Continuing Medical Education Support for Victorian Public Hospital Medical Specialists
Model Guidelines

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1. Purpose and Application

CME support is intended to maintain and enhance the skills and knowledge of the Doctor through reimbursement of costs directly incurred.

These guidelines have been developed to assist both Doctors and Health Services to better understand and apply the terms of Clause 19 of the AMA Victoria – Victorian Public Health Sector Medical Specialists Enterprise Agreement 2013 (the ‘Specialists Agreement’).

These guidelines apply to all Specialists (Full-Time and Fractional) employed as such (Doctors) in accordance with the Specialists Agreement and to all Health Services that employ those Doctors.

The guidelines should assist Doctors in their planning of their Continuing Medical Education (CME) Support and help Health Services in their consideration and processing of CME Support reimbursement claims.

2. Disclaimer

These guidelines do not substitute for or vary the provisions of Clause 19 (or any other term) of the Specialists Agreement. While these guidelines seek to provide contextual advice with respect to CME entitlements and rules, they provide advice on only a limited subset of the many possible scenarios that might arise in claiming and approving CME Support.

These guidelines do not purport to provide advice or guidance with respect to professional development support arrangements that were in place prior to 1 July 2006 and which remain in place.

3. Entitlement to CME Support

Doctors employed on a full-time or Fractional basis by a Health Service are entitled to reimbursement of approved CME expenses in accordance with Clause 19 of the Specialists Agreement.

The CME entitlement is calculated on a ‘financial year’ basis – ie, from 1 July through 30 June. Although the maximum CME Support available to a Doctor is described in sub-clause 19.1.1 on an annual basis, the Doctor does not have to be employed by a Health Service (or Health Services) for the full financial year to have access to that maximum annual amount. **There is no ‘pro-rata’ adjustment to the maximum annual amount available based on the Doctor’s period of employment.**

However, the maximum annual amount of CME Support is pro-rated based on a Doctor’s time fraction. A Doctor is entitled to one tenth of the maximum annual amount of CME Support for each 0.1 of EFT / 3.5 hours he/she represents (see sub-clause 19.1.3).

Where a Doctor transfers from one Health Service to another during the course of the financial year, and where a Doctor is employed concurrently by more than one Health Service, the maximum amount claimable is that specified in sub-clause 19.1.1 of the Specialists Agreement.
4. Reimbursable CME Activities and Items

The Specialists Agreement describes at sub-clause 19.2 three categories of expenses for which a Doctor can claim reimbursement (subject to all other requirements being met):

- Registration, travel, accommodation and incidental costs relating to attendance of professional conferences and workshops; and/or
- The cost of enrolment in relevant short courses, workshops or post-graduate courses; and/or
- The purchase of books, CDs (DVDs are deemed to be equivalent items), portable technological aids (with some caveats) and subscriptions.

Further advice and guidance on these categories of expense is provided later in this document.

5. Key Considerations for Claims

For Doctors planning CME Support activities or purchases for which they intend to make claim for reimbursement under Clause 19 of the Specialists Agreement, their underlying considerations must be:

- How much CME Support am I entitled to receive? (See sub-clause 19.1)
- How much of that benefit have I already utilised with this or another Health Service (ie, how much of my entitlement is left)? (See sub-clause 19.1)
- Does the activity or item I will be seeking reimbursement for fit into one of the categories described in sub-clause 19.2?
- Will the costs of each activity or item be reasonably and necessarily incurred? (See sub-clauses 19.1.4 and 19.3.2(b))
- Are the costs for CME activities or purposes directly relevant to my employment with the Health Service? (See sub-clause 19.1.4)

For Health Services reviewing CME Support reimbursement claims once submitted by Doctors, their underlying considerations must be:

- Has the Doctor satisfied the abovementioned considerations?
- Has the Doctor provided necessary and appropriate evidence of the expenses incurred? (sub-clause 19.4.2)
- Has the claim been submitted on time? (See sub-clause 19.4.3)
- Has the Doctor confirmed that he/she has not already claimed reimbursement with this or other Victorian Health Service?
6. Claim timeframes

All claims must be submitted within 3 months of expenditure being incurred and, where practical, within the financial year in which they were incurred. Claims will be attributed to the financial year in which the cost was incurred. The deadline for claims to be processed for each financial year is the following 30 September; however, this only applies to claims arising in the immediate preceding May/June. (This means that fully compliant claims must be received by the Health Service before this date.)

