



**Australian Government**

**Department of Health**

# General Practice Fellowship Program Placement Guidelines

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# 1. PURPOSE

These guidelines provide the overarching strategic policy objectives and operational direction for Australia's two General Practice (GP) Fellowship Programs:

- The Australian College of Rural and Remote Medicine (ACRRM) Fellowship Program; and
- The Royal Australian College of General Practitioners (RACGP) Fellowship Program.

The primary audience for these guidelines includes the Australian Government Department of Health (the Department); the Australian College of Rural and Remote Medicine (ACRRM); the Royal Australian College of General Practitioners (RACGP); Regional Training Organisations (RTOs); and the Remote Vocational Training Scheme Ltd (RVTS).

Current and prospective participants of the GP Fellowship Programs may also find the guidelines useful, but should first review the information provided in the [General Practice Training in Australia: The Guide](#). The Guide provides broad information on GP training in Australia.

These guidelines provide information about the GP Fellowship Program structure and the application process for an Approved Placement and Medicare Provider Number (MPN) to access the Medicare Benefit Schedule (MBS). These guidelines do not replace existing policies or standards that govern the operation of the GP training streams that operate under these Programs.

These guidelines will be reviewed and updated periodically by the Department (in conjunction with ACRRM and RACGP) to ensure they appropriately reflect program arrangements and policy priorities.

## 2. DEFINED TERMS

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

Term	Description
19AA	Section 19AA of the <i>Health Insurance Act (1973)</i> (the Act) restricts doctors from claiming a Medicare benefit for professional services unless they are: <ul style="list-style-type: none"> <li>• recognised as a specialist by a specialist medical college; or</li> <li>• participating in an approved training or workforce program (3GA placement); or</li> <li>• an overseas trained doctor covered by an exemption under subsection 19AB(3) of the Act.</li> </ul>
19AB	Section 19AB of the Act applies to International Medical Graduates (IMGs) and Foreign Graduates of an Accredited Medical School (FGAMS). Section 19AB means that during the first 10 years after registration in Australia, these groups can only claim Medicare rebates if they are working in a Distribution Priority Area if they are a GP or in a District of Workforce Shortage if they are a non-GP medical specialist.
3GA Programs	Section 3GA programs are programs specified in the Regulations, for the purposes of s 3GA of the Act. 3GA Programs provide training to doctors seeking vocational recognition by offering a range of incentives to doctors, such as access to a Medicare Provider Number (MPN) and access to the higher Medicare rebate items. Section 3GA programs include vocational training, vocational recognition and other training programs.
ACRRM	Australian College of Rural and Remote Medicine.
ACRRM Fellowship Program	The ACRRM Fellowship Program commenced on 1 January 2019 and is delivered through three distinct streams: <ul style="list-style-type: none"> <li>• Australian General Practice Training Program;</li> <li>• Remote Vocational Training Scheme; and</li> <li>• Independent Pathway</li> </ul> These streams are approved specified programs listed in Division 6 of the <i>Health Insurance Regulations 2018</i> (the Regulations).
AGPT	The Australian General Practice Training Program is one of the training streams under either the ACRRM or RACGP Fellowship Program.
AHPRA	The Australian Health Practitioner Regulation Agency supports the National Boards that are responsible for regulating the health professions. The primary role of the National Boards is to protect the public and the setting of standards and policies that all registered health practitioners must meet. Health professions in Australia are regulated by nationally consistent legislation under the National Registration and Accreditation Scheme.
AMDS	The Approved Medical Deputising Service Program allows doctors to gain clinical experience in the after-hours period and increase the workforce available during the after-hours period.
Approved Placement	A placement in a specified program listed in the Regulations which: <ul style="list-style-type: none"> <li>• must be linked to a course or program that is named in the Regulations;</li> <li>• 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</li> <li>• 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.</li> </ul>
AoN	Area of Need applies to both public and private sector positions. They are determined by the State and Territory Governments and methods of defining them vary. Contact the health department in the state or territory you would like to practise in to get more information about AoN positions.
DPA	Distribution Priority Area classification system replaces the Districts of Workforce Shortage (DWS) Assessment Areas for General Practitioners (GPs) and Bonded Doctors from 1 July 2019. Instead of using a GP to population ratio, the new DPA system takes into account demographics (gender/age) and socio-economic status of patients living in a GP catchment area. The DPA also applies a number of blanket rules: <ul style="list-style-type: none"> <li>• inner metropolitan areas area automatically deemed non-DPA;</li> <li>• MM5-7 are automatically deemed DPA; and</li> <li>• Northern Territory is automatically deemed DPA.</li> </ul>
DWS	A District of Workforce Shortage is an area identified as having below average access to doctors. This is determined using population data and Medicare billing information to get a GP to population ratio.

