



Australian Government

Department of Health

RACGP Fellowship Program

Placement Guidelines

Commencing from 1 January 2019

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DEFINED TERMS

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

Term	Description
Approved Placement	<p>A placement in a course or program that is listed in Division 6 of the <i>Health Insurance Regulations 2018</i>. An Approved Placement in a course or program:</p> <ul style="list-style-type: none"> • 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 (MBS) is limited to the listed practice location(s) and the duration of the placement.
Exceptional Circumstances	<p>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.</p> <p>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 RACGP Fellowship Program.</p> <p>Examples of exceptional circumstances may include, but are not limited to:</p> <ul style="list-style-type: none"> • 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. <p>All applications and requests pertaining to exceptional circumstances will be considered on a case by case basis.</p>
FACRRM	Fellowship of the Australian College of Rural and Remote Medicine.
FRACGP	Fellowship of the Royal Australian College of General Practitioners.

Term	Description
Foreign graduate of an accredited medical school	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.
Full-time general practice	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.
Guidelines	The Department of Health RACGP Fellowship Program Placement Guidelines.
Health	The Australian Government Department of Health.
HIA	<i>Health Insurance Act 1973.</i>
Medicare provider number	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.
Modified Monash Model (MM)	<p>The Modified Monash Model is a classification system that categorises metropolitan, regional, rural and remote areas according to both geographical remoteness and town size.</p> <p>For more information on the MM system see: www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/Classification-changes.</p>
Overseas trained doctors (OTDs)	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 Medicare Benefits Schedule (MBS) items.
Practice location	For the provision of a professional medical service that attracts a Medicare Benefits Schedule (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.

Term	Description
Practice Experience Program (PEP)	A delivery stream of the RACGP Fellowship Program, which is a recognised program for section 3GA of the <i>Health Insurance Act 1973</i> . The use of 'PEP' or 'Program (PEP stream)' throughout these guidelines means the RACGP Fellowship Program (PEP stream).
Permanent Resident or Australian Citizen	As defined in the <i>Migration Act 1958</i> .
Register	Register of Approved Placements maintained by DHS under section 3GA of the HIA.
Recognised Fellow	A medical practitioner who has obtained a FACRRM or a FRACGP.
Specified body	<p>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 <i>Health Insurance Regulations 2018</i>. A specified body :</p> <ul style="list-style-type: none"> • must be identified in Division 6 of the Regulations as being responsible for the relevant program or course; • can be an Australian Government Department, a medical college or a private entity; • can be responsible for several programs and courses; and • can share responsibility for the program or course with other specified bodies.
Vocationally Recognised GP (VR GP)	A registered medical practitioner who holds Fellowship of the Royal Australian College of General Practitioners or the Australian College of Rural and Remote Medicine.

PRELIMINARY MATTERS

These Guidelines:

- May be cited as the RACGP Fellowship Program Placement Guidelines.
- Commence on 1 January 2019.
- Confirm the relationship between the RACGP 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 RACGP Fellowship Program (the 'Program').

ABOUT THE RACGP FELLOWSHIP PROGRAM

Program Description

The RACGP, 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) program¹;
- the Remote Vocational Training Scheme (RVTS)²; and
- the Practice Experience Program (PEP).

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 practitioner practising as a GP to access Medicare benefits, subject to those conditions. By being entered in the Register of Approved Placements, the practitioner can:

- apply for a Medicare Provider number with the DHS for the practice location and period of the Approved Placement;

¹ Responsibility for the AGPT program will transition from the Department of Health to the RACGP (and the Australian College of Rural and Remote Medicine) 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 RACGP (and the Australian College of Rural and Remote Medicine) 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.

- 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 RACGP in-line with the relevant Fellowship of the Royal Australian College of General Practitioners (FRACGP) and Fellowship of Advanced Rural General Practice (FARGP) curriculum, standards and policies. The RACGP 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:

www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/section19AA

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

www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/section19AB

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

www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/class_exemption_section19AB

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 authority³ 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. Information about the medical registration categories and related practising rights is provided on the Board's website: www.medicalboard.gov.au/registration/types.aspx.

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

Note that additional eligibility criteria may apply to the PEP, the AGPT program, or the RVTS which are outlined in the documentation for those programs. This includes formal selection mechanisms such as the PEP Entrance Assessment.

For more information on the AGPT program see: www.agpt.com.au/Junior-doctors/Australian-General-Practice-Training--AGPT--program/New-Applicants/Eligibility.

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

For more information on the PEP see: www.racgp.org.au/education/imgs/fellowship-pathways/practice-experience-program.

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.

