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AMA LEADERSHIP TEAM



President Associate Professor Brian Owler



Vice President Dr Stephen Parnis

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Welcome commitment to consultation as common sense prevails

BY AMA PRESIDENT ASSOCIATE PROFESSOR BRIAN OWLER

"It really is a victory for grassroots GPs and for the patients that they serve. It is a very good outcome for those people going to see their GP and for those GPs who are providing those vital services in our community"

We have seen a great win for common sense, with the Federal Government announcing that it will not proceed with the planned introduction of a 10-minute time threshold for Level B Medicare Benefit Schedule consultation items.

This change was due to commence on 19 January, and would have seen the loss of \$1.3 billion in MBS funding for GP services.

As a result of the Government's change of heart, the existing Level A and B MBS consultation item structure will remain in place.

It really is a victory for grassroots GPs and for the patients that they serve. It is a very good outcome for those people going to see their GP and for those GPs who are providing those vital services in our community.

The AMA had placed the Government under significant public pressure over its plan. I have raised our concerns with politicians across the political spectrum, including the new Health Minister, Sussan Ley, and Prime Minister Tony Abbott.

I have been in contact with the Health Minister and she has given me a firm commitment to take a more collaborative approach to the development of GP policy, in the context of the future sustainability of Medicare. This is a welcome change in the Government's approach.

While the AMA is very pleased with this decision, which is a big win for GPs and patients, our concerns with other planned cuts to funding for MBS services remain.

The Government has not yet backed away from its proposal for a \$5 rebate cut for most GP services from July 1, or its planned freeze on MBS indexation until 2018.

With this in mind, the AMA will still proceed with previously announced GP forums in Tasmania, Victoria, South Australia, New South Wales, the ACT, Queensland and Western Australia.

These forums remain a critical part of our campaign to support General Practice and an important opportunity for you to join with other GPs to inform our feedback to the Government's consultation process.

Details of these forums are at www.ama.com.au/gprally

I appreciate the significant feedback that GPs have given me over recent weeks in response to the Government's plans. I have been able to put many of these concerns directly to the public and politicians, and they have been heard loud and clear.

The AMA remains committed to working collaboratively with Government to develop sustainable GP financing policy, and I am confident that last week's announcement by Ms Ley signals a new and refreshing approach.

Rebate cut backflip a 'victory for patients'



AMA President Associate Professor Brian Owler has hailed a "victory for patients and for common sense" after the Federal Government backflipped on plans to slash Medicare rebates for shorter GP consultations.

In an abrupt about-face, recently appointed Health Minister Sussan Ley on Thursday announced that a cut in the rebate for Level B consultations lasting less than 10 minutes from \$37.05 to \$16.95, due to come into effect on 19 January, had been taken "off the table".

"As the new Health Minister I have become aware of significant concerns and unintended consequences of changes in Medicare rebates scheduled to begin on Monday 19 January," the Minister said. "As a result, I'm announcing today [15 January] that the changes to level A and B Medicare consultation items will not commence on Monday as planned. The Government is taking them off the table."

The decision came amid mounting outrage among doctors and patients about the planned change, with warnings it would result in a \$20 jump in out-of-pocket expenses for patients, longer waits to see GPs and more pressure on hospital emergency departments.

A/Professor Owler said Ms Ley's announcement would be a huge relief for doctors and patients around the country.

"Clearly, common sense has prevailed," he said.

"No issue in recent memory has provoked the anger among doctors and patients that this proposed rebate cut has," the AMA President said. "The AMA and other doctors groups have been

inundated with messages from doctors and patients around the country outraged by the plan, which was always about the Budget bottom line rather than health policy."

Hundreds of GPs had registered to attend rallies being organised by the AMA to protest the change, and they had flooded politicians, newspapers, talkback radio and online forums with messages highlighting the devastating impact the change was likely to have on patients and primary health care.

A/Professor Owler said it was "heartening" to see that the new Health Minister had been listening, and had decided to dump what was always a very flawed idea.

The Government made its move as opposition to the measure intensified inside as well as outside Parliament.

The rebate cut was introduced by regulation just before Christmas, and Parliament would have to return from its summer recess before steps to disallow it could begin – an uncertain process that might take months.

But any Government hopes that the measure might stand were dealt a heavy blow the day before Ms Ley's announcement when Labor announced it would join the Australian Greens and at least four crossbench senators, including Nick Xenophon, Jacqui Lambie, Glenn Lazarus and Ricky Muir, in opposing it.

Continued on p5 ...

Rebate cut backflip a 'victory for patients'

... from p4

With the Senate appearing to be moving against it, and the protests of doctors and patients getting ever -louder, and claims some Coalition MPs were preparing to publically break ranks on the issue, the Government decided to cut its losses and ditch the change.

One down, but concerns remain

The rebate cut was part of a package of changes unveiled by the former Health Minister Peter Dutton in early December which together were projected to rip more than \$3.5 billion out of primary health care over the forward estimates.

At the time, Mr Dutton said the move to change the basis of Medicare rebates from the complexity of consultations to the time they took was intended to boost the amount of time doctors spent with their patients and reduce the incidence of "six-minute medicine".

But A/Professor Owler said the change had never been about health policy, and had always been driven by the search for Budget savings.

He said it was a poorly conceived plan because increasing out-of-pocket expenses would deter more patients from seeing their doctor, leading to more serious and expensive health problems down the track, possibly requiring hospitalisation.

While Ms Ley has dumped the \$20 Level B consultation rebate cut, the other elements of Mr Dutton's package – a \$5 Medicare rebate cut for general patients from 1 July and an extension of the Medicare rebate indexation freeze to mid-2018 – remain in place, and the Minister reaffirmed the Government's determination to make changes to Medicare.

"In the last decade, spending on Medicare has more than doubled from \$8 billion in 2004 to \$20 billion today, yet we raise only \$10 billion from the Medicare levy. Spending is projected to climb to \$34 billion in the next decade to 2024," the Minister said. "So my clear message to all with an interest in Medicare reform is that doing nothing is not an option."

