



Government of **Western Australia**
Department of **Health**

Interstate Patient Travel Scheme (IPTS)

Policy Document



Contents

1.	Introduction	1
2.	Background	2
2.1	Interstate Patient Travel Scheme (IPTS)	2
2.2	IPTS Process Guidelines	2
3.	Eligibility	2
3.1	Patients	2
3.2	Medical specialist (WA) referral	3
3.3	Approved specialist medical services	3
3.3.1	Eligible specialist medical services	3
3.3.2	Ineligible medical services	3
3.3.3	Follow-up appointments	4
3.4	Assistance under another scheme or compensation	4
4.	Assistance	4
4.1	Escort	4
4.1.1	Non-medical escort	4
4.2	Subsidies	5
4.2.1	Travel	5
4.2.2	Advanced travel	5
4.2.3	Accommodation	5
4.2.4	Excess costs	6
4.2.5	Extended stay	6
4.2.6	Cancellations or changes	6
4.2.7	Living away allowance	6
4.2.8	Timeframes for submitting applications	6
4.2.9	Deceased patients	6
4.2.10	Termination	7
Appendix 1: Fares claimable under another scheme		8
Appendix 2: Schedule 1 – IPTS subsidy rates		9
Policy updates		9

1. Introduction

Purpose

This Policy provides the revised governance framework for the Interstate Patient Travel Scheme (IPTS), following changes to the IPTS travel criteria on 2 March 2018.

It outlines the requirements for IPTS eligibility and subsidy options.

Assistance provided

IPTS was implemented to provide travel assistance primarily to the patient. The financial assistance offered by IPTS covers the cost of return travel from the individual's place of residence to the interstate health care unit. This assistance includes accommodation at venues and rates approved by the Department of Health WA.

Patients who hold approved concession cards are also provided a daily living away allowance. For the purpose of this document patients covered by a Health Care or Pensioner Concession Card are referred to as 'concession card holders'.

The Department of Health only provides the level of financial assistance described in this document. Requirements over and above these outlined are the responsibility of the patient.

Mandatory requirements

All staff must comply with this Policy Directive.

Implementation

This Policy applies to all WA Health staff and visiting medical practitioners.

Accountability

Accountability for the administration of the IPTS is vested with the Director General, Department of Health and has been delegated to the Chief Medical Officer.

Aim of the policy

The aim of this policy document is to facilitate consistency in the application of the IPTS scheme. It is recognised however that the policy cannot cover every circumstance; therefore, some flexibility may be applied in extreme circumstances.

Enquiries

Any enquiries regarding the following document should be directed to:

The Office of the Chief Medical Officer

Department of Health

PO Box 8172

Perth Business Centre, WA 6849

Email: ipts@health.wa.gov.au

2. Background

2.1 Interstate Patient Travel Scheme (IPTS)

The IPTS is a WA Government program which aims to improve access to specialised health treatment. While it is recognised that Western Australia (WA) can provide the vast majority of medical services required by its population, some services may not be available due to their speciality and relative rarity. The intention of the IPTS, is to provide travel and accommodation assistance to permanent residents of WA who have to travel interstate to obtain essential specialist medical treatment not available in WA.

The IPTS is a subsidy scheme, not a full reimbursement scheme. IPTS subsidises travel and accommodation and is not intended to cover all costs associated with accessing treatment.

This document outlines the IPTS governance framework and eligibility requirements.

2.2 IPTS Process Guidelines

This document must be read with the IPTS Process Guidelines and IPTS Subsidy Schedule which provides detailed information on subsidy rates, eligibility, administrative and procedural matters. The requirements detailed in this Policy are mandatory, and the IPTS Process Guidelines provide further detail and clarification on how IPTS is implemented. Sound reasoning must exist for departing from the IPTS Process Guidelines.