RACGP administered Program PEP provider number application process

1. Upon passing PEP Entrance Assessment⁴, or for participants seeking placement renewal up to ten weeks before their current placement end date, the participant obtains the *Application for an Approved Placement – RACGP Fellowship Program (Practice Experience Program)* form from the RACGP (pepapprovedplacement@racgp.org.au).
2. The participant submits the completed form to the RACGP inbox (pepapprovedplacement@racgp.org.au). As part of this application, participants who are already participating in an 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.

⁴ Overseas trained doctors who enter Australia through AHPRA's specialist registration pathway– with either a substantially or partially comparable GP assessment outcome – are not required to sit the PEP Entrance Assessment.

3. The RACGP 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 (MPN) then 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 RACGP. 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 once all eligibility requirements are satisfied.

Health administered Program PEP provider number application process

The Department of Health currently approves placements for a number of section 3GA programs. The Department of Health also has the authority to approve placements under this Program.

From time to time, due to College capacity limitations, there may be a delay from the time a medical practitioner passes the PEP Entrance Assessment to the commencement date of the Program. In these situations, the Department of Health may approve a placement for medical practitioners who meet certain conditions. The Health administered placement allows the medical practitioner to claim full GP MBS items under the Program because they have passed the PEP Entrance Assessment. The Health administered placement will apply to the doctor's current employment until their pathway commencement date.

To qualify for a Health administered placement, a medical practitioner must be able to provide evidence of:

- A pass result in the PEP Entrance Assessment⁵;

⁵ Overseas trained doctors who enter Australia through AHPRA's specialist registration pathway– with either a substantially or partially comparable GP assessment outcome – are not required to sit the PEP Entrance Assessment.

- A RACGP-issued start date for training under the Program (PEP stream); and
- A current Medicare provider number and Approved Placement on an alternate full-time general practice program or course that is listed in the Regulations (including the More Doctors for Rural Australia program). Note – while the Approved Medical Deputising Service Program is listed in the Regulations, it is not a full-time program and therefore does not provide grounds for Health to apply the placement rules under this section of the Guidelines.

Some doctors who pass the PEP Entrance Assessment will already have full GP MBS item access under one of the Other Medical Practitioners (OMPs) Programs – specifically the Rural Other Medical Practitioners Program, the Outer Metropolitan Other Medical Practitioners Program or the MedicarePlus for Other Medical Practitioners Program. Health will grant a placement to these doctors only if their access to the full GP MBS items through their OMPs Program terminates before their RACGP-confirmed Program (PEP stream) commencement date.

Health will only approve a placement for medical practitioners who already hold an Approved Placement in a full-time program or course that is listed in the Regulations. This restriction on granting Health administered placements also applies to temporary resident doctors working in Australia who have not joined a full-time program or course with a related commitment to attaining Fellowship when they pass the PEP Entrance Assessment.

The Health administered Approved Placement will have an end-date that aligns with the RACGP-set commencement date on Program (PEP stream).

A participant who is granted an Approved Placement by Health will have the following obligations and responsibilities:

- Complete, or demonstrate progress towards completion of, the foundation general practice modules offered by the RACGP.
- Complete, or demonstrate progress towards 50 hours of professional development as per AHPRA requirements.
- Complete the DHS education activities about Medicare.
- Continue to adhere to the requirements of their 3GA workforce program placement, including the relevant location requirements. For participants who did not have a 3GA workforce program placement (or a placement offer) prior to sitting the PEP Entrance Assessment, they will need to apply for one of these programs (eg. the More Doctors for Rural Australia Program).
- Continue to adhere to any restrictions that apply to their practice location such as medical registration restrictions or the MBS workforce distribution standard that applies to overseas trained doctors or foreign graduates of an accredited medical school under section 19AB of the HIA.

A participant cannot refuse commencement of the Program (PEP stream) unless they wish to stop work and defer commencement because of an exceptional circumstance. An application for exceptional circumstances consideration must be submitted with the

provider number application and is subject to the determination of the Department of Health in consultation with the RACGP.

The Health administered Approved Placement application process is as follows:

1. After achieving a pass result in the PEP Entrance Assessment, and if the participant's commencement date on the PEP is not immediate, the participant obtains the *Application for an Approved Placement – RACGP Fellowship Program (Practice Experience Program)* form from the Department of Health (PEP@health.gov.au).
2. The participant submits the completed form to the Department of Health inbox (PEP@health.gov.au) together with evidence of:
 - a. A pass result in the PEP Entrance Assessment,
 - b. A RACGP-issued start date for training under the Program (PEP stream), and
 - c. A current Medicare provider number for the relevant practice location and Approved Placement on an alternate full-time general practice program or course that is listed in the Regulations (including the More Doctors for Rural Australia program).
3. The Department of Health will add its approval as the Specified Body and submit the form to the DHS for entry on the Register of Approved Placements and notification to the participant, making it an Approved Placement, and will submit it to the DHS.
4. 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. register the new Approved Placement; and
 - c. update 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 Department of Health. However, the participant is not eligible to commence accessing Medicare benefits 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.

