

PATIENT ASSISTED TRAVEL SCHEMES



Healthy and sustainable rural, regional and remote communities across Australia

Patient assisted travel schemes (PATS) are an important element of providing equitable access to essential health services for people in rural, regional and remote (hereafter rural) Australia.



A critical mass of people (or patient throughput) is required to justify or commercially support the work of more specialised health professionals. In Australia, rural outreach is commonly provided by non-general practitioner (GP) specialist doctors who periodically visit the same community over time (O'Sullivan et al., 2014). This can take the form of fly-in/fly-out and drive-in/drive-out models. However, the reality is that people in sparsely populated areas often need to travel to their nearest regional centre or capital city for health care of a more specialised nature. Although specialised, these services are essential rather than optional for the patients who need them – for instance, oncology for cancer treatment, dermatology for skin conditions, or dialysis for those with end-stage kidney disease.

PATS provide patients (and eligible escorts) with financial assistance towards the costs involved in travelling to and from and staying near, non-GP specialist medical services while the patients are undergoing treatment.

Background

The Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS), introduced in 1978, was funded and managed by the Australian Government (Parliament of Australia, 2007). In 1987, management of programs was transferred to the states and territories.

As recipients of funding from the Australian Government for the provision of free public hospital services, the states and territories must ensure that people have equal access to public hospital care regardless of their geographic location.

Payment rates

Payment rates for PATS vary between states and territories; they are subsidies that are not designed to cover the full costs of visits to a major centre. All jurisdictions provide subsidies for accommodation and fuel allowances for private vehicle travel. The fuel allowances do not cover wear and tear or depreciation of the vehicle, just a portion of the cost of fuel, generally on a cents-per-kilometre basis. The various fuel and accommodation subsidies are outlined below.

All schemes provide support for ground transport and some also subsidise air travel, which is particularly important for jurisdictions such as the Northern Territory where the distances to be travelled can be vast. Some jurisdictions require a co-payment before the scheme can be accessed.

Eligibility criteria

For a patient to be eligible to receive a subsidy, their travel and accommodation must be for an approved type of care; some non-GP specialist medical visits are covered, others are not, and some jurisdictions allow certain allied health services, under specific conditions. There are also requirements around referrals from a doctor or other health professional. Another of the eligibility criteria is that the nearest available service must be a minimum distance from the patient.

Some jurisdictions cover frequent travel expenses under 'block treatment' provisions. These are designed to recompense those patients who do not meet the minimum distance requirement but are undertaking treatment that requires multiple journeys over a short period of time (typically one week).

See below for details of eligibility criteria by state and territory. Check the relevant guidelines for the relevant jurisdiction to understand the full details and eligibility requirements of the scheme.

Carers and escorts

All schemes include provision for the eligible patient to be accompanied by an escort – a family member or adult responsible for the patient's needs for the period of transport and accommodation during treatment. An approved escort must be deemed necessary by either the referring GP or the approved non-GP medical specialist. An escort is automatically approved if the patient is under 18 years of age (under 17 years of age in the case of New South Wales).

Escorts are not approved solely for the purpose of emotional support or to keep the patient company.

Critical choices

Survival rates from cancer are poorer in rural areas, due in part to delayed diagnosis and intervention. In some cases, patients in more remote areas may elect to have more radical treatment rather than make repeated trips for an ongoing program of intervention. The availability and adequacy of accommodation and travel support is one of the factors that affects such critical decisions. This highlights the importance of PATS.

The future

The ongoing challenge for the schemes is to achieve a balance between consistency across jurisdictions and the desired level of flexibility. A key reason the states and territories were given control of PATS was because of the perceived flexibility they would have in meeting the needs of local communities.

Adopting a uniform approach for some aspects of the schemes may be one way to create a fairer system. At the same time, it is recognised that other aspects of the schemes need to reflect jurisdictional differences such as size, distance and public transport availability.

PATS are important in the provision of equitable access to health care for people in rural Australia. The National Rural Health Alliance will continue to monitor the situation and welcomes feedback from patients, their families and clinicians.

