



6minutes News

Euthanasia doctors forced to charge terminally ill patients fees for access to VAD

Nearly 500 patients in WA have ended their lives through the state's VAD scheme.



Carmel Sparke

8



1 December 2023



Save



Dr Scott Blackwell.

Some doctors have begun charging fees for voluntary assisted dying care, raising concerns the cost could become prohibitive for "vulnerable" patients.

It is taking at least eight hours to complete the consultations and the paperwork needed to help deliver an assisted death in the state, says the Voluntary Assisted Dying Board of WA.

Its chair, GP Dr Scott Blackwell, said while most doctors had tried to absorb the additional costs, some were now charging a fee-for-service amid "insufficient" Medicare remuneration.

"Practitioners deserve to be adequately remunerated for the extensive time they spend assessing and supporting patients through the voluntary assisted dying [VAD] process and for the mandatory administrative and reporting activities involved," Dr Blackwell wrote in its annual report.

"As with all services provided by medical practitioners, the board recognises that medical practitioners are free to determine reasonable fees that are reflective of the services they provide.

"The board however is concerned that vulnerable patients at the end of life may experience inequity of access in being unable to afford out-of-pocket expenses for VAD."

The board said it had asked doctors involved with VAD to document the time and activities associated with each stage of the process.

It came to a minimum of 8.5 hours.

Since VAD became legal in WA back in July 2021, some 1120 patients had made formal requests to access the scheme, with more than 68% having a primary cancer diagnosis.

The report said that 446 had died after being administered a VAD substance, with 80% of those patients administered the lethal substance by a doctor.

And overall, 90 doctors have been involved in the scheme since its beginnings, either working as a patient co-ordinator, carrying out assessments on capacity to consent and eligibility, or administering the lethal substance.

They included 45 GPs, eight psychiatrists and eight emergency physicians, according to the report.

However, Dr Blackwell said it was disappointing some institutions and doctors were blocking access for patients in accessing end-of-life services.

Faith-based healthcare services have the right to not provide or facilitate VAD services if doing so doesn't align with their values, under WA law.

But one patient wrote: "After I made my first request ... I was given [a VAD booklet] which I read in detail and found very helpful.

"The problem is that it completely ignores the elephant in the room, being the whole [facility] is completely opposed to VAD and will not allow any part of the process in their premises.

"They state that they welcome all patients and caregivers, respecting their views and beliefs. Well... no, they don't.

"They claim that significant discomfort at end of life is rare, but that acknowledges that it occurs, and they still won't allow [VAD]."

As a result of complaints, the board has recommended that VAD laws be amended as soon as possible to prevent health services blocking access to VAD.

Read more: [Federal Court rules VAD telehealth consults 'an incitement to suicide'](#)

More information: [Voluntary Assisted Dying Board WA: Annual report 2022-23; 8 November 2023](#)

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Dr Chien-Che Lin
Palliative Medicine

While lives are invaluable, care provision takes resources. Also death hastening interventions probably shouldn't be cheaper than actual palliative care



Dr robert marr
General Practitioner
DRUMMOYNE, NSW

Voluntary assisted dying is now a legal medical service and should be charged on the basis of the hours involved.
NSW health is paying GPs \$235 an hour to provide VAD in NSW and this should be the fee per hour that GPs should charge.

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Reply



Dr Phillip Frank De Ronchi
General Practitioner
Bridgetown, WA

The funeral parlour will change – why is there an assumption that doctors must not?
It is an onerous and possibly litigious area in which to work – I would not be doing it at MBS rates.
Any doctor that has worked with dying patients, knows this is time consuming, one needs to be there for the patient and family and you can't just bulk bill a 23 and be done in under 20 minutes.

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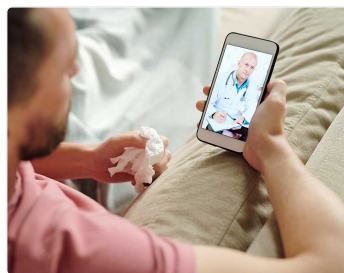
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