

SCHEDULE A – ADDENDUM TO THE AGREEMENT FOR MINIMUM COMMONWEALTH FUNDING FOR PUBLIC HOSPITAL SERVICES IN TASMANIA

Preliminaries

- A1. The Parties agree to amend the Agreement for Minimum Commonwealth Funding for Public Hospital Services in Tasmania (Agreement) with this Schedule.
- A2. This Schedule is divided into two parts:
- Part A (Clause A3) outlines the enduring amendments to the Agreement; and
 - Part B (Clause A4 – A5) outlines the time-limited amendments to the Agreement for the period 1 July 2019 to 30 June 2025.

Part A: Variations to the Agreement

- A3. Parties agree to amend the Agreement as follows:

Former clause	Varied clause
Clause 2	Clause 2 – replaced with: This Agreement will support the delivery of a guaranteed minimum Commonwealth funding to Tasmania for public hospital services each year for the period of 2017-18 to 2024-25.
Clause 5	Clause 5 – replaced with: This Agreement will expire once the final reconciliation for the 2024-25 financial year has been completed, assessment of eligibility for payment under this Agreement has been finalised and, where relevant, processing of this payment. The Agreement may be terminated early or extended as agreed in writing by the Parties.
Clause 9	Clause 9 – replace with: The Commonwealth will provide additional funding to Tasmania for public hospital services each year for the period 2017-18 to 2024-25 should the growth in Commonwealth contribution for public hospitals in Tasmania be less than the growth in the Consumer Price Index (CPI) and national population for that year.

Part B: Revised arrangements for the period 2019-20 to 2024-25

Scope

A4. This Part makes amendments to the Agreement within the period 1 July 2019 to 30 June 2025.

Time limited variations to the Agreement

A5. Parties agree to amend the Agreement as follows:

Former clause	Varied clause
Clause 17	<p>Clause 17 – replaced with: For the 2019-20 to 2024-25 financial years, services funded under this Agreement are not eligible for Commonwealth funding under the NHRA, consistent with Clause A9 of the NHRA (previously Clause A6).</p> <ul style="list-style-type: none"> a) Tasmania will include the National Weighted Activity Unit counts for any services funded under this agreement (both estimates and actuals) in its reports to the Administrator. b) Data provision to the Administrator will separately identify these services (for each Local Hospital Network) and Tasmania will direct the Administrator to exclude these services from the calculation of the Commonwealth contribution and share of the National Efficient Price (NEP) to Tasmanian public hospital services funded on an activity basis under the NHRA.
Clause 21	<p>Clause 21 – replaced with: For the financial years 2019-20 to 2024-25, if after the completion of reconciliation under the NHRA (see Clause 15), the Administrator revises state entitlements under the NHRA, and the revision results in a revised Commonwealth contribution under Clause 14, the Parties will determine appropriate payment or recoupment arrangements for any resulting variations to payment amounts under this agreement.</p>
New clause	<p>Insert new Clause 32: <i>Interaction with the Commonwealth Government’s National Health Reform Funding Guarantee offered alongside the National Health Reform Agreement 2020-21 to 2024-25</i></p> <p>32. The Parties agree that for the 2019-20 and 2020-21 financial years:</p> <ul style="list-style-type: none"> a) The Commonwealth has provided all state and territory governments a minimum funding guarantee to address the consequences of changes in hospital activity and costs resulting from COVID-19 on the National Health Reform Funding Model. b) The minimum funding guarantee sets a minimum level of funding the Commonwealth has agreed to pay the states and territories, under the NHRA in 2019-20 and 2020-21. c) The minimum funding guarantee entitlement for Tasmania is: <ul style="list-style-type: none"> i. \$449.7 million in 2019-20 ii. \$449.7 million in 2020-21.

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| | <ul style="list-style-type: none">d) The minimum funding guarantee is provided on a state by state basis. If Tasmania's National Health Reform Determination plus the Hospital Services component of the National Partnership on COVID-19 Response is less than the minimum funding guarantee, the Commonwealth has guaranteed a top up payment to that maximum value.e) If the minimum funding guarantee is invoked in either 2019-20 or 2020-21 and Tasmania advises the Commonwealth in writing the state chooses to receive a top up payment under the minimum funding guarantee, Tasmania is not eligible to receive payment under this Agreement.f) If this Agreement is invoked in either 2019-20 or 2020-21 and Tasmania advises the Commonwealth in writing the state chooses to receive payment under this Agreement, Tasmania is not eligible to receive a top up payment under the minimum funding guarantee.<ul style="list-style-type: none">i. If Tasmania chooses to receive payment under this Agreement, funding received under this Agreement will not contribute to Tasmania's National Health Reform base funding entitlement for the next financial year, as per the payment conditions under Clauses 15-20.g) Tasmania must advise the Commonwealth their choice of payment in writing within seven days of the Administrator advising the Commonwealth Treasurer of the final NHRA entitlement. |
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The Parties have confirmed their commitment to this schedule as follows:

*Signed for and on behalf of the Commonwealth
of Australia by*



The Honourable Greg Hunt MP
Minister for Health and Aged Care

24 June 2021

*Signed for and on behalf of the State of
Tasmania by*



The Honourable Jeremy Rockliff MP
Deputy Premier
Minister for Health

15 Sept 2021