A/Professor Owler said the AMA was ready to work with the Government on ways to improve the health system, including improving the support for primary care, but added that the July rebate cut and the extended indexation freeze remained a "serious concern" for doctors and their patients.

The latest backflip

Ms Ley's decision marks the second time the Abbott Government has been forced to dump a signature health change.

Late last year, Mr Dutton was compelled to drop plans for a \$7 co-payment for GP services after it became clear the Government did not have sufficient support in the Senate to have the measure passed.

But he tried to preserve \$1.3 billion of savings by extending the freeze on Medicare rebate indexation through to mid-2018, introducing a \$5 rebate cut for general patients from 1 July this year and, of course, slashing funding for shorter GP consultations.

One of these proposals has now been dumped, and the remaining two are likely to be the subject of intense discussions between the Health Minister, the AMA and other health groups in the coming months.

ADRIAN ROLLINS

INFORMATION FOR MEMBERS

Free tool to track registration requirements

The AMA has developed a free online tool to help doctors to keep track of the information they need to meet the Medical Board of Australia's annual continuing professional development (CPD) requirements.

Each September, practitioners, when renewing their Medical Board registration, may be required to provide evidence they have complied with the Board's CPD requirements.

The AMA CPD Tracker has been developed to enable doctors to progressively gather and organise the information needed to substantiate declarations made to the Board about CPD, so that evidence can be quickly and easily produced on demand.

The AMA CPD Tracker can be used to:

- List courses completed, including the organisation that accredited the CPD activity;
- · Store all certificates of completion;
- Keep a log of practice-based reflective activities, including clinical audits, peer reviews and perfomance appraisals; and
- Log hours spent on online learning, reading journals, teaching and other activities.

The system keeps a tally of hours, enabling practitioners to keep track of what needs to be completed before the end of the registration year.

The Tracker has been developed taking full account of the requirements set out in the Medical Board's Continuing Professional Development Registration Standard.

The service is free to AMA members. Nonmembers can subscribe for an annual fee of \$250.

To register for the product, please sign up here.

New health minister says, let's talk



New Health Minister Sussan Ley has affirmed the Federal Government's commitment to introduce a "modest" co-payment for GP services and discourage 'six-minute medicine' as part of changes to Medicare.

The Minister, who was pitched into the middle of a fierce confrontation between doctors and the Government upon taking up the job just before Christmas, has promised a more consultative approach than her predecessor, Peter Dutton, who was moved to the Immigration portfolio in a limited ministerial reshuffle.

But, while she has dumped the \$20 Medicare rebate cut for shorter consultations introduced by Mr Dutton which had provoked widespread outrage among doctors, she said the Government remained determined to make changes to Medicare.

In particular, Ms Ley has embraced the same concerns about Medicare spending that dominated the approach to health policy by her predecessor, Peter Dutton.

She said spending on Medicare had ballooned from \$8 billion to \$20 billion in the past decade, and was expected to reach \$34 billion by 2024, while the Medicare levy raised barely \$10 billion.

Given this outlook, she said, "doing nothing is not an option".

The Minister laid out the four principles that she said would guide her thinking about the types of changes that needed to be made, including ensuring Medicare's long-term sustainability, protecting bulk billing for vulnerable and concession card patients, supporting high quality care and treatment for all, and "a modest co-payment...for those who have the capacity to pay".

AMA President Associate Professor Brian Owler is due to meet with Ms Ley in the coming days as she kicks off on her promise to consult with the medical profession about health system reform.

A/Professor Olwer said that he had already been in contact with the Minister who had "given me a firm commitment to take a more collaborative approach to the development of GP policy, in the context of the future sustainability of Medicare. This is a welcome change in the Government's approach."

Ms Ley has attempted to re-set the Government's troubled relationship with doctor groups and the medical profession.

In announcing her decision to dump the \$20 rebate cut for Level B consultation of less than 10 minutes, the Minister emphasised her "strong commitment" to talking with doctors and the broader community.

"I'm announcing today my strong commitment to undertake wide ranging consultation on the ground with doctors and the community across the country in order to come up with sensible options to deliver appropriate Medicare reform," she said. "My clear message to all with an interest in Medicare reform is that doing nothing is not an option. This is the time for everyone to work constructively together to secure a more sustainable Medicare system."A/Professor Owler said the AMA looked forward to working with the Minister "in a very constructive manner".

He said that in the talks the AMA would underline the importance of investing in primary health care to ensure the long-term sustainability of the health system.

The AMA President said governments around the world recognised that primary health care was the most cost-effective part of the health system, and increasing support for it reduced overall health costs in the long-term.

For this reason, he said, "the AMA will not be supporting cuts to the Medicare rebate and, while we have always said that we are not against a co-payment per se, we want to make sure that there are protections there for vulnerable patients in our community, the sick and the poor, and we want to make sure that those with chronic diseases are well looked after".

A/Professor Owler said the Minister's decision to ditch the \$20 GP rebate cut meant there was now time to talk about the other changes on the Government's agenda.

"We have some time to talk about freezing to indexation which is also going to have very significant consequences for the affordability, not just of GP consultations, but specialist care provided by people in our hospital system. There are a range of issues we need to discuss," he said.

"We very much welcome the announcement that has been made by the Government and by the new minister, Minister Ley, and we look forward to working with her in a very constructive manner over the next few months."

The death of the \$20 rebate cut – how it happened

9 December 2014

Federal Government announces it has dumped the \$7 GP copayment, to be replaced by a package that includes a \$20 reduction to rebates for GP consultations of less than 10 minutes, a \$5 cut to rebates for general patients and a freeze of Medicare rebate indexation to mid-2018 http://www.abc.net.au/news/2014-12-09/federal-government-dumps-gp-co-payment/5955012



The AMA immediately objected to the changes. While welcoming co-payment exemptions for vulnerable patients, it voiced serious concerns about cuts to the Medicare rebate. https://ama.com. au/media/government%E2%80%99s-new-co-payment-model-%E2%80%98mixed-bag%E2%80%99

12 December

The AMA emailed members to outline the Government's revised Medicare co-payment package and invite feedback on the updated policy.