Term	Description
Exceptional Circumstances	Circumstances that were unforeseen and outside a participant's control that consideration of exempting the participant from meeting some or all program training placement conditions. Exceptional circumstances policies apply to each training stream (AGPT, RVTS, IP and PEP). Further information on these policies are available on ACCRM and RACGP's websites.
FACRRM	Fellowship of the Australian College of Rural and Remote Medicine.
Fellowship	A qualification awarded by an accredited specialist medical college leading to registration in a specialist field of medicine and eligibility for Medicare benefits of that specialism.
FRACGP	Fellowship of the Royal Australian College of General Practitioners.
FGAMS	Foreign graduates of an accredited medical school are doctors who were not: <ul style="list-style-type: none"> <li>• a permanent Australian; or</li> <li>• a New Zealand citizen; or</li> <li>• a permanent resident of New Zealand;</li> </ul> when they enrolled at an accredited medical school in Australia or New Zealand.
GP Catchment Areas	GP catchment areas are a custom designed geography, constructed using the Australian Statistical Geographical Standard and Medicare data. There are 829 non-overlapping GP catchment areas that are based on a number of factors including patient flows, workforce, rurality, and topography.
GP Fellowship Program	The General Practice Fellowship Program refers to the Fellowship Program and its supporting training streams (AGPT, RVTS, PEP or IP) delivered through either of the two Colleges.
Guidelines	The Australian Government Department of Health General Practice Fellowship Program Placement Guidelines.
HeaDS UPP Tool	The Health Demand and Supply Utilisation Patterns Planning (HeaDS UPP) tool is a single, integrated, quality source of health workforce and services data. The tool will provide sophisticated and comprehensive evidence to inform workforce planning and analysis. It uses GP catchment areas to reflect where people live and where they access health services, as well as where health practitioners and services are located.
IP	The Independent Pathway is one of the training streams under the ACRRM Fellowship Program.
IMGs	International Medical Graduates.
MBA	The Medical Board of Australia: <ul style="list-style-type: none"> <li>• registers medical practitioners and medical students;</li> <li>• develops standards, codes and guidelines for the medical profession;</li> <li>• investigates notifications and complaints about medical practitioners;</li> <li>• where necessary, conducts panel hearings and refers serious matters to Tribunal hearings;</li> <li>• assesses international medical graduates who wish to practise in Australia; and</li> <li>• approves accreditation standards and accredited courses of study.</li> </ul>
MBS	The Medicare Benefits Schedule is a listing of Medicare services subsidised by the Australian Government. Practitioners must have a Medicare Provider Number to claim items/services listed in the MBS.
MDRAP	The More Doctors for Rural Australia Program (MDRAP) supports non-vocationally recognised (non-VR) doctors to gain valuable general practice experience in rural and remote communities prior to joining a college fellowship pathway.
MM	Modified Monash (MM) refers to one of the seven remoteness categories (MM1 – 7) of the Modified Monash Model (MMM).
MMM	The Modified Monash Model is a geographic classification system that categorises metropolitan, regional, rural and remote areas. For more information on the MMM system click <a href="#">here</a> .
MPN	A Medicare Provider Number uniquely identifies a medical practitioner and the practice location from which they perform professional services. MPNs are issued by the Services Australia.
Non-VR	Non-Vocationally Recognised Doctors are medical practitioners who have not yet obtained Fellowship of a specialist medical college (FACRRM or FRACGP for general practice).
Participant	This refers to the person enrolled in a GP Fellowship Program to become a Vocationally Registered specialist general practitioner.
Practice location	The practice location where professional medical services are provided that attract a MBS item. Place of practice is related to a participant's MPN (granted by the Chief Executive Medicare in the Services Australia).
PEP	The Practice Experience Program is one of the training streams under the RACGP Fellowship Program.
Permanent Resident or Australian Citizen	As defined in the <i>Migration Act 1958</i> .
RACGP	The Royal Australian College of General Practitioners.

