PART 1 ‒ APPLICANT APPLICATION FORM

With GP experience

(Workforce Program Approved under Section 3GA of the Health Insurance Act 1973)

The More Doctors for Rural Australia Program (MDRAP) is listed in the Health Insurance Regulations 2018 (the Regulations) as an approved program under 3GA of the Act. Rural Workforce Agencies (RWA) in each State and the Northern Territory have delegated authority as the Specified Body to administer the MDRAP on behalf of the Department of Health.

Before completing this application both the practice and applicant must:

* Be fully aware of all obligations and expectations outline in the MDRAP criteria as stated on the Rural Health West website [**www.ruralhealthwest.com.au/mdrap**](http://www.ruralhealthwest.com.au/mdrap) before applying.
* Allow up to four weeks from submitting a complete application to receive an outcome from Rural Health West. Rural Health West reserves the right to ask for further documentation throughout the process where necessary.
* Allow up to 28 working days for processing of provider number applications following MDRAP approval.
* Submit your completed application with all supporting documentation as a whole to [**mdrap@ruralhealthwest.com.au**](mailto:mdrap@ruralhealthwest.com.au). Incomplete applications will not be processed and will only be held for 30 days.
* Type or write clearly in CAPITAL LETTERS.

This symbol indicates supporting documentation is required as evidence of the details you have stated in this application form.

Applicant to Initial \_\_\_\_\_\_\_\_\_\_\_\_\_

This symbol indicates supporting documentation is required as evidence of the details you have stated in this application form.

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| Applicant’s details  Please complete with your full name as per your identity documents/Australian Health Practitioner Regulation Agency (AHPRA) registration. | | |
| First name (as per AHPRA) |  | Please attach a copy of the following documents:  Photo identification page from your current passport  **or**  Australian drivers licence |
| Last name (as per AHPRA) |  |
| AHPRA registration number |  |
| Gender | Male  Female |
| Date of birth |  |
| Do you identify as an Aboriginal or Torres Strait Islander person? | Yes, Aboriginal  Yes, Torres Strait Islander  Yes, both Aboriginal & Torres Strait Islander  No |
| Country of primary medical qualification |  |
| Year qualification obtained |  |
| Current Australian residency status | Permanent resident  Australian citizen  Temporary resident | Evidence of Australian VISA  **or**  Evidence of Australian Citizenship, including birth certificate |

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| Applicant’s contact details  Please note Rural Health West’s primary form of contact is through email. | |
| Home address **(not practice address)** |  |
| Postal address **(if applicable)** |  |
| Postcode |  |
| Email address |  |
| Preferred telephone contact number |  |

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| Practice locations  Please note a doctor on the MDRAP must have a primary location. Doctors on the MDRAP cannot be used in a temporary locum capacity. Please list all practice locations that you will be working at and require a Medicare provider number. | | | |
| Primary location | | | |
| Practice name |  | | Please attach a copy of the following documents:  Medicare application form  *See explanatory notes on page 7* |
| Practice address |  | |
| Agreed number of working hours per week |  | Preferred Start Date        /       /  **Please note** your approval date may override this date |
| Additional location | | | |
| Practice name |  | | Please attach a copy of the following documents:  Medicare application form  *See explanatory notes on page 7* |
| Practice address |  | |
| Agreed number of working hours per week |  | Preferred Start Date        /       /  **Please note** your approval date may override this date |
| Additional location | | | |
| Practice name |  | | Please attach a copy of the following documents:  Medicare application form  *See explanatory notes on page 7* |
| Practice address |  | |
| Agreed number of working hours per week |  | Preferred Start Date        /       /  **Please note** your approval date may override this date |
| Hospital/Health Service location | | | |
| Name of Hospital/Health Service |  | | Please attach a copy of the following documents:  Medicare application form  *See explanatory notes on page 7* |
| Hospital/Health service address |  | |
| VMO rights being granted | Admitting  Procedural  If procedural, please indicate type | |

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| Previous Program history | | | |
| Have you been or are you currently on a OMPs Program? *See explanatory notes on page 7*  Yes  No If yes, which program?  AHOMPs  MOMPs  ROMPs  OMOMPs  \*  **Please note**: Rural Health West does not administer these programs and application forms will be submitted to Medicare on your behalf. | | | If you have answered ‘Yes’  Please attach the relevant application for new location(s) |
| Have you participated in a 3GA Program?  Yes  No If yes, which program? | | | If you have answered ‘Yes’  Please supply letter issued by the Department of Health confirming your 3GA history.  *See explanatory notes on page 7* |
| RLRP | From    /    / | Until    /    / |
| RACGP PEP | From    /    / | Until    /    / |
| SAPP | From    /    / | Until    /    / |
| AGPT | From    /    / | Until    /    / |
| RVTS | From    /    / | Until    /    / |
| ACRRM  (Independent pathway) | From    /    / | Until    /    / |
| AMDS (Accredited  after-hours clinic) | From    /    / | Until    /    / |

