

Asylum seeker health

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Information sheet 1



victorian refugee
health network

Asylum Seeker information sheet for Victorian health services

This information sheet and accompanying webpages aim to provide clarity to health service staff in Victoria on asylum seekers' health entitlements, housing arrangements, support services and details on who to bill for health services.

Who are asylum seekers?

An asylum seeker is a person who has applied for a refugee protection visa and is awaiting a decision on this application. In contrast (and to simplify for the purposes of brevity) a refugee is someone whose asylum claim has been successful. This is an important distinction.

Depending on mode and date of arrival to Australia, the experiences, living arrangements and service eligibility of asylum seekers vary. It is important to recognise that individuals may move from group to group (e.g. from detention facilities to community detention programs or onto a bridging visa) and that eligibility for certain services (including Medicare) can change during the visa determination process. All people found to be refugees in Australia have to undergo a Visa Health Check, which is performed by a provider contracted by the Commonwealth Department of Immigration.

Immigration status determination

Asylum claims made in Australia are assessed by the Department of Immigration to determine whether they legally engage the Australian Government's protection obligations. Over recent years there have been multiple changes to how this processing occurs, and different groups of people are processed in different systems, with different entitlements to have the Department's decision reviewed.

Do not provide legal advice unless you are qualified to do so. If a person asks questions about their asylum claim, health professionals should refer them to a legal clinic or to advice and resources that have been prepared by legal services (details here: refugeehealthnetwork.org.au/asylum-seeker-legal-services/).

Asylum seekers mode of arrival, health entitlements and housing arrangements

Asylum seekers who arrived with a visa (usually by plane)

Those who arrive in Australia with valid entry documents (usually by plane) are not generally subject to immigration detention. These people are reliant on the private rental market for accommodation, and due to high costs and rental barriers, may live with friends or relatives while their claims are being processed. These people may have arrived on tourist, business or student visas, and claimed asylum after arrival in Australia. On expiration of their original visa, people in this group are typically given a Bridging Visa A (BVA), Bridging Visa C (BVC) or Bridging Visa E (BVE). This group of asylum seekers are Medicare eligible if they have work rights. Medicare ineligible asylum seekers can access public health services (which usually require a Medicare card) as per the Victorian Department of Health policy (details here: docs.health.vic.gov.au/docs/doc/Guide-to-asylum-seeker-access-to-health-and-community-services-in-Victoria) and pro bono health services from ASRC and Monash Health (details here:

<http://refugeehealthnetwork.org.au/refer/asylum-seeker/>). With client consent, medical summaries for this group should be available from previous treating doctors.

Asylum seekers who arrived without a visa (prior to 31 December 2013)

Note: asylum seekers who arrived by boat without a valid visa after 31 December 2013 are subject to transfer to Naru and Manus Island.

Immigration detention (no visa status)

This includes alternate places of detention (APOD), Melbourne Immigrant Transit Accommodation (MITA) and Maribyrnong Immigration Detention Centre.

Asylum seekers who arrived without valid entry documents are subject to periods of immigration detention. Those who arrived by boat before 31 December 2013 were usually detained on Christmas Island in the first instance, and then moved to mainland immigration detention facilities. People in detention have no visa status. While in detention facilities, health care is facilitated by the Commonwealth government-contracted service International Health and Medical Services (IHMS). The health contracting arrangement sometimes involves receiving care from contracted private or public hospitals that have reimbursement arrangements with the Department of Immigration. People in held detention are accompanied by guards to all appointments outside of the detention facility.

After release from a detention facility, clients are given a detention health discharge summary prepared by IHMS. If this is misplaced health professionals may request this from the Status Resolution Support Services provider (detail here: refugeehealthnetwork.org.au/case-work-support-for-asylum-seekers/). The detention health discharge summary includes details of diagnosis, medication and special needs.

