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**PRIMARY HEALTH NETWORKS MUST NOT BE USED TO RATION
 HEALTH CARE FOR PATIENTS**

AMA Position Statement on Primary Health Networks 2015

The AMA today released its *Position Statement on Primary Health Networks (PHNs) 2015*, which replaces the *AMA Position Statement on Medicare Locals 2011*.

AMA Vice President, Dr Stephen Parnis, said the AMA supports the need for an overarching structure of Primary Health Care Organisations (PHCOs) such as Medicare Locals or Primary Health Networks (PHNs), but they should not become agencies for rationing health funding or devolving the Federal Government’s core primary health care responsibilities.

“PHNs have an important role to play in improving the integration of health services within primary health care, enhancing the interface between primary care and hospitals, and ensuring health services are tailored to the needs of local communities,” Dr Parnis said.

“They have the potential to have a strong impact on aged care services, mental health outcomes, chronic disease management, Indigenous health services, and services for the disadvantaged.

“The AMA believes that, as well as having a strong focus on supporting general practice, the PHNs should work to identify and address gaps in local and regional health care services.

“PHNs should focus on population health, building general practice capacity, and engaging with Local Hospital Networks or Districts to ensure there is continuity of care.

“General practice must be at the heart of PHNs, and GPs must be heavily involved in the leadership and management of PHNs.

“Local doctors must be represented on the Boards of PHNs and on all key committees established by the Boards.

“Clinical advisory bodies must be GP-led and have strong GP representation.”

Dr Parnis said that the Government’s recent mental health reforms and some of the preliminary work of the Primary Health Care Advisory Group point to a bigger, more controversial, and potentially unwelcome role for PHNs in primary health care funding.

“There are worrying signs that the Government is ignoring the lessons of the failed Medicare Locals experiment as well as diverting significant amounts of Medicare funding to PHNs, potentially establishing new models of care for some population groups that could interfere in the GP clinical care role, restrict patient choice, and ration access to health services.

“It is also unclear from recent Government announcements whether or not PHNs will be used to fundhold for GP services. The Government needs to rule this out immediately.

“The Government must support patients to access GP-coordinated care, and dismiss proposals that undermine this long-established successful model of primary care.

“The PHN network is seriously underdeveloped nationally, and there is the potential, over time, for PHNs to divert money from patient care into bureaucracy and administration.

“The PHNs must not be used as a vehicle to cut funding for health care, or to allow the Government to avoid health care funding responsibility.”

The AMA believes that PHNs can only succeed if they:

- have a clear purpose, with clearly defined objectives and performance expectations;
- are GP-led and locally responsive;
- focus on supporting GPs in caring for patients, and working collaboratively with other health care professionals;
- have strong skills-based Boards; and
- are appropriately funded to support their operations, particularly those that support the provision of clinical services;
- focus on addressing service gaps, not replicating existing services;
- are not overburdened with excessive paperwork and policy prescription; and
- are aligned with Local Hospital Networks (LHNs), with a strong emphasis on improving the primary care/hospital interface.

The *AMA Position Statement on Primary Health Networks 2015* is at <https://ama.com.au/position-statement/primary-health-networks>

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