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| Australian medical registration | |
| What AHPRA/Medical Board of Australia (MBA) registration type do you currently hold?  General (full)  Provisional: Level  Limited Area of Need: Level | Please attach a copy of the following documents:  Current registration with AHPRA/MBA  Evidence of submission of Plan for Professional Development and re-entry to practice to AHPRA (if requested)  *See explanatory notes on page 7* |
| Entry to a Fellowship Pathway Objectives | |
| The MDRAP is designed to assist and support non-vocationally recognised (non-VR) doctors and junior doctors (PGY 3-5) to gain valuable general practice experience in rural and remote communities before joining a college fellowship pathway.  Please indicate which pathway you intend to apply for:  AGPT  ACRRM - Independent Pathway  RACGP – PEP  RVTS  Undecided | |

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| Work experience | |
| Do you have general practice experience?  Yes  No  Please detail your previous work experience in a CV:  Work experience must be in date order from graduation to present day  **All** gaps in employment explained in detail | Please attach a copy of the following documents:  CV on Rural Health West template  RACGP GP Experience Assessment (if applicable) |

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| Junior Doctors ONLY ‒ Duty Statement | | |
| Which hospital did you complete your internship |  | Please attach a Duty Statement from the hospital on their letterhead detailing:  Hospital rotations  Postgraduate year that the junior doctor is currently in |
| When did you complete your internship | Date       /       / |

Applicant Declaration

Please read and ensure you understand the following declaration before signing:

* I declare the information provided in this application and the additional supporting documentation provided is true and correct.
* I understand that failure to complete all relevant sections of this application form, including all supporting documentation may result in delaying the processing of this application or refusal of this application.
* I understand that Rural Health West reserves the right to request further documentation in order to progress this application.
* I have read the explanatory notes attached to this application form and understand the requirements and my obligations of the MDRAP.
* I understand my personal information, provided in this application form and as subsequently requested during my continued placement on this recruitment program is being used confidentially to administer this Program by the following Agencies:
* Australian Government Department of Health;
* Medicare Australia; and
* the appropriate Rural Workforce Agency in the State or Territory of your placement and any other Rural Workforce Agency should you move or practice interstate.
* I understand information about all my 3GA placements will be shared with the Rural Workforce Agency, Australian Government Department of Health, Royal Australian College of General Practitioners and Australian College of Rural and Remote Medicine to support 3GA eligibility decisions.
* I consent to the Rural Workforce Agency obtaining and releasing relevant 3GA placement information.

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Applicant name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ / \_\_\_\_\_\_ / \_\_\_\_\_\_

Applicant Signature Date

Explanatory Notes

**‘Other Medical Practitioner’ (OMPs)** programs are workforce programs that were designed to provide access to higher Medicare rebates for non-vocationally recognised doctors who provided services in approved locations and met other eligibility criteria specific to the particular program. There are four OMPs programs with differing eligibility and requirements. The OMPs programs ceased to new entrants on 1 January 2019. Existing OMPs program participants will be grandfathered until 30 June 2023 as long as they continue to meet program requirements. An OMPs application should be completed for each location to the Rural Workforce Agency as part of the MDRAP application (if eligible) [**http://www.health.gov.au/internet/main/publishing.nsf/Content/work-pr-omps**](http://www.health.gov.au/internet/main/publishing.nsf/Content/work-pr-omps)

**3GA program** ‒ All medical practitioners restricted by section 19AA of the Act who do not hold specialist qualifications are unable to access Medicare benefits unless they apply and participate on an approved training or workforce program under section 3GA of the Act.

There are placements in various approved training and workforce programs, which satisfy the requirements of section 19AA of the Act. These allow doctors to access the Medicare benefits arrangements while undertaking vocational training to gain Fellowship of a recognised medical college. List of approved programs under section 3GA of the Act:

[**http://www.health.gov.au/internet/publications/publishing.nsf/Content/work-pubs-mtrp-16-toc~work-pubs-mtrp-16-chapter-6~work-pubs-mtrp-16-chapter-6-section-3ga-programs**](http://www.health.gov.au/internet/publications/publishing.nsf/Content/work-pubs-mtrp-16-toc~work-pubs-mtrp-16-chapter-6~work-pubs-mtrp-16-chapter-6-section-3ga-programs)