The National Rural Health Alliance continues to advocate for:

- Improved support to cover travel costs for patients in rural and remote areas, ensuring they can access essential healthcare services without undue financial burden.
- Continual review of the threshold for distances patients must travel before qualifying for assistance to ensure rural people are not disadvantaged.
- Simplified reimbursement process for travel-related expenses including:
 - streamlining application procedures and paperwork,
 - ensuring timely processing to minimise administrative hurdles and make it easier for patients to claim and receive support.
- Appropriate expansion within scheme guidelines to include a range of essential non-medical specialist services (such as allied health and dentistry) that are not currently covered, noting that some jurisdictions already allow certain allied health services under specific conditions.
- Scheme guidelines to be updated to keep up with emerging diagnostic and treatment options and appropriate clinical trials to ensure equitable access to these options for rural people.
- Rates that reflect the true cost of accommodation and transport and are regularly adjusted for inflation.

See below for a summary of distance requirements and subsidies available by state and territory.

References

O'Sullivan B, Joyce C and McGrail M (2014) *'Rural outreach by specialist doctors in Australia: a national cross-sectional study of supply and distribution'*, Human Resources for Health, 12(50), doi: 10.1186/1478-4491-12-50.

Parliament of Australia (2007), *Highway to health: better access for rural, regional and remote patients*, Senate Standing Committee on Community Affairs, Commonwealth of Australia, accessed 9 July 2025.



A GUIDE TO PATIENT ASSISTED TRAVEL SCHEMES

The following PATS details for each state and territory are current as of July 2025.

	ACT (EFFECTIVE FROM JULY 2023)	NSW (EFFECTIVE FROM 2 DECEMBER 2024)	NT (EFFECTIVE FROM JUNE 2017)	QLD (EFFECTIVE FROM JULY 2023; LAST REVIEWED 1 JULY 2025)
TRAVEL REIMBURSEMENT SCHEME	Interstate Patient Travel Assistance Scheme (IPTAS) Phone: 02 5124 9082 canberrahealthservices.act.gov.au/_data/assets/pdf_file/0007/1985479/IPTAS-Guidelines-July-2023.pdf	Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) Phone: 1800 IPTAAS (1800 478 227) enable.health.nsw.gov.au/services/iptaas	Patient Assistance Travel Scheme (PATS) Alice Springs: 08 8951 7846 Darwin: 08 8922 8135 East Arnhem: 08 8987 0540 Katherine: 08 8973 9206 Barkly: 08 8962 4262 nt.gov.au/wellbeing/health-subsidies-support-and-home-visits/patient-assistance-travel-scheme	Patient Travel Subsidy Scheme (PTSS) Phone: 13 HEALTH (13 432 584) qld.gov.au/health/services/travel/subsidies
BASIC DISTANCE THRESHOLD REQUIREMENTS Patient eligibility criteria apply and are detailed in each scheme's guidelines.	You must be referred for eligible treatment to the place closest to the ACT where you can get the medical care you need.	You must travel from your residence for treatment at least 100 km one way or 200 km within a week for specialised medical treatment that is not available locally.	You must travel more than 200 km one way to the nearest approved medical specialist. Reimbursement can also be paid for the return journey. Over 400 km travelled within a week applies to renal or oncology treatment.	Nearest eligible specialist health service is 50 km or more one way from the Queensland public hospital or public health facility closest to your permanent address.
TRAVEL SUBSIDY	Rebates up to a specified amount (return): Private fuel vehicle – Sydney \$165, Melbourne \$330, Brisbane \$660, Adelaide \$660 Private electric vehicle – Sydney \$40, Melbourne \$60 Coach/Bus – Sydney \$130, Melbourne \$160, Adelaide \$290, Brisbane \$390 Train – Sydney \$125, Melbourne \$230, Adelaide \$260, Brisbane \$260 Economy air fare where medically endorsed.	Private vehicle 40 cents per km. Taxi fares – one day: max \$20 2–7 days: max \$40 8–14 days: max \$80 15+ days: max \$160. Economy public transport fare (minus GST). Economy air fare where medically endorsed (minus GST).	Private vehicle 20 cents per km per patient, to a maximum three patients per vehicle. Lowest available fare for bus and air travel within NT. Ground transport reimbursement maximum of \$50 per patient per entire approved trip.	Private vehicle 34 cents per km. Commercial travel (air, bus, ferry or rail) lowest available discount fare.
ACCOMMODATION SUBSIDY PER APPROVED PERSON Includes the patient and an approved escort. In some situations, two escorts may be approved. See relevant guidelines for eligibility criteria.	Commercial accommodation subsidy of up to \$70 per night per person. Not-for-profit accommodation subsidy of up to \$50 per night per person.	Not-for-profit or commercial accommodation subsidy: \$75 per night for first 7 nights and \$120 per night from day 8 onwards. \$40 per person per night if you are staying with family or friends (Airbnb will be paid at this rate).	Commercial accommodation subsidy of \$60 per night per person. Private accommodation subsidy of \$20 per night per person.	Commercial accommodation subsidy of up to \$70 per night per person. Private accommodation subsidy of \$10 per night per person.
KEY ADDITIONAL CONDITIONS	If the patient and escort(s) return on the same day or no accommodation is claimed, a carparking subsidy of up to \$25 per day can be claimed. Claim forms must be lodged within 6 months of attending your approved medical appointment or the day you left hospital.	If you do not have approval for commercial air travel, you will be reimbursed at the private vehicle rate. Claim forms must be lodged within 12 months of the appointment end date or the day you left hospital.	Claim forms must be lodged within 3 months of completion of treatment.	Effective 1 August 2024, the PTSS no longer requires patients and escorts to pay for the first four nights of accommodation. The subsidy now covers accommodation costs from the first night. Standard rates for travel and accommodation still apply. Claim forms must be lodged for travel that has occurred within 12 months prior to the most recent treatment date.

