Incentives and support for GPs and general practices in MM 7 locations

The Australian Government funds a number of programs to provide incentives to encourage doctors to move to, and remain working in, regional, rural and remote Australia. Eligibility is generally based on the Modified Monash Model classification system. MM 7 encompasses very remote communities: Very remote areas (ASGS-RA 5) and all other remote island areas more than 5kms offshore.

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<td><strong>Rural Bulk Billing Incentive</strong></td>
<td>From 1 January 2022, the Rural Bulk Billing Incentives (RBBI) progressively increase for doctors and patients in rural and remote communities. This incentive is scaled according to the MM classification of each location in Australia. Also, from 1 January 2022, providers working in MM 1 locations are able to claim a RBBI for after-hours item when providing a bulk billed after hours service in MM 2-7 location. The rural bulk billing incentive available in MM 7 locations is approximately 190% of the standard bulk billing rate available in metropolitan areas.</td>
<td>MBS item 75857 = $11.80</td>
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<td><strong>Approved Medical Deputising Services Program (AMDS)</strong></td>
<td>The AMDS program allows a restricted non-vocationally registered workforce to provide after-hours services to the community when working for an AMDS. Participants are granted access to specific after hour’s items in the MBS. This program does not provide financial incentive. The AMDS satisfies section 19AA of the Health Insurance Act 1973.</td>
<td>AMDS participants are granted access to specific after-hours items in the MBS.</td>
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<td><strong>Health Workforce Scholarship Program</strong></td>
<td>Provides postgraduate/continuous professional development scholarships targeted to GPs, Nursing and Allied Health Professionals. Eligible locations include: • Qualified health professionals providing primary health care in MM 1-2 locations only if employed by an Aboriginal Medical Service or Aboriginal Community Controlled Health Organisation; or • Qualified health professionals providing primary health care in rural and remote locations in MM 3-7 locations.</td>
<td>Scholarship - Students receive $10,000 per year for 2 years. Bursary - Covers the cost of training, accommodation, travel or course fees and/or cover or partially cover training related expenses.</td>
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<td><strong>Medical Outreach Indigenous Chronic Disease Program</strong></td>
<td>Incentives are payable to health professionals providing chronic disease outreach services for Aboriginal and Torres Strait Islander people in MM 1-7 locations where the relevant State/Territory fund holder has identified a gap in services.</td>
<td>Costs associated with delivering outreach services are payable to eligible health professionals to remove a range of financial disincentives (e.g. travel, meals and accommodation).</td>
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<td><strong>Rural Locum Assistance Program (RLAP)</strong></td>
<td>The RLAP provides targeted locum support in MM 2-7 locations. It enhances the ability of nurses, allied health professionals, general practitioners (GP obstetricians and GP anaesthetists), and specialists (obstetricians and anaesthetists) to take leave for recreation or to undertake continuing professional development (CPD). Support includes the costs of travel, accommodation, travel allowance and incentives for locums.</td>
<td>Support includes the costs of travel, accommodation, travel allowance and incentives for locums. GPs can take planned leave and undertake CPD.</td>
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<td><strong>Rural Locum Assistance Program (RLAP) Aged Care</strong></td>
<td>The Rural Locum Assistance Program (RLAP) Aged Care program provides rural and regional aged care providers with access to a highly skilled surge workforce to ensure continuity of care and strong clinical leadership. It also delivers an incentive scheme for permanent aged care placements to increase staff retention in regional and remote areas. Aged care service locum support includes the costs of travel, accommodation, travel allowance and incentives for locums. The Incentive Scheme for Permanent Aged Care Placement include: • one-off relocation payment to cover immediate and direct costs associated with relocating an approved clinician from MMM zones 1 - 3 to MMM zones 4 - 7. Payment will be capped at $16,500 per relocation per person. If the individual leaves the regional/remote facility within 2 years, they are liable for reimbursement of the relocation payment fee; • an additional retention bonus payable to approved clinicians working in approved facilities on an annual basis for two years following their permanent relocation: o an annual retention bonus of up to $3,700 for clinicians in MMM zone 4, and up to $6,000 for those working in MMM zones 5 – 7. Clinicians are not eligible to apply for these payments if they have received the payment through another workforce program.</td>
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<td><strong>Healthy Ears - Better Hearing, Better Listening</strong></td>
<td>Incentives are payable to health professionals, including medical specialists, allied health professionals, aboriginal health workers and GPs, providing outreach ear and hearing health services to Aboriginal and Torres Strait Islander children aged 0-21 years in MM 2-7 locations. Costs associated with delivering outreach services are payable to eligible health professionals to remove a range of financial disincentives (e.g. travel, meals and accommodation).</td>