Term	Description
RACGP Fellowship Program	The RACGP Fellowship Program commenced on 1 January 2019 and is delivered through three distinct streams: <ul style="list-style-type: none"> <li>• Australian General Practice Training Program;</li> <li>• Remote Vocational Training Scheme; and</li> <li>• RACGP Fellowship Program - Practice Experience Program (PEP).</li> </ul> These streams are approved specified programs listed in Division 6 of the <i>Health Insurance Regulations 2018</i> (the Regulations).
Register	Register of Approved Placements is an electronic register maintained by Services Australia under s 3GA of the Act. Doctors placed on the Register satisfy the requirements of Section 19AA of the Act.
Regulations	<i>Health Insurance Regulations 2018</i> , made under the Act.
RLRP	The Rural Locum Relief Program allows doctors who are permanent residents or Australian citizens to access a Medicare Provider Number to work in rural and remote areas while they are working towards GP Fellowship. The RLRP closed to new entrants on 12 May 2019.
RTO	Regional Training Organisations – predominantly Commonwealth funded organisations which are accredited by ACRRM and RACGP to deliver training streams under the GP Fellowship Programs.
RVTS	The Remote Vocational Training Scheme is one of the training streams under the ACRRM or RACGP Fellowship Programs. This is a recognised program under the Act and is managed by the Remote Vocational Training Scheme Ltd.
SAPP	The primary purpose of the Special Approved Placements Program is to provide doctors who (due to exceptional circumstances) are unable to participate in other more formal general practice programs recognised under the Act. Applications are considered on a case-by-case basis by the Department of Health. The SAPP will be closing to new applicants in July 2019.
Services Australia	Services Australia, formerly known as the Department of Human Services (this includes Medicare Australia).
Specified Body	A Specified Body is an organisation that is responsible for administering programs or courses that are listed in Division 6 of the <i>Health Insurance Regulations 2018</i> . This includes the granting of 'Approved Placements'. A specified body: <ul style="list-style-type: none"> <li>• must be identified in Division 6 of the Regulations as being responsible for the relevant program;</li> <li>• can be an Australian Government Department, a medical college or a private entity;</li> <li>• can be responsible for several programs and courses; and</li> <li>• can share responsibility for the program or course with other specified bodies.</li> </ul>
Specified Programs	Section 3GA of the Act allows medical practitioners participating in specified programs (listed in the Regulations), to provide professional services that attract Medicare benefits for a defined period.
SRHS	The Australian Government Stronger Rural Health Strategy.
The Act	<i>Health Insurance Act 1973</i> .
VR-GP	A Vocationally Recognised doctor has obtained Fellowship of a specialist general practice medical college (FACRRM or FRACGP).
Vocationally registered	A vocationally registered doctor is a general practitioner who has been placed on the vocational register or Fellows list held by Medicare: <ul style="list-style-type: none"> <li>• as a Fellow of the ACRRM; or</li> <li>• as a Fellow of RACGP; or</li> <li>• based on historical eligibility requirements for the Vocational Register with Medicare.</li> </ul> Vocationally registered doctors have access to general practice items in the MBS.

### 3. GP FELLOWSHIP IN AUSTRALIA

Ensuring Australia has the best possible health workforce to deliver services to the community is essential. This involves having the right people with the right mix of skills, providing quality services at the right time and place, right around the country.

General Practitioners (GPs) play a central role in the delivery of health care to the Australian community as the first point of contact within the system.

The GP Fellowship programs all aim to:

- build a sustainable, high quality Australian trained and qualified health workforce;
- support the distribution of a high quality General Practice workforce across Australia and support community need, particularly regional, rural and remote locations; and
- provide clear GP training and qualification pathways and support, including the mechanism for doctors to provide services under the MBS while training.

These guidelines seek to ensure that the GP Fellowship Programs are working towards these objectives, with delivery of the programs underpinned by four core principles:

- **Support** – ensuring participants are appropriately supported and supervised (as applicable) during all their training placements which balance the needs of the practices with patient safety;
- **Momentum** – ensuring participants progress to GP Fellowship in a timely manner;
- **Quality** – ensuring all training providers hold College accreditation to maintain the standard for doctors providing general practice services to the community; and
- **Distribution** – support the equitable distribution of doctors in regional, rural and remote locations.

#### 4. GP FELLOWSHIP PROGRAM STRUCTURE

To be recognised and work independently as a specialist General Practitioner (GP), participants need to gain:

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

Both GP Fellowship Programs:

- lead to Vocational Recognition (VR) and registration under the specialist (GP) category with the Medical Board of Australia (MBA);
- are accredited by the Australian Medical Council (AMC) to ensure GPs provide safe, specialised, high-quality care; and
- upon attaining Fellowship, specialists will be able to work unsupervised as a GP anywhere in Australia (note – International Medical Graduates (IMGs) are subject to additional conditions of the *Health Insurance Act 1973* (the Act) that restrict the location they are able to work and access Medicare).

Each GP Fellowship Program has three distinct training streams to choose from that cater to both Commonwealth-supported and independent trainees.

	ACRRM Fellowship Program	RACGP Fellowship Program
Training Streams	<ul style="list-style-type: none"> <li>• Australian General Practice Training (AGPT) Program</li> <li>• Remote Vocational Training Scheme (RVTS)</li> <li>• Independent Pathway (IP)</li> </ul>	<ul style="list-style-type: none"> <li>• Australian General Practice Training (AGPT) Program</li> <li>• Remote Vocational Training Scheme (RVTS)</li> <li>• Practice Experience Program (PEP)</li> </ul>

Access requirements and eligibility criteria for each training stream are specified in individual policies (links provided in table below).

Participants need to successfully complete one training stream under one GP Fellowship Program and successfully pass the relevant College examinations to attain Fellowship of the relevant College.

