This guide covers special access arrangements to health and community services in Victoria for asylum seekers.

Asylum seekers have applied for protection visas to remain in Australia and are awaiting a decision. Asylum seekers arrive in Australia by plane and by boat, some arrive with valid visas, such as student or tourist visas, while others arrive with no visa. This means that asylum seekers may or may not be on a ‘bridging visa’. People who are asylum seekers are among the most disadvantaged people living in Victoria, often receiving little or no Commonwealth government income support.

While their applications for permanent residence in Australia are being determined, asylum seekers may be issued a number of different visas by the Commonwealth government. Some visa conditions restrict access to Medicare and the right to work. If a person does not have work rights, they will not have access to Medicare. Entitlement to work rights and Medicare can change during the course of the process to determine a person’s refugee status.

Asylum seekers are eligible for most health and community services funded by the Victorian government, such as community health services and the Home and Community Care program, as eligibility for most services is not determined by visa or residency status. However asylum seekers without access to Medicare often have difficulty accessing services that ordinarily require a Medicare card. It is also important to note that no asylum seekers have access to a Health Care Card and so often face financial difficulties meeting out-of-pocket health expenses for items such as pharmaceuticals.

Asylum seekers in Victoria have special access arrangements for the following services which are outlined in this document:

1. Public hospital services
2. Ambulance services in emergency situations
3. Community health and Home and Community Care Program services
4. Dental services
5. Catch-up immunisation
6. Other Victorian government programs for which asylum seekers have special access

This document does not relate to people in the Community Detention Program. A note explaining health care arrangements is included at the end of this document.
1. Public Hospitals (including Emergency Department and Royal Dental Hospital Melbourne)

Medicare ineligible asylum seekers are to be provided full medical care (including emergency and elective) including pathology, diagnostic, pharmaceutical and other services in Victorian hospitals as either admitted patients or non-admitted patients. Medicare ineligible asylum seekers are not to be billed, except in situations where they receive the following services as non-admitted patients:

- spectacles and hearing aids
- surgical supplies
- prostheses
- aids, appliances and home modifications for the first 30 days post discharge until they are eligible for the Department of Human Services’ Aids and Equipment Program (see below)

- pharmaceuticals:
  - Note: these should be billed at a level consistent with the Pharmaceutical Benefits Scheme statutory copayments.
  - Note: a co-payment for prescriptions to treat tuberculosis should not be charged.
  - Victorian hospitals may bill Medicare ineligible asylum seekers for pharmaceuticals supplied to admitted patients upon separation.

While this describes the minimum standard of health service provision, hospitals at their own discretion may choose to provide an extended level of service to Medicare ineligible asylum seekers where appropriate.

Asylum seekers with access to Medicare are eligible for full medical care like other Medicare card holders. However it is important to note that some asylum seekers will have a Medicare card but no income and therefore will face financial difficulties with out-of-pocket expenses for items such as pathology, specialist treatment, and pharmaceutical costs.

It is recommended that hospital social work staff are involved in the assessment and care of both inpatients and outpatients who seek treatment and referral as asylum seekers, particularly those who are Medicare ineligible. Agency and hospital staff are also encouraged to refer Medicare eligible and ineligible asylum seekers to the Red Cross who will then, where appropriate, make secondary referral to another asylum seeker support agency. These include the asylum seeker support agencies listed at the end of this resource.

For background on access to public hospital services and information about identifying asylum seekers please see Hospital Circular 27/2005: www.health.vic.gov.au/hospitalcirculars/circ05/circ2705.htm

- Note: Some details set out in Hospital Circular 27/2005 are outdated (for example, reference to Temporary Protection Visas and the 45 day rule, however the basic arrangements still apply).

2. Ambulance services in emergency situations

Asylum seekers living in Victoria, who otherwise have no capacity to pay, will have free access to ambulance services for emergency transport. As it is not practical for Ambulance Victoria (AV) to sight a visa when an ambulance is requested, asylum seeker patients will be transported as normal, and then billed.

