

17 August 2018

Mr Darryl Channing Director – Adjudication ACCC, GPO Box 3131 CANBERRA ACT 2601

Via email: adjucation@accc.gov.au

Dear Sir

Re: AA1000427 - RDAA - submission

The Australian College of Rural and Remote Medicine (ACRRM) supports the application of the Rural Doctors Association of Australia Limited (RDAA) for revocation of authorisation A91376 and substitution of new authorisation A1000427.

The College notes that the proposed collective negotiating arrangements are voluntary for all relevant parties and that authorisation of collective boycotts has not been requested. This in itself will ensure that there are no adverse effects on competition and a minimal chance of adverse public impact arising from these arrangements.

The granting of this application for revocation and substitution of A91376 would enable the RDAA and its State members to continue to effectively negotiate with the State health authorities regarding VMO services provided by rural doctors. This is especially necessary in States such as South Australia, where these negotiations are ongoing. It would also enable RDAA and the State Rural Doctor Associations (RDAs) to support their rural doctor members in any negotiations with LHNs and Primary Health Networks, which are carried out at the regional or local level.

This authorisation would support rural doctors (many of whom are Fellows or members of the College) with respect to the arrangements associated with the provision of Visiting Medical Officer (VMO) and other services. This in turn will potentially facilitate improved workforce recruitment and retention and efficiencies in contract negotiation and management. VMO services are essential in providing a wider range of health care services to people living in regional, rural and remote communities. Many of these communities continue to experience difficulty in accessing services and this is a significant contributor to poorer overall health outcomes.

In the view of the College, this application has significant potential for community benefit, especially in regional, rural and remote areas, with little associated risk of limiting competition or other adverse impacts.

Thank you for the opportunity to provide these comments.

Yours sincerely

A/Prof Ruth Stewart

President