Fully compliant claims will be reimbursed within 30 days of receipt by the Health Service; however every effort will be made to process reimbursements more quickly.

7. Approval and documentation required

All claims must be on an appropriate CME Support claim form and all claims must be approved by the relevant authorised delegate (see sub-clause 19.4.2).

With the exception of per diem rates, all claims must be accompanied by evidence of payment by the Doctors. See sections 9 and 11 of this document for more details of per diem rates. Per diems can be paid as an allowance in advance under sub-clause 19.4.5 of the Specialists Agreement, or by way of a payment after the event.

Further Guidance

8. Change of hours/new appointments during the year

The annual CME Support entitlement is available from the start of each financial year, or from commencement of employment. It is not pro-rated for length of time in the position.

Where standard hours of employment change, the full-year CME Support will be adjusted to reflect the new hours. The annual entitlement is not pro-rated for the length of time at the new hours. Where a Doctor has reduced hours and has already been reimbursed at a rate higher than the new hours would allow, repayment is not required.

Where existing hours are amended for a fixed period of time during the year – eg, for replacement of a staff member on sabbatical leave–CME Support can be based on the average hours over the full year to recognise the additional hours of work.

The entitlement for existing Fractional Specialists employed in a ‘relieving’ capacity is based on the average hours worked during the preceding year.

A new Fractional Specialist employed in a ‘relieving’ capacity can request calculation of CME based on the average hours worked during the year (ie, pro rata).
9. CME Support payment

As a general rule, CME Support is based on reimbursement only; no claims may be paid in advance. CME Support reimbursement is usually made via payroll directly into the bank account nominated by the Doctor.

The only exception to this general rule is with respect to per diem expenses relating to attendance at professional conferences and workshops. For those per diem expenses, a Doctor may request payment of an allowance prior to travel in accordance with the amounts set out in the relevant ATO tax determination dealing with reasonable allowance amounts. Such an allowance will be assessable income in the hands of the Doctor under the *Income Tax Assessment Act 1997* (Cth), as amended or replaced from time to time.

Doctors wanting to exercise this option must make their application for pre-payment of daily travel allowance expenses no more than six weeks, and no less than one week, prior to commencement of the CME activity/travel.

Claims for reimbursement of CME Support costs must be accompanied by supporting documentation – eg, original receipts or travel diaries as relevant to the cost incurred.

10. Claimable expense type

As per the Specialists Agreement (sub-clause 19.2.1), a Doctor is entitled to seek reimbursement for the following Continuing Medical Education related costs:

(a) Costs relating to professional conferences and workshops, including registration fees, and reasonable travel, accommodation and per diem expenses; and/or

(b) Costs associated with enrolment in relevant short courses, workshops or post graduate courses recognised by the Speciality College for purposes of accruing CME / CPD / MOPS points; and/or

(c) Other reasonable costs such as books, CDs, portable technological aids (not including items of a capital nature eg, ultrasound imaging devices, mobile telephones or iPods and like audio devices) and subscriptions where the resources are not otherwise provided by, or available from, the Health Service.

10.1 Course/conference Registration fees

These are reimbursable only for professional conferences and workshops. Where leave from the Health Service is required this must also be approved by the Chief Medical Officer or delegate, in accordance with the Health Service’s policy (where applicable).

10.2 Travel expenses

Travel costs associated with travel to and from the approved education activity may be reimbursed as CME Support. Additional or lateral travel for personal purposes may not be claimed.

Generally a Doctor should complete his/her travel as soon as practical after the completion of the education activity. Where the Doctor elects to extend the travel, expenses for such additional days are not considered a CME expense. Any additional costs incurred as a result of annual leave – eg, additional travel will not be reimbursed.
A travel diary must be completed for all international travel and domestic travel where a Doctor is away six or more nights.

**10.3 Accompanying person**

CME Support may not be claimed for any additional expenses incurred as a result of the Doctor being accompanied on his/her travel. This includes, for example, the cost of larger accommodation than would be required for the Doctor travelling alone, or attendance of a guest at conference functions.

Where it is not possible to separate the additional expenses incurred on behalf of the accompanying person(s), an estimate of the cost for the Doctor alone will be reimbursed. For example, where a Doctor is accompanied, a standard room only will be reimbursed and the cost of room service charges will be divided by the occupants of the room.