The table below summarises the key features of each of the training streams available under the GP Fellowship Programs:

Fellowship Program	AGPT	RVTS	PEP	IP
Suited to	Recent medical graduates and experienced non-vocationally recognised doctors	Graduates and experienced non-vocationally recognised doctors, who have enough experience to cope with remote clinical supervision and who work in remote areas or Aboriginal Medical Services	Experienced non-vocationally recognised doctors who prefer self-directed learning	Experienced non-vocationally recognised doctors who prefer self-directed learning
Training Timeframes	4 years FTE* (FACRRM) 3 years FTE* (FRACGP)	4 years FTE* (FACRRM) 3 years FTE* (FRACGP)	6-48 months FTE for educational component);	4 years FTE*
Training Organisation	RTOs† accredited by ACRRM and RACGP	RVTS accredited by ACRRM and RACGP	RTOs† and RVTS in partnership with RACGP	ACRRM
Location restrictions	Metropolitan, regional, rural and remote facilities	Live and work in rural or remote community, or work in an Aboriginal Medical Service	Regional, rural and remote facilities	Rural and remote facilities with a possibility of some skills training in metropolitan or regional locations
Practice Placement	RTOs† will facilitate placements based on preferred location/s	Must already be employed as a GP in a rural or remote location or in an Aboriginal Community Controlled Health Service (ACCHS).	Must already be employed in a general practice or have a job offer with a general practice	Must be in an accredited teaching post within three months commencing training
Number of places available per year	Up to 1500	22 Remote Stream places 10 Aboriginal Community Controlled Health Service places	Demand based	Demand based
Application process	Apply to ACRRM and/or RACGP for a specific training region Complete the ACRRM and/or the RACGP selection process Accepted by an RTO† Commence training	Apply to RVTS Selection by RVTS Enrol with either ACRRM and/or RACGP Commence training	Apply to RACGP Pass the PEP entrance assessment See RACGP website for further information	Apply to ACRRM Complete the ACRRM Selection process See College website for further information
Fees	Training is fully Commonwealth funded Assessment fees are self-funded	Training is Commonwealth funded, some self-funding may be required Assessment fees are self-funded	Training is partially Commonwealth funded if eligible under the Non-VR FSP** Assessment fees are self-funded	Training is partially Commonwealth funded if eligible under the Non-VR (FSP)** Assessment fees are self-funded
Further information	<a href="#">AGPT</a>	<a href="#">RVTS</a>	<a href="#">PEP</a>	<a href="#">IP</a>

\* FTE Full-Time Equivalent

\*\*FSP Non-VR Fellowship Support Program

†RTOs Regional Training Organisations

Note: Dual GP Fellowship - Registrars who elect to train in the AGPT program can train towards Fellowships of both colleges in the same training region on the same pathway and complete the training concurrently. Contact your RTO for more information or visit the college websites.

## 5. ACCESSING THE MEDICARE BENEFIT SCHEDULE

Once accepted into a GP Fellowship Program, participants will need to apply for an Approved Placement, Medicare Provider Number (MPN) and have an Approved Placement entered into the Register of Approved Placements (the Register). The Register is managed by Services Australia.

Whilst working towards Fellowship of either College, participants will have access to the highest value MBS GP items during training to become a specialist GP.

The Act provides the legislative framework for Services Australia to enter doctors with Approved Placements on the Register. The Register is maintained by Services Australia under s 3GA of the Act. Persons with an Approved Placement can access the MBS for services they provide.

ACRRM, RACGP, RVTS Ltd and the Department of Health are currently identified as Specified Bodies for the purposes of paragraph 3GA(5)(a) of the Act for granting Approved Placements in their respective GP Fellowship Programs and notifying Services Australia of the

applicant's enrolment or that the applicant is undertaking a specified course. As responsibility for GP training transitions from the Department to the Colleges, full responsibility of processing Approved Placements is expected to be assumed by the Colleges and these guidelines will be updated. The Colleges are responsible for assisting participants to apply for an Approved Placement under the Act.

An Approved Placement is for a specific practice location and period of time (start and end date). An Approved Placement must be obtained for each location where participants have a MPN whilst working towards Fellowship. It is important that participants keep a record of Approved Placement expiry dates to ensure continued eligibility to access Medicare billing. Services Australia will not backdate any MPN applications they receive after the commencement date of a placement.

Once entered in the Register of Approved Placements, participants can:

- apply for a MPN with Services Australia for the practice location and period of the Approved Placement;
- request certain MBS services on behalf of their patients and refer their patients to other health professionals within the scope and conditions applicable to specific MBS items; and
- perform specified professional services that attract MBS benefits.

**Important:**

Participants are required to have a valid MPN and written confirmation from Services Australia that confirms access to Medicare benefits before they perform any specified professional services.