16 December

The Government tabled regulations enshrining a cut in the rebate for Level B GP consultation of less than 10 minutes from \$37.05 to \$16.95 from 19 January, 2015 – giving doctors and patients less than five weeks to prepare for the change. http://www.comlaw.gov.au/Details/F2014L01714

17 December

AMA announces its formal opposition to the Government's revised co-payment model, warning it will send a "wrecking ball" through general practice - http://www.abc.net.au/news/2014-12-17/gp-co-payment-opposed-by-australian-medical-association/5974342

AMA sent a letter to all members outlining its opposition to the latest co-payment proposal.

19 December

AMA President Associate Professor Brian Owler holds a doorstop at Parliament House to discuss the GP co-payment, saying the AMA would not support the rebate cut, rebate freeze or the change in terms of the level A and level B rebates. - https://www.youtube.com/watch?v=RKk5mxjwGqg&feature=youtu.be



22 December

Cabinet reshuffle – Sussan Ley promoted to Minister for Health – announces she will focus on working with the medical community on the co-payment - http://www.smh.com.au/federal-politics/political-news/sussan-ley-vows-to-focus-on-indigenous-health-and-gp-copayment-20141222-12cenr.html

AMA President Associate Professor Brian Owler welcomes Ms Ley's appointment, saying he looks forward to inclusive debate and robust discussions on the Government's Medicare and copayment proposals - https://ama.com.au/media/ama-welcomesnew-health-minister-sussan-ley

The death of the \$20 rebate cut – how it happened

23 December

AMA President Associate Professor Brian Owler met with newly sworn in Health Minister Sussan Ley to discuss the copayment





24 December

AMA sent a letter to all AMA members informing them of what they need to do to prepare for changes to level B consultations from 19 January, and promised to continue the fight against the MBS rebate cuts, indexation freeze and the introduction of a 10-minute time threshold for level B consultations.

7 January 2015

AMA President Associate Professor Brian Owler discusses the Medicare funding cut to be introduced on 19 January on ABC 666. https://ama.com.au/media/ama-transcript-ama-president-aprofbrian-owler-666-abc-radio-canberra ABC News Online highlights the AMA's concerns with the changes to Medicare consultations http://www.abc.net.au/news/2015-01-07/gps-lobby-mps-patients-ahead-of-looming-rebate-cut/6004394

7 January

AMA announces it will hold rallies of GPs across Australia to protest the Abbott Government's proposed Medicare changes - http://www.theguardian.com/australia-news/2015/jan/07/doctors-to-demonstrate-in-protest-at-plan-b-proposed-medicare-changes?CMP=share_btn_tw

9 January

AMA Takes fight on co-payment to PM

JESSICA GARDNER

The Australian Medical Association wants Prime Minister Tony Abbott to back down from funding cuts for short doctor visits and has threatened to ramp up its campaign against Medicare cuts with public rallies in February.

The president of the influential doctors' lobby Brian Owler said Mr Abbott could intervene to stop the changes, which are due to come into effect on January 19. If not, the AMA would lobby Labor and the Senate crossbenchers to disallow the changes at a later date, Dr Owler said.

The AMA is fighting the revised co-payment scheme for Medicare funding that Mr Abbott outlined in December.

In addition to scaling back the proposed co-payment from \$7 to \$5 per GP visit, the Coalition said it would freeze Medicare rebates until July 2018 and cut the rebate paid to doctors for visits that last less than 10 minutes from \$37.05 to \$16.95.

The AMA has had one meeting with new Health Minister Sussan Ley, who is now on leave. Dr Owler said it was a "very positive" meeting but the minister had been "saddled with a very poor proposal that really has nothing to do with health and it's all about finance."

A spokesman for Mr Abbott said it was a matter for the Health Minister. Ms Ley's spokesman said consultation on Medicare changes would continue.

12 January

Media attention on the issue ramps up. The AMA reveals the Abbott Government made rushed changes to Medicare arrangements, which it says is evidence of Government bungling on the issue - http://www.smh.com.au/federal-politics/political-news/lastminute-medicare-change-evidence-of-abbott-government-bungling-says-australian-medical-association-20150111-12lytn. html

Discreet regulation changes bring in co-payment by stealth - http://www.canberratimes.com.au/comment/discreet-regulation-changes-bring-in-copayment-by-stealth-20150112-12me2m.html

The death of the \$20 rebate cut – how it happened

13 January

The Age splashes with "Patients face new \$20 fee for seeing their GP", adding to the issue's momentum – http://www.theage.com. au/federal-politics/political-news/patients-face-new-20-fee-for-seeing-their-gp-20150112-12mpag.html

AMA Vice President Dr Stephen Parnis talked about the changes to Medicare on Channel Nine's the Today Show – he said the Medicare rebate cuts may lead to clogged emergency departments as patients bypass GPs - https://www.youtube.com/watch?v=bdkZRr36FcE&feature=youtu.be

Media coverage of the issue, including the AMA's opposition to the measure, is unrelenting - http://www.theage.com. au/national/health/medicare-cuts-could-swamp-hospital-emergency-departments-say-doctors-20150113-12nffk.html, http://www.smh.com.au/federal-politics/political-news/new-20-gp-fee-under-fire-senators-could-wind-back-government-changes-20150113-12n702.html

Even the BBC joined the conversation - http://www.bbc.com/news/world-australia-30790863

Dr Brian Morton spoke with 7News Sydney and Sky News Australia while in Canberra about the Government's wrecking ball through general practice