**10.4 Travel Insurance**

For international travel, travel insurance may be claimed. Where any additional leave is taken in addition to the education activity, the travel insurance must be pro-rated. Where an annual insurance policy is taken, it will be assumed that 50% of the cost of the insurance is CME related, unless additional evidence is supplied.

**11. Meals and Incidental expenses**

Claims may be made for reasonable and necessarily incurred meal and incidental expenses whilst the Doctor is travelling from his/her home city for an approved CME activity. Guidance for a reasonable amount is the amounts set out in the relevant ATO Tax Determination (The tax determination is updated annually, it is currently 2014/19 – found on the ATO Website at [http://www.ato.gov.au](http://www.ato.gov.au)). The rate used will be based on the base full-time equivalent salary applicable to the position occupied by the Doctor.

The Doctor may elect for reimbursement of expenditure based on receipts or on a per diem basis at the rates set by the ATO. Alternatively, the Doctor may request pre-payment of anticipated per diem expenses according to ‘ATO daily amounts’ (see sub-clauses 19.4.5 and 19.3.2).

Where pre-payment of per diems is claimed, no additional food or incidental costs should be claimed for the travel.

**12. Car Hire**

Car hire would not be expected to be claimed as a CME-related activity unless no other transport option (flights, public transport, taxis) is available. The vehicle hired must be reasonable for the CME activity.

Car-hire may not be claimed for travelling interstate or inter-country, except in emergencies (ie, cancellation of other forms of travel due to strikes or equipment failures).
13. Personal Vehicle Travel

A vehicle allowance may be claimed for self-drive travel to conferences at the applicable rate per business kilometre published by the Australian Taxation Office from time to time (refer to: [http://www.ato.gov.au](http://www.ato.gov.au)). The maximum rate reimbursed shall not exceed that which would have been reimbursed if the Doctor had taken a domestic flight; this includes any per diem.

As with flights, the primary purpose of the travel will be considered when calculating the amount to be reimbursed.

14. Accommodation

Accommodation required for an approved CME activity may be claimed. As with all CME expenses, it must be “reasonably and necessarily incurred” for the CME activity. For example, when claiming for domestic travel, accommodation the night before or after a conference, the start and finish times, as well as the distance from the usual place of work, are taken into consideration. For extended international travel, reasonable time for adjustment on arrival can be approved.

The accommodation rate claimed must be reasonable. Guidance for this is given by the ATO tax ruling on “reasonable travel and overtime meal allowance expense amounts”. (The tax determination is updated annually – currently 2014/19 – found on the ATO Website at [http://www.ato.gov.au](http://www.ato.gov.au)).

It would be unusual for accommodation expenses to be reimbursed where a Doctor is attending a conference/workshop in the Doctor’s home city.

15. Documentation Required for travel claims

The following documentation must be supplied (sub-clause 19.4.2):

- evidence of payment and attendance at the CME activity (even if the cost of attendance is not being claimed; and
- evidence of payment for all travel expenses excluding per diem; and
- A confirmed flight e-ticket where applicable (flight costs cannot be reimbursed without this).

Where claims for a conference are split over several claim forms – ie, one claim for the registration and a further claim for flights and a separate later claim after attendance for accommodation – the earlier claims should be referenced.

Where international transactions are claimed, a copy of the actual transaction (ie, receipt or credit card slip) must be included to assist in identifying the correct exchange rate. Where cash has been paid for incidentals without provision of a receipt, an estimate of the exchange rate may be calculated based on the relevant or estimated date.
16. Professional Reference Materials

A Doctor may seek reimbursement of professional reference material such as books, CDs (or DVDs), journal subscriptions, not otherwise provided by the Health Service, for the Doctor’s personal use. Purchase of these materials for a Health Service’s or other third party library should not be reimbursed for CME purposes.

Mobile phone or internet plans (mobile or fixed) are not comprehended under ‘reimbursable subscriptions’ in sub-clause 19.2.1(c) as CME Support costs.

17. Technological Aids

A Technological Aid statutory declaration must be completed for all claims for technological aids.

17.1 Computer Purchases

A portable, notebook computer may be reimbursed where:

- It is required by the Doctor for the purpose of taking notes, reviewing provided literature and drafting reports during or relating to a professional conference, workshop or course that he/she is attending as part of his/her approved CME activity or for reviewing CME materials online (this is in recognition that many Journals are now available only electronically);
- One is not supplied by the Health Service;
- One has not been reimbursed as CME from any Health Service in the last 3 years;
- Its purchase is a reasonably and necessarily incurred cost. (This would exclude purchases of high-end notebooks when the need would be satisfied by a computer of a lesser specification. Where notebooks are considered excessive to the CME needs only the value of a lesser specification computer will be reimbursed.)