TRAVEL
REIMBURSEMENT
SCHEMEBASIC DISTANCE
THRESHOLD

Patient eligibility criteria apply and are detailed in each scheme's guidelines.

TRAVEL SUBSIDY

SA (EFFECTIVE FROM FEBRUARY 2021, FUEL SUBSIDY FROM 1 JULY 2024)	TAS (EFFECTIVE FROM JANUARY 2023)	VIC (EFFECTIVE FROM DECEMBER 2015; LAST REVIEWED MAY 2025)	WA (EFFECTIVE FROM JUNE 2022, FUEL SUBSIDY FROM 1 JULY 2025)
Patient Assistance Transport Scheme (PATS) Phone: 1300 341 684 pats.sa.gov.au	Patient Travel Assistance Scheme (PTAS) North: 03 6777 6249 North-West: 03 6477 7734 South: 03 6166 8225 health.tas.gov.au/patients/health-costs/ptas	Victorian Patient Transport Assistance Scheme (VPTAS) Phone: 1300 737 073 health.vic.gov.au/rural-health/victorian-patient-transport-assistance-scheme-vptas	Patient Assisted Travel Scheme (PATS) PATS Central Office: 08 9781 2016 Goldfields region: Esperance 08 9079 8101 Kalgoorlie 08 9080 5681 Great Southern region: Albany: 08 9892 2226 Denmark: 08 9848 0600 Gnowangerup: 08 9827 2222 Hopetoun: 08 9838 3144 Katanning: 08 9821 6270 Kojonup: 08 9831 2222 Mount Barker, Plantagenet and Cranbrook: 08 9892 1222 Ravensthorpe: 08 9838 2211 Kimberley region: Broome 08 9194 2373 Derby and Fitzroy Crossing: 08 9193 3348 Kununurra: 08 9166 4237 Midwest region: Carnarvon: 08 9941 0313 Cue: 08 9963 0100 Dongara: 08 9927 0200 Exmouth: 08 9949 3666 Geraldton 08 9956 2216 Kalbarri: 08 9937 0100 Meekatharra: 08 9981 0600 Morawa: 08 9971 0200 Mt Magnet: 08 9963 3100 Mullewa: 08 9961 6200 Northampton: 08 9934 0200 Sandstone: 08 9963 5808 Three Springs: 08 9954 3200 Yalgoo: 08 9962 8600 Peel region: 08 9599 4485 Pilbara region: 1800 138 653 South West region: 1800 823 131 Wheatbelt region: 1800 728 792 wacountry.health.wa.gov.au/Our-patients/Patient-Assisted-Travel-Scheme-PATS
More than 100 km one way to approved medical specialist services not available locally.	More than 50 km one way to the nearest cancer or dialysis centre. More than 75 km one way to the nearest specialised health service.	More than 100 km one way or an average of 500 km per week for one or more weeks to approved medical specialist services.	Limited assistance is available if you are required to travel between 70 and 100 km (one way) for renal or cancer treatment. More than 100 km one way to access other eligible specialist medical treatment.
Private vehicle 32.8 cents per km. The most economical mode of travel appropriate for the client's functional ability and medical condition. Kangaroo Island residents travelling to the mainland for specialist treatment are eligible to apply for a ferry subsidy. Economy air fare where medically endorsed OR when combined cost of surface travel subsidy and two nights of accommodation is more than return air travel OR when the most economical public transport option does not provide an appropriate travel option to the nearest specialist.	Private vehicle 24 cents per km. Economy public transport fare. Economy air or ferry ticket for interstate travel. Taxi fare only when required to fly or take the Spirit of Tasmania.	