Under [section 19CC](#) of the Act, doctors providing professional services to patients without informing the patient that a MBS item is not payable, are committing an offence. An offence under Section 19CC is an offence of strict liability – see section 6.1 of the *Criminal Code*.

Participation in a formal pathway to Fellowship and access to a MPN are intrinsically linked.

For example:

Participants that are transitioning from a workforce program to a training program (i.e. PEP) will need to apply for a PEP Placement and update or create their MPN.

Once an applicant begins a placement on the PEP and leaves their previous workforce program, they will not be able to go back to their old program.

AMDS is the only program that can be undertaken concurrently with PEP or IP.

See page 12 for a full list of workforce programs.

To get a MPN, participants must not be covered by the prohibition set out in [section 19AA](#) and [section 19AB](#) of the Act in relation to the entitlement to be paid Medicare rebates. Holding an Approved Placement disengages the prohibition set out in section 19AA of the Act. International medical graduates who are subject to section 19AB will need to ensure that their practice location is in a Distribution Priority Areas in order to be eligible for a MPN.

For further information on applying for a MPN, please visit the relevant training stream website for policies and application forms.

### **FUTURE MPN APPLICATION PROCESSES (DIGITAL MPN REGISTRATION)**

Work is currently being undertaken to develop a new streamlined process for doctors on the GP training streams to access MPNs. This process is intended to eliminate the need to complete a manual application form by using existing data already held by Government. Third parties such as the Australian Health Practitioner Regulation Agency (AHPRA), the Colleges and RTOs will be able to send data directly to Services Australia, allowing provider numbers to be issued more swiftly.

Affected medical practitioners and organisations will be provided with advice and further instructions as this project progresses.

### **ELIGIBILITY FOR AN APPROVED PLACEMENT**

To be eligible for an Approved Placement in either of the GP Fellowship Programs, doctors must be enrolled in one of the training streams (AGPT, RVTS, IP or PEP) and must be registered to practise medicine with the MBA.

For more information about the medical registration categories and related practising rights, visit the [MBA website](#).

Eligible applicants include:

- doctors with general medical registration;
- (IMGs who completed their primary medical training with a competent authority<sup>1</sup> and who have been registered for a position in a general practice; and
- IMGs who hold limited medical registration under the Area of Need (AoN) rules for general practice; and
- meet eligibility requirements of the relevant College.

### **APPLICATION PROCESS FOR AN APPROVED PLACEMENT**

The application process for an Approved Placement is outlined in the relevant training stream policy.

For further information visit the relevant website for policies and application forms.

ACRRM: [acrrm.org.au](http://acrrm.org.au)

RACGP: [racgp.org.au](http://racgp.org.au)

Information is also available in the [General Practice Training in Australia \(the Guide\)](#)

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<sup>1</sup> Competent Authority degrees come from: the General Medical Council (UK), the Medical Council of Canada, Educational Commission for Foreign Medical Graduates of the United States, Medical Council of New Zealand and the Medical Council of Ireland.

## 6. PLACEMENT REQUIREMENTS

### LOCATION

#### For AGPT and RVTS

Location requirements for the AGPT and RVTS are governed by the policies applicable to these programs.

#### For IP

For participants on the IP training 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.

#### For PEP

Broadly PEP placements are limited to areas classified MM2-7. The only conditions through which PEP participants could take up a new placement in a MM1 location would be through approved exceptional circumstances.

*No MM1 placements for PEP participants will be approved unless the participant:*

- has been initially found by the RACGP to meet the definition of an exceptional circumstances exemption in the program policies; or
- enters the program already working in MM1 under an existing 3GA program\* if the doctor has not exhausted the maximum timeframes on the program (such as the Special Approved Placements Program (SAPP) or Rural Locum Relief Program (RLRP) and will be undertaking their PEP placement in the same location; or
- is already working in MM1 as a pre-1996 non-vocationally registered GP; or
- is an international medical graduate with substantially comparable specialist qualifications participating in the PEP under the PEP Specialist training pathway and will be working in a **Distribution Priority Area** (DPA) or a priority GP catchment area; or
- is relocating to a DPA or priority catchment area

Priority GP catchment areas will be identified by the Department of Health with an updated list to be provided to the RACGP each year

19AB Replacement Provisions under PEP:

The only circumstances that would be considered for granting a section 19AB exemption to a doctor seeking to participate on the PEP in a non-DPA area are:

- The practice was located within a DPA when employment negotiations commenced – documentary evidence must be provided
- The doctor commenced at the practice as a temporary resident while it was located within a DPA
- The doctor held an ongoing 3GA\* placement at the requested location and is seeking to move to the PEP from that program (including from the AMDS to an after-hours PEP).

