



COVID-19: Frequently Asked Questions and Answers

How do I help out the COVID-19 efforts within the hospital system?

Hospital recruitment for casual staff is managed by the individual jurisdictions. Some jurisdictions have already begun to advertise for casual roster pools and we're yet to hear from others.

Can I continue to see patients face-to-face?

At this stage, all medical services are considered essential and can continue to practice. However, Sport and Exercise Medicine is generally a non-urgent service and seeing people face-to-face increases the risk of viral transmission. We'd strongly suggest that you move as many services as possible to [telehealth](#).

What financial support is available to me?

Check the [notes](#) created by Tim Neal (Finance Manager, ACSEP), the webinar and keep abreast of Government announcements.

What is the College doing about Australian MBS item numbers and telehealth?

The College is advocating with the help of the AMA and the CPMC to seek consultant level rebates for telehealth services. Telehealth services in general are evolving rapidly. Having higher telehealth services to allow SEM Physicians to bulk bill will not necessarily make a big impact if there are no patients accessing SEM services.

What is the College doing to support registrars?

The College Board is considering what financial support can be considered (such as ACSEP Fee relief) and after analysing future budget will provide direction. The Board must ensure financial viability of the College so it might continue to exist post COVID-19.

Australia – The College is talking with the AMA Doctors in Training to obtain their support and advocacy to progress the dire rebate situation for Registrars. The College is also investigating other opportunities with private health, jurisdictions for redeployment opportunities and also communicating directing to Government about other opportunities.

New Zealand – The College has participated in the ACSEP ACC Advisory Group meetings and together decided to suspend the ACC model and no longer take any administrative fees. This allows for a local solution to be delivered and will be monitored regularly.

What other advocacy is the College undertaking?

Australia - The College is developing a COVID-19 resource for GPs to outline the role that SEM Physicians and Registrars can play during the pandemic and how we can support GPs in their role. This will be distributed through the RACGPs and ACRRM. A similar resource is being considered for

ACEM to circulate to Emergency Departments however clinics are encouraged to connect locally to offer referral support now.

The College circulated a Media Release (supported by ESSA and SMA) titled COVID and Exercise to demonstrate leadership in this space with other sector collaborators.

CPMC – The ACSEP President and CEO participate in weekly Zoom meetings and daily communications regarding COVID-19 and use this platform and these connections to advocate on College and SEM matters.

New Zealand - The College has worked with Private Health insurers, including the largest Southern Cross, to confirm that they will, in most cases, accept Telehealth claims with no distinction. This from Chief Executive, Health Funds Association of NZ:

“Our member insurers are accepting Telehealth claims - some make no distinction in the format of the consultation, while others have adopted a 3-month period where a Telehealth consultation would be funded in a similar manner as an in-person one.”