Australian Government

Department of Health

ACRRM Fellowship Program
Placement Guidelines

Commencing from 1 January 2019
**DEFINED TERMS**

The following terms are defined and have the meaning given below whenever they are used in these Guidelines.

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
</table>
| Approved Placement          | A placement in a course or program that is listed in Division 6 of the *Health Insurance Regulations 2018*. An Approved Placement in a course or program:  
  - must be linked to a course or program that is named in the Regulations;  
  - can only be granted by an organisation that is named in Division 6 of the Regulations as being responsible for the relevant course or program (a ‘specified body’); and  
  - will always specify the relevant practice location(s) and will be time-limited. Access to the Medicare Benefits Schedule is limited to the listed practice location(s) and the duration of the placement. |
| Exceptional Circumstances  | Exceptional Circumstances are defined as circumstances which were unforeseen and outside a participant’s control that warrant the Department of Health or the College’s consideration of applying special conditions to a training placement to allow an otherwise eligible doctor to participate in the Program.  
  Circumstances will not be considered as unforeseen if it can be determined that they were known or reasonably should have been known by the participant upon acceptance of their place on the ACRRM Fellowship Program.  
  Examples of exceptional circumstances may include, but are not limited to:  
  - Ill-health (other than minor illnesses);  
  - Deterioration of an existing medical condition that can no longer be managed in the current location;  
  - Bereavement;  
  - Acute personal/emotional circumstances;  
  - Hospitalisation;  
  - Illness of an Immediate Family Member;  
  - A major change to a participant’s personal circumstances; or  
  - An involuntary change in a spouse’s employment.  
  All applications and requests pertaining to exceptional circumstances will be considered on a case by case basis. |

**FACRRM**  
Fellowship of the Australian College of Rural and Remote Medicine.

**FRACGP**  
Fellowship of the Royal Australian College of General Practitioners.
<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreign graduate of an accredited medical school</td>
<td>A doctor who was not a permanent resident or citizen of Australia on the day that they enrolled in their primary medical degree. Foreign graduate of an accredited medical school status applies for a minimum period of ten years commencing on the day that the doctor is first registered to practise medicine in Australia. While this status applies, the doctor is subject to restrictions on their ability to perform professional services that attract Medicare Benefits Schedule (MBS) items.</td>
</tr>
<tr>
<td>Full-time general practice</td>
<td>A medical practice that operates during business hours for the purpose of offering patient-centric continuity of care. This definition is considered to exclude after-hours clinics and medical deputising services.</td>
</tr>
<tr>
<td>Guidelines</td>
<td>The Department of Health ACRRM Fellowship Program Placement Guidelines.</td>
</tr>
<tr>
<td>Health</td>
<td>The Australian Government Department of Health.</td>
</tr>
<tr>
<td>HIA</td>
<td><em>Health Insurance Act 1973.</em></td>
</tr>
<tr>
<td>Independent Pathway (IP)</td>
<td>A delivery stream of the ACRRM Fellowship Program, which is a recognised program for section 3GA of the <em>Health Insurance Act 1973</em>. The use of ‘IP’ or ‘Program (IP stream)’ throughout these guidelines means the ACRRM Fellowship Program (IP stream).</td>
</tr>
<tr>
<td>Medicare provider number</td>
<td>A Medicare provider number uniquely identifies a medical practitioner and the practice location from which they perform professional services. A Provider Number is issued by the Department of Human Services (DHS). Provider numbers are specific to a practice location and a medical practitioner will require a new provider number for each employment engagement. Provider numbers are not transferrable between practices or medical practitioners.</td>
</tr>
<tr>
<td>Modified Monash Model (MM)</td>
<td>The Modified Monash Model is a classification system that categorises metropolitan, regional, rural and remote areas according to both geographical remoteness and town size. For more information on the MM system see: <a href="http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/Classification-changes">www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/Classification-changes</a>.</td>
</tr>
<tr>
<td>Overseas trained doctors (OTDs)</td>
<td>A doctor who did not obtain their primary medical degree from an Australian Medical Council accredited medical school in Australia or New Zealand. Overseas trained doctor status applies for a minimum period of ten years commencing on the day that the doctor is first registered to practise medicine in Australia. While this status applies, the doctor is subject to restrictions on their ability to perform professional services that attract MBS items.</td>
</tr>
<tr>
<td>Practice location</td>
<td>For the provision of a professional medical service that attracts a MBS item, means the place of practice at which the medical practitioner has been granted a Medicare provider number by the Chief Executive Medicare in the DHS.</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanent Resident or Australian Citizen</td>
<td>As defined in the <em>Migration Act 1958</em>.</td>
</tr>
<tr>
<td>Register</td>
<td>Register of Approved Placements maintained by DHS under s 3GA of the HIA.</td>
</tr>
<tr>
<td>Recognised Fellow</td>
<td>A medical practitioner who has obtained a FACRRM or a FRACGP.</td>
</tr>
<tr>
<td>Specified body</td>
<td>A specified body is an organisation that is responsible for granting Approved Placements in a program or course that is listed in Division 6 of the <em>Health Insurance Regulations 2018</em>. A specified body:</td>
</tr>
<tr>
<td></td>
<td>• must be identified in Division 6 of the Regulations as being responsible for the relevant program or course;</td>
</tr>
<tr>
<td></td>
<td>• can be an Australian Government Department, a medical college or a private entity;</td>
</tr>
<tr>
<td></td>
<td>• can be responsible for several programs and courses; and</td>
</tr>
<tr>
<td></td>
<td>• can share responsibility for the program or course with other specified bodies.</td>
</tr>
<tr>
<td>Vocationally recognised GP (VR GP)</td>
<td>A registered medical practitioner who holds Fellowship of the Royal Australian College of General Practitioners or the Australian College of Rural and Remote Medicine.</td>
</tr>
</tbody>
</table>
PRELIMINARY MATTERS

