



Taskforce Recommendations	Government Response	Details of Government Response
<p><b>1</b> No changes to the 24 non-urgent (standard) after-hours items.</p>	<p><b>Accepted</b></p>	<p>No changes to the 24 non-urgent (standard) after-hours items.</p>
<p>Restrict the use of urgent after-hours items to GPs and other medical practitioners (OMPs) predominantly working within a general practice setting.</p> <p>Doctors employed by a Medical Deputising Service (MDS) or obtaining work from a MDS will not be permitted to claim urgent after-hours items.</p> <p><b>2</b> Current rebate: <b>\$129.80</b> Suggested new rebate: <b>\$74.95<sup>^</sup></b> (for doctors working for MDSs or predominantly in the after-hours period)</p>	<p><b>Modified</b></p>	<p>Maintain the use of urgent after-hours items to all practitioners, but modifying items and rebates for OMPs:</p> <p>Introduce a new urgent after-hours item with lower priced rebate for OMPs providing urgent after-hours services in metro areas (MMM 1 – 2).            Current rebate: <b>\$129.80</b>            1 Mar 2018 rebate: <b>\$100</b>            1 Jan 2019 rebate: <b>\$90</b></p> <p>Maintain the current rebate and use of urgent after-hours items for VR GPs, GP registrars and OMPs who work predominately during in-hours.</p> <p>Maintain the current rebate and use of urgent after-hours items to all doctors working in the unsociable period (between 11pm and 7am).</p> <p>Maintain the current rebate and use of urgent after-hours items to all doctors providing urgent after-hours services in rural and remote areas (MMM 3 – 7).</p>
<p><b>3</b> Replace the current wording of “the patient’s condition requires urgent medical treatment” with “the patient’s condition requires urgent medical assessment”.</p>	<p><b>Accepted</b></p>	<p>Revising urgent after-hours item descriptors to include “the patient’s medical condition requires urgent assessment”.</p>
<p><b>4</b> Require urgent after-hours services to be requested in the same unbroken after-hours period during which the attendance occurs.</p>	<p><b>Accepted</b></p>	<p>Ceasing the ability to pre-book urgent after-hours services (up to two hours) before the after-hours period.</p>
<p><b>5</b> Require that the attending practitioner determines that the urgent assessment of the patient’s condition is required.</p>	<p><b>Accepted</b></p>	<p>Changes will be made to ensure that the attending practitioner determines that the urgent assessment of the patient’s condition is required.</p>
<p><b>6</b> Provide a fuller definition of ‘urgent’.</p>	<p><b>Accepted</b></p>	<p>Revising the rules for urgent after-hours items to define that a patient’s medical condition requires urgent medical assessment if:</p> <ol style="list-style-type: none"> <li>1. medical opinion is to the effect that the patient’s medical condition requires assessment within the unbroken after-hours period in which the urgent after-hours attendance was requested; and</li> <li>2. assessment could not be delayed until the start of the next in-hours period.</li> </ol>
<p><b>7</b> Professional Services Review (PSR) to continue to monitor clinician use of after-hours MBS items.</p>	<p><b>Accepted</b></p>	<p>Professional Services Review (PSR) to continue to monitor clinician use of after-hours MBS items.</p>

**Other measures in response not proposed by Taskforce**

<b>Subsequent items</b>	Introduce a new urgent after-hours item with a flat fee for subsequent attendances at the same location for each additional patient.  Current rebate: derived fee - <b>\$74.95</b> for the 1st subsequent, down to <b>\$51</b> for 7 <sup>th</sup> subsequent for VR GPs and non-VR GPs on a workforce program* derived fee - <b>\$43.50</b> for the 1st subsequent, down to <b>\$26.70</b> for 7 <sup>th</sup> subsequent for non-VR GPs not on a workforce program*.  1 Mar 2018 rebate: <b>\$41.95</b> for all GPs for every subsequent attendance (no derived fee)
<b>Advertising</b>	Aligning advertising of deputising services with AHPRA requirements.
<b>Triaging</b>	Introducing minimum triaging standards for medical deputising service providers, to better identify patients in need of urgent after-hours services.

\*subsequent attendances in addition to the 7<sup>th</sup> subsequent attendance used a derived fee stated on MBS online.

^for a level B consultation, under the standard (non-urgent) after-hours items.