**3GA history Letter** ‒ Letter from the Department of Health confirming applicant’s 3GA history including length of time. Applicants can apply directly to the Department by emailing [**19AA@health.gov.au**](mailto:19AA@health.gov.au)

**Plan for Professional Development and re-entry to practice to AHPRA** ‒ GPs are required to submit a professional development plan for re-entry to practice to AHPRA. Evidence of submission will need to be supplied to the Rural Workforce Agency as part of the MDRAP application. Template ‒ Plan for professional development and re-entry to practice can be accessed on the AHPRA website  
[**https://www.medicalboard.gov.au/Codes-Guidelines-Policies/FAQ.aspx#re-entry**](https://www.medicalboard.gov.au/Codes-Guidelines-Policies/FAQ.aspx#re-entry).

**Hospital Duty Statement** ‒ Letter from the hospital (on hospital letterhead) that details the applicant’s clinical rotations and length of time that have been undertaken. More than one duty statement may be required if applicant has worked at multiple hospitals.

**District of Workforce Shortage** ‒ A DWS is an area where the general population’s need for medical services is deemed to be unmet. An area is a DWS if it has less access to medical services than the national average. The current DWS status of every location in Australia for the medical specialty of general practice is available through the locator map at [**http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/locator**](http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/locator).

The DWS status of a particular medical practice can be confirmed by typing the exact street location in the locator map. Further information regarding what is a District of Workforce Shortage (DWS) is also on the DoctorConnect website at [**http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/dwsFactsheet**](http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/dwsFactsheet)

**Modified Monash Model** ‒ The Modified Monash Model (MMM) is a category system that better categorises metropolitan, regional, rural and remote areas according to both geographical remoteness and town size. Modified Monash (MM) category of every location in Australia is available through the locator map at [**http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/locator**](http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/locator).

**Position Description** ‒ A position description is a document that describes the general tasks, or related duties, and responsibilities of a position. The position description should detail the clinical responsibilities, safety and quality responsibilities, qualifications for the role as well as other clinical and general requirements.

**Letter of Offer** ‒ is a formal written document sent by an employer to a job candidate selected for employment. The letter of offer should be on company letterhead and detail the position title, location(s), commencement date, hours of work, employment term (permanent full time etc.). The letter of offer should also be signed and dated by an authorised person.

**Medicare provider number** and/or **prescriber number** for a medical practitioner.  
[**https://www.humanservices.gov.au/organisations/health-professionals/forms/hw019**](https://www.humanservices.gov.au/organisations/health-professionals/forms/hw019)

Helpful Websites

Australian College of Rural and Remote Medicine (ACRRM)  
[**http://www.acrrm.org.au**](http://www.acrrm.org.au)

Australian Medical Association (AMA)  
[**https://ama.com.au**](https://ama.com.au)

Australian Health Practitioner Regulation Agency (AHPRA)  
[**https://www.ahpra.gov.au**](https://www.ahpra.gov.au)

Australian Medical Council (AMC)  
[**https://www.amc.org.au**](https://www.amc.org.au)

Doctor Connect  
[**http://www.doctorconnect.gov.au**](http://www.doctorconnect.gov.au)

Primary Health Networks (PHN)  
[**http://www.health.gov.au/internet/main/publishing.nsf/content/primary\_health\_networks**](http://www.health.gov.au/internet/main/publishing.nsf/content/primary_health_networks)

Royal Australian College of General Practitioners (RACGP)  
[**https://www.racgp.org.au/home**](https://www.racgp.org.au/home)

Rural Health West  
[**www.ruralhealthwest.com.au**](http://www.ruralhealthwest.com.au)

Checklist

PART 1 ‒ APPLICANT APPLICATION FORM

With GP experience

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|  | **Photo ID**  Photo ID Page from current passport **OR** Photo of your Australian drivers licence |
|  | **Residency status**  Evidence of Australian permanent or temporary residency visa **OR** Evidence of Australian citizenship, including birth certificate |
|  | **Practice locations**  Completed Medicare application form for each practice location |
|  | **3GA Program participation**  Letter for the Australian Government Department of Health confirming 3GA participation history (if applicable) |
|  | **Australian medical registration**  Copy of your current registration with AHPRA/MBA **AND** Evidence of submission of Plan for Professional Development and re-entry to practice to AHPRA |
|  | **Work experience**  Curriculum Vitae on Rural Health West template **AND** RACGP Time Assessment (if applicable) |
|  | **Duty Statement ‒ Junior Doctors only**  Duty statement from the employing hospital detailing hospital rotations **AND** Postgraduate year that the doctor is currently in |