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| **More Doctors for Rural Australia Program (MDRAP)**       | Supports non-vocationally recognised (non-VR) doctors to gain general practice experience in rural and remote communities prior to joining a college fellowship pathway. The MDRAP also supports junior doctors and locums providing services in rural and remote communities.                                                                                                                                                                         | The MDRAP Support Package provides funding to support supervision and education for eligible MDRAP participants:  
- Up to $500 reimbursed to doctors who complete foundation general practice training modules;  
- Up to $13,600 per participant for approved learning and development activities; and  
- Up to $30,000 per fulltime participant annually in quarterly supervision payments. |
| **Rural Health Workforce Support Activity**                | Rural Workforce Agencies in each State and the Northern Territory are funded to deliver a range of activities aimed at addressing the misdistribution of the health workforce through the following program elements: Access; Quality; and Sustainability. Grants to health professionals can include:  
- Recruitment costs or as incentives  
- Orientation expenses  
- Relocation expenses to move to a rural area  
- Locum support  
- Assist with access to continuing professional development opportunities.                                                                                                                                                                                                                     | Specific grants to health professionals not exceeding $25,000.00 per annum, and capped at $50,000.00, in totality.                                                                                                                                                          |
| **Remote Vocational Training Scheme (RVTS)**              | The RVTS delivers structured distance education and supervision to doctors to support them in gaining fellowship of the Royal Australian College of General Practitioners and/or the Australian College of Rural and Remote Medicine while they provide general medical services. Supervision is facilitated remotely and delivery caters to the unique needs of doctors working in remote communities by supporting them to achieve Fellowship through a distance education model. It allows training to be completed in an accredited post, without leaving your community.  
It has two trainee streams:  
- The Aboriginal Medical Service Stream, providing training for doctors working in Aboriginal Community Controlled Health Services (MM 2-7).  
- The Remote Stream for doctors working in rural & remote Australia (MM 4-7).                                                                                                                                                                                                                       | Fully Government funded.  
The provision of distance education and supervision to doctors to support them in gaining fellowship without travelling long distances or relocating. Being on a College-approved training program will be mandatory before sitting Fellowship exams from 2022.                                                                                                       |
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| **Remote Vocational Training Scheme (RVTS) Extended Targeted Recruitment Pilot** | The RVTS Extended Targeted Recruitment pilot commenced early 2021 and aims to improve the attraction of GP trainees in rural and remote areas by providing salary incentives to doctors as they train towards GP fellowship. The pilot will recruit up to 10 doctors, focusing on Aboriginal and Torres Strait Islander communities and rural and remote locations with high medical workforce need (MM 5-7). | Salary support per placement by training year:  
Year 1 - $200,000  
Year 2 - $200,000  
Year 3 - $100,000                                                                                           |
| **Practice Incentives Program (PIP)**                               | The PIP incentives are available to support general practice activities that encourage continuing improvement and quality of care, enhance capacity and improve access and health outcomes for patients. It is administered by Services Australia on behalf of the Department of Health.  
There are currently eight incentives under the PIP:  
eHealth (e-PIP);  
Teaching;  
Indigenous Health (IHI);  
GP Aged Care Access (ACAI);  
GP Procedural;  
After Hours;  
Quality Improvement (PIPQI); and  
Rural Loading; the PIP rural loading is added as a total to PIP incentive payments (except for ACAI, as this is a GP payment not a practice payment) for practices located in Rural Remote and Metropolitan Areas (RRMA) 3-7.  
An additional/temporary incentive under the PIP is the COVID-19 In-reach Vaccination Payment, which does not attract a rural loading. This temporary incentive supports general practices that undertake in-reach COVID-19 vaccination services for residential aged care and disability support workers in their workplace. This payment is only available for COVID-19 vaccine suitability assessment services (including vaccinations) that are administered via an in-reach COVID-19 vaccination clinic for residential aged care or disability support workers from 29 April 2021 until 30 June 2022. | PIP loading for each Rural, Remote and Metropolitan Area (RRMA) category:  
RRMA 1 - 0%  
RRMA 2 - 0%  
RRMA 3 - 15%  
RRMA 4 - 20%  
RRMA 5 - 40%  
RRMA 6 - 25%  
RRMA 7 - 50%  
COVID-19 In-reach Vaccination Payment                                                                                      |
| **Workforce Incentive Program (WIP) – Practice Stream**              | The WIP Practice Stream provides financial incentives to support general practices to engage the services of nurses, Aboriginal and Torres Strait Islander Health Practitioners and Health Workers, and eligible allied health professionals.  
Practices in MM 3-7 locations are eligible to receive a rural loading on top of their incentive payment. The rural loading is applied in recognition of the difficulties rural and remote communities face attracting and retaining health professionals. | Up to $125,000 per annum for a single practice.  