AV will write off the invoice if one of the asylum seeker support organisations listed at the end of this resource writes or faxes AV on behalf of an asylum seeker. This must include:

1. a covering letter, which verifies
   - an individual’s asylum seeker status (noting current visa class status) and
   - their inability to otherwise pay for ambulance transport
2. a copy of the AV invoice

For further detail please see www.health.vic.gov.au/ambulance/ambcharge010808.pdf
3. Community health services and Home and Community Care Program

Fee waivers for asylum seekers

The January 2011 Home and Community Care (HACC) and Primary Health Programs Fees Policy applies to asylum seekers (Dental has a separate fees policy – see below). HACC and community health services determine fees based on the principles set out in the Fees Policy, including that:

- inability to pay cannot be used as a basis for refusing a service to people who are assessed as requiring a service.
- procedures for determination and collection of fees should take into account the situation of special needs groups.

The Fees Policy can be found here:

docs.health.vic.gov.au/docs/doc/Fees-Policy-for-HACC-and-Primary-Health-Programs---January-2011

Priority of access for asylum seekers for community health services

Refugees (including asylum seekers) are priority 1 clients for community health services. Community health services are under increasing pressure to meet the demand for their services, so prioritisation of client access ensures that clients with high clinical needs and/or disadvantage are provided with timely assessment and access to services. Generic and Clinical Priority Tools have been developed to establish the client’s priority level (priority 1, 2 or 3). The Generic Priority Tool prioritises service delivery for people with the poorest health status and the greatest economic and social need for service. According to the Generic Priority Tool, the refugee population group, which includes asylum seekers, automatically qualifies as a priority 1, and should be seen as quickly as possible.

For further detail refer to the ‘Towards a Demand Management Framework for Community Health Services’ which can be found here www.health.vic.gov.au/pch/publications/demand_management.htm

Some community health services also deliver a targeted program for refugees (including asylum seekers) through the Refugee Health Nurse Program. This program operates in areas where data demonstrates high numbers of newly arrived refugees. The key aims of the program are to provide increased access by refugees to primary health services, improve the response of health services to refugees’ needs and enable individuals, families and communities to improve their health and wellbeing. The program typically works with refugees and asylum seekers who are newly arrived or have complex needs.

4. Dental services

Asylum seekers can receive public dental treatment through community dental clinics in community health services, rural hospitals and the Royal Dental Hospital, Melbourne. As with other community health services, asylum seekers have priority access to dental care. They must be offered the next available appointment for general care and must not be placed on the general care wait list. Where the person has denture care needs, they must be offered the next available appointment for denture care or placed on the priority denture waiting list, where applicable. For specialist care the wait may still be some months. For further details consult the March 2010 Department of Health Eligibility and priority access for public dental services policy:


For clarification or follow up on asylum seeker access to dental care please contact:

Dental Health Services Victoria. Tel: 1300 360 054
5. Catch-up immunisation

Immunisation is a shared responsibility between the Commonwealth and State governments, with the Commonwealth responsible for vaccine funding and some services delivered through general practice. The state is responsible for vaccine distribution, public sector immunisation programs, monitoring and evaluation.

Asylum seeker children, like all children, can receive free childhood vaccines as catch up. In addition, a number of vaccines are provided as catch-ups free of charge for adolescent and adult refugees and asylum seekers as part of a special program called the ‘Refugee catch-up immunisation program’.

For information on catch-up immunisation and vaccines available free of charge for refugees and asylum seekers, see: Quick guide — Catch-up immunisation for Victoria, issued by the Department of Health:


Further queries relating to immunisation for asylum seekers should be addressed to the Immunisation Section, Department of Health. Tel: 1300 882 008 or immunisation@health.vic.gov.au

6. Special access for asylum seekers to other Victorian government programs

Public transport concession card

In 2010, the Victorian Department of Transport introduced a public transport concession card which is available to people aged 17 and over who have applied for a protection visa; who either hold or are applying for a bridging visa; are receiving aid from the Asylum Seeker Resource Centre, Australian Red Cross or Hotham Mission; and hold no other form of valid public transport concession entitlement. See the Victorian fares and ticketing manual, page 64:


Aids and Equipment Program

Asylum seekers are eligible to apply to the Victorian Department of Human Services Aids and Equipment Program, which provides people with a permanent or long-term disability with subsidised aids, equipment, vehicle and home modifications to enhance independence in their home, facilitates community participation and supports families and carers in their role. More information can be found at:


