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AMA CALLS ON ALL MAJOR PARTIES TO PUT HEALTH FIRST

AMA President Dr Michael Gannon has called on the Coalition to match Labor’s pledge to unfreeze Medicare rebates, boost public hospital funding and reverse bulk billing incentive cuts for pathology and diagnostic imaging services.

Releasing a report on how the promises of the major parties line up with the key health issues identified by the AMA at the start of the election campaign, Dr Gannon said it was not too late for the Coalition to match Labor and the Greens in backing primary health and public hospitals.

“There are still four days to go before polling day, and I urge the Prime Minister Malcolm Turnbull and his team to back the nation’s GPs and hospitals and dump the Medicare rebate freeze and lift public hospital funding,” Dr Gannon said.

“The freeze has meant that the Medicare rebate is falling ever further behind the cost of providing care.

“GPs are telling us that they are at breaking point and many say they will have to begin charging patients up to \$25 a visit if their practices are to remain viable.

“Public hospitals, meanwhile, are being squeezed financially even as demand for their services climbs higher.

“The AMA’s *Public Hospital Report Card* shows that improvement in key measures of hospital performance has stalled and, in some instances, is beginning to slide. Public hospitals need more resources to continue to serve the needs of patients.

“Opinion polls consistently show that health is one of the top priorities for voters, and now is the chance for the Coalition to show its commitment to putting health first,” Dr Gannon said.

At the start of the Federal election campaign the AMA issued a report, *Key Health Issues for the 2016 Federal Election*, detailing its top 10 policy priorities for health, including unfreezing Medicare rebates, increasing public hospital funding, reversing pathology and diagnostic imaging bulk billing incentive cuts, investing in medical workforce and training, tackling chronic disease, improving Indigenous health, expanding infrastructure grants for rural GPs, boosting preventive health programs, cracking down on e-cigarettes and supporting physical activity.

Dr Gannon said the AMA’s policy prescription highlighted the issues that would deliver the greatest benefit to patients, the health system and the medical profession.

The AMA President said the Coalition’s promise to appoint a National Rural Health Commissioner and establish a Rural Generalist Pathway had the potential to deliver real improvements in rural health, and was a far better investment than creating another medical school.

Dr Gannon commended both the major parties for promising to make major investments in mental health, including the Coalition’s \$192 million pledge to implement a National Suicide Prevention Strategy, and Labor’s \$72 million commitment to fund 12 regional suicide prevention projects.

He said it was encouraging that many of the AMA's ideas had been taken up by the major parties, but significant gaps remained – especially, in the case of the Coalition, on Medicare and public hospital funding and, in the case of both major parties, a lack of commitment to expand the rural GP infrastructure grants program.

“Health issues have, quite rightly, figured prominently in the election campaign, and the last week of electioneering provides a chance for all major parties to ensure they are putting up policies that put health first.

“Whoever wins Saturday's vote, they must invest significantly in the health of the Australian people, and the AMA's policy prescription gives them an excellent place to start,” Dr Gannon said.

The AMA's *Key Health Issues for the 2016 Federal Election* is available at <https://ama.com.au/article/key-health-issues-federal-election-2016>

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How the major parties line up on the AMA's key health issues for the Federal election

Policy	Party		
	Coalition	ALP	Greens
<p>Medicare Benefits Schedule Indexation Freeze <i>AMA Position:</i> The AMA calls on the major parties to immediately reverse the indexation freeze upon coming to office and increase rebate indexation of to levels that cover the cost of providing high quality health care.</p>	<p>MBS indexation is to remain frozen until July 2020.</p>	<p>Labor will restore indexation of the MBS from 1 January 2017. This will apply to all services provided by GPs, allied health and other health practitioners and medical specialists. It represents a commitment of an additional \$2.4 billion in funding for Medicare over the next four years and more than \$12 billion over 10 years.</p>	<p>The Greens have committed to reverse the freeze on Medicare indexation.</p>

<p>Public Hospitals <i>AMA Position:</i> The AMA calls on the major parties to provide certainty to Commonwealth public hospitals with a long-term plan that provides sufficient funding for at least a decade; ensure public hospital funding is quarantined from opportunistic, short-term policy making; at a minimum, include adequate provision for population growth and demographic change, and for annual indexation at a rate appropriate to hospital running costs.</p>	<p>The Coalition reached an agreement at COAG on 1 April to fund 45% of efficient growth in activity, capped at 6.5% per year. This represents up to an additional \$2.9 billion to 2020 over the existing funding model based on population growth and CPI. No commitment beyond 2020.</p>	<p>Labor has pledged to restore funding under the National Health Reform Agreement, confirming the Commonwealth would provide 50% of growth funding to 2020. This represents a \$2 billion increase on the agreement reached at COAG on 1 April. No commitment beyond 2020.</p>	<p>The Greens have committed an additional \$4 billion dollars for public hospitals to 2020 and want to enshrine a funding formula in law to provide certainty. The additional hospital funding will come from phasing out the private health insurance rebate.</p>
<p>Removal of Pathology and Diagnostic Imaging Bulk Billing Incentives <i>AMA Position:</i> The AMA calls on the major parties to maintain bulk billing incentives for pathology and diagnostic imaging.</p>	<p>Coalition has announced it will save \$650 million by: <u>Pathology:</u></p> <ul style="list-style-type: none"> • the measure to remove bulk billing incentives will commence at the date that changes to the regulatory framework take effect; • it will not change the Pathology Services Table, excluding those from the MBS Review, for the 	<p>Labor has pledged not to introduce the Coalition’s planned cuts to bonus payments for pathologists and radiologists who bulk bill.</p>	<p>No specific announcement.</p>

