

Health Insurance Amendment (Midwives) Regulation 2013

Select Legislative Instrument No. 186, 2013

I, Quentin Bryce AC CVO, Governor‑General of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following regulation under the *Health Insurance Act 1973*.

Dated 25 July 2013

Quentin Bryce

Governor‑General

By Her Excellency’s Command

Tanya Plibersek

Minister for Health and Medical Research

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1 Name of regulation

 This regulation is the *Health Insurance Amendment (Midwives) Regulation 2013*.

2 Commencement

 This regulation commences on 1 September 2013.

3 Authority

 This regulation is made under the *Health Insurance Act 1973.*

4 Schedule(s)

 Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1—Amendments

Health Insurance Regulations 1975

1 Paragraph 2C(1)(a)

Repeal the paragraph, substitute:

 (a) an arrangement under which the midwife:

 (i) is employed or engaged by one or more obstetric specified medical practitioners, or by an entity that employs or engages one or more obstetric specified medical practitioners; or

 (ii) has an agreement, in writing, with an entity, other than a hospital, that employs or engages one or more obstetric specified medical practitioners;

2 At the end of subregulation 2C(1)

Add:

 ; (e) an arrangement mentioned in regulation 2EA for the midwife.

3 At the end of regulation 2C

Add:

 (5) To avoid doubt, a collaborative arrangement may involve a specified medical practitioner who is in private practice or in the public sector.

4 After regulation 2E

Insert:

2EA Arrangement—midwife credentialed for a hospital

 (1) For paragraph 2C(1)(e), in relation to a hospital, an eligible midwife is:

 (a) credentialed to provide midwifery services after successfully completing a formal process to assess the midwife’s competence, performance and professional suitability; and

 (b) given clinical privileges for a defined scope of clinical practice for the hospital; and

 (c) permitted to provide midwifery care to his or her own patients at the hospital.

 (2) The hospital must employ or engage one or more obstetric specified medical practitioners.