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14 January

AMA rejects Federal Government claims that the planned \$20 cut to Medicare rebates for shorter GP consultations due to come into effect next Monday will boost quality care - https://ama.com.au/

media/ama-media-release-government-rebate-cut-underminesquality-care

The Prime Minister takes a break from his holidays to comment on the deepening stoush with doctors and patients http://www.theage.com.au/federal-politics/political-news/new-20-gp-fee-abbott-governments-health-charge-changes-explained-20150113-12n32h.html

Key crossbench senators Jacqui Lambie, Ricky Muir and Nick Xenophon voice strong opposition to the changes.

http://www.brisbanetimes.com.au/federal-politics/political-news/new-20-gp-fee-under-fire-senators-could-wind-back-government-changes-20150113-12n702.html

Opposition Leader Bill Shorten announces that Labor will move to disallow Medicare Level B rebate changes when Parliament resumes - http://www.afr.com/p/national/labor_to_block_medicare_rebate_change_J0349efxU0u3frKBlAvT8L

15 January

AMA President Associate Professor Brian Owler publicly releases his letter to the Prime Minister, in which he urges him to personally intervene and overturn the Government's plans to slash the Medicare rebate for GP consultations lasting less than 10 minutes. - https://ama.com.au/media/ama-media-release-time-prime-minister-abandon-rebate-cut

AMA Vice President Dr Stephen Parnis discusses the Government's massive cuts to general practice in an attempt to shore up the Budget bottom line on ABC Breakfast News.

Health Minister Sussan Ley cuts her holidays short to deal with the increasing backlash against the Government's Medicare changes. In her 12.15pm press conference she makes her first act as Health Minister to scrap her predecessor Peter Dutton's \$20 cut to the GP rebates. https://www.youtube.com/watch?v=nvzpSvyyZis

AMA President Associate Professor Brian Owler immediately responded by welcoming the Federal Government's decision to ditch the \$20 Medicare rebate cut as a victory for patients. https://ama.com.au/media/ama-media-release-ama-welcomes-victory-patients

KIRSTY WATERFORD

GP forums to go ahead despite Govt backflip

Doctors are being urged to attend a series of meetings being held around the nation in early February to discuss the future of Medicare and health policy.

The meetings, originally planned as rallies to demonstrate against the \$20 cut to shorter GP consultations that was to have come into effect on 19 January, are instead being used as an opportunity for GPs to share ideas and concerns about the Federal Government's health reform agenda.

AMA President Associate Professor Brian Owler said although the Government had taken the \$20 cut to Level B consultations of less than 10 minutes off the table, it was still pushing ahead with a \$5 rebate cut for most patients from 1 July, and planned to extend the freeze on rebate indexation until mid-2018.

A/Professor Owler said the surviving changes were worrying because of their potentially serious effects on primary health care.

He said the meetings, to be held in Tasmania, Victoria, South Australia, New South Wales, the ACT, Queensland and Western Australia in the first two weekends of February, were an important opportunity for GPs to share ideas and inform the AMA's discussions

with Health Minister Sussan Ley in coming months.

Hundreds of GPs across the country have registered to attend the meetings, and A/Professor Owler urged them to continue to come even though the Level B consultation cut had now been scrapped.

"These forums remain a critical part of our campaign to support general practice, and are an important opportunity for you to join with other GPs to inform our feedback to the Government's consultation process," the AMA President said.

"I appreciate the significant feedback that GPs have given me over recent weeks in response to the Government's plans. I have been able to put many of these concerns directly to the public and politicians, and they have been heard loud and clear."

He said the AMA was committed to working collaboratively with Government to develop sensible health policy, and added he was confident Ms Ley's announcement last week signalled "a new and refreshing approach" by the Federal Government to health reform.

ADRIAN ROLLINS

INFORMATION FOR MEMBERS

AMA Careers Advisory Service

From graduates preparing their first resume to experienced doctors seeking to carve out a new career path in the Commonwealth public service, the AMA Careers Advisory Service is on hand to provide practical advice and information.

The Careers website, which is at: http://careers.ama.com.au/, gives members access to both general and specific careers advice and information. In addition to direct links to external websites and specific sources of information, the Service also offers practical advice for medical professionals as their medical careers advance.

The Careers Service provides information and support relevant to all stages of an individual's career, from medical students looking for assistance preparing internship applications - particularly writing resumes and covering letters - through to doctors in training who want to brush up their interview skills to give them

a competitive edge at all-important medical college interviews.

But the Service is not only there for those in the early stages of their medical careers. It has also helped qualified medical professionals looking to apply their skills and expertise in jobs beyond medical practice. Among these have been those looking for non-clinical roles in Commonwealth and State public services that take advantage of their skills and experience.

The Service is constantly updating content on its website, including listings of career-related events being staged across the country, and uses feedback from members to help add and develop resources.

Members are encouraged to visit the website, if they haven't done so already, and we welcome feedback, which can be submitted via the online feedback form on the website.

PRINT

"AMA leans on Ley to get rid of rebate cut", *The Australian*, 22 December 2014

The AMA told newly appointed Health Minister Sussan Ley to dump plans to cut the Medicare rebate to doctors and negotiate with the sector on an alternative funding strategy. Australian Medical Association President Brian Owler savaged the Abbott government's handling of the issue, first with the \$7 co-payment proposal and then the \$5 cut to the rebate.

"Alcohol, water deadly mix, doctors warn", Sunday Canberra Times, 4 January 2015

A quick swim after an afternoon of beers in the sun may seem a good idea to some, but the AMA is warning of potentially tragic consequences. After observing alcohol play a part in numerous drownings in recent years, the Australian Medical Association has called on Australians to abstain from alcohol at the beach and to watch out for loved ones while swimming.

"Doctors take Medicare battle to waiting rooms", The Australian Financial Review, 8 January 2015

The AMA will pile pressure on new Health Minister Sussan Ley over changes to Medicare rebates by holding a series of meetings for GPs later this month. Timed to coincide with the return of politicians to Canberra and to inflict maximum damage on the Coalition's plans, doctors will be encouraged to "air their grievances" at the meetings about the revised co-payment scheme.