\* 3GA program placements that were issued to allow a doctor to transition to an alternate training program will need to meet the PEP entry requirements. These are areas classified as MM2-7, it is also expected that applicants ensure they are meeting their s19AB requirements.

### Location Requirements for the IP

Participants of existing workforce programs entering the IP may be able to remain in the current work location providing that the facility meets the ACRRM Standards for Accreditation of Teaching Posts and the individuals training requirements. The participant is required to apply for an Approved Placement through ACRRM.

### Location Requirements for the PEP

The following table summarises location requirements for participants of existing training and workforce programs entering the PEP.

<b>Program</b>	<b>Location Requirements</b>
<ul style="list-style-type: none"><li>• Rural Locum Relief Program (RLRP)</li><li>• Special Approved Placements Program (SAPP)</li><li>• Temporary Resident Other Medical Practitioners Program (TROMPs)</li></ul>	<p>Participants who (at the time of application for entry into the PEP) were actively participating in one of these programs may remain in the same practice location(s) while participating in the PEP. If they wish to move to a new location, they must meet the PEP eligibility criteria (MMM 2-7).</p> <p>Note: 3GA program placements that were issued to allow a doctor to transition to an alternate training program will need to meet the PEP entry requirements. These are areas classified as MM2-7, it is also expected that applicants ensure they are meeting their s19AB requirements.</p>
<ul style="list-style-type: none"><li>• More Doctors for Rural Australia Program (MDRAP)</li></ul>	<p>Participants who were providing GP services via the MDRAP prior to entry into the PEP may remain in their MDRAP location. These participants will be restricted to Approved Placements in areas that have a MMM 2-7 classification.</p>
<ul style="list-style-type: none"><li>• Approved Medical Deputising Service (AMDS) Program</li></ul>	<p>AMDS program doctors entering the PEP can:</p> <ul style="list-style-type: none"><li>• participate in PEP education activities</li><li>• continue to provide services in the after-hours period through their AMDS provider using a PEP provider number</li><li>• apply for business hours placement in MMM classification 2-7 in addition to, or instead of, their AMDS work; and</li><li>• work during business hours work in MMM1 would be subject to exceptional circumstances and (if approved) granted for a limited period of time</li></ul> <p>Note: AMDS program may be done concurrently with the PEP. Doctors who wish to undertake additional AMDS work outside their PEP placement can potentially do so, using an AMDS program provider number. Doctors who wish to use a PEP provider number for their AMDS work (hence attracting higher rebates) will need to transfer from the AMDS program to the PEP and fulfil PEP requirements. A new AMDS placement will only be granted so long as it is concurrent with daytime practice in areas classified as MM2-7. A PEP participant cannot work in two AMDS practices concurrently unless they entered PEP with two AMDS provider numbers and cannot move solely into AMDS if they have not come in to the program doing so.</p>

### **PLACEMENTS FOR DUAL FELLOWSHIP QUALIFICATION**

A single MPN application for an appropriate Approved Placement needs to be submitted through one College (not both) for those who are undertaking FACRRM and FRACGP concurrently.

It is the responsibility of registrars and participants, RTOs 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 access the MBS, a medical practitioner must be enrolled in a specified program and placed on the Register of Approved Placements (the Register) for the duration of their time on the program. The Register is maintained by Services Australia.

The Colleges are responsible for determining the duration of each Approved Placement for the relevant training stream and the specific needs of the participant and training post. The Colleges will notify Services Australia of the commencement and end dates of an Approved Placement. When participants cease the program, Services Australia will remove them from the Register.

The focus of recent changes to GP training is to create momentum for participants to achieve a specialist GP qualification through obtaining Fellowship. Once a non-VR medical practitioner joins a pathway to Fellowship, they will be prevented from enrolling in other workforce programs (i.e. RLRP, SAPP, TROMP or MDRAP programs).

Note: In 2019 a number of programs closed to new participants:

- From 1 January 2019, the Other Medical Practitioner (OMP programs).
- From 1 July 2019, the Rural Locum Relief Program (RLRP) and the Special Approved Placements Program (SAPP).
- Under grandfathering arrangements, doctors who are participating on any of these programs will be given to 30 June 2023 to fulfil their commitment to obtain Fellowship.

#### **RENEWAL OF PLACEMENTS**

When considering a placement renewal request, the Colleges have the right to:

- assess the merits of the renewal request according to the standards and guidelines for the relevant training stream;
- revise the start and end dates of the Approved Placement (for future dated placements); and
- apply additional conditions that are deemed necessary for the doctor to achieve Fellowship. This includes the right for a doctor to relocate to an alternate training practice location.

Once the Colleges or an organisation operating under the delegation of the College has agreed to renew a participant's Approved Placement, the process for renewing is similar to the steps outlined in these guidelines under Application Process for Approved Placement.

A MPN application must be made so that Services Australia 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.