3. Eligibility

3.1 Patients

A patient is eligible for IPTS assistance if they:

- Have a permanent residential address in WA or can demonstrate they have spent more than six months of the previous 12 months in WA
- Have a Medicare Card or are covered under the Reciprocal Health Care Agreement
- Are receiving treatment at an eligible WA public health site
- Are unable to use telehealth to access the required specialist medical service (telehealth is a statewide/national video conference service to help improve patient access to health care in their community)

Private patients who access private specialist services are entitled to assistance as long as they meet the eligibility criteria.

A patient is ineligible for IPTS if they are:

- Travelling on holidays or business, and reside in another state/jurisdiction
- A fly-in-fly-out (FIFO) contractor whose permanent residence is not in WA
- Have an accepted claim (or eligible to claim assistance) from a third party, for example workers compensation, travel insurance, Department of Veterans Affairs, or other insurance cover (Section 3.4)
- Undertaking an inter-facility transfer or emergency aeromedical or ambulance transport

- Seeking a second opinion by a specialist without a medical referral
- Participating in clinical trials and experimental procedures.

Note: if a patient chooses to travel when telehealth is available and clinically appropriate, IPTS subsidies are not provided.

3.2 Medical Specialist (WA) Referral

To apply for IPTS assistance, applicants are required to obtain a referral from a WA medical specialist. The medical specialist must ensure that all locally available medical options are explored prior to referring the applicant to an interstate specialist. The referral must be obtained prior to interstate treatment as retrospective applications are not accepted.

3.3 Approved Specialist Medical Services

3.3.1 Eligible Specialist Medical Services

Specialist medical services that are eligible under IPTS include those that are:

- NOT available in WA
- Covered by an item in the Commonwealth Medicare Benefits Schedule Book*
- Deemed essential by the treating WA Specialist.

* To determine whether a procedure/consultation is covered under Medicare, call the Medicare national information line on 13 20 11 or visit the website at www.medicareaustralia.gov.au

3.3.2 Ineligible Medical Services

Specialist medical services that are ineligible under IPTS include:

- Treatment available in WA
- Treatment not covered by an MBS item number
- Routine follow-up appointments where the index medical condition is stable
- Second opinions
- For medical escorts (e.g. doctor, nurse, paramedic) for a patient
- For referrals for interstate services on the basis of shorter waiting lists
- Research and clinical trials
- Experimental treatment
- Dental or orthodontic services
- Non-specialist medical treatment
- Allied health services (e.g. speech pathology, physiotherapy, podiatry, clinical psychology etc)
- Nursing services/residential care facilities
- Services of a type or location that an application prefers, if suitable alternatives exist in WA
- Diagnostic work-up visits, if available in WA
- Medical advice, or a medical assessment

3.3.3 Follow-up appointments

- IPTS does not provide for routine follow-up where the patient's index medical condition (leading to initial referral) is stable. The referring clinician must therefore make provision to provide follow-up care locally.

Paediatric patients who may require repeat procedures with growth are eligible for ongoing support under IPTS.

3.4 Assistance under another scheme or compensation

Applications eligible to claim assistance under another government scheme or compensation are not eligible for IPTS assistance. Please see appendix 1 for examples of fares claimable under other relevant government schemes.

Patients with private health insurance are required to seek the maximum benefits from their private health fund before they apply for IPTS assistance. Confirmation of this is required prior to approval of an IPTS application.

4. Assistance

4.1 Escort

Eligible patients may qualify for assistance for an escort to travel with them. An escort is an adult who accompanies a patient when they travel to access a specialist medical service. This can assist them in their treatment, in an active care role or if the patient is impaired. The escort must be 18 years or older.

Escorts are not approved solely for emotional support or to keep the patient company.

When an escort is not approved the patient may still choose to have someone accompany them, however the escort's travel and accommodation costs will not be subsidised by IPTS.

4.1.1 Non-medical escort

Patients aged 17 years and under are automatically entitled to one non-medical escort. In life-threatening circumstances an additional escort may be approved (see Special Rulings in the IPTS Process Guidelines).

Patients 18 years and over are not entitled to an escort. An escort will only be approved if there is documentation from the referring specialist explaining how the patient is placed at serious risk by travelling alone.

