



THE APPROVED MEDICAL DEPUTISING SERVICE (AMDS) PROGRAM

Background

In 1996, the Commonwealth introduced a requirement under s19AA of the *Health Insurance Act 1973* (the HIA) that doctors achieve vocational recognition (VR) in general practice to qualify for continued access to the Medicare Benefits Schedule (MBS). A doctor meets the s19AA requirements once they achieve VR status by becoming a Fellow of either the Royal Australian College of General Practitioners (FRACGP) or the Australian College of Rural and Remote Medicine (FACRRM). This requirement was introduced to recognise general practice as a specialty with related professional development standards.

The AMDS Program was established in 1999 and supports the intent of s19AA by acting as a mechanism for doctors to obtain clinical experience in the after-hours period. The Program was initially conceived as a response to a decrease in the number of after-hours services being provided by fully qualified GPs in the capital cities. The AMDS Program offers clinical experience to non-VR doctors and increases the available workforce available during the after-hours period by allowing these doctors to access the MBS for deputised work.

What is a medical deputising service?

A medical deputising service provides after-hours primary health care to patients at their home or in an aged care facility on behalf of their regular GP. These are services that meet Royal Australian College of General Practitioners' (RACGP) standards for being accredited as a medical deputising service, meaning they:

- have been established to perform after-hours call-out services;
- operate for the entirety of the after-hours period including the unsociable after-hours hours;
- have the facilities to manage requests for deputised services from local GPs and arrange for the timely transfer of patient records; and
- are not physically co-located or share facilities with a general practice.

How does a medical deputising service become an AMDS?

Before applying to join the AMDS Program, a service must have been operating and held full accreditation as a medical deputising service for a period of at least 12 months. The accreditation process is administered by private agencies and not by the Department of Health (Health). In addition to being operational, a medical deputising service must also demonstrate that it:

- is not co-located with a general practice;
- can supervise and offer mentoring to non-VR GPs;
- has engaged a VR GP into a Medical Director role to develop and coordinate standards of clinical care;
- applies a triage process that satisfies the minimum standards set out in Appendix of the AMDS Program Guidelines; and
- is not engaged in any direct marketing activities that would breach the requirements of the AMDS Program Guidelines or s133 of the *Health Practitioner National Law Act 2009*.

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An accredited deputising service that satisfies these requirements applies to Health to enter into a Deed to participate on the AMDS Program. Once a Deed is granted the service becomes an 'Approved Medical Deputising Service'. A Deed sets the conditions for participation on the AMDS Program and the employment of non-VR GPs to deputise with access to the MBS.

What are AMDS Program incentives for service providers?

Deputising services do not receive funding through the AMDS Program. When a service is approved to participate on the AMDS Program it gains an eligibility to employ non-VR GPs who are normally restricted from accessing the MBS because of the operation of s19AA of the HIA. An AMDS therefore gains access to an expanded workforce that qualifies for access to the MBS.

What are the AMDS Program incentives for participant doctors?

Most non-VR doctors who hold general registration with the Medical Board of Australia will be able to apply to participate on the AMDS Program (there is a separate Fact Sheet that provides more detail on eligible non-VR GPs). Participants must also be committed to attaining a postgraduate general practice qualification. From 1 March 2018, doctors will not be restricted on the basis of their Australian residency status or the location at which they did their primary medical degree.

Non-VR GPs who qualify and participate on the AMDS Program receive two benefits:

1. they qualify for a Medicare provider number with the service provider – this is significant because their status as non-VR GPs generally restricts their access to the MBS; and
2. clinical experience in managing patients outside of hospital settings. This clinical experience extends to rapid assessment/emergency medicine skills without the aid of diagnostic equipment, pathology and other support relied upon in hospital settings

Contacting Health for further information

The Access Programs Section of Health is responsible for the AMDS Program. The AMDS Program is supported by a dedicated in-box: AMDS@health.gov.au. Further information regarding the AMDS Program can be obtained by emailing this in-box. The Access Programs Section responds to all emails within a 28 day timeframe.

Further reading

This Fact Sheet must be read in conjunction with the AMDS Program Guidelines that come into effect on 1 March 2018. The Guidelines provide the requirements medical deputising services and non-VR GPs to participate on the Program.