Australian Medical Association Limited ABN 37 008 426 793

42 Macquarie Street, Barton ACT 2600: PO Box 6090, Kingston ACT 2604 Telephone: (02) 6270 5400 Facsimile (02) 6270 5499 Website : http://www.ama.com.au/



STRONGER GENERAL PRACTICE THE KEY TO PRIMARY HEALTH CARE REFORM AMA Submission to the Primary Health Care Review

The AMA Submission to the Government's Primary Health Care Review highlights the robustness of the Australian health system, particularly the crucial role of general practice, and stresses the need to build on the proven track record of general practice with significant new investment.

AMA President, Professor Brian Owler, said today that the Review must focus on strengthening the parts of the system that deliver quality, accessible, and affordable care to the community, most notably general practice.

"This is not the time to throw the baby out with the bathwater," Professor Owler said.

"In terms of both cost and health outcomes, the Australian health system is performing very well by world standards, and general practice delivers outstanding public health outcomes from modest Government investment.

"We must avoid radical change for change's sake.

"Some of the potential reforms raised in the Primary Health Care Advisory Group's (PHCAG) discussion paper have been tried or are in place in other countries, and there is only very limited evidence about any significant positive impact.

"General practice in the UK, for example, has been the subject of several rounds of funding reforms, and the GP workforce in the UK is now being reported as demoralised and suffering from extreme shortages.

"We do not want or need to repeat the same mistakes here. It is concerning that some of the failed UK experiments are still on the table here for PHCAG consideration.

"For the Review to have genuine credibility, the Government must change its reform language – it must start talking about primary care reform as an investment, not a cost or a saving to the Budget bottom line.

"There is no doubt that extra investment in general practice will deliver long term savings to the Government, and improve the sustainability of the health system.

"The Government needs to take a long term view and make this investment now, in the knowledge of savings in later years, better patient outcomes, and less pressure on our hospital system.

"Significant new investment in general practice and the urgent need to lift the current freeze on the indexation of Medicare patient rebates must be priorities for the Review, or they will be priority issues for voters at the next election," Professor Owler said.

With the growing burden of chronic disease and the long term impact this will have on the health system, the AMA is encouraging the PHCAG to consider reforms that will better support these patients in accessing high quality GP-led care.

The AMA Submission highlights a number of areas for change, including:

- provided there is no overall reduction in funding, reform of existing Medicare chronic disease items to strengthen the role of the patients usual GP, cut red tape, streamline access to GP referred allied health care services and reward longitudinal health care;
- the adoption of pro-active models of care-coordination for patients with higher levels of chronic disease and who are at risk of unplanned hospitalisation similar to the Coordinated Veterans' Care program that has been established by the Department of Veterans' Affairs;
- the introduction of an incentive payment through the Practice Incentives Program to support quality improvement, informed by better data collection;
- the introduction of non-dispensing pharmacists in general practices to help improve medication management, particularly for patients with chronic disease;
- an enhanced role for private health insurers to fund targeted programs that support general practice in caring for patients with chronic disease;
- the utilisation of Primary Health Networks to support GPs in providing care for patients, particularly in improving the connection between primary and hospital care; and
- better use of technology, including the use of point of care testing.

While the AMA Submission promotes a number of reforms, it also emphasises that fee-forservice should remain the primary source of funding for General Practice.

Professor Owler said that the fee-for-service model works well for the majority of patients in the Australian context.

"Fee-for-service provides patients with autonomy and choice, and access to care based on clinical need as opposed to the potential for rationed care that arises under some other funding models," Professor Owler said.

"It also supports the doctor-patient relationship, with patients receiving a Medicare rebate to support them in accessing GP services."

The Submission also highlights that there may be scope to go further when looking at the introduction of blended payment models, but these would need to be carefully designed, piloted, and subject to thorough evaluation.

The AMA also acknowledges the current discussion about the potential benefits of the introduction of the medical home to Australia, and supports the principles that underpin this concept. Most Australians currently have a medical home - via their usual GP or usual general practice.

If the medical home approach is to be formalised, the AMA recommends that:

- it must be appropriately funded;
- funding should complement existing fee-for-service arrangements;
- it must utilise the patient's usual general practice/GP as the medical home;
- it must be voluntary, allowing patients or GPs to opt out, or reverse decision;
- it must target patients with chronic disease,
- it must impose minimal administrative burden on practices; and
- it must be based on a GP-led team.

Professor Owler said the AMA is pleased that the Government has started this important debate over primary health care.

"The AMA has put forward to the PHCAG a measured, workable plan to improve access to care for patients, particularly those with chronic disease," Professor Owler said.

"The Government has raised the expectations of the community, as well as stakeholders, and it must now deliver the significant real new investment needed to achieve genuine reform that benefits patients and communities."

The AMA Submission to the Primary Health Care Review is at <u>https://ama.com.au/submission/ama-submission-primary-health-care-review</u>

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CONTACT: John Flannery Odette Visser 02 6270 5477 / 0419 494 761 02 6270 5412 / 0427 209 753

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