

## EXPLANATORY STATEMENT

### *Health Insurance Act 1973*

#### *Health Insurance (Section 3C General Medical Services – Allied Health Services) Amendment (No. 1) Determination 2024*

Subsection 3C(1) of the *Health Insurance Act 1973* (the Act) provides that the Minister may, by legislative instrument, determine that a health service not specified in an item in the general medical services table (the Table) shall, in specified circumstances and for specified statutory provisions, be treated as if it were specified in the Table.

The Table is set out in the regulations made under subsection 4(1) of the Act. The most recent version of the regulations is the *Health Insurance (General Medical Services Table) Regulations 2021*.

This instrument relies on subsection 33(3) of the *Acts Interpretation Act 1901* (AIA). Subsection 33(3) of the AIA provides that where an Act confers a power to make, grant or issue any instrument of a legislative or administrative character (including rules, regulations or by-laws), the power shall be construed as including a power exercisable in the like manner and subject to the like conditions (if any) to repeal, rescind, revoke, amend, or vary any such instrument.

#### **Purpose**

On 1 March 2024, the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Determination 2024* (the Principal Determination) will repeal and remake the *Health Insurance (Allied Health Services) Determination 2014* (the Former Determination), which is due to sunset on 1 April 2024.

The purpose of the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Amendment (No. 1) Determination 2024* (the Amendment Determination) is to make administrative amendments to three allied health items (10953, 10966 and 82382) to address issues identified following registration of the Principal Determination on the Federal Register of Legislation. The Amendment Determination will commence immediately after the commencement of the Principal Determination on 1 March 2024.

#### **Consultation**

No consultation was undertaken regarding the changes in the Amendment Determination as they are machinery in nature and intended to address administrative errors identified in the Principal Determination.

The Amendment Determination is a legislative instrument for the purposes of the *Legislation Act 2003*.

The Amendment Determination commences immediately after the commencement of the Principal Determination.

Details of the Amendment Determination are set out in the [Attachment](#).

Authority: Subsection 3C(1) of the  
*Health Insurance Act 1973*

## ATTACHMENT

**Details of the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Amendment (No. 1) Determination 2024***Section 1 – Name

Section 1 provides for the Amendment Determination to be referred to as the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Amendment (No. 1) Determination 2024* (the Amendment Determination).

Section 2 – Commencement

Section 2 provides for the Determination to commence immediately after the commencement of the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Determination 2024*.

Section 3 – Authority

Section 3 provides that the Determination is made under subsection 3C(1) of the *Health Insurance Act 1973*.

Section 4 – Schedules

Section 4 provides that each instrument that is specified in a Schedule to this Determination is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this Determination has effect according to its terms.

Schedule 1 – Amendments

*Health Insurance (Section 3C General Medical Services – Allied Health Services) Determination 2024*

**Item 1** amends item 10953 to replace “items” with “item” to align the item descriptor with other items listed in Group M3.

**Item 2** amends item 10966 to address a typographical error in the item descriptor and correctly reference the “Telehealth and Telephone Determination”.

**Item 3** amends item 82382 to address a typographical error in the schedule fee and insert the current schedule fee for this service of \$24.55.

## Statement of Compatibility with Human Rights

*Prepared in accordance with Part 3 of the Human Rights (Parliamentary Scrutiny) Act 2011*

*Health Insurance (Section 3C General Medical Services – Allied Health Services) Amendment (No. 1) Determination 2024*

This instrument is compatible with the human rights and freedoms recognised or declared in the international instruments listed in section 3 of the *Human Rights (Parliamentary Scrutiny) Act 2011*.

### Overview of the Determination

On 1 March 2024, the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Determination 2024* (the Principal Determination) will repeal and remake the *Health Insurance (Allied Health Services) Determination 2014* (the Former Determination), which is due to sunset on 1 April 2024.

The purpose of the *Health Insurance (Section 3C General Medical Services – Allied Health Services) Amendment (No. 1) Determination 2024* (the Amendment Determination) is to make administrative amendments to three allied health items (10953, 10966 and 82382) to address issues identified following registration of the Principal Determination on the Federal Register of Legislation.

### Human rights implications

This instrument engages Articles 9 and 12 of the International Covenant on Economic Social and Cultural Rights (ICESCR), specifically the rights to health and social security.

#### *The Right to Health*

The right to the enjoyment of the highest attainable standard of physical and mental health is contained in Article 12(1) of the ICESCR. The UN Committee on Economic Social and Cultural Rights (the Committee) has stated that the right to health is not a right for each individual to be healthy, but is a right to a system of health protection which provides equality of opportunity for people to enjoy the highest attainable level of health.

The Committee reports that the '*highest attainable standard of health*' takes into account the country's available resources. This right may be understood as a right of access to a variety of public health and health care facilities, goods, services, programs, and conditions necessary for the realisation of the highest attainable standard of health.

#### *The Right to Social Security*

The right to social security is contained in Article 9 of the ICESCR. It requires that a country must, within its maximum available resources, ensure access to a social security scheme that provides a minimum essential level of benefits to all individuals and families that will enable them to acquire at least essential health care. Countries are obliged to demonstrate that every effort has been made to use all resources that are at their disposal in an effort to satisfy, as a matter of priority, this minimum obligation.

The Committee reports that there is a strong presumption that retrogressive measures taken in relation to the right to social security are prohibited under ICESCR. In this context, a retrogressive measure would be one taken without adequate justification that had the effect of reducing existing levels of social security benefits, or of denying benefits to persons or groups previously entitled to them. However, it is legitimate for a Government to re-direct its limited

resources in ways that it considers to be more effective at meeting the general health needs of all society, particularly the needs of the more disadvantaged members of society.

*The right of equality and non-discrimination*

The rights of equality and non-discrimination are contained in articles 2, 16 and 26 of the International Covenant on Civil and Political Rights (ICCPR). Article 26 of the ICCPR requires that all persons are equal before the law, are entitled without any discrimination to the equal protection of the law and in this respect, the law shall prohibit any discrimination and guarantee to all persons equal and effective protection against discrimination on any ground such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

Analysis

This instrument maintains the rights to health and social security and the right of equality and non-discrimination as it implements administrative and machinery changes, maintaining the current arrangements for services provided under items 10953, 10966 and 82382.

**Conclusion**

This instrument is compatible with human rights as it maintains the right to health and the right to social security and the right of equality and non-discrimination.

**Louise Riley**  
**Assistant Secretary**  
**MBS Policy and Reviews Branch**  
**Medicare Benefits and Digital Health Division**  
**Health Resourcing Group**  
**Department of Health and Aged Care**