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Tasmanian Health Organisations Act 2011

NOTICE OF MINISTERIAL POLICY

I,

Michelle Anne O'Byrne MP, being and as the Minister for Health:

pursuant to section 42 of the *Tasmanian Health Organisations Act 2011* require all Tasmanian Health Organisations to implement the policy entitled Patient Travel Assistance Scheme which is attached to this notice, in accordance with all requirements made under the *Tasmanian Health Organisations Act 2011*.

Dated this 22nd day of NOVEMBER 2013

A handwritten signature in black ink, appearing to read "Michelle Anne O'Byrne".

Michelle Anne O'Byrne MP
Minister for Health

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Patient Travel Assistance Scheme

SDMS Id Number:

Effective From: 1 July 2014

Replaces Document: P2010-0771-001

Contact: SPP-AHSPD-Manager, Service Development

Applies to: Tasmanian Health Organisation - North; Tasmanian Health Organisation - North West; Tasmanian Health Organisation - South

Review Date: 1 December 2016

Purpose

- This Ministerial Policy is issued by the Minister for Health under section 42 of the *Tasmanian Health Organisations Act 2011*.
- This Policy has been developed to ensure equity of access for Tasmanian residents to specialist medical services by assisting eligible patients with the transport and accommodation costs associated with the accessing of specialist medical services.
- Expressions used in this Ministerial Policy have the same meaning as in the *Tasmanian Health Organisations Act 2011*.

Policy Objective Statement

The Patient Travel Assistance Scheme (PTAS) is a statewide scheme targeted towards Tasmanians who have to travel long distances to access specialist medical services and face high travel costs as a result (e.g. flights from the Bass-strait islands).

The scheme is *targeted* towards Tasmanians who:

- have to travel long distances to access medical services; and
- face high travel costs (e.g. flights from the islands).

The purpose of the scheme is achieved through the following strategies:

- contributing to the cost of patient travel;
- contributing to the cost of patient accommodation, if required; and
- contributing to the cost of travel and accommodation for an escort that might be required for the effective treatment of patients.

To maximise the benefit of PTAS to the greatest number of Tasmanians the scheme is targeted to those most in need. This is achieved through eligibility criteria and tiered co-contributions from patients.

Patients who are eligible for assistance under this scheme, include:

- All Tasmanian residents required to travel interstate to access an eligible specialist medical service that is not available in either the public or private sector in Tasmania.

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- All Tasmanian residents who need to travel more than 75 kilometres one-way by the shortest practical route to access the nearest appropriate eligible medical service
- All Tasmanian residents who need to travel more than 50 kilometres one-way by the shortest practical route to access the nearest dialysis or oncology treatment centre.
- Residents of King and the Furneaux Group Islands who have to leave the island to access an eligible service.

Subsidy and co-contribution rates are derived and set in the following way:

- PTAS fuel payments for eligible patients are set at fifty per cent of the Health and Human Services (Tasmanian State Service) Award for the occasional user less than two litre rate payable under the award. The review and adjustment of these rates is to occur annually on 1 July commencing, 1 July 2014.
- PTAS intrastate accommodation payments for eligible patients are set at fifty per cent of the Health and Human Services (Tasmanian State Service) Award, and interstate accommodation defined as fifty per cent of the Melbourne award rate. The review and adjustment of these rates is to occur annually on 1 July commencing, 1 July 2014.
- Except in cases of financial hardship, patients are expected to part fund their travel both directly, and through a co contribution when accessing PTAS. The level of co contribution will be subject to periodic review and indexed to the annualised increase in the Commonwealth aged pension at 1 July each year, commencing 1 July 2014.

A Statewide PTAS Operational Protocol, and associated Register of Decisions, subordinate to this Policy, will guide the operational rules of the scheme throughout Tasmania to ensure consistency and equity of access.

Implementation

- CEOs are accountable for ensuring the requirements contained in this Policy and the associated documents are adhered to and communicated to all appropriate staff.
- Compliance with this Ministerial Policy will be monitored and managed in accordance with the *Tasmanian Health Organisations Act 2011* and Department of Health and Human Services Performance and Accountability Framework.
- THOs are funded to provide PTAS through their service agreements; any changes to the PTAS Operational Protocol must take into account the financial implications and include consultation with System Purchasing and Performance as Manager of the Department's Purchasing Framework.
- The PTAS Operational Protocol and Register of Decisions will be maintained and implemented by the Statewide PTAS Operational Committee (or other appropriate body) as delegated by the CEOs of the THOs.
 - The PTAS Operational Protocol specifies the detail of implementing the scheme.
 - The Register of Decision allows for adaptation and interpretation to an evolving clinical landscape by providing a mechanism through which the statewide PTAS committee can make operational adjustments to the protocol as required.
- Review of this document will be, at minimum, every three years and will take into account feedback from the THO Boards and CEOs.