"AMA takes fight on co-payment to the PM", *The Australian Financial Review*, 9 January, 2015

The AMA wants PM Tony Abbott to back down from funding cuts for short doctor visits and has threatened to ramp up its campaign against Medicare cuts with public rallies in February.

"Coalition rethinks GP fees", *The Australian Financial Review*, 10 January 2015

There is speculation the revamped Medicare co-payment, which lacks support among the AMA and Senate crossbench at present, could be quietly abandoned as the Government seeks to close off lingering political battles from last year's May budget.

Senate revolt over GP fee, The Age, 15 January 2014

The Abbott Government again faces the embarrassing defeat of a

key policy measure with the Senate vowing to overturn the Prime Minister's plan to slash Medicare rebates, blowing a further \$1.3 billion hole in the budget bottom line. Two days after The Age revealed many patients would face a \$20 cut to the Medicare rebate when seeing their GP, Labor leader Bill Shorten declared the opposition would strike down the "sneaky, back-door" fee when Parliament resumes in February.

Patients hit despite vow to block GP rebate cut, *The Australian*, 15 January 2015

Doctors are warning of higher consultation charges if a \$20 cut in the rebate paid to GPs is to take effect next week. Labor vowed to use its numbers in the Senate to block the new regulations

"Really dumb not to consult with doctors", *The Age*, 15 January 2015

It is a brave Government that picks a fight with doctors says former Australian Medical Association President Dr Kerryn Phelps. She highlighted that most GPs would see more constituents more often than any politician would ever meet.

"Ley backs off GP rebates", *The Australian Financial Review*, 16 January 2015

Recently appointed Health Minister Sussan Ley has dumped contentious cuts to GP rebates for short visits promising a more consultative approach to policy.

RADIO

6PR Perth, 22 December 2014

Doctors who are disappointed on the lack of consultation on the GP Co-payment proposal in the past hope they will be able to start an open dialogue with new Federal Health Minister Sussan Ley.

Australian Medical Association President Professor Brian Owler sees a constructive relationship ahead.

2CC Canberra, 22 December 2014

President of the Australian Medical Association Associate Professor Dr Brian Owler said he is not happy with the various incarnations of the co-payment, from the \$7 to the \$5 co-payment.

Professor Owler said the changes to the level A, level B rebates are also making GPs unhappy.

2UE Sydney, 23 December 2014

AMA President Associate Professor Brian Owler said smoking is a preventable cause of death and disability, and affects the rest of the community, not just the person who smokes. He said smoking-related problems include passive smoking, lung cancer, and cardiovascular disease.

2GB Sydney, 30 December 2014

A/Professor Brian Owler, President, Australian Medical Association said that depending on the time of day and the day of the week, alcohol can contribute to up to a third of all hospital emergency department admissions. A/Professor Owler said that it is not about not drinking or having a good time, but it is important that attitudes towards alcohol, particularly binge drinking and alcoholism, are examined.

ABC News Radio Melbourne, 1 January 2015

The AMA is urging Australians to have the difficult discussion about what they want to happen to them when they die. AMA President Associate Professor Brian Owler said planning ahead saves relatives and friends a lot of stress. He said people can create an advanced care plan which outlines their wishes for doctors and families, which especially helps those who face hospitalisation and intensive care.

2GB Sydney Breakfast, 7 January 2015

A/Professor Brian Owler, President of the Australian Medical Association discusses Queensland's ban on e-cigarettes. He said nicotine is one of the most highly addictive substances, and that it is dangerous to market the products for recreational use and to young people. He said the e-cigarettes are not listed under the TGA as a therapeutic product.

ABC Radio National, Sydney, 8 January, 2015

A/Professor Brian Owler, President, Australian Medical Association said doctors are likely to take part in rallies against cuts to Medicare rebates. The Federal Government announced last year that it intends to reduce rebates for GP consultations that last less than 10 minutes. The AMA has rejected the proposal and the optional \$5 co-payment.

ABC 774 Melbourne, 8 January, 2015

The Australian Medical Association said it will support demonstrations against proposed cuts to Medicare rebates for some GP consultations after the Federal Government announced

last year that it plans to reduce rebates for consultations lasting less than 10 minutes. Brian Owler, President, AMA, said doctors will take part in protest rallies next month.

Triple J Sydney, 8 January, 2015

Doctors are likely to take part in rallies against cuts to Medicare rebates for some consultations, with the government announcing last year that it intends to reduce rebates for GP consultations that last less than ten minutes. The AMA has rejected the proposal, in addition to the optional five-dollar co-payment. Brian Owler, President, AMA, said the rallies are planned for Sydney and Brisbane, with other capital cities likely to follow.

2GB, Sydney, 8 January, 2015

Australian Medical Association President Brian Owler said the AMA does not agree with the proposed freeze to Medicare for the next four years, and the change to Level A and Level B rebates which comes into effect on January 19. He said GP rallies would be held nationally in early February.

ABC Radio National, 10 January, 2015

The Australian Medical Association said surgeons in Australia were having to fix an increasing number of botched procedures done overseas. Michael Gannon, WA AMA President, said medical tourism either leaves someone thousands of dollars out of pocket or puts pressure on the public hospital system in Australia.

702 ABC Sydney, 12 January 2015

AMA Vice President Dr Stephen Parnis dismissed Government claims that health care expenditure is growing unsustainably. Dr Parnis said that, as a proportion of total Government spending, health expenditure has actually gone backwards. He said high quality medicine can be provided in less than ten minutes and the new imposition will hamstring GPs, because they will opt for a 10 minute plus rebate for business to remain viable, meaning fewer patients can be seen per hour. Parnis said GPs are incredibly angry about the changes, with rallies planned in early February encouraging Senate to reverse the measure.

2GB Sydney, 14 January 2015

AMA President Associate Professor Brian Owler said that doctors are angry at the changes to Medicare scheduled fees and said some doctors will abandon bulk billing.