The Services Australia assessment process can take up to six weeks in peak processing periods. Program participants are advised to begin the process of seeking an extension of

their Approved Placement from the relevant College at least ten weeks before the projected end date of their training/experience placement is renewed.

#### **BACKDATING TRAINING PLACEMENTS**

Approved Placements may not commence earlier than the date of entry on the Register of Approved Placements. The Specified Body will not grant a “backdated” Approved 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.

International Medical Graduates or Foreign Graduates of an Accredited Medical School (FGAMs) will be able to access Medicare benefits after the approval of an exemption under section 19AB of the Act. This is irrespective of the approval of an Approved Placement.

Section 19AB exemptions are granted prospectively and are not backdated to coincide with the Approved Placement approval date.

#### **TERMINATION OF PLACEMENT**

The relevant College or the Department will send notification to Services Australia 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 participant to advise the College or the training organisation working under the auspices of the College (e.g. RTOs and the RVTS Ltd) within **ten working days** of the termination.

Each training stream has policies which govern when a participant may be withdrawn from training.

On achievement of Fellowship, the relevant College will distribute required Fellowship documentation enabling the practitioner to apply for an updated MPN.

#### **REQUEST OF REVIEW**

Each training stream has policies which govern review processes.

## 7. CONTACT DETAILS

### The Department of Health

Telephone: 1800 DR AGPT (1800 37 2478) or for international callers: +61 2 6289 2666

Website: [agpt.com.au](http://agpt.com.au)

Email: [AGPTeligibility@health.gov.au](mailto:AGPTeligibility@health.gov.au)

### Australian College of Rural and Remote Medicine (ACRRM)

Telephone: 1800 223 226

Website: [acrrm.org.au](http://acrrm.org.au)

Email: [training@acrrm.org.au](mailto:training@acrrm.org.au)

### Royal Australian College of General Practitioners (RACGP)

Telephone: 1800 472 247

Website: [racgp.org.au](http://racgp.org.au)

Email: [racgpeducation@racgp.org.au](mailto:racgpeducation@racgp.org.au)

### Remote Vocational Training Scheme (RVTS)

Telephone: 02 6057 3400

Website: [rvts.org.au](http://rvts.org.au)

Email: [rvts@rvts.org.au](mailto:rvts@rvts.org.au)

### Services Australia

For information about Medicare provider numbers and Medicare benefits email:

[Medicare.prov@humanservices.gov.au](mailto:Medicare.prov@humanservices.gov.au)

## REGIONAL TRAINING ORGANISATIONS

### AUSTRALIAN CAPITAL TERRITORY/ NEW SOUTH WALES

Western New South Wales

GP Synergy

W: [gpsynergy.com.au](http://gpsynergy.com.au)

T: 1300 477 963 (International: +61 2 8321 4000)

E: [applicant@gpsynergy.com.au](mailto:applicant@gpsynergy.com.au)

### NEW SOUTH WALES

Lower Eastern New South Wales

GP Synergy

W: [gpsynergy.com.au](http://gpsynergy.com.au)

T: 1300 477 963 (International: +61 2 8321 4000)

E: [applicant@gpsynergy.com.au](mailto:applicant@gpsynergy.com.au)

North Eastern New South Wales

GP Synergy

W: [gpsynergy.com.au](http://gpsynergy.com.au)

T: 1300 477 963 (International: +61 2 8321 4000)

E: [applicant@gpsynergy.com.au](mailto:applicant@gpsynergy.com.au)

### VICTORIA

Eastern Victoria

Eastern Victoria GP Training

W: [evgptraining.com.au](http://evgptraining.com.au)

T: 1300 851 753

E: [evgptraining.com.au](http://evgptraining.com.au)

Western Victoria

Murray City Country Coast GP Training

W: [mccc.com.au](http://mccc.com.au)

P: 1300 622 247

E: [info@mccc.com.au](mailto:info@mccc.com.au)

### TASMANIA

General Practice Training Tasmania

W: [gptt.com.au](http://gptt.com.au)

T: (03) 6215 5000

E: [enquiries@gptt.com.au](mailto:enquiries@gptt.com.au)

### SOUTH AUSTRALIA

GPEX

W: [gpex.com.au](http://gpex.com.au)

T: 1300 473 972 or (08) 8490 0400

E: [selection@gpex.com.au](mailto:selection@gpex.com.au)

### QUEENSLAND

North Western Queensland

GP Training James Cook University

W: [jcugp.edu.au](http://jcugp.edu.au)

T: (07) 4781 3262

E: [gpselections@jcu.edu.au](mailto:gpselections@jcu.edu.au)

South Eastern Queensland

General Practice Training Queensland

W: [gptq.qld.edu.au](http://gptq.qld.edu.au)

T: (07) 3552 8100

E: [gptq@gptq.qld.edu.au](mailto:gptq@gptq.qld.edu.au)