Private vehicle 21 cents per km. Economy public transport fare. Economy air fare only if the journey exceeds 350 km one way and a commercial flight is used. Taxi fare only to or from nearest public transport when there are no other transport options.	Private vehicle 40 cents per km. Economy train or bus fare. Economy air fare for patients travelling 1,200 km (one-way) for an eligible appointment or 350 km (one way) for patients receiving cancer treatment. Patients accessing cancer or renal treatment required to travel 70–100 km one way are eligible for \$20 subsidy.

ACCOMMODATION
SUBSIDY PER
APPROVED PERSON

Includes the patient and an approved escort. In some situations, two escorts may be approved. See relevant guidelines for eligibility criteria.

KEY ADDITIONAL
CONDITIONS

Commercial accommodation subsidy of up to \$44 per night per person (plus GST) within SA and up to \$80 per night per patient (plus GST) for interstate travel.	Commercial accommodation subsidy of up to \$76 per night per person within Tasmania and up to \$98 per night per person for interstate travel.	Commercial accommodation subsidy of up to \$45 per night per person (\$49.50 including GST).	Commercial accommodation subsidy of up to \$110.00 per night for the patient and up to \$15 per night for an approved support person. Private accommodation subsidy of \$20 per night per person.
Non pensioners and those without health care cards must meet the costs of first night of accommodation. If a stay longer than two nights in commercial accommodation is required to attend multiple medical appointments, your medical specialist needs to authorise your length of stay in order for subsidies to be provided for the additional nights. Claim forms must be lodged within six months attending an approved medical specialist appointment.	Concession card holders, or the child of a concession card holder, will only have to pay the gap between the subsidy and the actual cost of travel. Non pensioners and those without a health care card must contribute \$82.50 per return trip (capped at \$330 per travel year). Claim forms must be lodged within 6 months of attending your approved specialist medical appointment.	People receiving VPTAS assistance pay the first \$100 each treatment year for their travel and accommodation (except for primary card holders of a Pensioner Concession Card or Health Care Card). Claim forms must be lodged within 12 months of attending an approved medical specialist appointment.	Generally, you must be a permanent resident of a WA Country Health Service region to be eligible for PATS. However, if you live in the Peel region you may be eligible for PATS. Claim forms must be lodged within 12 months of your appointment. All PATS reimbursements will be paid via Electronic Funds Transfer (EFT) from mid-June 2025. Payments via cheque will no longer be available.