These Guidelines:

- May be cited as the ACRRM Fellowship Program Placement Guidelines.
- Commence on 1 January 2019.
- Confirm the relationship between the ACRRM Fellowship Program and the enabling legislation for Medicare Benefits Schedule (MBS) access – in particular the *Health Insurance Act 1973 (the HIA)* and the *Health Insurance Regulations 2018* (the Regulations).
- Provide operational procedures for granting Approved Placements to doctors in the ACRRM Fellowship Program (the ‘Program’).

ABOUT THE ACRRM FELLOWSHIP PROGRAM

Program Description

The ACRRM, through this Program, assists a medical practitioner who is participating in one of its formal training/experience programs to apply for an Approved Placement under section 3GA of the *Health Insurance Act 1973*.

The Program is delivered via three distinct streams:

- the Australian General Practice Training (AGPT) program\(^1\);
- the Remote Vocational Training Scheme (RVTS)\(^2\); and
- the Independent Pathway (IP).

Further information on the related programs is at Appendix A.

Section 3GA provides that certain medical practitioners in Approved Placements may apply to the DHS for registration on the Register of Approved Placements.

Entry of the name of the practitioner in the Register of Approved Placements together with the period in respect of which and the location in respect of which the practitioner is registered allows the medical practitioner to practising as a GP to access Medicare benefits, subject to those conditions. By being entered in the Register of Approved Placements, the practitioner can:

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\(^1\) Responsibility for the AGPT program will transition from the Department of Health to the ACRRM (and the Royal Australian College of General Practitioners) during 2019-2021. AGPT program registrars can continue to access an approved placement under the current arrangements, facilitated by Regional Training Organisations (RTOs), until they are notified otherwise.

\(^2\) Responsibility for the RVTS will transition from the Department of Health to the ACRRM (and the Royal Australian College of General Practitioners) during 2019-2021. RVTS registrars can continue to access an approved placement under the current arrangements, facilitated by RVTS Ltd, until they are notified otherwise.
• apply for a Medicare Provider number with the DHS for the practice location and period of the Approved Placement;
• request certain MBS services on behalf of their patients and to refer their patients to other health professionals within the scope and conditions applicable to specific MBS items;
• perform specified professional services that attract MBS benefits.

