

Supplementary submission

Funding external doctors' health programs

Supplementary submission of Professor Greg Whelan and Dr Kerry Breen

Differential use of levies

From contact with various sections of the medical profession in our home state of Victoria and around Australia, it appears that the profession is united over the need for doctors' health advisory services but is divided over some aspects of the means by which such services should be funded and the nature of the services to be funded. This should not be surprising given the different histories, cultures, populations and stages of development of our states and territories.

Given that the MBA has consulted over an appropriate levy that might be imposed via annual renewal of registration fees to fund these services and given that, despite best intentions, national registration is not a singular uniform system (NSW being "co-regulatory"), we now raise for consideration the proposal that the MBA examine the use of a differential levy according to the wishes and needs of each jurisdiction. We believe that after experiencing more than ten years of successful operation of the Victorian Doctors Health Program, the medical profession in Victoria if asked directly would not wish to see any diminution of the services it provides and would not be distressed by being expected to continue to pay an annual levy of \$25-30.

It should be a reasonably simple task to base annual renewal of registration fees on the place of primary residence and add a different levy for these services in Victoria and, if desired, in each jurisdiction. This proposal would also assist in minimising complaints of inequities should a single fund based on a uniform levy be apportioned unequally across the jurisdictions. It would also allow the jurisdictional levy to be adjusted from time to time as jurisdictions gradually develop more complete and more modern doctors' health services. Finally, a differential system would allow the MBA to remain true to the undertaking given originally by the National Registration and Accreditation Implementation Project team that the new national system would build on the best of the existing state programs and would not lead to the abandonment of useful state initiatives.

Declaration of interests:

* Professor Whelan served as Acting CEO/Medical Director of VDHP during 2007-2009 and has had a long experience in assessing and managing doctors with health issues related to addiction (many referred from VDHP or MPBV).

* Dr Breen was involved in the establishment of VDHP while serving as President of the MPBV. He subsequently chaired the Board of Directors of VDHP from 2005-2009.