Kindergarten fee subsidy

The Victorian Department of Education and Early Childhood Development provides a kindergarten fee subsidy for eligible children. The subsidy is to support eligible families with 10 hours and 45 minutes of kindergarten for free. Refugees/Special Humanitarian Visa Holders 200–217 and Asylum Seekers on Bridging Visas A–F have been eligible for the kindergarten fee subsidy since 1 July 2008. More information in a range of languages can be found at: www.education.vic.gov.au/ecsmanagement/careankinder/funding/subsidy.htm

Housing Establishment Fund and other homelessness assistance

Asylum seekers, who are homeless or at risk of becoming homeless, and with no means to access accommodation or other forms of assistance independently are eligible for the Housing Establishment Fund and other forms of homelessness assistance, funded by the Department of Human Services.

Asylum seekers can access these funds through local homelessness housing and support entry points. The general statewide access number is 1800 825 955.
Three steps to identifying Medicare ineligible asylum seekers

Step 1: Determine Medicare ineligible status if relevant

- Will not hold a Medicare card
- NO WORK clearly stated on visa in passport or on evidence card (Visa Condition 8101)

Step 2: Determine asylum seeker status

- Evidence by supporting documentation or letter from asylum seeker support agency, or
- Evidence by receipt/letter from Department of Immigration and Citizenship (DIAC)
  - Note: it will not always be possible to identify an asylum seeker from official government documentation, so some discretion and judgement by health care staff may be required.

Step 3: Determine eligibility for ASAS or need for referral to specialist agency

- The Asylum Seeker Assistance Scheme (ASAS) is funded by the Commonwealth Department of Immigration and Citizenship (DIAC) and administered by the Australian Red Cross. It assists some asylum seekers in Australia who are in the process of having their refugee status determined. The Scheme provides eligible asylum seekers with some financial assistance and limited healthcare assistance, plus referrals to other agencies for additional support.
- Eligibility for ASAS is determined by DIAC. To be eligible, asylum seekers must be in financial hardship and meet specific criteria.
- Asylum seekers will generally know if they are receiving support through the Red Cross ASAS. If the person identifies as receiving ASAS their status should be confirmed by contacting the Red Cross who will then advise if they should be billed on the patient's behalf.
- Agency and hospital staff are encouraged to refer asylum seekers to the Red Cross. The Red Cross will then be able to identify whether a secondary referral to another asylum seeker support agency is appropriate.
Asylum seeker support agencies provide a range of supports for asylum seekers, including information, advice, advocacy, referral and support around a range of different issues including health, housing, immigration, legal, recreational, financial, material aid, employment, education and counselling.

Asylum seeker support agencies

Australian Red Cross Migration Support Programs including:
- Asylum Seeker Assistance Scheme
- Community Detention Program
Tel: 8327 7883 or www.redcross.org.au/vic/services_asylumseeker.htm

Asylum Seeker Resource Centre
Tel: 9326 6066 or www.asrc.org.au

Hotham Mission Asylum Seeker Project
Tel: 9326 8343 or asp.hothammission.org.au
Community Detention Program (CDP): A note about health care

After the Commonwealth government’s announcement at the end of 2010, an increasing number of detainees at the Christmas Island detention centre have been given permission to reside in Victoria under the Community Detention Program (CDP). Unlike most of the community asylum seekers described above, detainees under the Community Detention Program will not have a bridging visa. They may carry a letter of introduction from the Department of Immigration and Citizenship which explains their status and may also carry a card from International Health and Medical Services (IHMS).

Detainees under the Community Detention Program do not have access to Medicare. Their healthcare is provided through a network of providers subcontracted by IHMS on a fee-for-service cost basis and as such should be directed to that network of providers.

All detainees under the Community Detention Program are clients of the Red Cross Community Detention Program. Queries regarding entitlements for community detainees or the available network of providers should be directed to the client’s CDP caseworker. If the caseworker is unknown contact Red Cross Migration Support Program for assistance, Tel: 8327 7883.

For more information see the Asylum Seeker Fact Sheet on the Victorian Refugee Health Network website www.refugeehealthnetwork.org.au

For further information regarding any of the above information please email diversity@health.vic.gov.au