	<p>next three years, without consultation and agreement with the sector.</p> <p><u>Diagnostic Imaging:</u></p> <ul style="list-style-type: none"> • delay the commencement of the bulk billing incentive cuts to 1 January 2017 to allow for independent evaluation; • maintain bulk billing incentives for concession card holders and children under 16; • make no change to the Diagnostic Imaging Services Table, excluding those from the MBS Taskforce, for the next three years, without consultation and agreement with the sector; and • restore diagnostic imaging indexation in 2020. 		
<p>Medical Workforce and Training <i>AMA Position:</i> The AMA calls on the major parties to require the National Medical Training and Advisory Network to complete workforce modelling across all medical specialties by the end of 2018; establishing a</p>	<p>No election policy announcement.</p>	<p>No election policy announcement.</p>	<p>No election policy announcement.</p>

<p>Community Residency Program for prevocational doctors; increase the GP training program intake to 1700 places a year by 2018; and further expanding the Specialist Training Program to provide 1400 places a year by 2018.</p>			
<p>Tackling Chronic Disease <i>AMA Position:</i> The AMA calls on the major parties to commit appropriate funding for the planned Health Care Homes trial; and use the DVA CVC program as the basis to calculate how much extra money is required.</p>	<p>Established a framework for Health Care Home trials but committed no new resources above the \$21 million allocated in the Budget.</p>	<p>Has committed an additional \$100 million over two years to strengthen primary care and develop its <i>Your Family Doctor</i> model of patient-centred medical homes.</p>	<p>Has promised \$1.5 billion over four years to reorganise the current GP payment system, with \$1000 payments available to GP practices for each chronic disease patient enrolled.</p>
<p>Indigenous Health <i>AMA Position:</i> The AMA calls on the major parties to commit to: correct the under-funding of Aboriginal and Torres Strait Islander health services; establish and strengthen preventive health programs; increase investment in Aboriginal and Torres Strait Islander community</p>	<p>\$25 million to tackle domestic violence in Indigenous communities.</p>	<p>Invest \$9.5 million to close the gap in Aboriginal and Torres Strait Islander vision loss; consider priorities for justice targets, including establishing three new launch sites for initiatives to prevent crime and reduce incarceration.</p>	<p>\$42.3m to work to limit preventable blindness; \$99.8m to Close the Gap in hearing health; \$10m to treat chronic kidney disease.</p>

<p>controlled health organisations; appropriately resource the National Aboriginal and Torres Strait Islander Health Plan.</p>			
<p>Rural GP Infrastructure Grants <i>AMA Position:</i> The AMA calls on the major parties to commit to: address the poor take up of GP infrastructure grants; fund an extra 425 grants; and scrap the demand that practices match funding on a dollar-for-dollar basis.</p>	<p>No election policy announcement.</p>	<p>No election policy announcement.</p>	<p>No election policy announcement.</p>
<p>Prevention <i>AMA Position:</i> The AMA calls on the major parties to commit to: fund prevention and early intervention; increase investment in evidence-based approaches to preventive health; and deliver sustainable funding for non-government organisations that advocate, educate and provide services to those affected by chronic diseases and other health problems.</p>	<p>No election policy announcement but existing commitments to develop a new National Alcohol Strategy.</p>	<p>Labor has committed \$300 million as part of a preventive health package that includes:</p> <ul style="list-style-type: none"> • establishing 50 ‘Healthy Communities’ to provide targeted support to communities at high risk of chronic disease; • establish a National Physical Activity Strategy and Nutrition Framework; • National roll out of Victoria’s Better Health Channel; 	<p>20% tax on sugary drinks; mandatory food labelling; restrictions on advertising junk food to children; \$10m a year for Harm Reduction Innovation Fund.</p>

		<ul style="list-style-type: none"> • \$50 million for smoking cessation; • develop a National Alcohol Strategy. 	
<p>Tobacco <i>AMA Position:</i> The AMA calls on the major parties to commit to: ban the sale of e-cigarettes to anyone aged under 18 years; ban the marketing of e-cigarettes as smoking cessation aids; subject e-cigarettes to the same marketing and advertising restrictions as tobacco products.</p>	No specific election announcement.	A commitment to introduce four annual 12.5 per cent increases in tobacco excise between 2017 and 2020.	No specific election announcement.
<p>Physical Activity <i>AMA Position:</i> The AMA calls on the major parties to commit to: a National Physical Activity Strategy that clearly defines practical, prioritised and evaluated measures and national indicators of physical activity participation.</p>	No election policy announcement.	Labor has committed to develop Australia's first National Physical Activity Strategy.	\$250m annual Active Transport Fund; \$20m to support disadvantaged families for children's sport and exercise.