



AUSTRALASIAN
MEDICAL SERVICES COALITION

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15th February 2021

To Whom It May Concern:

Re: AMSC Response to Media Article Published 27 January 2021 – “Title”

We represent the Secretariat Office of the Australasian Medical Services Coalition Ltd (AMSC), a non-profit organisation registered in Australia. AMSC is the first platform in Australasia to represent and support all health professionals, health and related industry, liaising between medical, health, government and community entities to achieve the objects of professional support and improved health outcomes for all Australians, in particular minority and disadvantaged groups. More information can be found on our website <http://www.amsc.org.au>.

We refer to the Media article Published 27 January 2021 – “Title”, which reported misinformation in the absence of fact-checking, and misled the readership with non-expert opinion misrepresented as fact. This has caused direct and serious reputational damage to General Practitioners (GPs) and the entire medical profession of Australia, and will likely cause community resistance to the national COVID-19 vaccine rollout aimed at mitigating the COVID-19 pandemic, thereby causing direct harm to the Australian community.

The above article states that GPs providing COVID vaccination receive a **monetary bonus** [“奖金奖励”] of \$30.75 after delivering the first dose of the COVID vaccine and \$24.75 after delivering the second, which is on top of the usual Medicare Benefits Scheme (MBS) billing item for a standard consultation. In addition, for every patient who receive both doses of the vaccine at the same clinic, the practice receives \$10 subsidy from the government.

We refer to the article published by **newsGP** of The Royal Australian College of General Practitioners (RACGP) published 22 January 2021 – “Federal Government confirms new COVID vaccine item numbers”. The Department of Health (DoH) makes it clear that GPs in metropolitan Australia (MMM1 areas) receive \$30.75 for delivering the first dose of the AstraZeneca/Oxford vaccine and \$24.75 for delivering the second.

We wish to clarify the following: 1. The above fee structure **replaces** the MBS item number for a normal doctor's consultation and is not on top of a usual consultation fee, **ergo is not a bonus payment**; 2. COVID vaccination appointments have to be prebooked through a national appointment system specific for this purpose, that is, other medical consultations and treatments are not undertaken concurrently during this appointment; 3. Compliance regulations stipulate that GPs must deliver the vaccine only after patients have a full doctor consultation, ensure informed consent, and are observed for a minimum 15 minutes with recommended social distancing guidelines. This will require a minimum of 30 minutes per patient vaccinated, with fewer medical patients seen in the same time period, and **the fees received are in fact lower than a standard medical consultation of the same duration**. This does not cover the running cost of a clinic for the same unit time.

Additionally, since the vaccine can be delivered at any clinic accredited to deliver the COVID-19 vaccine, GP practices have to prove that both doses of the vaccine have been delivered to a patient at their clinic in order to receive the \$10 subsidy.

Even with the subsidy, the time and resources required to deliver two doses of vaccine far exceed the scheduled vaccination payments. That is, \$65.50 (for metropolitan Australia) remains way below standard medical consultation rates for two appointments of equal duration under normal circumstances.

RACGP President Dr Karen Price states that:

'From the beginning of this process, the RACGP has argued that this is not a standard vaccination program, given the clinical, logistical and administrative costs associated with providing such a service,' she said.

'The widespread provision of vaccines from GPs and general practice will rely on the financial sustainability of providing the immunisation services themselves.

'I know general practices right across the country will be doing the figures and working out whether they will be in a position to support this national health response.

'As a cornerstone of Australia's vaccination program, it is critical that GPs are appropriately recognised, supported and valued throughout the entire process.'

Doctors have affirmed that clinics delivering the COVID-19 vaccines are in fact providing a community service at a financial loss.

The Media article also sensationalises that GPs stand to "earn an insane amount of money" ["可疯狂大赚一笔"] and perpetuates public mistrust by hearsay and speculation, stating that the Australian government is resorting to extreme measures to force mandatory vaccination of all Australian residents ["政府出狠招 不打疫苗，百

万人出行受限制”], when it is in fact 1. not currently mandated by law, 2. restriction of movement for unvaccinated individuals have not been announced officially and 3. vaccine uptake is as yet unknown.

Media is an established media platform with a large readership in the Chinese Australian community, including many General Practitioners and other medical professionals. Given that not all clinics will be in a financial position to deliver the vaccine and only consider doing so out of social responsibility, the potentially libelous claims of the Media article against the medical profession resulted in severe professional, reputational and emotional harm to many doctors.

Furthermore, the Media article may potentially cause far-reaching public health, economic and humanitarian consequences by impeding the national COVID-19 vaccine rollout and reducing vaccine uptake in communities which need it the most.

AMSC would like to comment specifically about the following.

1. AMSC believes in responsible journalism. A publicly accessed media platform should possess the social responsibility to uphold integrity and publish well-balanced articles after careful consideration of fact, not opinion if it is not an opinion piece, especially with regards to an issue that has far-reaching negative public health consequences that affect the entire Australian community. The public opinion on the COVID-19 vaccine rollout has been divided and this article has served to fan the flames of dissension against the vaccine without factual basis or expert opinion. This damage is irreversible.
2. The Media article also states that the Federal Government will vaccinate children under the age of 18 only if indicated because “there is evidence that children do not transmit COVID-19 like adults” [“已有证据表明儿童并没有像成年人一样传播新冠”] without source or reference. Readers who take this at face value may be misled into thinking that children do not require the vaccination, when this is again an opinion based on speculation, and may lead to catastrophic effect for herd immunity.

We refer to the DoH COVID-19 Vaccines Initiatives & Programs - “When will I get a COVID-19 Vaccine” (<https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/getting-vaccinated-for-covid-19/when-will-i-get-a-covid-19-vaccine> accessed 14 February 2021). Phase 3 vaccination with the Pfizer vaccine for children under the age of 16 if recommended may be performed. There is no mention of specific clinical evidence that vaccination is not indicated in children because they do not transmit the COVID-19. Children need to be assessed individually as they have different immune requirements, and the rollout takes this into consideration before categorically recommending that all children have the vaccine.

AMSC respectfully requests that Media urgently: 1. corrects the misinformation perpetuated in this article, 2. publicly acknowledges that this is not based in fact and 3. issues an apology. If the correction and acknowledgement cannot be published post-haste, the original article should be retracted in its entirety with a public apology.

The Australasian Medical Services Coalition represents frontline healthcare workers and all other health professionals in presenting our views to Media, and awaits a favourable resolution of the above issues with an apology for the above article. AMSC will have no choice but to escalate the matter through legal channels if our recommendations are not met, with full translation and disclosure of the above article to all stakeholders including the relevant government departments. The original article has been saved to our database for further reference. We also recommend that Media cites all sources and references for all future publications.

We look forward to your response.

Secretariat Office

Australasian Medical Services Coalition Ltd (AMSC)