



TASMANIA

**HEALTH (REGIONAL BOARDS) AMENDMENT
(MEDICARE AGREEMENT) ACT 1994**

No. 3 of 1994

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**HEALTH (REGIONAL BOARDS) AMENDMENT
(MEDICARE AGREEMENT) ACT 1994**

No. 3 of 1994

AN ACT to amend the *Health (Regional Boards) Act 1991*

[Royal Assent 17 March 1994]

BE it enacted by His Excellency the Governor of Tasmania, by and with the advice and consent of the Legislative Council and House of Assembly, in Parliament assembled, as follows:—

Short title

1—This Act may be cited as the *Health (Regional Boards) Amendment (Medicare Agreement) Act 1994*.

Commencement

2—This Act commences on the day on which it receives the Royal Assent.

Principal Act

3—In this Act, the *Health (Regional Boards) Act 1991** is referred to as the Principal Act.

Section 3 amended (Interpretation)

4—Section 3 (1) of the Principal Act is amended as follows:—

(a) by inserting the following definitions after the definition of “Board”:—

“**Commonwealth Act**” means the *Health Insurance Act 1973* of the Commonwealth;

“**eligible person**” means an eligible person within the meaning of the Commonwealth Act;

(b) by inserting the following definitions after the definition of “intern”:—

“**Medicare commitments**” means the commitments set out in section 26 (2) of the Commonwealth Act and in Part 2 of Schedule 2A;

“**Medicare principles**” means the principles set out in section 26 (2) of the Commonwealth Act and in Part 1 of Schedule 2A;

Section 7 amended (Functions of Boards)

5—Section 7 (1) of the Principal Act is amended as follows:—

(a) by omitting from paragraph (n) “region.” and substituting “region;”;

(b) by inserting the following paragraph after paragraph (n):—

(o) on behalf of the State—to ensure that the delivery in its region of public hospital services to eligible persons is in accordance with the Medicare principles and Medicare commitments.

* No. 4 of 1991.

Section 9 amended (Power of Minister to give directions to Boards)

6—Section 9 of the Principal Act is amended by inserting the following subsection after subsection (1):—

(1A) Without limiting the generality of subsection (1), the Minister may give to a Board such directions under that subsection as the Minister considers necessary or expedient to ensure that in providing public hospital services to eligible persons in its region the Board, on behalf of the State—

(a) gives effect to the Medicare principles; and

(b) undertakes the Medicare commitments—

in the manner required by the Commonwealth Act.

Section 26 amended (Health Service Agreements)

7—Section 26 of the Principal Act is amended by inserting the following subsections after subsection (3):—

(3A) It is a condition of a Health Service Agreement that the Board must, on behalf of the State, ensure that the delivery in its region of public hospital services to eligible persons is, in respect of the period covered by the agreement, in accordance with the Medicare principles and Medicare commitments.

(3B) A Health Service Agreement is not to contain a condition or provision that—

(a) is inconsistent with the Medicare principles or Medicare commitments; or

(b) diminishes or jeopardizes the ability of the State, through the Board, to give effect to the Medicare principles and undertake the Medicare commitments.

Schedule 2A inserted

8—After Schedule 2 to the Principal Act, the following Schedule is inserted:—

SCHEDULE 2A

Section 3 (1)

MEDICARE PRINCIPLES AND COMMITMENTS**PART 1****MEDICARE PRINCIPLES**

The Commonwealth and the States are committed to the following principles in the provision of public hospital services:

Explanatory Note: The Principles focus on the provision of public hospital services to eligible persons, but operate in an environment where eligible persons have the right to choose private health care in public and private hospitals supported by private health insurance.

Choices of services

Principle 1: Eligible persons must be given the choice to receive public hospital services free of charge as public patients

Explanatory Note 1: Hospital services include in-patient, out-patient, emergency services (including primary care where appropriate) and day patient services consistent with currently acceptable medical and health service standards.

Explanatory Note 2: At the time of admission to a hospital, or as soon as practicable after that, an eligible person will be required to elect or confirm whether he or she wishes to be treated as a public or private patient.

*Universality of services***Principle 2: Access to public hospital services is to be on the basis of clinical need**

Explanatory Note 1: None of the following factors are to be a determinant of an eligible person's priority for receiving hospital services:

- . whether or not an eligible person has health insurance;
- . an eligible person's financial status or place of residence;
- . whether or not an eligible person intends to elect, or elects, to be treated as a public or private patient.

Explanatory Note 2: This principle applies equally to waiting times for elective surgery.

*Equity in service provision***Principle 3: To the maximum practicable extent, a State will ensure the provision of public hospital services equitably to all eligible persons, regardless of their geographical location**

Explanatory Note 1: This principle does not require a local hospital to be equipped to provide eligible persons with every hospital service they may need.

Explanatory Note 2: In rural and remote areas, a State should ensure provision of reasonable public access to a basic range of hospital services which are in accord with clinical practices.

PART 2**COMMITMENTS**

In order to achieve Principles 1 to 3, the Commonwealth and States make the following Commitments regarding public hospital services for eligible persons:

Information about service provision

Commitment 1: The Commonwealth and a State must make available information on the public hospital services eligible persons can expect to receive as public patients

Explanatory Note 1: The joint Commonwealth/State development of a Public Patients' Hospital Charter for each State will be a vehicle for the public dissemination of this information.

Explanatory Note 2: The Charter will set out the public hospital services available to public patients.

Efficiency and quality in service provision

Commitment 2: The Commonwealth and States are committed to making improvements in the efficiency, effectiveness and quality of hospital service delivery

Explanatory Note: This includes a commitment to quality improvement, outcome measurement, management efficiency and effort to integrate the delivery of hospital and other health and community services.

*[Second reading presentation speech made in:—
House of Assembly on 8 December 1993
Legislative Council on 16 February 1994]*