The organ donor and recipient are both eligible for the subsidy of an escort. Escort's accommodation will be subsidised from the night prior to the operation until the patients (either donor or recipient) are medically fit to return home. This means that the donor and his/her escort are only subsidised until the donor is medically fit to return home; although it is likely that this will be prior to the return of the recipient and his/her escort.

To be eligible the escort must be:

- The patient's parent, legal guardian or next of kin (and is required to make decisions in relation to the patient's healthcare)
- Travelling with the patient
- Certified by the referring specialist as necessary for the medical well-being of the patient (i.e. patient significant medical risk if travelling alone; escort has an active role in care; patient has a physical or cognitive impairment etc). General or emotional support to the adult patient is an insufficient reason

Application for an IPTS funded escort must be made on the same form as the patient's application. **Applications must be made prior to travel as retrospective claims will not be accepted.**

4.2 Subsidies

IPTS applications are to be assessed on a case-by-case basis. Subsidies are available to eligible patients and approved escorts to assist with the cost of travel and accommodation. All subsidies are Goods and Services Tax (GST) exclusive and patients cannot claim a subsidy for any GST they incur for travel.

4.2.1 Travel

IPTS subsidy rates for travel appear in **Schedule 1 Appendix 2**. The GST component for travel costs is not reimbursable. A patient will not receive a travel subsidy for emergency transport via an ambulance or aeromedical organisations. Travel subsidies are calculated based on the cheapest available form of transport.

For approved patients and escorts, IPTS will cover the cost of one return economy airfare 'best fare of the day' from Perth to the interstate destination.

Regardless of the mode of transport used, travel assistance is only provided for travel to and from the airport. Escorts are not permitted to claim subsidies. Travel undertaken during a treatment period is not eligible for IPTS assistance.

4.2.2 Advanced travel assistance

Patients holding a valid concession card and experiencing financial hardship may apply for travel assistance before their appointment.

4.2.3 Accommodation

An accommodation subsidy is available to eligible patients and approved escorts for commercial or private accommodation. Accommodation will only be subsidised for the period the patient is required to be away from home for medical reasons, or where a return journey cannot be completed in one day.

The GST component of accommodation costs is not reimbursable.

Different subsidy rates apply depending on the eligible accommodation type (for profit, not-for-profit, or private). Inpatient hospital accommodation is not eligible. A patient may receive a subsidy for their escort's accommodation while they are an in-patient. IPTS subsidy rates for travel and accommodation appear in **Schedule 1 Appendix 2**.

4.2.4 Excess costs

The patient or escort is responsible for payment of accommodation charges where charges exceed approved levels. All amounts over and above the approved IPTS payment are the responsibility of the patient to settle directly with the accommodation provider prior to check out. This may occur in circumstances where:

- there is a gap in the IPTS approved level of assistance and accommodation cost
- the stay is extended past the agreed number of nights (without further approval being obtained)
- additional charges are incurred e.g. meals, phone etc.

4.2.5 Extended stay

If the patient's treatment period is unexpectedly increased, approval can be granted for the extended time period at the standard accommodation rates. To extend a stay, patients are required to contact the Project Officer and forward written confirmation from their interstate specialist. Approval for extended stay will only be given for the patient and the approved escort.

4.2.6 Cancellations or changes

It is the responsibility of the patient to advise the Project Officer of any changes to their travel plans. If a patient fails to provide adequate notice (i.e. within 24 hours) and/or misses their travel/accommodation without good reason (i.e. changes the arrangements for their convenience), the patient will be responsible for the cost. If patients miss the appointment without good reason, they are not eligible to claim IPTS for a second trip unless there are exceptional circumstances.

4.2.7 Living away allowance

Approved patients who have a Concession Card may claim a Living Away Allowance (LAA) for each day they are interstate. This includes the days they travel to and from the interstate destination except when leaving first thing in the morning on a return flight. No allowance is payable to the patient on days they are admitted to hospital.

LAA is usually paid on completion of the interstate round trip. In extenuating circumstances where financial hardship has been identified, a proportion of the LAA may be paid in advance.