Accompanying portable accessories (eg, a computer carry bag or a mouse) may be reimbursable where their purchase is reasonable and necessary.

Extended Warranties and protection devices are claimable under CME Support, again where reasonable and necessary. Where an extended warranty has been claimed, a new technological device of a similar nature will not be eligible for CME Support reimbursement until the extended warranty has expired unless loss of or damage to that item falls outside the purchased warranty.

Reasonable software required for the CME activities of the computer purchase may be reimbursed. For example the purchase of a basic Microsoft Office package (ie, ‘Home and Student’ or equivalent) would be generally reimbursable, whereas the purchase of a more advanced package (eg, ‘Premium’ or ‘Home and Business’ or equivalent) would need to be justified.

17.2 iPads/Smartphones

iPad/smartphone purchases may be reimbursed where the practitioner can demonstrate the CME related activities requiring the item, and, a similar item has not been reimbursed as CME Support from any Victorian Health Service in the last 3 years.

The purchase of mobile telephones (other than a smartphone) and iPods (or like audio devices) is specifically excluded from CME Support reimbursement.
17.3 Digital Cameras

Digital cameras may be reimbursed where the Doctor can demonstrate that it is a reasonable and necessary expense for his/her CME purposes. The purchase of a digital camera must be reasonable and necessary in relation to the educational application of the camera.

In some instances the aid may need to be replaced earlier due to damage or failure to continue to provide assistance with CME. In other cases the useful life of an item may be a longer period.

18. Sabbatical Leave

As Sabbatical Leave is a separate form of leave from Continuing Medical Education Leave – and as the activities typically performed during a period of Sabbatical Leave are not the activities specifically comprehended in sub-clauses 19.2.1(a) and 19.2.1(b) – they do not qualify for reimbursement as CME Support. However, if during a period of Sabbatical Leave, a Doctor seeks to undertake an activity that would qualify for reimbursement as CME Support, he/she may seek approval to undertake that activity and have directly related costs reimburses. This cannot include any travel or accommodation costs relating to the Sabbatical Leave itself.

For example, if the Doctor is on Sabbatical Leave in location A and travels to location B for an approved conference, the travel-related expenses of moving between location A and location B, as well as appropriate per diem expenses in location B, may be claimed. The Doctor may not otherwise claim travel to and from location A or accommodation at location A in this example.
APPENDIX 1 – Clause 19 of the Specialists Agreement

19. CONTINUING MEDICAL EDUCATION SUPPORT

19.1. Funded Support entitlement

19.1.1 The entitlement for full-time Doctors is for reimbursement of approved costs (inclusive of the support at clause 19.1.2 and subject to clause 19.1.5 below) up to a value of:

<table>
<thead>
<tr>
<th>Financial Year</th>
<th>Reimbursement of approved costs up to a value of</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013/14</td>
<td>$23,487</td>
</tr>
<tr>
<td>2014/15</td>
<td>$24,269</td>
</tr>
<tr>
<td>2015/16 and thereafter</td>
<td>$25,077</td>
</tr>
</tbody>
</table>

19.1.2 Where support was provided to Doctors prior to 1 July 2006 (including from PPFs, SPFs or similar funds), those arrangements will be unchanged by this clause. This includes support that in the absence of this clause would have normally been available to new Doctors of a Health Service.

19.1.3 The entitlement to funding support for fractional Doctors is pro rata based on the Doctor’s base fractional appointment (up to $2,348.70 in the 2013/14 financial year; $2,426.90 for the 2014/15 financial year; and $2,507.70 for the 2015/16 financial year and thereafter, for each 0.1 fraction / 3.5 hours), provided that where a Doctor holds more than one fractional appointment with a Health Service listed in Schedules 1-5 of the Health Services Act 1988 (Vic), the total benefit available to the Doctor each year will not exceed the full-time rates contained in clause 19.1.1.

19.1.4 Subject to clauses 19.2 and 19.3 below, funds will be paid to the Doctor as a reimbursement of costs reasonably and necessarily incurred for CME activities or purposes directly relevant to the Doctor’s employment with the Health Service.

19.1.5 The funding provided for in this clause is a “benchmark” entitlement. A Chief Medical Officer/delegate may approve higher levels of support dependent on the monies available in the appropriate fund.