A doctor must be registered on the Register of Approved Placements by DHS before the doctor can start seeing patients under the MBS. This requirement is supported by section 19CC of the HIA, which states that doctors are committing an offence if they provide professional services to patients without informing the patient that a MBS item is not payable as a consequence of sections 19AA or 19AB of the HIA.

The Program is administered by the ACRRM in-line with the relevant Fellowship of the Australian College of Rural and Remote Medicine (FACRRM) curriculum, standards and policies. The ACRRM has the discretion to identify and select eligible applicants for each stream.

For more information on the abovementioned legislation, please see:

Fact Sheet – Section 19AA of the Health Insurance Act 1973:  

Fact Sheet – Section 19AB of the Health Insurance Act 1973:  

Fact Sheet – Class exemptions under section 19AB of the Health Insurance Act 1973:  

Participant Eligibility

To qualify for an Approved Placement under this Program, participants must be registered to practise medicine with the Medical Board of Australia. When considering the current registration categories, eligible applicants for the general practice programs include:

• those with general medical registration (doctors with general registration will be given priority for places);
• overseas trained doctors who completed their primary medical training with a competent authority\(^3\) and who have been registered for a position in a general practice; and
• overseas trained doctors who hold limited medical registration under the Area of Need rules for general practice.

\(^3\) Competent Authority degrees come from: the General Medical Council (UK), the Medical Council of Canada, Education Medical Council for Foreign Medical Graduates of the United States, Medical Council of New Zealand and the Medical Council of Ireland.
Doctors who have conditions attached to their registration may be considered for an Approved Placement under this Program. However, placements cannot be granted to doctors seeking to work outside of Board-set supervision requirements. An Approved Placement also cannot be granted for a practice that is not covered by the applicant’s medical registration.

Participants must also be enrolled in one of the Program streams administered by the ACRRM.

Note that additional eligibility criteria may apply to the IP, the AGPT program, or the RVTS which are outlined in the documentation for those programs. This includes formal selection mechanisms such as the IP response to written selection and multiple mini interviews (MMIs).

Information about the medical registration categories and related practising rights is provided on the Board’s website: www.medicalboard.gov.au/registration/types.aspx.


For more information on the RVTS see: www.rvts.org.au/applicants/eligibility.


Application

AGPT Program and the RVTS

The Approved Placement application process for the AGPT program and the RVTS registrars is currently facilitated by the Regional Training Organisations and the RVTS Ltd respectively, and these arrangements remain in place until registrars are notified otherwise.

IP provider number application process

1. Upon passing the IP response to written selection and multiple mini interviews (MMIs), or for participants seeking placement renewal up to ten weeks before the commencement of an IP placement or renewal of an existing placement, the participant obtains the Approved Placement form directly from ACRRM.

2. The participant submits the completed form to the ACRRM inbox (training@acrrm.org.au). As part of this application, participants who are already participating in another full-time general practice program or course that is listed in the Regulations (for example the More Doctors for Rural Australia Program) will provide the College with evidence of:
   - Their current Medicare provider number; and
   - An existing Approved Placement in the relevant general practice program or course.

3. The ACRRM will add its approval as the Specified Body to the form, making it an Approved Placement, and will submit it to the DHS.
4. If the participant does not have an initial Medicare provider number, they must complete an Application for a Medicare Provider Number form (www.humanservices.gov.au/organisations/health-professionals/forms/hw019) and submit this directly to the DHS. The participant must also provide the other supporting documents specified on the provider number application form. Where the placement is a renewal of an existing placement or the placement is for a new location (that is, the participant has been already previously registered with DHS), the Application for a Medicare Provider Number form is not required.

