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POSITION STATEMENT

AMA principles on transparency of specialist medical training fees

2026

These principles set out the AMA's expectations for transparent, predictable and fair specialist medical training fees, supporting trainee wellbeing and diversity while recognising the central role of colleges in delivering high-quality training.

To support a diverse medical workforce responsive to community need, greater transparency in specialist medical training is essential. Specialist medical colleges play a central role as the accredited providers of specialist training in Australia, and their governance and fee-setting decisions have a direct impact on doctors in training.

Doctors in training continue to raise concerns about the transparency and predictability of specialist medical college fees,[i] including instances where new or increased fees are introduced with limited notice or explanation. When information about fees is unclear or provided late, trainees are less able to plan financially across long training pathways.

Transparent governance and timely communication of fees and costs support informed decision-making, enable trainees to budget appropriately, and help ensure specialist training remains accessible to doctors from diverse backgrounds, including Aboriginal and Torres Strait Islander doctors, doctors from rural and remote areas, those from lower socioeconomic backgrounds, doctors with disabilities, and those with family or caring responsibilities.

The AMA recognises the crucial role of specialist medical colleges and their fellows in the creation of a highly trained specialist medical workforce, and their collective expertise in coordinating and delivering specialist medical training. As the accredited providers of training in Australia, colleges must ensure training programs are accessible and sustainable to build a diverse specialist medical workforce to meet community need. Strong governance with fee transparency and accountability for how these fees are spent to deliver training should underpin training programs.

Costs of training

The financial requirements associated with training vary across specialist medical colleges and often extend well beyond annual training and membership fees. Trainees may incur substantial costs associated with examinations, mandatory courses or modules, and end-of-training administrative fees, such as admission to fellowship.

Medical Training Survey data (2025) shows 66 per cent of specialist non-GP trainees experienced stress due to the financial cost of their training program, with 13 per cent citing cost as a barrier to progress in their training.[ii]

Doctors are limited in their ability to understand the full cost of their training as mandatory fees are disclosed late, inconsistently, or without published amounts. These additional unplanned costs disproportionately impact career decisions and the financial sustainability of doctors in training from lower socioeconomic backgrounds, First Nations doctors, doctors with disability, or those managing family responsibilities.

Trainees must also manage 'hidden costs' of specialist medical training, including the cost of pre-requisite courses prior to entering training,[iiiiv] and attending conferences and workshops, which while not mandatory, are important to remain competitive with their peers.[v]

Transparency and consultation

Trainees from all specialist medical colleges have expressed concerns regarding the lack of transparency in college fees. There is insufficient accessible information for trainees and members outlining the methods used for fee determination (including where fees have been subsidised by college fellows), how fees are spent within the college, and the rationale behind fee increases. This is reflected by Medical Training Survey data, with 57 per cent of specialist non-GP trainees disagreeing their college provides clear and accessible information about how their fees are spent.[vi] This lack of visibility can undermine trust and makes it harder for trainees to plan and assess value across long training pathways.

Trainees have called for greater transparency and involvement in financial decisions through meaningful consultation within specialist medical colleges. Currently, detailed financial information is limited to individuals in leadership roles, leaving most trainees without insight into key financial decisions.

Predictable and justified fee changes

The Australian Medical Council's Standards for Assessment and Accreditation of Specialist Medical Programs (Standards) outlines expectations and standards for communication with trainees and the costs of specialist medical programs. This includes clear expectations that any changes to training fees must be transparent, communicated well in advance, and made with consideration of their impact on trainee welfare and fairness.

The AMA acknowledges the necessity of training fee increases over time to reflect costs associated with inflation and investment into training by specialist medical colleges. However, when considering the Standards, this must be balanced with fairness for trainees.

From the AMA's perspective, predictability and justification are critical to fairness for trainees. Fee increases that broadly reflect inflation and genuine costs of delivering training are more readily understood by trainees. Where increases exceed inflation-type benchmarks, colleges should clearly explain the drivers for the change and engage with trainees early enough to support informed financial planning.

Principles

The AMA has developed the following guiding principles to support training institutions, the Australian Medical Council, and specialist medical colleges deliver transparent and community responsive governance and fee policies:

Transparency and accountability

1.1 Colleges must provide clear and accessible information to the public, trainees and members on their website about all training-related costs from the commencement of training and throughout the training program. This includes application fees, membership fees, examination fees, standard annual fees and any other associated expenses.

1.2 Colleges must be explicit about whether additional courses are mandatory or optional, and their associated costs.

1.3 Colleges should be accountable to their members, with regular reporting on how training fees are set and spent, and accessible summaries available where appropriate. Colleges should provide detailed breakdowns of how individual trainee fees are used to support training or college processes related to training in an accessible format.

Accessibility, equity and inclusion

1.4 Training costs should not be a barrier to entry or progression into specialist medical training.

1.5 Colleges must consider the diverse life stages and circumstances of trainees, including provisions for those experiencing financial distress when setting and structuring fees.

1.6 Fee structures should not disproportionately impact trainees from underrepresented backgrounds, including women, rural trainees, First Nations trainees, trainees from low socioeconomic backgrounds, trainees with disabilities, and trainees with caring responsibilities.

1.7 Colleges must have formal and publicly available policies for financial distress allowing for flexible payment or assistance options. This includes deferred payment schemes, hardship-based fee waivers, and provisions sensitive to life circumstances (for example, parental leave, caregiving, part-time work).

Reasonableness and sustainability

1.8 Fee increases should be predictable and justifiable, ideally linked to inflation or other similar benchmarks.

1.9 Colleges must ensure training remains high-quality and financially sustainable without shifting undue burden to trainees.

1.10 Colleges should consider working together to create efficiencies in training processes to ensure the cost of specialist medical training remains sustainable and accessible. This could include sharing resources related to IT and examination systems.

Consultation and governance

1.11 Trainees must be meaningfully involved in and supported in governance structures and decision-making regarding training costs.

1.12 Consultation should be genuine, ongoing, and inclusive of a diverse range of trainee voices.

1.13 Increases in training fees beyond inflation should be clearly justified and communicated to trainees.

1.14 Any changes in training fees must be communicated to trainees in a clear and timely manner.

Quality and oversight

1.15 An independent health workforce planning and analysis body must be federally funded to support and provide data-driven decision-making, and to lead a forum for accountable and collaborative planning that aligns community need with college goals.[vii]

1.16 Colleges should aim to develop equitable and data-informed pathways for trainees that encourage a generalist and well-distributed workforce.

1.17 AMC Specialist Medical Training Standards should continue to support quality assurance, equity, and public accountability.

[i] AMA Trainee Forum on Costs of Specialty Training 2021
[ii] Medical Training Survey 2025 Report. Medical Board of Australia and Ahpra
[iii] AMA position statement Entry requirements for vocational training
[iv] AMACDT Trainee Forum discusses Entry requirements for selection into training
[v] AMA position statement Clinical Academic Pathways in Medicine
[vi] Medical Training Survey 2025 Report. Medical Board of Australia and Ahpra
[vii] AMA position statement Commonwealth Supported Places and Medical Workforce Supply and Distribution