



**RURAL DOCTORS
ASSOCIATION
OF AUSTRALIA**

Caring for the Country

Dr Richard Chadwick
General Manager, Adjudication Branch
ACCC
GP Box 3131
Canberra ACT 2601

9 September 2008

Dear Dr Chadwick

**Australian Medical Association Limited and State/Territory AMA organisations
application for Authorisation A91100**

I refer to your letter to the RDAA dated 22 August 2008 in relation to the above.

The RDAA notes that the AMA application has sought an authorisation to negotiate on behalf of rural GPs who work as VMOs in public hospitals. We note that the application seeks the same level of authorisation as granted by the ACCC to the RDAA on 14 May 2008 (A91078). Please note that we are not opposing the authorisation but simply seeking to ensure that the decision is factually correct.

We would make the following comments:

1. We note that the application does not recognise the pre-eminent role of the RDAA and State RDA's in representing rural doctors and the fact that the RDAA is the major voice in ensuring that the needs of rural doctors are not lost in the noise of metropolitan based doctors who form the majority of the profession.
2. It is not clear whether AMA is also seeking an authorisation to negotiate on behalf of rural generalists who work as independent VMO contractors contracted to public hospitals. We note that some States now recognise Rural Generalists as a separate group within the medical profession and that the RDAA authorisation did include this group of doctors. We would request the AMA clarify the confusing statement in the last sentence of the first paragraph of page 15 of their application that "the bargaining group does not include medical practitioners other than GPs in rural or remote areas, 'rural generalists', or GPs or medical practitioners other than GPs in metropolitan areas."
3. We note that in response to comments made by Queensland Health (A91078 -Submission - after draft decision Queensland Health - 27.03.08) and the AMA

(A91078 - Submission - after draft decision AMA - 28.03.08) the RDAA noted that "RDAA would have no objection of jointly negotiating with an appropriately authorised body such as the AMA." The RDAA is the only organisation that advocates solely on behalf of RDAA doctors, the RDAA expects that its involvement in VMO negotiations would ensure that the needs of rural doctors are appropriately identified in any agreement. We would seek a similar commitment from the AMA that they would jointly negotiate with the RDAA. This commitment would ensure that negotiations are undertaken in an orderly way with the best outcomes achieved for rural doctors, rural communities, rural hospitals and the State Governments.

4. The RDAA would note that the granting of the authorisation to the RDAA has already provided the public benefits cited in the AMA application as the rural VMO contract negotiations can already proceed under the terms of the RDAA authorisation.
5. The AMA in their application note that if an authorisation is not granted that the status quo will continue into the foreseeable future. This is clearly not the case as the process of negotiation has already commenced in a number of States and further negotiations are expected to commence within the next year.
6. We note that RDAA is in a position to represent the needs of rural doctors in any VMO negotiations and should the ACCC not provide an authorisation to the AMA then these negotiations will still continue.

If you require any additional information please do not hesitate to contact me on 02 62739303 or via email at ceo@rdaa.com.au.



Steve Sant
Chief Executive Officer