



# Fact Sheet: Strengthening Medicare – Pre-Fellowship Program

2 April 2024

THIS FACT SHEET PROVIDES INFORMATION ON THE STRENGTHENING MEDICARE – PRE-FELLOWSHIP PROGRAM (PFP)

## Background

In the May 2023 Budget, the Australian Government provided \$30.5 million over two years from 2023-24 for a trial of the Pre-Fellowship Program (PFP). Rural Workforce Agencies (RWAs) will deliver the pilot. The PFP pilot, which replaces the More Doctors for Rural Australia Program (MDRAP), starts on 2 April 2024.

## What is the purpose of the Program?

Through the PFP, the Government aims to support Overseas Trained Doctors and Foreign Graduates of an Accredited Medical School (also known as International Medical Graduates (IMGs)) and other non-vocationally recognised (non-VR) doctors to gain valuable general practice experience and improve access to health care for Australians where it is most needed.

The PFP will allow doctors to offer services under Medicare.

In addition, IMGs with provisional or limited registration will also receive financial support in the form of funding for supervision and for learning and development.

## Who is eligible for the Program?

To have a placement on the PFP, the doctor, location and practice must meet minimum requirements.

### *Doctor eligibility*

The PFP is open to IMGs and other non-VR doctors who are Australian citizens, permanent residents and temporary residents. Doctors can have general, provisional or limited registration.

To be eligible for a PFP placement, a doctor must meet the following criteria:

- hold current registration with the Medical Board of Australia
- have an offer of employment and the needed skills and experience to perform the role
- provide evidence of appropriate support in place to meet supervision requirements if applicable
- undertake GP professional development activities, including compulsory modules
- review readiness for fellowship training, in conjunction with their medical adviser, every 3 months, and
- take active steps to join a GP College-led Fellowship pathway in the defined period.

Participants working in an outer metropolitan location should note, they may need to move location when they join a GP College-led Fellowship pathway. This is to satisfy eligibility requirements for that program.

A doctor is not eligible to join PFP if they:

- have previously been on a 3GA program
- are currently on MDRAP
- are vocationally registered.

Once a doctor departs the PFP to join a GP College-led Fellowship program, they are ineligible to return to the PFP.

#### *Location*

To be eligible for a PFP placement, the practice must be located within:

- a Distribution Priority Area, or
- classified as an Aboriginal Medical Service (AMS) or that are the subject of a Ministerial direction under s19(2) or s19(5) of the Act, or
- classified as an Aboriginal Community-Controlled Health Service or be the subject of Ministerial direction under s19(2) or a s19(5) of the Act.

Search the [Health Workforce Locator](#) to find eligible locations.

#### *Practice*

Medical practices who employ a doctor participating in the PFP must:

- be in an eligible location
- be accredited, meeting minimum safety and quality standards under the National General Practice Accreditation (NGPA) Scheme, and
- be accredited or working towards accreditation, as a training practice with the Australian College of Rural and Remote Medicine (ACRRM) or the Royal Australian College of General Practitioners (RACGP).

Practices will be prioritised dependent on workforce need by the RWA's Health Workforce Needs Assessment.

After-hours only placements or placements at Urgent Care Clinics (UCC) are **not** available under this program.

### **What support does the Program provide?**

The PFP will allow access to a Medicare provider number, allowing doctors to offer services under Medicare.

Placements are for a maximum of two years.

#### *Supervision*

Only supervisors of IMGs on limited or provisional supervision are eligible to receive payments under the PFP.

A small allocation in the supervision payments may be paid to the practice to cover administration and related costs of hosting a PFP doctor (up to 10 per cent).

The supervisor/practice will need an agreement with the RWA. Evidence will be required to show the supervisor has undertaken the agreed supervision and met all the requirements and responsibilities set out in their supervision agreement with the RWA.

Payments are intended to give supervisors and practices, especially those in smaller rural areas, with financial support. Payments represent (some) loss of revenue by a supervisor in supporting the PFP doctor in other locations and recognise the high supervisory needs of a PFP doctor needing Level 1 supervision.

Payments will be made quarterly in arrears at the following rates.

Location	Level 1 Supervision	Levels 2-4 Supervision
MM 1	\$10,000	\$0
MM 2	\$15,000	\$1,250
MM 3	\$15,000	\$2,500
MM 4-5	\$17,500	\$3,750
MM 6-7	\$21,250	\$5,000

*Learning and development*

Only IMGs with limited or provisional registration will receive financial support in the form of funding for learning and development.

Based on the learning and development plan, RWAs may fund appropriate learning and development opportunities for eligible PFP participants. PFP doctors can access fully or partially subsidised clinical learning and development opportunities as identified in the plan or based on emerging community needs. Payments will be made on provision of evidence showing successful completion of a course.

Funding for learning and development is scaled by level of supervision, with the amount funded determined by the assessment plan and submitted evidence of successful completion.

The level of financial support for eligible participants per year is in the table below:

Supervision level	Annual L&D Budget Per Person
Level 1	\$20,000
Level 2-4	\$15,000

**How do I apply?**

RWAs administer the PFP. To apply for the PFP, contact the [Rural Workforce Agency](#) in your state.