2CC Canberra, 16 January 2015

Chair of the AMA Council of General practice Dr Brian Morton talks about the back down by the Government on Medicare rebates, Dr Morton says the planned changes to consultations was a very unwise move by the Government and welcomes their decision to scrap the policy.

TELEVISION

ABC 730 Sydney

The struggle to improve Indigenous health has become a little easier, with six Indigenous medical students recently graduating from the University of NSW. The AMA's Dr Stephen Parnis said health and life expectancy for Aboriginal Australians are far worse than the rest of the population. He said having doctors from the same cultural background provides a much better chance of improving

Channel Nine Perth, 8 January, 2015

The rebate for short visits to a GP is about to be slashed by around 50 percent. Doctors say fewer GPs will bulk bill, and it will be harder to make an appointment. The public can expect to pay an extra \$20 for each visit. A spokesperson for Sussan Ley, Minister for Health, said the minister has met with the AMA. Doctors are lobbying for the changes to be repealed.

Channel Nine Adelaide, 8 January, 2015

Changes have been quietly introduced to the Medicare rebate, and limits placed on consultation times. GPs say they will have no choice but to charge patients more. The Federal Government has introduced a smaller \$16.95 rebate for appointments less than 10 minutes. Australian Medical Association President, A/ Professor Brian Owler, said the changes are insulting to GPs. A spokesman for Health Minister Sussan Ley said the minister had already met with the AMA, and would continue to consult doctors and the community.

ABC News 24, Sydney, 8 January, 2015

Australian doctors will hold public rallies to protest against the Federal Government's proposed changes to Medicare. Brian

Owler, Australian Medical Association, said GPs are unhappy with the overhaul, which includes a co-payment option and changes to consultation times.

ABC National News, 12 January, 2015

Doctors and the Federal Government are headed for a showdown over changes to the Medicare rebate. The Government will cut the rebate it pays doctors for a quick consultation later this month. Graeme Alexander, General Practitioner, said patients will end up paying more. Brian Owler, Australian Medical Association, and Morton Rawlin, College of General Practitioners, are consequently urging the Senate to take action. Labor is considering its position. Richard Di Natale, Victorian Greens Senator, said health care cannot be improved by reducing the amount given to doctors. Nick Xenophon, Federal Independent Senator, is also concerned about the changes. The spokesman for Sussan Ley, Minister for Health, said she will continue to consult doctors and the community.

ABC News 24, 13 January 2015

The AMA is warning that impending Government cuts to Medicare rebates will put an end to bulk billing and increase pressure on hospital emergency departments. Chair of the AMA Council of General Practice Dr Brian Morton said the changes to the rebate will see people pay \$20 more for some visits to the doctor.

ABC News 24, 15 January 2015

AMA Vice President Dr Stephen Parnis discusses the Government's proposed cuts to the Medicare rebate for doctor consultations under 10 minutes. Dr Parnis said if general practice is undermined than the entire health system is affected. Dr Parnis said that the changes were not about improving quality health care, as claimed by the Prime Minister, but about restoring \$1.3 billion to the Budget.

ABC News 24, 15 January 2015

AMA President Associate Professor Brian Owler welcomes the Government's decision to scrap changes to the Medicare rebate. He says the AMA will consult with the Minister about ways to enhance general practice and make the healthcare system more sustainable.

Motivated health workers fear the future



Most health care workers believe the country will be unable to cope with the challenges arising from an aging population and are worried about their own ability to continue to work in their current jobs through to retirement, a poll has found.

As the Federal Government pushes ahead with measures that are likely to undermine access to primary health care and increase the number of elderly patients who end up in hospital, a survey conducted by Galaxy Research for workforce management consultancy Kronos has found health workers are worried the health system will prove increasingly inadequate in meeting demand for care without major reform.

The survey of 324 health workers, 63 per cent of whom worked in public and private hospitals, found that although many enjoyed their job and relished the opportunity to care for others and contribute to society, they doubted their ability to continue meeting the intensive demands of their work as they grew older – highlighting concerns that the challenge of an ageing population will be compounded by a greying health workforce.

Almost a third of the workers surveyed reported they wanted to finish work before retirement age, though almost a quarter felt they would have little choice but to continue working as long as possible to build up savings. This was a particular source of concern for many, because more than half thought it would be hard to cope in their current role at 69 years of age.

This suggests many will either have to retire early with less funds than they would have liked, or that they will need to take up a different role if they are to continue working through to retirement age.

While the future for many health workers appears clouded with doubt and concern, they report they are more contented with their job than the average worker.

Almost three-quarters reported enjoying what they were doing, compared with two-thirds of workers in other industries.

Affirming the caring image of doctors, nurses and other health workers, the survey found almost 60 per cent were motivated by a feeling of contributing to society (compared with less than 40 per cent of other workers), enjoyed the feeling of being part of a team and valued the responsibility and autonomy of their work.

But while health workers are a motivated workforce, 85 per cent said working conditions and environment would have to improve if they were to remain in the industry. In particular, 74 per cent thought the sector was losing many good staff because of heavy workloads.

This concern was reinforced by the fact that 48 per cent said they would quit if their hours were made inflexible. Altogether, almost three-quarters thought employers needed to enhance training opportunities, provide more flexible hours and increase support for mentoring.



Emergency target dropped as cuts bite



A nationally-agreed target to cut hospital emergency department waiting times is under threat as Federal Government health funding cuts bite.

The New South Wales Government has walked away from a national agreement aimed at ensuring that by the end of the this year at least 90 per cent of emergency department patients would be admitted, referred or discharged within four hours, while the Queensland Government has its commitment under review.

The 90 per cent National Emergency Access Target was part of a National Partnership Agreement struck between the Commonwealth, State and Territory governments in 2011 which promised Federal incentive payments for health systems that reached agreed performance benchmarks.

But doubt was cast over commitments made under the Partnership Agreement after the Abbott Government dumped the system of reward payments as part of sweeping cuts to hospital funding in last year's Budget.