5. Upon receiving a complete application, DHS will assess the doctor against the MBS eligibility requirements of sections 19AA and 19AB of the HIA. DHS’s process includes:
   a. arranging for a section 19AB exemption to be granted (for the subset of approved participants who are subject to 19AB);
   b. registering the new Approved Placement; and
   c. updating the doctor’s Medicare provider record to reflect the terms of the Approved Placement.

A participant will have an Approved Placement once it is signed by the ACRRM. However, the participant is not eligible to commence working under the MBS until their placement has been registered by DHS and (if required) they have been granted a section 19AB exemption.

DHS is responsible for notifying Program participants of their eligibility to claim MBS items once their obligations under sections 19AA and 19AB are satisfied. Access will commence upon the start date of the placement.

More information about this application process is provided at Appendix B.

**Placement Location Requirements**

Entry of the name of a medical practitioner in the Register of Approved Placements requires the placement location in respect of which the practitioner is registered to be identified in the application for registration.

Location requirements for the AGPT program and RVTS are governed by the policies applicable to those programs, and are currently administered by the Regional Training Organisations and the RVTS Ltd respectively. These arrangements remain in place.

For participants on the Program (IP stream) all clinical training time must take place in an ACRRM accredited teaching post as per the requirements of the registrar’s individualised training plan.

Note that while participants who are subject to section 19AB can be considered for the Program, they will continue to be subject to section 19AB (until the restrictions expire). These doctors must hold an exemption, as part of a program-related class exemption or an individual exemption from Health, in addition to their Approved Placement. The section 19AB exemptions have a workforce distribution requirement that compels these doctors to seek Approved Placements and gain their clinical experience in areas with low access to GP services attracting a MBS rebate.
Placement Supervision requirements
Clinical supervision is an essential component of training for a general practice fellowship. The requirements for supervision depend on doctors’ prior skills and experience. All supervision requirements stipulated by the Medical Board of Australia must be adhered to.

The level of supervision for doctors without Medical Board of Australia supervision requirements will be outlined in program guidelines for the different Fellowship streams.

Placements that meet both the ACRRM and RACGP Fellowship Program requirements
Doctors who are undertaking both the ACRRM and the RACGP Fellowship qualification concurrently must use a single placement to satisfy the curriculum requirements and standards of both Colleges. In this instance a single Medicare Provider Number application for the Approved Placement needs to be submitted through one College (not both).

It is the responsibility of the participant, Regional Training Organisation and/or RVTS Ltd to ensure that the Approved Placement meets the requirements of both Colleges to ensure it is recognised.

Duration of Approved placements
To satisfy the MBS eligibility rules under s19AA, all placements must be made with a defined start and end date in writing.

Of particular importance, the start date and end date inform the processing of MBS item claims by DHS.

The s19AA MBS rules compel doctors to attain a postgraduate medical qualification for long-term MBS access. This means doctors cannot indefinitely participate in the courses and programs that are listed in the Regulations. Approved Placements in each course or program will therefore be issued with a defined start and end date.

The Regulations do not identify a minimum or maximum duration that must be applied to Approved Placements in the recognised courses and programs. For the ACRRM Fellowship Program, the ACRRM:

- is responsible for determining the duration of each Approved Placement it grants under each of the ACRRM Fellowship Program streams; and
- will make its determination of an appropriate Approved Placement duration according to the Guidelines for the relevant stream and the specific needs of the participant and training post.

Renewal of Placements
Approved Placements in each of the ACRRM Fellowship Program streams will have a specified duration. The ACRRM has the discretion to consider requests to extend a previously issued Approved Placement. When considering a placement renewal request under this power, the ACRRM has the right to:
• assess the merits of the renewal request according to the FACRRM standards and
  Guidelines for the relevant Program stream;
• revise the start and end dates of the Approved Placement (for future-dated
  placements), noting that the broad restrictions on issuing retrospective placements
  under the rules of section 19CC of the HIA continue to apply; and
• apply additional conditions that are deemed necessary for the doctor to achieve
  FACRRM. This includes the right to have the participant doctor relocate to an
  alternate training practice location.