Locations requirements for the Program (PEP stream) are detailed below.

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 workforce distribution requirements 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.

Location requirements for Program (PEP stream) participants

- Participants who were providing general practice services via a full-time program or course listed in the Regulations prior to July 2018 (Rural Locum Relief Program, Special Approved Placements Program and the Temporary Resident Other Medical Practitioners Program) are restricted to the location(s) where they were providing those services.
- Participants who were providing general practice services via the MDRAP prior to entry into the Program (PEP stream) should remain in their MDRAP location while participating in the Program. These participants will be restricted to receiving Approved Placements in areas that have a Modified Monash Model (MM) classification of 2-7.
- Participants who enter the Program (PEP stream) via the AMDS Program may only be placed at a full-time practice that has a MM classification of between 2 and 7⁶. These doctors may also participate in the Program (PEP stream) with an after-hours PEP provider number, or remain with their deputising service employer under the AMDS Program (the Regulations do not prevent doctors from concurrently participating in two programs or courses that are listed in Division 6).
- Any relocation of a MM classification 2-7 participant into a MM classification 1 location is subject to approval by the Department of Health in consultation with the RACGP with consideration for exceptional circumstances, and would need to be accommodated within the MM1 cap determined by the Department of Health.
- MM1 placements on the Program (PEP stream) are capped and are subject to availability.

Participants practising in an Area of Priority, as determined by the Rural Workforce Agencies, will be prioritised in terms of enrolment for the PEP Entrance Assessment.

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.

⁶ This restriction will not be retrospectively applied to the first participant cohort who have already accepted a Program (PEP stream) place for commencement in 2019.

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 RACGP and the ACRRM Fellowship Program requirements

Doctors who are undertaking both the RACGP and ACRRM 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, the RACGP (for the PEP stream), 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 RACGP Fellowship Program, the RACGP:

- is responsible for determining the duration of each Approved Placement it grants under each of the RACGP 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 RACGP Fellowship Program streams will have a specified duration. The RACGP has the discretion to consider requests to extend a previously issued Approved Placement. When considering a placement renewal request under this power, the RACGP has the right to:

- assess the merits of the renewal request according to the RACGP 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 FRACGP. This includes the right to have the participant doctor relocate to an alternate training practice location.

Once the RACGP 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 Medicare provider record to reflect the terms of the revised Approved Placement.

DHS's assessment process can take up to 6 weeks. Program participants are advised to begin the process of seeking an extension of their Approved Placement from the RACGP 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 HIA, it should be understood that, even if a section 3GA placement approval has already been granted, access to Medicare benefits will not commence until the date of approval of the exemption under section 19AB of the HIA and vice versa.

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

Notification of unexpected termination of placement

When a participant withdraws or is withdrawn from the program it is the responsibility of the medical practitioner to advise the RACGP, or the training provider working under the auspices of the RACGP (e.g. Regional Training Organisations and the RVTS Ltd) within 10 (ten) working days of the termination. RACGP as the specified body of the participant's Approved Placement will notify DHS to remove it from the Register. If the participant has a Health administered placement, the RACGP will notify the Department of Health.

Only the Specified Body of an Approved Placement can remove it from the Register of Approved Placements maintained by DHS.

DHS will notify the medical practitioner following advice from either the Department of Health or RACGP.

Remediation and Removal

Participants not meeting the requirements for progression may be offered remediation on a fee for service basis as determined by RACGP (or delegate) in consultation with the participant. Participants who do not meet the required standards of progression after remediation may be removed from the Program at the discretion of the RACGP. The RACGP will not provide an Approved Placement under these guidelines for a participant who has been withdrawn from the Program.

Participants who do not attain Fellowship within the exam attempt/time limits outlined in the RACGP Fellowship Exam Attempts Policy will be removed from the Register of Approved Placements. Removal will occur four weeks after determination of the last unsuccessful exam attempt, or four weeks after determination that the time limit has been exceeded.

More information about the RACGP Fellowship Exam Attempts Policy is available at:
www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/policies/fellowship-exam-attempts.

Request of Review

Participants may request that RACGP 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, RACGP 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.

