal and/or Torres Strait Islander patient aged 15 years and over who is registered with the practice for chronic disease management.	\$100 per eligible patient per calendar year
		Outcomes Payment Tier 1: payment to practices for each registered patient for whom a target level of care is provided by the practice in a calendar year.	\$100 per eligible patient per calendar year
		Outcomes Payment Tier 2: payment to practices for providing the majority of care for a registered patient in a calendar year.	\$200 per eligible patient per calendar year
	<u>Quality Improvement (PIP QI) Incentive</u>	Payment to practices to undertake continuous quality improvement through the collection and review of practice data, and to share de-identified data with their PHN.	\$5 per SWPE capped at \$12,500 per quarter
PIP Capacity Stream	<u>After Hours Incentive</u>	Level 1: Participation. Practices must meet the requirements of Level 1 to qualify for payment at this level.	\$1 per SWPE
		Level 2: Sociable after-hours cooperative coverage. Practices must meet the requirements of Level 2 to qualify for payment at this level.	\$4 per SWPE
		Level 3: Sociable after-hours practice coverage. Practices must meet the requirements of Level 3 to qualify for payment at this level.	\$5.50 per SWPE
		Level 4: Complete after-hours cooperative coverage. Practices must meet the requirements of Level 4 to qualify for payment at this level.	\$5.50 per SWPE
		Level 5: Complete after-hours practice coverage. Practices must meet the requirements of Level 5 to qualify for payment at this level.	\$11 per SWPE
	<u>eHealth Incentive</u>	Practices must meet each of the eHealth requirements to qualify for payments through this incentive.	\$6.50 per SWPE capped at \$12,500 per practice per quarter
	<u>Teaching Payment</u>	Payment for teaching medical students to a maximum of 2 sessions per GP per day.	\$200 per session
PIP Rural Support Stream	<u>Procedural GP Payment Rural Loading Incentive</u>	Tier 1: Payment for a GP in a rural or remote practice who provides at least 1 procedural service, which meets the definition of a procedural service, in the 6-month reference period.	\$1,000 per procedural GP per 6-month reference period
		Tier 2: Payment for a GP in a rural or remote practice who meets the Tier 1 requirement and provides after-hours procedural services on a regular or rostered basis (15 hrs per week on average) throughout ref period.	\$2,000 per procedural GP per 6-month reference period
		Tier 3: Payment for a GP in a rural or remote practice who meets the Tier 2 requirements and provides 25 or more eligible surgical, anaesthetic or obstetric services in the 6-month reference period.	\$5,000 per procedural GP per 6-month reference period
		Tier 4: Payment for a GP in a rural or remote practice who meets the Tier 2 requirements and delivers 10 or more babies in the 6-month reference period or meets the obstetric needs of the community.	\$8,500 per procedural GP per 6-month reference period
		Payment for a practice that has its main location outside a metropolitan area, based on the Rural, Remote and Metropolitan Area (RRMA) Classification. Once all incentive payments are added, the rural loading amount is applied.	RRMA 3 - 15% loading RRMA 4 - 20% loading RRMA 5 - 40% loading RRMA 6 - 25% loading RRMA 7 - 50% loading