



President's Report

Defending, promoting, and enhancing the best interests of doctors and patients

This year was another period of high-level and high-speed activity, advocacy, achievement, and advancement for the AMA – on many fronts.

The year began very much in the same vein as 2014 ended, with health policy and politics centred on the Government's controversial and contentious co-payment policies, which in 2015 entailed a \$5 cut to the Medicare patient rebate (a co-payment by stealth), a freeze to the Medicare rebate, and changes to Level A and B GP consultations.

The year also began with a change of Health Minister, with Sussan Ley taking over from Peter Dutton, who moved to Immigration. The AMA's relationship with Minister Ley started on good terms and, even throughout occasional tumultuous times, a strong transparent relationship remained in place at year's end.

It was Minister Ley's job to take the heat out of the co-payment debate – to consult and to keep things calm. It worked. It was not long before the Government's co-payment plans were gone – dead, buried, cremated.

Having worked tirelessly for this outcome, the AMA then called on the Government to shift its health priorities to chronic disease management, public hospital funding, Commonwealth/State relations, prevention, and medical training.

We stressed to the Government and the community that there was no health funding crisis facing Australia, as claimed by some in the Government and some commentators.

The foundations of the health system were sound. Health spending was not out of control. Our health system was, and is, the envy of the world.

It is not perfect, but the foundations – the balance between public and private, the defined roles for the Commonwealth and the States, high life expectancy, and good health outcomes – continue to underpin a healthy nation.

The problem for the Government throughout 2015 was that the damage from the 2014 Budget would not go away. The quest for significant savings in the health budget had come to a sudden halt with the demise of the co-payment.

A change of strategy came in the 2015 Budget with the announcement of the Review of the Medicare Benefits Schedule (MBS) and the Primary Health Care Review.

While welcoming the reviews and offering willing AMA participation, we let it be known from the beginning that the AMA would not support a process that was primarily about cost cutting and Budget savings.

Despite assurances from the Minister, all the rhetoric around the reviews was about removing items, not introducing new items as well, as had been agreed at the outset.

There was unanimity around building a modern MBS that reflects modern medical practice. That unanimity was frayed by the end of the year, as we waited for preliminary reports from both reviews.



In October, the Minister announced a review of the private health insurance sector. This came after months of inappropriate behaviour by some funds in their negotiations with private hospitals, and questions being raised about the value of many private health policies. The emergence of 'junk policies', where patients discovered they were not covered for care in a private hospital, added further impetus for the review.

Meanwhile, the private health funds continued pushing for a greater role in primary care

Then, in November, the Government released its long-delayed response to the mental health review. This virtually amounted to the Government allocating funding packages to Primary Health Networks to be distributed to various care providers and services at the local level.

There is still scant detail, and only a small number of PHNs operating at an efficient level, so question marks remain over this strategy, especially given the lack of commitment to a key role for GPs.

But the AMA advocacy and policy profile was much broader throughout the year.

We launched the AMA *Pharmacist in General Practice Incentive Program (PGPIP)*, our plan to have non-dispensing pharmacists part of the GP team.

We released the *Community Residency Program for Junior Medical Officers (JMOs)*, the AMA *Guide to 10 Minimum Standards for Medical Forms*, we co-launched the report, *Climate Change challenges to health: Risks and Opportunities*, with the Australian Academy of Science, and we co-launched the *Avoid the crash, Avoid the trauma* road safety campaign.

We launched new or updated AMA Position Statements on Palliative Care, Residential Aged Care, Methamphetamine, Combat Sports, Climate Change and Human Health, Aboriginal and Torres Strait Islander Health, Sexual Harassment in the Medical Workplace, Workplace Bullying and Harassment, Medical Graduates, Primary Health Networks (PHNs), the Medical Home, Tobacco Smoking and E-cigarettes, and the Health Care of Asylum Seekers.

The AMA Indigenous Health Report Card was warmly received by all stakeholders, and was broadly publicised in the media.

Our Public Hospital Report Card set the political agenda on hospital funding.

AMA advocacy brought an end to proposed Government changes to the Medicare Safety Net.

Our leaders and grassroots members spoke out in support of proper health care and compassion for asylum seekers, especially children in detention.

Importantly, the AMA played a leading role in the medical profession's examination of bullying and harassment in the profession and in medical workplaces, and this work is ongoing.

There have also been changes with AMA governance arrangements, which are detailed in the Secretary General's report.

As I approach my final months as AMA President, I thank my Vice President, Federal Council, Board, and Secretariat staff for working as a team to keep the AMA at the forefront of medico-political advocacy in Australia.

And I thank all AMA members for your feedback, your ideas, your energy, and your dedication to your patients, your peers, and the profession. You make us strong.

There will be a Federal Election in 2016. The AMA will be watching things very closely, and we will be standing up for what is best for doctors, their patients, and the community.

Professor Brian Owler
President