More information about the RACGP Fellowship Pathways Appeals Policy is available at:
www.racgp.org.au/education/registrars/fellowship-pathways/policy-framework/policies/fellowship-pathways-appeals

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

Royal Australian College of General Practitioners

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

Phone: 1800 472 247

Regional Training Organisations

Eastern Victoria GP Training

Training region: Eastern Victoria

www.evgptraining.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: (03) 6215 5000

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

Practice Experience Program (PEP)

The RACGP's Practice Experience Program (PEP) is a self-directed education program designed to support non-vocationally recognised (non-VR) doctors on their pathway to RACGP Fellowship. The PEP provides targeted educational support for non-VR doctors to help them prepare for Fellowship of the RACGP (FRACGP). The program commences in January 2019. From 2022 onwards, it will be compulsory for all doctors to complete an RACGP approved program in order to be eligible to sit the RACGP exams.

The PEP consists of a maximum of three general practice training terms. Each term is six months in duration (full-time equivalent). Following the completion of an Initial Core Skills Analysis (ICSA), participants are provided with an individualised learning program which is undertaken whilst working in their general practice and is selected from 39 on-line self-directed practice-based learning units and assessment activities. Approximately 150 hours of learning and activities are required for each term. Guidance, feedback and support are provided throughout the program.

Download the PEP guide for participants at:

www.racgp.org.au/FSDEDEV/media/documents/Education/IMGs/PEP-guide-for-participants.pdf.

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 regional 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.

ACRRM Fellowship Program

The ACRRM Fellowship Program is an alternate Fellowship Program administered by the Australian College of Rural and Remote Medicine that leads to Specialist Recognition as a general practitioner and vocational registration.

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

www.acrrm.org.au.

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 (PEP STREAM) MEDICARE PROVIDER NUMBER APPLICATION PROCESS

The following will assist Program (PEP 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 RACGP exercises its power to renew an Approved Placement on the Program (PEP stream);
- a program participant moves to a new practice location with RACGP approval under the Program (PEP stream) rules; or
- a program participant becomes a Fellow of the RACGP 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 (PEP 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 RACGP; 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 (PEP 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 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 22.

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.

The MPN application form can be downloaded from the DHS's website:
www.humanservices.gov.au/organisations/health-professionals/forms/hw019.

Submitting a complete Medicare provider number application for the Program (PEP stream)

	Information requirements Subject to S19AB*	Information requirements Not subject to S19AB
Basic information	Give your full name as it appears on your registration with the Australian Health Practitioner Regulation Agency (AHPRA).	Give your full name as it appears on your registration with the AHPRA.
	Give your correct AHPRA Registration number.	Give your correct AHPRA Registration number.
	For Question 19, give the same start and end dates as your approved Program (PEP stream) placement. <i>This ensures your application will be considered by DHS.</i>	For Question 19 give the same start and end dates as your approved Program (PEP stream) placement. <i>This ensures your application will be considered by DHS.</i>
	For question 20, tick the second option 'refer, request and provider Medicare or Department of Veterans' Affairs rebateable services'.	For question 20, tick the second option 'refer, request and provider Medicare or Department of Veterans' Affairs rebateable services'.
	Tick 'yes' in response to Question 21 – 'Are you in a 3GA Program?'	Tick 'yes' in response to Question 21 – 'Are you in a 3GA Program?'
	Tick 'yes' in response to Question 23 to qualify to perform services that attract MBS items.	Tick 'yes' in response to Question 23 to qualify to perform services that attract MBS items.
	Tick 'yes' in response to Question 32 so that you will be able to prescribe medicines.	Tick 'yes' in response to Question 32 so that you will be able to prescribe medicines.
	Give bank account details for the payment of MBS items.	Give bank account details for the payment of MBS items.
Multiple locations	Follow the process set out at Question 18.	Follow the process set out at Question 18.
Required Supporting documents	Approved Placement on the Program (PEP stream) as issued by the RACGP	Approved Placement on the Program (PEP stream) as issued by the RACGP.
	A printed copy of your: <ul style="list-style-type: none"> • current AHPRA registration; • current visa or Australian citizenship certificate; • employer letter of support. 	

**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 (PEP stream) participants must be assessed for MBS eligibility, they cannot submit Medicare provider number applications to DHS through the HPOS system.

Separation from the Program (PEP stream)

MPNs granted during the course of the Program (PEP stream) will only be valid for the RACGP Approved Placement. Program participants must make a new MPN application if their Approved Placement is renewed by the RACGP. Program participants must not claim a Medicare benefit until they receive confirmation of eligibility in writing.

Fellowship Qualification

When a program participant has obtained 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 FRACGP status recognised by DHS. The DHS website provides the application form for recognition of FRACGP status (reference number is HW076): www.humanservices.gov.au/organisations/health-professionals/forms/hw076.

If participants separate from the Program (PEP stream) 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.