Once the ACRRM or an organisation operating under the delegation of the College have
agreed to renew a participant’s Approved Placement, the process for renewing is broadly
the same as the steps outlined in these Guidelines (under Application).

A provider number application must be made so that DHS can:
• arrange for a new section 19AB exemption to be granted (for those doctors who are
  subject to 19AB);
• register the new Approved Placement; and
• update the doctor’s MBS provider record to reflect the terms of the revised
  Approved Placement.

DHS’s assessment process can take up to 6 weeks in peak processing periods. Program
participants are advised to begin the process of seeking an extension of their Approved
Placement from the ACRRM at least ten weeks before the projected end date of their
training/experience placement is renewed.

**Backdating training placements**
Approved Placements granted under section 3GA may not commence earlier than the
applicant’s date of entry on the Register of Approved Placements. As a consequence there
are no circumstances under which the Specified Body will be able to grant a “backdated”
placement approval.

Section 19CC of the Act states that medical practitioners are committing an offence if they
provide professional services to patients without informing the patient that a Medicare
benefit is not payable as a consequence of sections 19AA or 19AB of the HIA.

If a medical practitioner also requires an exemption under section 19AB of the Act, it should
be understood that, even if a section 3GA placement approval has already been granted,
access to the Medicare Benefits Scheme (MBS) will not commence until the start date of the
exemption under section 19AB of the Act and vice versa.

Section 19AB approvals cannot be backdated to the 3GA placement approval date.

**Termination of placement**
ACRRM will send notification to DHS to remove participants who are no longer in training
from the Register of Approved Placements. When a participant withdraws from the program
it is the responsibility of the medical practitioner to advise the ACRRM, or the training
organisation working under the auspices of the ACRRM Program streams (e.g. Regional Training Organisations and the RVTS Ltd) within 10 (ten) working days of the termination.

ACRRM and the Program streams have policies which govern when a participant may be withdrawn from training. These policies include the right to Appeal the decision. Removal from the Register of Approved Placements will not be initiated until the Appeals period has elapsed.

On achievement of Fellowship the ACRRM will distribute required documentation enabling the Fellow to apply for an updated MPN.

Request of Review
Participants may request that ACRRM review a decision. The College will respond to such requests by reviewing:

- The evidence that was provided in support of the initial request for an Approved Placement or extension of such a placement;
- The factors considered as part of the original response provided to the applicant doctor; and
- Any additional evidence that has been provided by the doctor as part of their review request and that is deemed relevant to the intended application of these Guidelines.

This internal appeals process does not compel the College to apply considerations that fall outside of these Guidelines. As such, ACRRM is not compelled to consider the following matters as part of this appeals process:

- suitability for enrolment on a training program leading to Fellowship;
- restrictions and conditions relating to medical registration or their interpretation for the assessment of Program placement requests;
- overseas trained doctor or foreign graduate of an accredited medical school status;
- the District of Workforce Shortage or MM status of a requested service location; or
- requests to retrospectively grant Approved Placements, so that MBS claims can be backdated.
CONTACT DETAILS

Department of Health
www.health.gov.au
Phone: Switchboard (02) 6289 1555 or Free call 1800 020 103

Department of Human Services (DHS)
www.humanservices.gov.au
Phone: 13 21 50

Australian College of Rural and Remote Medicine
www.acrrm.org.au
Phone: (07) 3105 8200 or Free call: 1800 223 226

Regional Training Organisations

Eastern Victoria GP Training
Training region: Eastern Victoria
www.evtptraining.com.au
Phone: (03) 9822 1100

General Practice Training Queensland
Training region: South Eastern Queensland
www.gptq.qld.edu.au
Phone: (07) 3552 8100

General Practice Training Tasmania
Training region: Tasmania
www.gptt.com.au
Phone: (07) 3552 8100

Generalist Medical Training
Training region: North Western Queensland
www.gmt.edu.au
Phone: 1300 823 874

