

Application for recognition as a specialist or consultant physician

Applying online

If you are an eligible medical practitioner and would like to access Health Professional Online Services (HPOS) you need an individual Provider Digital Access (PRODA) account. If you do not have one, go to servicesaustralia.gov.au/proda to register. Then follow the steps to set up your HPOS access.

To find out more about HPOS, go to servicesaustralia.gov.au/hpos

When to use this form

Use this form if you are a medical practitioner who requires recognition as a specialist or consultant physician.

Eligibility

You need to:

- be an Australian citizen, permanent resident, a temporary resident, or a New Zealand citizen
- be a registered medical practitioner
- be, or will be, working as a specialist or consultant physician
- have, or have applied for, a Medicare provider number for the specific practice location(s) at which you will render services
- provide services to private patients that attract Medicare benefits at the specialist or consultant physician rates
- be registered to practise as a specialist in your specialty with the Australian Health Practitioner Regulation Agency (Ahpra) or have Australasian Specialist Medical College Fellowship and status as a Fellow of an Australasian Specialist Medical College in relation to the specialty. The exception is recognition in intensive care or nuclear medicine.

If you are not:

- a fellow of an Australasian Specialist Medical College, and
- have not successfully completed training in the specialty recognised by the college, or
- your medical registration certificate(s) does not provide details of your specialty, time-period and specific location (if limitations exist),

you must provide written advice from Ahpra which clearly states these details. Contact Ahpra to obtain a copy before submitting your application for recognition.

Provider number

You need to have a provider number before we can process your application for recognition as a specialist or consultant physician.

If you need a provider number, you can apply for one at the same time that you return your **Application for recognition as a specialist or consultant physician (HW077)** form.

To apply for a provider number, go to servicesaustralia.gov.au/providernumber

When you are recognised as a specialist or consultant physician, you are not allocated a **specialist** provider number. Your record is updated to reflect your approved specialty and this applies to any current or future provider numbers you have.

Recognition in intensive care or nuclear medicine

If you do not hold the Fellowship of Royal Australasian College of Physicians but have Australian medical board registration to work in the specialty, you must have been assessed by the Royal Australasian College of Physicians.

If you were assessed by the Royal Australian and New Zealand College of Radiologists or the College of Intensive Care Medicine of Australia and New Zealand, you are eligible to apply for recognition as a specialist.

For access to Medicare benefits for nuclear medicine imaging items (Group 14 items of the Medicare Benefits Schedule), you must also be credentialled by the Joint Nuclear Medicine Credentialling and Accreditation Committee (JNMCAC) of the Royal Australasian College of Physicians, and the Royal Australian and New Zealand College of Radiologists.

The JNMCAC secretariat will tell us when your name has been included on the Register of Credentialled Nuclear Medicine Specialists.

Upon receipt of this advice, we will update your access to Medicare benefits for nuclear medicine imaging services.

Restrictions on accessing Medicare benefits

Recognition as a specialist or consultant physician does not automatically provide you with access to Medicare benefits.

Overseas trained doctors or foreign graduates of an accredited medical school are subject to restrictions, under section 19AB of the *Health Insurance Act 1973*, on accessing Medicare benefits for a period of at least 10 years. To access Medicare benefits, a 19AB exemption is required. To see if you need to apply for an exemption, go to servicesaustralia.gov.au/hpmbarecognition

The *Health Insurance Act 1973* and Health Regulations are available at legislation.gov.au

For more information

For more information about specialist or consultant physician recognition, go to servicesaustralia.gov.au/hpmbarecognition

For more information about the JNMCAC credentialling process, contact the JNMCAC secretariat.

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Filling in this form

You can fill and sign this form digitally in some browsers, or you can open it in Adobe Acrobat Reader. If you do not have Adobe Acrobat Reader, you can print this form and sign it.

If you have a printed form:

- Use black or blue pen.
- Print in BLOCK LETTERS.

The application will be returned if information is missing and/or not signed.

Personal details

1 Read this before answering the following question.

You need to have a provider number before we can process your specialist recognition. To apply, go to servicesaustralia.gov.au/providernumber

Do you have a provider number?

Tick one only

No

No, but I have applied

Yes Provider number

2 Dr Mr Mrs Miss Ms Mx Other

Family name

First given name

Second given name

3 Date of birth (DD MM YYYY)

4 Gender Male Female Non-binary

5 Daytime phone number (including area code)

Mobile phone number

Email

6 Postal address

Postcode

Residency status

7 What is your current citizenship or residency status?

Tick one only

Australian citizen

Australian permanent resident

Australian temporary resident

New Zealand citizen

If your residency status has changed and you have not advised us, provide copies of the relevant pages of your passport, visa or Australian citizenship papers.

Ahpra registration details

8 Registration details

Ahpra registration number	Specialty (if applicable)
<input type="text"/>	<input type="text"/>



Provide a copy of your current Ahpra certificate.

9 Are you a Fellow of a relevant Australasian specialist medical college?

No



Provide written advice from Ahpra that confirms your specialty, time-period and specific location (if limitations exist), if this information is not specified on your medical registration certificate.

Yes



Provide a copy of your Australian Fellowship certificate and letter confirming your status as a Fellow in relation to the specialty.

Qualifications

10 Post-graduate medical qualification

Awarding body

Field of supervising training

Month/Year (MM YYYY)



Provide a copy of your Fellowship certificate or letter.



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Specialty(ies) in which recognition is sought

11 List specialties that you are qualified in and want recognition for

12 Date qualification obtained (DD MM YYYY)

13 Date of recognition required for Medicare claiming (DD MM YYYY)

Checklist

14 Read this before answering the following question.

Your application will be returned to you if all the required documentation is not provided or is incomplete.

Which of the following documents are you providing with this form?

A copy of pages from your passport (if you are an overseas trained medical practitioner or a foreign graduate of an accredited medical school of Australia or New Zealand)	<input type="checkbox"/>
A copy of your passport (if you are a temporary resident or your residency status has changed)	<input type="checkbox"/>
A copy of your visa documents (if you are a temporary resident or your residency status has changed)	<input type="checkbox"/>
A copy of your Australian citizenship documents (if your residency status has changed)	<input type="checkbox"/>
A copy of your current Ahpra certificate (required at question 8)	<input type="checkbox"/>
Written advice from Ahpra confirming your specialty, time-period and specific location (if limitations exist), if this information is not specified on your medical registration certificate (if required at question 9)	<input type="checkbox"/>
A copy of your Australian Fellowship certificate and letter confirming your status as a Fellow in relation to the specialty (if you answered Yes at question 9)	<input type="checkbox"/>
A copy of your Fellowship certificate or letter (required at question 10)	<input type="checkbox"/>

Privacy notice

15 The privacy and security of your personal information is important to us, and is protected by law. We collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacypolicy

Declaration

16 I declare that:

- I am working, or will be commencing work, as a specialist or consultant physician in a private medical practice or have rights to private practice with a hospital.
- the information I have provided in this form is complete and correct.

I understand that:

- Services Australia may contact the relevant Specialist Medical College(s), Australian Health Practitioner Regulation Agency or my employer in relation to this application.
- giving false or misleading information is a serious offence.

Applicant's signature

Date (DD MM YYYY)

Returning this form

Return the completed form and any supporting documents by email to co.srac@servicesaustralia.gov.au

There may be risks with sending personal information through unsecured networks or email channels.

Make sure your documents are:

- in PDF, JPG, PNG, GIF or BMP format
- not password protected, or in a WinZip or RAR file
- no larger than 5 megabytes (MB) for each document
- no larger than 10 MB in total for all the documents.