

Reciprocal Health Care Agreements (RHCA)

Summary This Policy Directive provides information regarding the classification, treatment and charging arrangements of Reciprocal Health Care Agreement patients.

Document type Policy Directive

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 - Branch contact 02 9461 7674
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Functional group Corporate Administration - Fees, Finance

- Applies to Ministry of Health, Public Health Units, Local Health Districts, Specialty Network Governed Statutory Health Corporations, Affiliated Health Organisations, NSW Health Pathology, Cancer Institute, Community Health Centres, NSW Ambulance Service, Dental Schools and Clinics, Public Hospitals
- Distributed to Ministry of Health, Public Health System, NSW Ambulance Service
 - Audience Administration;Revenue Managers;Admissions Staff, Revenue Staff, Finance Managers, Patient Administration System Managers/Developers;Administrative, Directors of Finance, Revenue Managers, Billing Staff Administration



RECIPROCAL HEALTH CARE AGREEMENTS (RHCA)

POLICY STATEMENT

NSW Health is committed to providing free or subsidised medically necessary treatment to those patients who are eligible under their country's Reciprocal Health Care Agreement (RHCA) with the Australian Government.

SUMMARY OF POLICY REQUIREMENTS

NSW Health staff need to be aware of what services are/are not covered by an Agreement.

Reciprocal Health Care Agreements differ from country to country. It is important to know what services are available for each country's citizen/resident to access when in Australia and in NSW.

By understanding these Agreements, staff will be able to provide verbal and written advice to patients presenting at NSW Health facilities that is current, correct and ensures that patients can make an informed financial decision.

NSW public facilities can provide "medically necessary" treatment to Reciprocal Health Care Agreement patients as defined by their country's agreement. Medically necessary treatment is treatment for ill-health or an injury which occurs while the visitor is in Australia and requires treatment before returning home.

This can include emergency department assessment and treatment; acute admissions to a public hospital or mental health facility; ambulatory/outpatient care, (including antenatal, confinement and postnatal care), mental health services and community health services. Interhospital patient transport is also included if required for ongoing care.

The Agreements do not cover treatment as a private patient in a public or private hospital. If a patient elects to be treated as a private patient, they will be classified as Medicare ineligible and charged.

All staff working in NSW Health facilities/services are to adhere to this Policy and Information Bulletin.

Version	Approved by	Amendment notes
November-2021 (PD2021_045)	A/Deputy Secretary and CFO	Tables removed and replaced with an Information Bulletin. Policy Document has been replaced with a policy statement.
September-2021 (PD2021_042)	A/Deputy Secretary and CFO	Initial Document.

REVISION HISTORY