Eligible for an additional 50% rural loading.                                                                                                   |
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| **Workforce Incentive Program (WIP) - Doctor Stream** | The WIP - Doctor Stream aims to encourage medical practitioners to practise in regional, rural and remote communities (MM 3-7) and to promote careers in rural medicine through the provision of financial incentives. Incentive amounts are dependent on the MM classification and the amount of time spent working in the location. To be eligible for the WIP - Doctor Stream, medical practitioners must:  
- Provide a minimum amount of eligible primary care services in eligible locations and/or undertake eligible general practice (GP) training under an approved training pathway  
- Meet the required number of active quarters for payment  
- Have an eligible current Medicare provider number  
- Have provided current bank details to Services Australia specifically for the WIP - Doctor Stream in the required timeframe. | Year 1 – $25,000  
Year 2 – $25,000  
Year 3 – $35,000  
Year 4 – $35,000  
Year 5 plus – $60,000 |
| **Rural Health Outreach Fund (RHOF)** | The RHOF aims to improve access to medical specialists, GPs, allied and other health providers in regional, rural and remote areas of Australia by supporting outreach health activities. There are four health priorities under the RHOF: maternity and paediatric health, eye health, mental health and support for chronic disease management. The RHOF works by removing barriers such as the cost of travel, facility hire and equipment leasing, to enable a range of health professionals to provide outreach services. | |
| **Eye and Ear Surgical Support** | Incentives are payable to health professionals providing expedited access to eye and/or ear surgical support services to Aboriginal and Torres Strait Islander people who reside in MM 3-7 locations. Costs associated with delivering outreach services are payable to eligible health professionals to remove a range of financial disincentives (e.g. travel, meals and accommodation). | |
| **Rural Procedural Grants Program (RPGP)** | The Rural Procedural Grants Program (RPGP) supports procedural GPs in rural and remote areas to attend relevant continuing professional development (CPD) activities, focused on both skills maintenance and upskilling for procedural skills and emergency medicine. Support is provided in the form of grant payments which are designed to assist with the cost of attending CPD activities, including course costs, locum relief and travel expenses. Grants are calculated on the number of training days. Current COVID-19 amendments are in place to reduce the daily payment for all categories to $1000 per day for online CPD (normally $2000 and restricted to face to face CPD activities). | Procedural skills - up to $20,000 per year  
Emergency medicine - up to $6,000 per year  
Emergency mental health - up to $6,000 per year |
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<td><strong>Premium Support Scheme (PSS)</strong></td>
<td>The PSS is an Australian Government scheme that helps eligible medical practitioners with the costs of their medical indemnity insurance. Eligible medical practitioners continue to see the benefit of the PSS through reductions in the level of premiums charged to them by their medical indemnity insurers. The Australian Government makes payments to medical indemnity insurers for the PSS.</td>
<td>The PSS is designed to ensure that if a medical practitioner’s gross medical indemnity costs exceed 7.5% of his or her gross private medical income, he or she will receive a Government subsidy of 60% towards the cost of the premium beyond that threshold limit. Procedural GPs working in rural areas are eligible for the PSS regardless of whether they meet other PSS eligibility criteria. The PSS will cover 75% of the difference between premiums for these doctors and those for non-procedural GPs in similar circumstances (i.e. same location, same income, and same insurer).</td>
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<td><strong>General Practitioner Procedural Training Support Program (GPPTSP)</strong></td>
<td>The GPPTSP is an optional, competitive scholarship program that provides $40,000 (GST exclusive) to up to 10 GP Fellows to gain a statement of satisfactory completion of Advanced Rural Skills Training in Anaesthesia, and up to 10 GP Fellows to achieve the Diploma of the Royal Australian and New Zealand College of Obstetrics and Gynaecology. Payments are in instalments with completion required within two years of commencing training.</td>
<td>$40,000 per applicant who completes training.</td>
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| **5 Year Overseas Trained Doctor Scheme** | The Five Year Scheme encourages overseas trained doctors (OTDs) and Foreign Graduates of Accredited Medical Schools (FGAMS) to work in regional, rural and remote locations by allowing a reduction of moratorium time (i.e. the time they must work in a DPA or DWS location). The time reduction increases the more rural or regional the doctor practices in. Doctors on the Scheme are required to complete a “return of service” of between 3-5 years in an eligible rural or remote community, in agreed locations. To qualify for a non-location specific exemption (i.e. time “off” their moratorium), each Five Year Scheme participant must:  
  - Complete a return of service of between three and five years in an eligible regional or remote DWS community  
  - Obtain Fellowship of either the Royal Australian College of General Practitioners or Australian College of Rural and Remote Medicine during the return of service; and  
  - Become an Australian permanent resident (make a permanent commitment to Australia). | Non-location specific exemption for the agreed period of their remaining moratorium time.                                                                                                                                                                                                 |