GP Synergy
Training regions: Lower Eastern New South Wales, North Eastern New South Wales, Western New South Wales
www.gpsynergy.com.au
Phone: (02) 9818 4433

GPEX
Training region: South Australia
www.gpex.com.au
Phone: 1300 473 972

Murray City Country Coast GP Training
Training region: Western Victoria
www.mccc.com.au
Phone: 1300 622 247
Northern Territory General Practice Education
Training region: Northern Territory
www.ntgpe.org
Phone: (08) 8946 7079

Western Australian General Practice Education and Training
Training region: Western Australia
www.wagpet.com.au
Phone: (08) 9473 8200

Remote Vocational Training Scheme Ltd (RVTS)
www.rvts.org.au
Phone: (02) 6057 3400
APPENDIX A - RELATED PROGRAMS

Independent Pathway (IP)
ACRRM Independent Pathway Fellowship Program is an established Fellowship Program delivered, supported and administered by the Australian College of Rural and Remote Medicine that leads to Specialist Registration as a general practitioner and vocational recognition with DHS.

The Independent Pathway offers individuals the flexibility throughout training to meet their Fellowship requirements.

The Independent Pathway Fellowship Program is one of the three pathways to Fellowship of ACRRM, the others being AGPT and RVTS

Australian General Practice Training (AGPT) Program
The Australian General Practice Training (AGPT) program is an Australian Government initiative which provides training for registrars towards fellowship and gaining specialist (general practitioner) registration.

The AGPT program is three to four years of full-time training offered in urban, regional and rural locations nationally, delivered across 11 training regions in Australia.

There are nine registered training organisations (RTOs) who deliver training towards two vocational endpoints recognised by Medicare Australia:

- Fellowship of the Royal Australian College of General Practitioners (FRACGP); and
- Fellowship of the Australian College of Rural and Remote Medicine (FACRRM).

RTOs also deliver training towards the RACGP’s Fellowship in Advanced Rural General Practice (FARGP).

RTOs are accredited by the two GP Colleges (RACGP and ACRRM) to provide training, with RTOs undertaking accrediting of training practices. The GP Colleges set the curriculum and assess registrars.

The Stronger Rural Health Strategy (the Strategy) will implement new arrangements to simplify existing General Practitioner (GP) training and qualification pathways. The nine current pathways to specialist GP status will be rationalised into two; delivered through the Royal Australian College of General Practitioners (RACGP), and the Australian College of Rural and Remote Medicine (ACRRM).

The Commonwealth will continue to fund 1,500 Australian General Practice Training (AGPT) program training places per year across the two College pathways, and will fund an additional 100 Rural Generalist places from 2021. Targets for the distribution of training places across regional and remote areas will ensure a continued focus on the skills needed for rural and remote general practice, and rural and remote GP workforce distribution.
The streamlined pathways to Fellowship will come into effect on 1 January 2019. Transition of the AGPT program to the GP Colleges will be staged between 2019 and 2021, with the RACGP and ACRRM assuming full responsibility for the program by 2022.

www.agpt.com.au

Remote Vocational Training Scheme (RVTS)
The Remote Vocational Training Scheme (RVTS) aims to provide an alternative route to vocational recognition for doctors working in Aboriginal Community Controlled Health Services (ACCHS); single doctor towns; or a regional town where the medical services would be substantially compromised by the departure of that doctor to undertake training.

The RVTS is a three or four year program that delivers structured distance education and supervision to doctors while they continue to provide general medical services in Aboriginal and Torres Strait Islander communities and rural and remote locations throughout Australia.

The RVTS will support medical practitioners to gain Fellowship of either the RACGP and/or Fellowship of ACRRM. This is achieved by funding two streams of doctors:

- Stream A – doctors working in Modified Monash Model– (MM) 4-7 locations; and
- Stream B - doctors working in ACCHS in MM 2-7 locations.

The RVTS provides 32 commencing places per year, ten of which are situated in ACCHS.