Community detention (no visa status)

Some asylum seekers are released from immigration detention facilities into the community under Residence Determination arrangements. Placement in the community allows people to move about without being accompanied. Department of Immigration have contracted service providers under the Status Resolution Support Services (SRSS) program to provide people in this group (usually women, families or unaccompanied minors) with housing and case management support. These clients are legally still in detention and have no visa status. Community Detention clients are not eligible for Medicare, instead IHMS is contracted by the Department of Immigration to facilitate and pay for a specified range of health services for this group. Clients in this group should have an IHMS Card. Upon entry into Community Detention, IHMS will assign a General Practice clinic located within reasonable distance of a person's housing. Each GP clinic will have been credentialed by IHMS, meaning that the clinic has entered into a formal agreement to provide services at agreed rates, with administrative procedures in place. The SRSS providers will arrange the first appointment with the assigned GP. The client should bring with them their health discharge summary provided by IHMS. The GP manages health care for the client, and refers to other providers as required and in line with agreed procedures. IHMS will meet the cost of eligible clinical services and will reimburse GP consults using Australian Medical Association (AMA)/Department of Veterans Affairs rates. IHMS, through Department of Immigration, has alternative reimbursement arrangements for other public health services. Specialist referral should be organised with the assistance of IHMS. Health discharge summaries and medical summaries are available from IHMS through the Community Detention Assistance Desk (Ph.1800 689 295).

Living in the community post-detention (Bridging Visa E)

Since November 2011, asylum seekers have been released from detention facilities on a Bridging Visa E (BVE) to live in the community. This group are reliant on the private rental market, and receive six weeks of income, housing and case work support from Status Resolution Support (SRSS) providers after they exit detention. The level and length of additional support that an individual or family receive will be determined by the Department of Immigration. Holders of BVE are eligible for Medicare. BVE holders may not be aware that they are eligible for Medicare, and will need support to understand the Medicare system. SRSS providers can help these clients register for Medicare and renew Interim Medicare Cards after their expiry. Medicare validity and expiry is linked with an asylum seeker's BVE, in circumstances where a BVE has expired due to Department of Immigration administrative processing delays, a client remains in the community without a valid Medicare card. In these instances payment for medical services may be arranged in advance with SRSS providers through a letter of supply.

Health Consequences of Long Term Detention

People detained for prolonged periods in immigration detention (including Australian immigration detention) may have memory, concentration and other mental health impairments related to this experience. Further clinical guidance material may be found here: refugeehealthnetwork.org.au/learn/guides/

Protection Visas (Permanent and Temporary)

People who arrive in Australia with a valid visa then apply for asylum and are found to be owed protection, are entitled to a permanent protection visa 866.

People who arrive in Australia without a valid visa then apply for asylum and are found to be owed protection are entitled to a Temporary Protection Visa or a Safe Haven Enterprise visa. For more information:

refugeehealthnetwork.org.au/temporary-protection-visa/

Further reading and contact details

Further reading can be found here: refugeehealthnetwork.org.au/learn/asylum-seekers/

Specific topics include:

- Identification of asylum seekers: refugeehealthnetwork.org.au/identification-of-asylum-seekers/
- Legal services: refugeehealthnetwork.org.au/asylum-seeker-legal-services/
- Case work services: refugeehealthnetwork.org.au/case-work-support-for-asylum-seekers/ (includes details about Status Resolution Support Service programme)
- Health services: refugeehealthnetwork.org.au/refer/asylum-seeker/
- Refugee Health Nurses: refugeehealthnetwork.org.au/refer/refugee-health-nurse-program/
- Further clinical guidance material may be found here: refugeehealthnetwork.org.au/learn/guides/

Key points:

- Most asylum seekers are eligible for Medicare.
- Bridging visas are linked to Medicare; as a high number of bridging visas have been expiring people may have expired Medicare cards. Alternative payment arrangement have been made for this group, further information is available here: refugeehealthnetwork.org.au/medicare-renewal-for-asylum-seekers/
- Medicare ineligible asylum seekers are to be provided with health services (which normally require a Medicare Card, such as public dental, emergency ambulance, pathology, diagnostic, pharmaceutical) in Victorian Hospitals as per the Victorian Department of Health 'Guide to access to health and community services for asylum seekers'.
- It is recommended that Medicare eligible asylum seekers are bulk-billed due to low-income status.
- Asylum seekers in Community Detention are not eligible for Medicare and their medical bills should be directed to IHMS and not the client themselves. Not all health services are covered: contact IHMS for advice and pre-approval 1800 689 295.
- Some Medicare ineligible asylum seekers may have their pharmaceutical or pathology bills paid for by asylum seeker support agencies.

Disclaimer: This information has been compiled by the Victorian Refugee Health Network for healthcare practitioners based on information from Asylum Seeker Agencies, the Department of Immigration and Border Protection and the Victorian Department of Health and Human Services. Every effort has been made to confirm the accuracy of the information (last updated March 2015) but please advise if any amendments are required. Please contact info@refugeehealthnetwork.org.au or the Victorian Refugee Health Network, 03 9388 0022.