RACGP

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Regulation and compliance news – September 2026

Latest news

Medical registration renewal now open

Registration renewal for medical practitioners is now open. Practitioners must log in to the Ahpra portal using multifactor authentication (MFA) to renew by 30 September 2026.

Renewing early means if you need help – particularly with logging in or MFA – you'll get through to Ahpra's Customer Support Team quicker.

If you've changed phones or deleted your MFA app and can't get access, use the web enquiry form and choose 'Reset my MFA' from the menu. Your identity will be verified based on at least four points of identification, so please complete all parts of the form. Once your MFA is reset, you can set up your MFA app using these instructions.

If you hold dual registration or endorsements, make sure you renew all of them. You can check everything has been completed correctly by searching the Register of practitioners.

Medical Training Survey

The 2026 Medical Training Survey (MTS) is now live and all doctors in training are encouraged to take part (including international medical graduates [IMGs] with limited or provisional registration).

The MTS is a national, profession-wide, safe and confidential survey of doctors in training, created to improve medical training and support patient safety. It is a quality improvement tool that identifies strengths and flags issues in supervision, environment/culture, unacceptable behaviours and wellbeing.

- **Prevocational, unaccredited, specialist GP and non-GP trainees**: the MTS pops up when you've finished renewing your medical registration.
- **Interns and IMGs**: log into your Ahpra portal and click on the MTS portal task.

The MTS runs from August to early October.

Racism and discrimination notifications review

In July 2026, Ahpra released the findings of the Review into Ahpra's management of notifications relating to racism and discrimination – with a focus on antisemitism and Islamophobia.

Between 1 July 2023 and 28 February 2026, concerns relating to racism and discrimination accounted for only 1.5% of all notifications received. However, these concerns are likely under-reported and notifications data alone does not reflect the true prevalence of racism and discrimination.

44% of notifications (n=211) arose from conduct on social media – particularly in relation to antisemitism and Islamophobia. 92% of finalised matters (406 of 439) resulted in no regulatory action, compared to 88.6% for all notifications completed in 2025–26.

Action is underway to strengthen the notifications process through enhanced triage, refined risk assessment, improved communication and correspondence, practitioner liaison support, stronger guidance on racism and discrimination, and the establishment of a Lived Experience Advisory Panel. Ahpra has also committed to six-monthly releases of data to track its progress.

Updates on Ahpra's broader work around racism and discrimination in healthcare can be viewed here.

Medicare integrity reforms

A new webpage outlines reforms to strengthen Medicare integrity, including a fact sheet detailing funding announced in this year's Federal Budget. The RACGP is engaging with the Department of Health, Disability and Ageing (DoHDA) on what these changes will mean for providers.

Standards for general practices (6th edition) now available

The RACGP has released the *Standards for general practices (6th edition)*, building on more than 30 years of profession-led quality standards for Australian general practice.

The sixth edition strengthens and modernises the accreditation framework while remaining practical, outcome-focused and centred on continuous quality improvement. Updates include environmental sustainability, safe governance of artificial intelligence (AI), strengthened privacy and confidentiality requirements, continuous quality improvement and shared decision-making.

There will be a transition period to give practices time to familiarise themselves with the sixth edition and prepare for implementation. Further information about commencement dates and accreditation arrangements will be communicated by the Australian Commission on Safety and Quality in Health Care.

Visit the RACGP sixth edition hub to access the Standards and supporting resources.

RACGP advocacy

Joint RACGP/AMA letter – Amendments to 30/20 rule

The RACGP and the Australian Medical Association have jointly written to the Minister for Health and Ageing, calling on the Australian Government to prepare to implement temporary amendments to the 30/20 rule in the event Australia moves to Level 3 of the National Fuel Security Plan.

Under this rule, any specialist GP, prescribed medical practitioner or consultant physician who claims 30 or more relevant Medicare Benefits Schedule (MBS) telephone attendance services on 20 or more days in a rolling 12-month period is in breach of the rule.

Should Level 3 of the National Fuel Security Plan be activated, the letter calls for the limit of 30 phone consultations per day to be retained, with the 20-day limit increased to 50 days. Proactive planning will ensure continuity of care is maintained if in-person services become constrained.

Recent submissions

The following submissions are available to read on the RACGP website:

- Health Insurance Amendment (Incentive Payments and Other Measures) Bill 2026
- Fee transparency in healthcare: Informed financial consent and split billing practices

Compliance statistics

Practitioner Review Program – Key statistics

DoHDA has published key statistics for case reviews and outcomes under the Practitioner Review Program, including case progression and an overview of requests made to the Director of the Professional Services Review (PSR).

This document also provides a breakdown of requests for review made to the PSR Director by specialty, and the number of referrals for breaches of prescribed pattern of services rules (80/20 and 30/20).

From 1 July 2025 to 30 June 2026, there were 25 total breaches of the 30/20 rule for telephone services, and just three for the 80/20 rule covering face-to-face and telehealth services.

PSR statistics

A reminder that if you are interested in statistics relating to the PSR, the agency's annual report is the best source of information.

The 2024–25 annual report includes information on prescribed pattern of services referrals (page 31), common items attracting review (page 32), record keeping concerns (page 32), residential aged care facility services (page 33), and chronic disease management services (page 34).

Education and resources

Medicare compliance webinar recording and Q&A

If you missed the first webinar as part of the RACGP's Medicare CPD project with DoHDA, you can watch the recording on demand.

Dr Kris Kandasamy, GP and Senior Medical Advisor at DoHDA, provides an overview of Medicare fundamentals and compliance essentials for GPs in training and providers new to the system, and where to get help and support.

We have also received written responses from DoHDA to webinar questions that were not answered on the night, grouped by theme for ease of reading.

Assignment of benefit webinar recording and Q&A

The RACGP ran a second webinar on changes to the assignment of benefit process with DoHDA on 14 July 2026, following a webinar with software vendors on 24 June 2026. Written responses to webinar questions are now available.

Referrals for specialist services

A new fact sheet and quick reference guide on MBS Online provide general information on the rules and requirements of referrals for specialist services under the MBS. This includes who can refer, what a referral should include, what the referral covers, and how long it lasts.