4.2.8 Timeframes for submitting reimbursement claims

IPTS subsidy applications must be submitted to the IPTS office at the Department of Health WA within six weeks from conclusion of their journey. A patient will not receive a subsidy for journeys outside six weeks, even if the patient meets the eligibility criteria.

4.2.9 Deceased patients

Where a patient dies during treatment, IPTS will provide a travel subsidy to assist with the costs of transporting their body home. Escort travel may be available if a patient dies during treatment and the escort is on the return trip.

4.2.10 Termination

IPTS assistance will cease to apply where a WA resident is deemed to have transferred their primary residential address from WA.

Appendix 1: Fares claimable under another scheme

Patient Assisted Travel Scheme (PATS)

In some instances, assistance may be provided by PATS to facilitate a journey to another state if the referral is to the nearest specialist and all other PATS criteria are met. This essentially affects localities in the Kimberley Health Service where it may be more appropriate to send the patient to the closest specialist in Darwin, as opposed to travelling to Perth. If the requirement for PATS are met, then IPTS is not responsible for the arrangements.

www.wacountry.health.wa.gov.au/index.php?id+pats

Department of Veterans' Affairs

If a patient is eligible for assistance through the Department of Veterans' Affairs (DVA) Veterans' Affairs Transport Scheme, they are not eligible for IPTS assistance. If they do not qualify for assistance with DVA the IPTS application process outlined in this policy may apply. Further information can be accessed from the DVA website www.dva.gov.au

Motor vehicle insurance or Workers Compensation

Where individuals are seeking medical specialist treatment for a condition compensated through motor vehicle insurance or Workers Compensation, claimants should be encouraged to claim direct from the motor vehicle insurance company or their employer wherever possible.

Where a motor vehicle insurance or a worker's compensation claim is pending, financial assistance may be provided through IPTS and claimed against future compensation or insurance awards.

Relevant claim references and numbers should be recorded on the application form, if known.

In these instances, the applicant must supply a statutory declaration whereby he/she undertakes to repay all IPTS funds paid should the claim be determined in the patient's favour.

The patient is expected to notify their legal representatives pursuant to the declaration so that IPTS may be reimbursed upon determination.

Commonwealth Department of Health and Ageing

Patients who travel to or from outside Australia are not eligible for assistance under IPTS. This is a Commonwealth matter and inquiries should be directed to the Commonwealth Department of Health and Ageing who oversee the Medical Treatment Overseas Program (MTO).

www.health.gov.au/internet/main/publishing.nsf/Content/strategicpolicyMTO.htm

Appendix 2: Schedule 1 – IPTS subsidy rates

Transport subsidy rates

Transport Type	Subsidy Rate
Air travel (excluding GST)	Full reimbursement for approved air travel at economy rates. Approval required from referring medical practitioner or treating specialist prior to booking travel.
Travel by road	Max \$200.00
Private vehicle (to and from airport only)	30 cents per kilometre (mileage needs to be recorded)
or	
Taxi (to and from airport only)	For duration of journey

Accommodation subsidy rates

For profit accommodation	Maximum subsidy	
Total nights stayed (financial year)	Patient or escort only \$80 per night	Patient and escort(s) \$100 per night
Not-for-profit accommodation (financial year)	Maximum subsidy	
Total nights stayed (financial year)	Patient or escort only \$80 per night	Patient and escort(s) \$100 per night

Living allowance

Daily living allowance	Patient \$43.20	Escort \$26.00
-------------------------------	--------------------	-------------------

Policy updates

This policy document will be reviewed and updated at regular intervals. Applications will be assessed based on the most current IPTS policy document which has been approved by the Director General of WA Health. With variations in funding and availability of WA based services this may mean that from time to time conditions that were funded under previous versions of the IPTS policy are no longer eligible under an updated version. It is important that patients and referring specialists are aware of eligibility criteria, special rulings and conditions under the latest approved version of the IPTS policy. The Project Officer can be contacted for further information via email ipts@health.wa.gov.au.

This document can be made available in alternative formats on request for a person with disability.

Produced by the Office of the Chief Medical Officer
© Department of Health 2021

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.