Health Legislation (Fees) Amendment Regulation (No. 1) 2016

Explanatory Notes for SL 2016 No. 90

made under the

Ambulance Service Act 1991 Health Act 1937 Pest Management Act 2001 Radiation Safety Act 1999

General Outline

Short title

Health Legislation (Fees) Amendment Regulation (No. 1) 2016

Authorising law

Section 54 of the *Ambulance Service Act 1991* Section 180 of the *Health Act 1937* Section 130 of the *Pest Management Act 2001* Section 215 of the *Radiation Safety Act 1999*

Policy objectives and the reasons for them

The Queensland Government Principles for Fees and Charges (December 2012) requires agencies to set fees and charges to accurately reflect the cost of providing their services, and to ensure these fees and charges maintain their value over time. Where a regular comprehensive review of fees and charges is not cost effective or no specific indexation method has been otherwise approved, agencies are required to annually apply the Government endorsed indexation factor to their fees and charges. The current Government endorsed indexation factor is 3.5 per cent.

The following health portfolio Acts provide for the prescribing of fees and charges by regulation:

- the *Ambulance Service Act 1991*, in relation to ambulance services such as emergency and non-emergency transport, ambulance attendance and for the treatment of a person by an ambulance officer;
- the *Health Act 1937*, in relation to applications for an endorsement, or renewal of a drug licence, poison licence, treatment approval or wholesale representative licence, and fees for the analysis of a drug or article by an analyst;
- the Pest Management Act 2001, in relation to pest management licence fees; and
- the *Radiation Safety Act 1999*, in relation to possession, use, transport and related licences and approvals.

The objective of the amendment regulation is to index the fees and charges prescribed in regulations made under the above Acts, in accordance with Government policy.

Achievement of policy objectives

The amendment regulation increases fees and charges in the following regulations by the Government endorsed indexation factor of 3.5 per cent:

- the Ambulance Service Regulation 2015,
- the Health (Drugs and Poisons) Regulation 1996,
- the Health Regulation 1996,
- the Pest Management Regulation 2003, and
- the *Radiation Safety Regulation 2010*.

In accordance with the *Queensland Government Principles for Fees and Charges*, a rounding policy, developed in consultation with Queensland Treasury, has been applied.

The increased fees and charges take effect on 1 July 2016 for the *Ambulance Service Regulation 2015* and 1 October 2016 for the remaining regulations.

Consistency with policy objectives of authorising law

The amendment regulation is consistent with the main objectives of each of the authorising laws.

Inconsistency with policy objectives of other legislation

No inconsistencies with the policy objectives of other legislation have been identified.

Alternative ways of achieving policy objectives

The amendment regulation is the only effective means of achieving the policy objectives.

Benefits and costs of implementation

The amendment regulation will ensure that the fees and charges prescribed in health portfolio regulations retain their value over time and accurately reflect the cost of providing services. The amendment regulation will not significantly increase the financial burden on the community or stakeholders.

Consistency with fundamental legislative principles

The amendment regulation is consistent with fundamental legislative principles, as set out in section 4 of the *Legislative Standards Act 1992*.

Consultation

The Office of Best Practice Regulation in the Queensland Competition Authority was consulted in relation to the regulation meeting the requirements of the Regulatory Impact Statement (RIS) System. The Office of Best Practice Regulation has advised that the proposal is excluded from the RIS System on the basis that it provides for standard annual fee variations in line with the Government endorsed indexation factor, and as such a RIS is not required.

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