19.2. Reimbursable Expenses

19.2.1 Pursuant to clause 19.4 a Doctor is entitled to seek reimbursement for the following CME related costs:

(a) costs relating to professional conferences and workshops, including registration fees, and reasonable travel, accommodation and per diem expenses; and/or
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19.3. Rates of Reimbursement

19.3.1 Air travel associated with CME activities will be reimbursed at the rate of business class for journeys of 3 hours or more, and economy class for journeys of less than 3 hours’ duration. Claims for private car use for travel associated with CME activities will be reimbursed at the relevant rate per business kilometre published by the ATO from time to time.

19.3.2 Accommodation, meal and incidental expenses:

(a) Reimbursement of reasonable and necessarily incurred accommodation, meal and incidental expenses relating to CME activity will be paid subject to the following:

(A) Accommodation may be at the hosting hotel or elsewhere as is reasonable for the conference/seminar attended;

(B) Meal and other incidental expense amounts will be in accordance with the amounts set out in the relevant ATO Tax Determination dealing with reasonable allowance amounts (currently Tax Determination 2013/16 which can be found on the ATO website at http://www.ato.gov.au/).

The ATO daily allowance rates vary according to salary. The rates used should be based on the full-time equivalent salary applicable to the position occupied by the Specialist, ie Fractional Specialists should be paid the rate relevant to a full-time salary. For the purpose of this clause, “salary” shall mean the Specialist’s base salary. The salary used for this purpose is not reduced by any salary sacrifice arrangement.

(b) Where the CME activity does not involve travel (eg. post-graduate study, local conferences), reasonable and necessary expenses actually incurred should be paid.

19.4. Reimbursement

19.4.1 Reimbursement may be claimed by a Doctor using a common simplified claim form provided by the Health Service:

(a) an initial common simplified form (see SCHEDULE C) will be implemented within three months of the date on which this Agreement comes into operation;
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(b) the initial common simplified claim form will be reviewed by the parties after it has been in operation for twelve months, at which time any agreed changes to the claim form and/or the process relating to its use will be made.

19.4.2 Claims are to be submitted to the Chief Medical Officer/delegate for approval, through the Doctor’s Unit Head, and subject to clause 19.4.5 below must be accompanied by original receipts and any other necessary supporting documentation, including for FBT purposes (e.g. travel diary).

19.4.3 Claims are to be submitted within 3 months of expenditure being incurred and, where practicable, within the financial year to which they relate.

19.4.4 The Health Service will process reimbursements in an expeditious manner not later than 30 days after submission of a fully compliant claim.

19.4.5 In lieu of reimbursement of reasonable and substantiated expenses in respect of meals and relevant incidentals, the Health Service will, if the Doctor so elects, provide the Doctor with a taxable allowance prior to travel in accordance with the amounts set out in the relevant ATO tax determination dealing with reasonable allowance amounts (currently Tax Determination 2013/16) which may be found on the ATO website at http://www.ato.gov.au.

19.4.6 It will be expected that a Doctor will make his/her application for pre-payment of daily travel allowance expenses no more than six weeks, and no less than one week, prior to the commencement of the CME activity/travel.

19.4.7 Such allowance will be assessable income in the hands of the Doctor under the Income Tax Assessment Act 1997 (Cth), as amended or replaced from time to time.

19.4.8 A Doctor will not be entitled to payout of any unused entitlement under this clause upon retirement, resignation, redundancy or dismissal.

19.4.9 The reimbursement of up to the per annum amounts described in clause 19.1 is inclusive of any applicable Fringe Benefits Tax.

19.4.10 There will be no transfer of any unexpended entitlement to funded support between Health Services. However, access to some funded support from the new Health Service should not be unreasonably withheld, provided that the total value of support provided by the relevant Health Services does not exceed the per annum amounts described in clause 19.1 in any one financial year.

19.4.11 Any dispute as to the reasonableness and/or eligibility of a claim for CME reimbursement under this clause will be handled as follows:

(a) the Health Service will refer the claim back to the Doctor seeking clarification of the items in question. This clarification request will be in writing and the response from the Doctor will be in writing;
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(b) if the matter remains unresolved, either party may refer the matter to an independent
person or body for determination;

(c) the determination of the independent person or body will be final.

19.5. Any dispute in relation to the application of this clause may be dealt with through the Dispute
Resolution Procedure in clause Error! Reference source not found. of this Agreement.
APPENDIX 2 - Frequently asked questions about CME