In the Budget, the Commonwealth disavowed public hospital funding guarantees made under the National Health Reform Agreement and reduced the indexation of post-2017 funding to CPI plus population growth, changes the AMA estimates will strip \$20 billion from the public hospital system in the next five years.

The ability of the states and territories to be able to reach the 90 per cent NEAT target already appeared doubtful.

In its 2014 Public Hospital Report Card, the AMA revealed that in

2012-13, just 67 per cent of all emergency department patients nationwide were admitted, referred or discharged within four hours, a slight improvement from the previous year but still well short of the 90 per cent target.

In NSW, the performance of emergency departments has improved but, as at last October, only 75.5 per cent were dealt with within the four hour target.

NSW Health Minister Jillian Skinner announced on 12 January that hospitals in her state will aim at a more modest target for this year of 81 per cent of patients, pending the results of a Queensland review of the 90 per cent target.

"The Queensland Government has advised State and Territory health ministers it is reviewing the 90 per cent target," Ms Skinner said. "The states and territories believe this review will help determine if 90 per cent is a clinically-safe and appropriate long-term goal. "Ministers are yet to receive the Queensland report."

The breakdown in the NEAT target has raised the prospect that other commitments about hospital performance made under the National Health Reform Agreement may also slide.

The Federal Government is overhauling how hospital performance is measured.

Early last year it secured the agreement of the nation's health ministers that the National Health Performance Authority should report on benchmarks around rates of infection and elective surgery and emergency response times. However, following the Budget cuts, this work has been deferred.

ADRIAN ROLLINS

Medicare reprieve for pro athletes

Professional athletes and sporting codes have been given an extra three years to make arrangements to cover their own health costs following yet another backflip by the Federal Government on health policy.

In one of his last acts as Health Minister and Sports Minister, Peter Dutton late last year intervened to reverse an earlier decision to block elite sportspeople from getting publicly subsidised health care for illness and injury.

In a surprise announcement, the Federal Government declared last year that from 25 May 2014 professional athletes would no longer be eligible for Medicare benefits for medical services "where it is directly related to their employment".

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INFORMATION FOR MEMBERS

Essential GP tools at the click of a button

The AMA Council of General Practice has developed a resource that brings together in one place all the forms, guidelines, practice tools, information and resources used by general practitioners in their daily work.

The GP Desktop Practice Support Toolkit, which is free to members, has links to around 300 commonly used administrative and diagnostic tools, saving GPs time spent fishing around trying to locate them.

The Toolkit can be downloaded from the AMA website (http://ama.com.au/node/7733) to a GP's desktop computer as a separate file, and is not linked to vendor-specific practice management software.

The Toolkit is divided into five categories, presented as easy to use tabs, including:

- online practice tools that can be accessed and/or completed online;
- checklists and questionnaires in PDF format, available for printing;
- commonly used forms in printable PDF format;
- clinical and administrative guidelines; and
- · information and other resources.

In addition, there is a State/Territory tab, with information and forms specific to each jurisdiction, such as WorkCover and S8 prescribing.

The information and links in the Toolkit will be regularly updated, and its scope will be expanded as new information and resources become available.

Members are invited to suggest additional information, tools and resources to be added to the Toolkit. Please send suggestions, including any links, to general practice@ama.com.au

Health on the hill

POLITICAL NEWS FROM THE NATION'S CAPITAL

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But in November Mr Dutton exercised his ministerial discretion to suspend the change, allowing sportspeople injured in the course of their work any time between 25 May last year and 30 October 2017 to claim Medicare benefits.

In a letter explaining the decision, Department of Health Acting Assistant Secretary Dr Megan Keaney said it was the Government's "continuing view...that in the longer term these expenses should not be subsidised by the Australian taxpayer".

"This Direction provides sporting codes with time to put in place suitable insurance arrangements so that at the end of this period sporting clubs and codes are fully responsible for meeting the costs of their players' medical treatment, where appropriate," Dr Keaney wrote.

The Health Department official suggested sports groups look at organising their own insurance, develop suitable products in consultation with the insurance industry or possibly arrange to have professional athletes covered by State-based workers' compensation schemes.

In a hint that the original decision to scrap Medicare eligibility for professional athletes had not be fully developed before it was announced, Dr Keaney said the three-year phase-in period would allow the Health Department to develop a definition of "professional sportsperson", as well as allowing sporting codes and clubs to collect and analyse data on the Medicare claiming patterns of elite athletes.



Hope new wave antibiotics could doom superbugs



Researchers are working on a new class of antibiotics that may help stem the rise of superbugs that threaten to make even relatively minor injuries and common infections deadly.

Scientists at the University of East Anglia have discovered a weakness in the defence mechanism of a major group of bugs, gram negative bacteria, that could be the target of a new wave of antibiotic drugs.

The target of their attention has been the cell membrane used by gram negative bacteria, which include common and potentially deadly germs including E.coli and Klebisella pneumonia, to protect themselves from the human immune system and antibiotics.

They have identified a set of molecules called lipopolysaccharides that are crucial to forming the membrane. It means researchers can now look at developing drugs that target these molecules, preventing the membrane from forming and leaving the bacteria vulnerable to the body's immune response.

Research leader Professor Changjiang Dong told *The Independent* newspaper the finding provided "the platform for [an] urgently needed new generation of drugs".

Importantly, the discovery raises the possibility of developing antibiotics to which bacteria cannot develop resistance. The

researchers said that, because the drugs would not need to enter the bacteria cell itself, the bacteria many not have the opportunity to develop resistance, bringing the evolution of superbugs to a halt.

The potential breakthrough has come none too soon, given mounting international alarm about the proliferation of superbugs resistant to existing antibiotic treatments.

The World Health Organisation has warned that antibiotic resistance is "a growing public health threat of broad concern... [that] threatens the achievements of modern medicine".

"A post-antibiotic era – in which common infections and minor injuries can kill – far from being an apocalyptic fantasy, is instead a very real possibility for the 21st century," the WHO said.

