EXPLANATORY STATEMENT

Veterans' Affairs (Treatment Principles) Amendment (Medical Practitioner Fee Schedule Services) Determination 2025

EMPOWERING PROVISION

The Repatriation Commission makes this instrument under subsection 90(5) of the *Veterans' Entitlements Act 1986* (the *VEA*).

The Military Rehabilitation and Compensation Commission makes this instrument under subsection 286(5) of the *Military Rehabilitation and Compensation Act 2004* (the *MRCA*).

Under subsection (6) of the respective empowering provisions, the Minister approves the instrument, and under subsection (7), the Minister is the rule-maker.

PURPOSE

This instrument amends the *Treatment Principles* (Instrument 2013 No. R52) and the *MRCA Treatment Principles* (No. MRCC 53/2013) – collectively the *Treatment Principles* – to expand the services that can be claimed by general practitioners or medical specialists for treatment delivered to an entitled person without requiring the prior financial approval of the Commissions.

OVERVIEW

The *Treatment Principles* set out the places at which, the circumstances in which, and the conditions subject to which, a particular kind or class of treatment may be provided for entitled persons under relevant provisions of the MRCA and the VEA and are to be read subject to those Acts.

Part 4.2 of the *Treatment Principles* establishes that an entitled person may be provided with medical practitioner services that are included in the Medicare Benefits Schedule (MBS). This instrument amends the *Treatment Principles* to allow general practitioners and medical specialists to also provide non-MBS services listed in the *Department of Veterans' Affairs Fee Schedule for Medical Services*.

EXPLANATION OF PROVISIONS

Section 1 states the name of the Instrument.

Section 2 provides that the Instrument commences on 1 December 2025.

Section 3 sets out the authority for the making the Instrument:

> The Repatriation Commission makes this instrument under subsection 90(6) of the *Veterans Entitlements Act 1986*.

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The Military Rehabilitation and Compensation Commission makes this instrument under subsection 286(6) of the *Military Rehabilitation and Compensation Act 2004*.

Section 4 is a standard provision used in instruments that amend or repeal other instruments. It gives effect to Schedule 1.

Schedule 1 — Amendments

Item 1

Paragraph 4.2.3(1)

This item amends the definition of "unlisted services" to include any service that is not made available under the *Medicare Benefits Schedule* or the *Department of Veterans' Affairs Fee Schedules for Medical Services.*

Item 2

After paragraph 4.2.7 (Note)

This item inserts new provisions that allow an entitled person to be provided with services that are specified in the *Department of Veterans' Affairs Fee Schedule for Medical Services* but not otherwise listed on the *Medicare Benefits Schedule*. These services may be provided by a general practitioner or medical specialist and do not require the prior financial approval of the Commission.

The purpose of the amendment is to streamline administrative processing for common medical services. Removing the need for prior approval for common services will reduce the regulatory burden for providers of these services and improve timely access to treatment for veterans.

Items 3 and 4

These items make the same amendments, as described in Items 1 and 2 above, to the *MRCA Treatment Principles*.

Consultation

Consultation was not undertaken in relation to this instrument. The current amendments remove the requirement for prior approval from certain medical practitioner services that are already funded by DVA through prior approval arrangements. These changes to the *Treatment Principles* are consistent with stakeholder feedback received by DVA relating to the administration of veteran health arrangements and is expected to have a positive impact on veterans and providers.

Documents incorporated by reference

Not Applicable. This instrument does not incorporate any new documents by reference. The *Department of Veterans' Affairs Fee Schedule for Medical Services* is already incorporated by reference into the *Treatment Principles* under Section 3.5.

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Human rights implications

This instrument is compatible with the human rights and freedoms recognised or declared under section 3 of the *Human Rights (Parliamentary Scrutiny) Act 2011*. A full statement of compatibility is set out in **Attachment A.**

Making the instrument

The instrument is made by the Repatriation Commission under subsection 90(6) of the *Veterans Entitlements Act 1986* and the Military Rehabilitation and Compensation Commission under subsection 286(6) of the *Military Rehabilitation and Compensation Act 2004*.

Approved by

Minister for Veterans' Affairs

Rule-maker

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Attachment A

Statement of Compatibility with Human Rights

Prepared in accordance with Part 3 of the Human Rights (Parliamentary Scrutiny) Act 2011

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This Disallowable Legislative Instrument is compatible with the human rights and freedoms recognised or declared in the international instruments listed in section 3 of the *Human Rights (Parliamentary Scrutiny) Act 2011* (the ***recognised rights***).

Overview of the Disallowable Legislative Instrument

The *Veterans' Affairs (Treatment Principles) Amendment (Medical Practitioner Fee Schedule Services) Determination 2025* (the Instrument) amends the *Treatment Principles* (Instrument 2013 No. R52) and the *MRCA Treatment Principles* (No. MRCC 53/2013) – collectively the *Treatment Principles* – to expand the services that can be claimed by general practitioners or medical specialists for treatment delivered to an entitled person without requiring the prior financial approval of the Commissions.

Human rights implications

Article 12 of the *International Covenant on Economic Social and Cultural Rights* (the Covenant) provides for the right of everyone to enjoyment of the highest attainable standard of physical and mental health.

The United Nations Committee on Economic, Social and Cultural Rights (the Committee) states that health is a "fundamental human right indispensable for the exercise of other human rights" and that "every human being is entitled to the enjoyment of the highest attainable standard of health conducive to living a life in dignity". The Committee further states that the "right to health must be understood as a right to the enjoyment of a variety of facilities, goods, services and conditions necessary for the realisation of that standard" instead of a general right to be healthy. Article 12.2(d) of the Covenant requires "the creation of conditions which would assure to all medical service and medical attention in the event of sickness."

This instrument expands the medical services that can be delivered by general practitioners and medical specialists to an entitled person without requiring the prior financial approval of the Commissions. These amendments ensure more timely and consistent access for veterans to a wide range of preventive, curative, and rehabilitative health treatments. The changes will reduce regulatory burden for health care providers, increase treatment access for eligible patients, and support DVA to respond to an increasing demand for high quality health care services among the veteran community.

Conclusion

This instrument is compatible with human rights as it promotes the right to health by expanding the scope and timeliness of services that can be provided to an eligible person

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without requiring the prior financial approval of the Commission, consistent with Article 12 of the International Covenant on Economic Social and Cultural Rights.

Minister for Veterans' Affairs

Rule-Maker

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