The program is delivered by RVTS Limited (Ltd): www.rvts.org.au.

RACGP Fellowship Program

The RACGP Fellowship Program is an alternate Fellowship Program administered by the Royal Australian College of General Practitioners that leads to Specialist Registration as a general practitioner and vocational recognition with the DHS.

The RACGP Fellowship Program encompasses three streams, of which two are common with the ACRRM Fellowship Program (the AGPT program and the RVTS).

https://yourgp.racgp.org.au/welcome

More Doctors for Rural Australia Program (MDRAP)

As part of the Strategy announced in the 2018-2019 Budget the Department of Health is developing the More Doctors for Rural Australia Program (MDRAP).

One of the aims of the Strategy is to improve the quality and volume of services available in rural and remote communities. Under existing 3GA program structures doctors have been able to provide services to communities for long periods without attaining general practice fellowship.

The MDRAP will be a new workforce 3GA program supporting non-VR doctors to provide general practice services in rural and remote Australia. Eligible locations for the MDRAP will be in MM 2 – MM 7.
Doctors on the MDRAP will be able to claim Medicare benefits at the non-VR rate while gaining valuable general practice experience and working towards entry to a general practice training or experience program.

The MDRAP will support non-VR doctors by developing a framework of ongoing education, supervision and program milestones. The requirements of the MDRAP align with training and experience pathways preparing doctors to progress to fellowship.

The Department worked closely with the health industry to co-design the MDRAP.

A long term benefit of the MDRAP will be to reduce the number of non-VR doctors in general practice. Measures of success include:

- comparing the fellowship rates of existing 3GA programs with the fellowship rates of MDRAP participants; and
- comparing the total number of non-VR doctors providing services to the community each year.
APPENDIX B – PROGRAM (IP STREAM) MEDICARE PROVIDER NUMBER APPLICATION PROCESS

The following will assist Program (IP stream) participants with making their first MPN application to the Department of Human Services (DHS) as a program participant. This is also a useful reference for subsequent MPN applications in situations where:

- the ACRRM exercises its power to renew an Approved Placement on the Program (IP stream);
- a program participant moves to a new practice location with ACRRM approval under the Program (IP stream) rules; or
- a program participant becomes a Fellow of the ACRRM and makes a new MPN application for the first time as a fully-qualified GP.

Background to the Medicare provider number application process

Before qualifying to claim MBS items with a training practice, a Program (IP stream) participant must have:

- a MPN for the relevant practice location and written confirmation from DHS that MBS items are payable for their services;
- an Approved Placement from the ACRRM; and if applicable
- an exemption under section 19AB of the Health Insurance Act 1973 (for those program participants who fall under the ten year moratorium).

The MPN application process is administered by DHS with assistance from the specified bodies. A key objective of the process is to ensure doctors are correctly assessed according to the Medicare eligibility rules. All program participants under the Program (IP stream) can expect to receive clear instructions from DHS regarding your eligibility to:

- submit MBS item claims or have such claims made on your behalf by an employer or your patients;
- refer your patients to other specialists and consultant physicians through the Medicare system; and
- request services (such as pathology or diagnostic imaging services) on behalf of your patients.

It is the responsibility of program participants to make a complete MPN application when applying for an initial Approved Placement.

The MPN application process is outlined in further detail in the Figure on Page 20.
The Medicare Provider Number (MPN) application form

Commencing in mid-2018, DHS adopted a single MPN application form (reference number is HW019) for all doctors. This application form covers all doctors, whether they are applying for their first MPN, seeking to extend an MPN that was previously granted to them, or applying for a new number because they have changed practice locations.


