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Strides made on health with focus on general practice in federal budget

Tonight's budget shows the government has been listening to AMA calls for new initiatives to tackle the viability crisis facing general practices, improve access to general practice for vulnerable Australians, tackle inadequate Medicare indexation and make medicines more affordable for consumers battling with the cost of living.

AMA President Professor Steve Robson said the AMA had been calling on the government to make this budget a health budget, and it has clearly listened with a strong focus on supporting general practice.

"Tonight's budget outlined in some detail how the previously committed \$750 million secured by the AMA as an election commitment would be spent, while also detailing significant new funding over and above this that will go straight towards addressing the viability crisis facing general practices and tackling out of pocket costs for patients," Professor Robson said.

"Firstly, the AMA welcomes the government investing a record \$3.5 billion to triple the bulk billing incentive for concession card holders and children under 16, with this applying to most GP consultations. With access to GP care getting more difficult for these patients due to increasing out of pocket costs, this targeted support is much needed and will make a real difference, especially in rural and regional areas.

"We are also particularly pleased to see the \$445.1 million in additional funding for the Workforce Incentive Program, which has been underfunded for years. This extra money will encourage general practices to engage more nursing and allied health professionals and support the delivery of well coordinated multidisciplinary care — all under one roof. This will ease pressure on GPs and help make care more convenient and accessible for patients, and is based on what the AMA has <u>long called for</u>.

"\$99.1 million in new funding for GP consultations that last for sixty minutes or longer will help those patients with very complex health care needs and support GPs to spend more time with these patients."

The government also announced the MyMedicare program, which will give patients the opportunity to voluntarily enrol with their preferred GP. This is intended to strengthen the role of general practice in the health system and follows a number of reports recommending the Commonwealth implement a system of Voluntary Patient Enrolment (VPE), and was called for in the AMA's <u>Modernise Medicare</u> campaign.

"The government has delivered its response to those recommendations and importantly has learnt from past mistakes, such as the Health Care Homes Trial, preferring a blended funding model in which additional funding is made available on top of existing fee for service arrangements. This also means that VPE will be tailored to the Australian context and will not follow the capitated model used overseas in countries like the United Kingdom."

Professor Robson said while most of the implementation detail still needs to be worked through, it appears VPE will open up funding and access to additional telehealth services, enhanced GP led care for frequent hospital users, better targeted chronic disease items, and extra incentives for GP services in Residential Aged Care.

"The AMA will be examining the details of the proposals more carefully and will work with government to ensure MyMedicare works for patients and GPs alike and results in genuine improvements in health care."

"The government has also adopted reforms put forward by the MBS Review Taskforce including a six minute floor for a Level B consultation item, the simplification of GP chronic disease management arrangements and the encouragement of longitudinal care. Critically, the savings generated by these changes are all reinvested back into general practice." The budget also contains \$50 million for a wounds consumable scheme in general practice — a scheme first proposed by the AMA in submissions to the MBS Review Taskforce and further developed and modelled by the AMA in its <u>Solutions to the Chronic Wound Problem in Australia</u> paper.

"I also welcome the changes to the formula for indexing Medicare rebates that will deliver an extra \$1.5 billion over and above the former framework that had been in place since 1996 and saw the value of a patient's rebate fall significantly in real terms. The AMA ran a <u>strong campaign</u> on the issue of Medicare indexation and the impact of the Medicare freeze, and tonight we've seen recognition of the successive underfunding in stealth of Medicare by substandard indexation."

The budget also confirms the government is proceeding with its announcement to move, over time, 325 medicines to a situation where a stable and clinically suitable patient can access 60 days supply of their medicine and a 12-month prescription from their doctor.

"This is good policy that is based on the independent recommendations of the Pharmaceutical Benefits Advisory Committee that will save patient's money and free up GP time," Professor Robson said.

"The AMA also welcomes the recent announcements regarding a crack down on vapes, with \$234 million committed to addressing the issue, which is impacting the health of many Australians, including our children.

"The government continues to make welcome progress on the establishment of an Australian Centre for Disease Control, setting aside \$91.1 million for its establishment over the next two years.

"The forecasts in the budget suggest total expenditure on Medicare is going to be less than had been previously expected. Yet we know as a society we are growing in size, we are growing older, and we have more chronic disease.

"The revised projections suggest we still have not rebounded from COVID-19 while patients have also struggled to access the care they need due to cost and the failure to adequately invest in our health system. This means patients will be diagnosed later in their illness, when they are much sicker and their care needs are more complex. This will have profound implications for our public hospitals that are already buckling under pressure."

"In our discussions with the Minister for Health he clearly indicated general practices was going to be a key focus for the government and tonight's budget has demonstrated that commitment.

"But there's also a great deal of unfinished business in our health system. As the government approaches its second year in office, we know that much more work is required in areas such as public hospital funding, prevention and supporting a sustainable private health care system, and I will advocate to government on these issues every day."

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