### WESTERN AUSTRALIA

Western Australian General Practice Education and Training

W: [wagpet.com.au](http://wagpet.com.au)

T: (08) 9473 8200

E: [gpcareers@wagpet.com.au](mailto:gpcareers@wagpet.com.au)

### NORTHERN TERRITORY

Northern Territory General Practice Education

W: [ntgpe.org](http://ntgpe.org)

T: (08) 8946 7079

E: [registrar@ntgpe.org](mailto:registrar@ntgpe.org)

## 8. APPENDIX A

### SUMMARY OF RECENT KEY CHANGES TO GENERAL PRACTICE TRAINING

#### MBS Access Reforms

Changes have been made to the way GPs are funded through Medicare to better recognise their level of expertise and the quality of service they provide. From 1 July 2018, a new MBS rebate structure was introduced for non-VR doctors. The new rebate structure provides new MBS items for non-VR doctors, worth 80% of the equivalent VR GP item for services provided in (MM) 2–7 locations.

By enrolling in a GP Fellowship Program with the ACRRM or RACGP, participants seeking to become a specialist GP will continue to have access to the highest value MBS items during training, until they reach the time limit set by their College.

<b>Access to Medicare Rebates</b>		
<b>General Practice Fellowship Program Training Streams</b>	<b>MM1 - 7</b>	
Australian General Practice Training Program (AGPT)	100%	
Remote Vocational Training Scheme (RVTS)	100%	
ACRRM Independent Pathway (ACRRM IP)	100%	
Practice Experience Program (RACGP PEP)	100%	
<b>General Practice Workforce Programs</b>	<b>MM1</b>	<b>MM 2-7</b>
Rural Locum Relief Program (RLRP) <sup>(1)</sup>	60%	80%
Approved Medical Deputising Service Program (AMDS)	60%	80%
Special Approved Placements Program (SAPP)	60%	80%
Queensland Country Relieving Doctors Program (QCRD)	N/A	80%
Temporary Resident Other Medicare Practitioner Program (TROMP)	60%	80%
More Doctors for Rural Australia Program (MDRAP)	N/A	80%

(1) Some participants in the RLRP will have access to 60% rebates in select MM1 regions due to differences between the Modified Monash Model and the Rural, Remote Metropolitan Area classification which was the basis of the RLRP.

#### Rebates

60% - A2 items in the MBS Schedule

80% - A7 items in the MBS Schedule - for 'medical practitioners'

100% - All items in the MBS Schedule marked for 'General Practitioners' Includes A1, A11 and A22 group items

A grandfathering period for existing non-specialist doctors participating in the 'Other Medical Practitioner' programs is in place. After 30 June 2023, participants who do not have vocational recognition will only be able to access the lower tier MBS GP Items (80% of the equivalent VR GP item for services).

#### Non-Vocationally Registered Fellowship Support Program

To support and encourage non-VR doctors to attain higher qualifications, the Government is providing a subsidy to the Colleges to support training needs under the Fellowship Support Program (FSP). This program is an opportunity to assist non-VR doctors providing GP services to attain Fellowship and therefore GP specialist status. Participating doctors will also be expected to contribute a co-payment.

The FSP will be administered by the two Colleges.

- the ACRRM will deliver the FSP through their Independent Pathway (IP); and
- the RACGP will deliver the FSP through their Practice Experience Program (PEP).

### More Doctors for Rural Australia Program (MDRAP)

The MDRAP supports non-VR doctors to gain valuable general practice experience in rural and remote communities prior to joining one of the GP Fellowship Program streams. The MDRAP also supports junior doctors and locums providing services in rural and remote communities.

For some doctors, MDRAP will be the first step to joining a GP Fellowship Program, by gaining general practice experience while participating in selection processes.

Through MDRAP, Australian trained non-VR doctors will be able to obtain a MPN and work in private practices, including in rural and remote areas.

For more information on MDRAP, visit your relevant Rural Workforce Agency's website.

### Other Workforce Programs

From 1 January 2019, the Other Medical Practitioner (OMP programs), were closed to new participants. Under grandfathering arrangements, doctors who are participating on one of the OMPs programs will be given to 30 June 2023 to fulfil their commitment to obtain Fellowship.

From 1 July 2019, the Rural Locum Relief Program (RLRP) and the Special Approved Placements Program (SAPP) will be closed to new participants. Under grandfathering arrangements, doctors who are participating on either of these programs will be given to 30 June 2023 to fulfil their commitment to obtain Fellowship.

### Transition of GP Training to the Colleges

Responsibility for the management of the GP Fellowship program will transition from the Commonwealth Department of Health to the two Colleges between 2019 and 2021. The ACRRM and RACGP will assume full responsibility for the program by 2022.

The impact on participants on existing pathways to Fellowship will be minimal and trainees will continue to work towards achieving their specialist qualification.