### Submitting a complete MPN application for the Program (IP stream)

<table>
<thead>
<tr>
<th>Information requirements Subject to S19AB*</th>
<th>Information requirements Not subject to S19AB</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Basic information</strong></td>
<td></td>
</tr>
<tr>
<td>Give your full name as it appears on your registration with the Australian Health Practitioner Regulation Agency (AHPRA).</td>
<td>Give your full name as it appears on your registration with the AHPRA.</td>
</tr>
<tr>
<td>Give your correct AHPRA Registration number.</td>
<td>Give your correct AHPRA Registration number.</td>
</tr>
<tr>
<td>For Question 19, give the same start and end dates as your approved ACRRM IP placement. <em>This ensures your application will be considered by DHS.</em></td>
<td>For Question 19 give the same start and end dates as your approved ACRRM IP placement. <em>This ensures your application will be considered by DHS.</em></td>
</tr>
<tr>
<td>For question 20, tick the second option ‘refer, request and provider Medicare or Department of Veterans’ Affairs rebateable services’.</td>
<td>For question 20, tick the second option ‘refer, request and provider Medicare or Department of Veterans’ Affairs rebateable services’.</td>
</tr>
<tr>
<td>Tick ‘yes’ in response to Question 21 – ‘Are you in a 3GA Program?’</td>
<td>Tick ‘yes’ in response to Question 21 – ‘Are you in a 3GA Program?’</td>
</tr>
<tr>
<td>Tick ‘yes’ in response to Question 23 to qualify to perform services that attract MBS items.</td>
<td>Tick ‘yes’ in response to Question 23 to qualify to perform services that attract MBS items.</td>
</tr>
<tr>
<td>Tick ‘yes’ in response to Question 32 so that you will be able to prescribe medicines.</td>
<td>Tick ‘yes’ in response to Question 32 so that you will be able to prescribe medicines.</td>
</tr>
<tr>
<td>Give bank account details for the payment of MBS items.</td>
<td>Give bank account details for the payment of MBS items.</td>
</tr>
<tr>
<td><strong>Multiple locations</strong></td>
<td></td>
</tr>
<tr>
<td>Follow the process set out at Question 18.</td>
<td>Follow the process set out at Question 18.</td>
</tr>
<tr>
<td><strong>Required Supporting documents</strong></td>
<td></td>
</tr>
<tr>
<td>Approved Placement on the Program (IP stream) as issued by the ACRRM</td>
<td>Approved Placement on the Program (IP stream) as issued by the ACRRM.</td>
</tr>
<tr>
<td>A printed copy of your:</td>
<td></td>
</tr>
<tr>
<td>• current AHPRA registration;</td>
<td></td>
</tr>
<tr>
<td>• current visa or Australian citizenship certificate;</td>
<td></td>
</tr>
<tr>
<td>• employer letter of support.</td>
<td></td>
</tr>
</tbody>
</table>

*Applies to overseas trained doctors and foreign graduate of an accredited medical school.*
**What is the Health Professional Online Services (HPOS) system?**

HPOS is an online service designed to streamline interactions between DHS and health professionals, including doctors. This service allows fully qualified doctors (those who have an Australian postgraduate medical qualification) to make online provider number applications.

As Program (IP stream) participants must be assessed for MBS eligibility, they cannot submit MPN applications to DHS through the HPOS system.

**Renewing a MPN for the Program (IP stream)**

MPNs granted during the course of the Program (IP stream) will only be valid for the ACRRM Approved Placement. Program participants must make a new application for an Approved Placement if their placement is renewed by the ACRRM (the placement form also serves to extend the MPN). Program participants must not claim a Medicare benefit until they receive confirmation of eligibility in writing.

**Fellowship Qualification**

When a program participant obtains a Fellowship qualification, they will be responsible for making a new MPN application. The process is different as they will need to simultaneously apply to have their FACRRM status recognised by DHS. The DHS website provides the application form for recognition of FACRRM status (reference number is HW076): [www.humanservices.gov.au/organisations/health-professionals/forms/hw076](http://www.humanservices.gov.au/organisations/health-professionals/forms/hw076).

If participants separate from the ACRRM IP without obtaining a qualification, they need to seek advice from the College regarding alternate options. Program participants are not eligible to apply for a new MPN for a general practice without participating in a recognised section 3GA program.