

Health Insurance (Professional Services Review Scheme) Regulations 2019

I, General the Honourable Sir Peter Cosgrove AK MC (Ret’d), Governor‑General of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following regulations.

Dated 21 February 2019

Peter Cosgrove

Governor‑General

By His Excellency’s Command

Greg Hunt

Minister for Health

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Part 1—Preliminary

1 Name

 This instrument is the *Health Insurance (Professional Services Review Scheme) Regulations 2019*.

2 Commencement

 (1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

| Commencement information |
| --- |
| Column 1 | Column 2 | Column 3 |
| Provisions | Commencement | Date/Details |
| 1. The whole of this instrument | The day after this instrument is registered. | 23 February 2019 |

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

 (2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

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

4 Schedules

 Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

5 Definitions

Note: A number of expressions used in this instrument are defined in the Act, including the following:

(a) general medical services table;

(b) general practitioner;

(c) Human Services Department;

(d) medical practitioner;

(e) professional service.

 In this instrument:

***Act*** means the *Health Insurance Act 1973*.

***practitioner*** has the same meaning as in Part VAA of the Act.

***relevant service*** means a service specified in an item in group A1, A2, A5, A6, A7, A9, A11, A13, A14, A15, A17, A18, A19, A20, A21, A22 or A23 of Part 2 of the general medical services table.

***service*** has the same meaning as in Part VAA of the Act.

Part 2—Prescribed matters for definitions

6 Standards for adequate and contemporaneous records

 For the purposes of the definition of ***adequate and contemporaneous records*** in subsection 81(1) of the Act, the standards for a record of the rendering or initiation of services to a patient by a practitioner are that:

 (a) the record must include the name of the patient; and

 (b) the record must contain a separate entry for each attendance by the patient for a service; and

 (c) each separate entry for a service must:

 (i) include the date on which the service was rendered or initiated; and

 (ii) provide sufficient clinical information to explain the service; and

 (iii) be completed at the time, or as soon as practicable after, the service was rendered or initiated; and

 (d) the record must be sufficiently comprehensible to enable another practitioner to effectively undertake the patient’s ongoing care in reliance on the record.

7 Exceptional circumstances in relation to inappropriate practice

 For the purposes of subsection 82(1D) of the Act, each of the following circumstances are exceptional circumstances for a particular day for a practitioner:

 (a) an unusual occurrence causing an unusual level of need for relevant services on the day;

 (b) an absence, on the day, of other medical services for the practitioner’s patients, having regard to:

 (i) the location of the practitioner’s practice; and

 (ii) the characteristics of the practitioner’s patients.

8 Circumstances for medical practitioners for prescribed pattern of services

 For the purposes of section 82A of the Act, circumstances in which services rendered or initiated by a medical practitioner constitute a ***prescribed pattern of services*** are that the medical practitioner renders or initiates 80 or more relevant services on each of 20 or more days in a 12 month period.

Part 3—Professional Services Review Committees

9 Allowances for witnesses at hearings

 (1) This section is made for the purposes of subsection 106C(1) of the Act and deals with allowances for expenses in respect of attendance by a person summoned to appear as a witness at a hearing before a Professional Services Review Committee.

Kinds of allowances

 (2) The allowances for a witness are the following:

 (a) attendance allowance in accordance with subsection (3) or (4) as applicable;

 (b) travel allowance in accordance with subsection (5).

Amount of attendance allowance

 (3) For a witness attending because of the witness’ professional, scientific or other special skill or knowledge, the amount of attendance allowance is equal to the witness’ actual fees for preparing to give evidence and of attending to give evidence.

 (4) For a witness other than a witness mentioned in subsection (3), the amount of attendance allowance is equal to:

 (a) if the witness is paid by salary—any salary actually lost because of the attendance; or

 (b) if the witness is paid by wages—any wages actually lost because of the attendance; or

 (c) if the witness is paid by fees—any fees actually lost because of the attendance;

up to a maximum of $527 per day.

Amount of travel allowance

 (5) The amount of travel allowance for a witness is a reasonable amount, determined in relation to the witness by the Professional Services Review Committee, for:

 (a) transport to and from the hearing; and

 (b) if the witness is required to be absent overnight from the witness’ usual place of residence—meals and accommodation during the absence.

Part 4—Referral of professional issues to regulatory and other bodies

10 Specified persons and bodies—significant threat to life or health

 (1) For the purposes of paragraph 106XA(4)(a) of the Act, this section specifies persons and bodies for persons who render professional services.

General practitioners

 (2) The following persons and bodies are specified for a person who renders professional services who is a general practitioner:

 (a) the Australian College of Rural and Remote Medicine;

 (b) Australian General Practice Accreditation Limited;

 (c) the Australian Health Practitioner Regulation Agency;

 (d) the Health Care Complaints Commission of New South Wales;

 (e) the Health Ombudsman of Queensland;

 (f) the Medical Board of Australia;

 (g) the Medical Council of New South Wales;

 (h) Quality Practice Accreditation Pty Ltd;

 (i) the Royal Australian College of General Practitioners.

Persons who are not general practitioners

 (3) The following persons and bodies are specified for a person who renders professional services who is not a general practitioner:

 (a) the Aboriginal and Torres Strait Islander Health Practice Board of Australia;

 (b) the Australian Health Practitioner Regulation Agency;

 (c) the Chinese Medicine Board of Australia;

 (d) the Chiropractic Board of Australia;

 (e) the Dental Board of Australia;

 (f) the Department;

 (g) the Health Ombudsman of Queensland;

 (h) the Human Services Department;

 (i) the Medical Board of Australia;

 (j) the Medical Council of New South Wales;

 (k) the Medical Radiation Practice Board of Australia;

 (l) the Nursing and Midwifery Board of Australia;

 (m) the Optometry Board of Australia;

 (n) the Osteopathy Board of Australia;

 (o) the Paramedicine Board of Australia;

 (p) the Pharmacy Board of Australia;

 (q) the Physiotherapy Board of Australia;

 (r) the Podiatry Board of Australia;

 (s) the Psychology Board of Australia.

11 Specified bodies—non‑compliance with professional standards

General practitioners

 (1) For the purposes of paragraph 106XB(3)(a) of the Act, a body is specified in relation to a practitioner who is a general practitioner if:

 (a) the body:

 (i) is specified in subsection 10(2) of this instrument; and

 (ii) has the power to take action against the practitioner if the practitioner has failed to comply with professional standards; or

 (b) the body has the function of assisting a person who:

 (i) is specified in subsection 10(2) of this instrument; and

 (ii) has the power to take action against the practitioner if the practitioner has failed to comply with professional standards.

Practitioners who are not general practitioners

 (2) For the purposes of paragraph 106XB(3)(b) of the Act, a body is specified in relation to a practitioner who is not a general practitioner if:

 (a) the body:

 (i) is specified in subsection 10(3) of this instrument; and

 (ii) has the power to take action against the practitioner if the practitioner has failed to comply with professional standards; or

 (b) the body has the function of assisting a person who:

 (i) is specified in subsection 10(3) of this instrument; and

 (ii) has the power to take action against the practitioner if the practitioner has failed to comply with professional standards.

Schedule 1—Repeals

Health Insurance (Professional Services Review) Regulations 1999

1 The whole of the instrument

Repeal the instrument.