



Practitioner review program, for practitioners – the six-month review

Information about the Practitioner Review Program (PRP) six-month period of review.

The six-month period of review

If some or all the identified concerns remain after the interview, you may be offered a six-month review. This allows you time to consider your billing and/or prescribing as highlighted at interview and make any changes if necessary.

After the six-month review period ends, a Professional Adviser will examine your Medicare servicing data from that time. To allow time for data to become available, this will be approximately 8 to 9 months after you were notified you were placed in six-month review. You will not be contacted again for information during the six-month review. Possible outcomes include the following:

- all concerns are addressed, and no further action is required, so the matter is closed
- some or all the concerns remain, or new concerns are identified, and the matter is referred to a delegate of the Chief Executive Medicare (delegate) to consider whether to make a request to the Director of Professional Services Review.

We will write to you to let you know the outcome of the six-month review. Where you are referred to a delegate after your six-month review, an explanation will be provided in the letter.

All relevant information is carefully considered prior to referring a case to the delegate, including:

- your Medicare, Child Dental Benefits servicing and/or Pharmaceutical Benefits Scheme prescribing data
- information provided by you at interview
- any other information that may arise about your case.