



Federation of Chinese Medicine &
Acupuncture Societies of Australia Ltd.

澳洲全國中醫藥針灸學會聯合會 (National Body)

FCMA

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Welcome Speech

Dear Honourable Speaker Hon Bruce Atkinson, Legislative Council Mr. Jianhua Zeng, Deputy Consul-General, PRChina, Mr. Ken Smith, Former Speaker of the Victorian Legislative Council, Dr. David Graham, Former National Manager of TGA, Ms Debra Gillick, CEO CMBA, Anne-Louis Carlton and distinguished guests,

We are honoured to have you all as our VIPs to our International Conference this evening as well as our State branch presidents across all different states, and esteemed Victorian council members. We sincerely hope that you enjoy this evening.

It is our pleasure to have so many politicians and senior officials gathered together; I would like to take this opportunity to express our concern over the following unfair and somewhat discriminatory issues.

1. Health Fund insurers give many different provider numbers for consultation and acupuncture rebate, which makes it very confusing, difficult and creates extra unnecessary work. These issues stem from the Federal Health Minister who gives private Health Fund insurers the discretion to recognise their favoured associations, instead of approving Chinese registered Chinese medicine and acupuncture Practitioners. We ask that the Federal Government unify one single provider number for individually registered practitioners;
2. At present, the Medicare-Chronic Disease Management (CDM) program allows allied health professions i.e. physiotherapists and chiropractors; five free treatments subsidised by Medicare per patient annually. Whereas Chinese medicine profession, which is also one of the 14 Health professions regulated by NRAS and be exclusive

in the CDM program at all. The FCMA calls on the Federal Government to review this matter as a discriminatory issue.

3. Many non-registered practitioners or acupuncturists are practising Chinese medicine and/or acupuncture. Many registered health practitioners who have not endorsement to practice acupuncture are practising acupuncture and dry needling. They avoid using of the protected title of Chinese medicine or acupuncture, by using another title such as dry needling or herbalist, where they can continue to practice acupuncture without any regulation. This is unfair for the registered Chinese medicine practitioners or registered acupuncturists who have done due diligence by registering correctly. We hope the Chinese Medicine Board of Australia (CMBA) seriously considers how to deal with this problem. We would also like to call on the CMBA to simplify the registration of Chinese medicine labelling requirements.
4. We call on the TGA to review the standards of Chinese medicine recognise the Chinese Pharmacopoeia as reference for evaluate the Chinese herbal Medicine issues. I recall, when I served as the Evaluation Committee Member for TGA from 1994-1998, TGA had agreed to use Chinese Pharmacopeia as reference but this has now completely changed. We strongly request the Federal government to re-consider these issues:
 - Set up an independent CM management committee under the jurisdiction of the TGA.
 - TGA accepts the "Chinese Pharmacopoeia" and "Chinese Materia Medica" as an important reference for the evaluation of Chinese medicine.
 - The scientific evidence of proprietary Chinese medicine should be consistent with same the degree of supervision of those herbs.
 - All proprietary Chinese medicines that have obtained the TGA list should retain the status quo.

We face many difficulties and challenges, we need our collective wisdom and collective efforts to unite and fight together to work through these challenges together. We will endeavour to provide high quality and high-level standards in academic fields, and unite more physicians to join our society.

Thank you.



Professor Tzi Chiang Lin PhD, J. P.

President, FCMA

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