In its latest update on the worldwide incidence of antibiotic resistance, the organisation reported that "very high rates of resistance have been observed in bacteria that cause common health-care associated and community-acquired infections (e.g. urinary tract infection, pneumonia) in all WHO regions".

The WHO said that in many areas, clinicians were having to use drugs forming the last line of defence against bacterial infections.

"High proportions of resistance to third generation cephalosporins reported for E. coli and K. pneumonia means that treatment of severe infections likely to be caused by these bacteria in many settings must rely on carbapenems, the last-resort to treat severe community and hospital acquired infections," it said.

"Of great concern is the fact that K. pneumoniae resistant also to carbapenems has been identified in most of the countries that provided data, with proportions of resistance up to 54 per cent reported."

Professor of Microbiology at Kingston University, Mark Fielder, told *The Independent* said the discoveries made by the East Anglia research team were exciting because of the potential development of a new generation of antibiotics that may stall the superbug threat.

But he sounded a note of caution, warning that the effectiveness of even this new generation of drugs may eventually become compromised by bacterial resistance.

"I think because [the new drugs would be] attacking such a vast area of the organism, the potential for mutation might be slowed, but I don't think we could ever say it won't evolve," Professor Fielder said.

Ebola outbreak: worst may be over



The world's worst-ever Ebola virus outbreak has passed a tipping point and may soon come to an end, according to a senior United Nations official.

The weekly tally of new cases in the three West African countries at the centre of the outbreak has dropped to its lowest point in months, making health workers increasingly confident the deadly outbreak, which had claimed 8414 lives by last Wednesday, was petering out.

In its latest situation report on the infection, the World Health Organisation reported that in Liberia there were just eight new cases reported in the week ended 11 January, compared with a weekly peak of 300 in August and September. In the same period, Guinea reported 42 new cases (the lowest number since mid-August).

Sierra Leone, where the Australian-funded and operated treatment centre is located, remains the hardest country, reporting 184 cases between 4 and 11 January. But even here, the weekly number of new infections has plunged to levels not seen since mid-2014.

United Naitons Ebola co-ordinator David Nabarro told Agence France Press that he was "absolutely delighted to see that the incidence of confirmed Ebola cases week-on-week is reducing".

"This suggests that we have passed the tipping point and we are beginning to be on the downward slope of the outbreak," Mr Navarro said.

The outbreak has taken a particularly heavy toll on health workers. Eight hundred and forty-three are reported to have been infected since it began, 493 of whom have died.

Overall, the mortality rate is at 71 per cent, but among patients being treated in hospital it is lower, between 57 and 60 per cent.

While the outbreak appears to be weakening, health workers are continuing to be trained and deployed to the Australian-run treatment centre at Hastings Airfield, just outside the Sierra Leone capital, Freetown.

The first patient to be successfully treated at the clinic, 11-year-old Aminata Bangura, was discharged on 6 January.

More than 30 Australian health workers have already travelled to Sierra Leone to work at the centre, which is being operated by Aspen Medical on contract from the Federal Government, and a fourth group is currently undergoing training for deployment late this month or early February.

Health workers are continuing to be deployment as research rush to develop and test new treatments for the virus.

Several organisations and companies including the US National Institutes of Health, the Bill and Melinda Gates Foundation and GlaxoSmithKline have already begun trialling vaccines and the use of antibody-rich blood from Ebola survivors.

There are predictions that the epidemic in Liberia could be over by the middle of the year, while the Sierra Leone aims to make the country Ebola-free by the end of May.

Reflecting growing confidence that the worst is over, Mr Nabarro said the United Nations, which is leading the international response to the Ebola crisis, has shifted to a "phase two" approach that focuses more on contact tracing rather than emergency treatment.

Australian Ebola nurse evacuated

A nurse working at an Australian-operated Ebola treatment centre in Sierra Leone has been airlifted to the United Kingdom amid fears she may have been exposed to the deadly virus.

Foreign Minister Julie Bishop said the nurse, whose identity has not been disclosed, had been evacuated as a precautionary measure after some of her skin was exposed while treating some patients infected with Ebola.

"The individual, who for privacy reasons has not been named, has not been diagnosed with Ebola, and her transferral to the UK for a 21-day observation period is a precautionary step," Ms Bishop said.

The incident is one of the first significant health scares at the Aspen Medical-run clinic at Hastings Airfield, on the outskirts of the Sierra Leone capital, Freetown.

Public Health England (PHE) told Fairfax Media the nurse was one of two people flown from Sierra Leone to the UK for assessment and monitoring on Friday.

The other person, an non-government organisation employee, had potential exposure to the virus in a separate incident after coming into contact with a co-worker who eventually died and was then diagnosed post-mortem with Ebola.

"[The two evacuees] have not been diagnosed with Ebola, do not currently have any symptoms, and their risk of developing the infection remains low," PHE said in a statement.

The nurse's evacuation is significant because last year the Government for months resisted repeated calls, including from AMA President Associate Professor Brian Owler, to join international efforts to help stem the world's worst-ever Ebola outbreak because it claimed there were no satisfactory arrangements to evacuate any Australian personnel who became infected.

It eventually bowed to pressure and engaged Aspen to run the centre after receiving assurances from the British Government that any infected Australian staff could be transferred to in-country treatment centres for foreign medical workers or be evacuated to the UK.

As of last Saturday, 18 patients had been treated and discharged from the Australian-operated centre, whose capacity was on track to reach 50 beds by early next month, according to the Foreign Minister.

ADRIAN ROLLINS

INFORMATION FOR MEMBERS

AMA Indigenous Peoples Medical Scholarship 2015

Applications are invited for the AMA Indigenous Peoples Medical Scholarship 2015.

The Scholarship is open to Aboriginal and Torres Strait Islander people who are currently studying medicine, with the4 successful applicant receiving \$10,000 year for the duration of their course.

AMA President Associate Professor Brian Owler said training more Indigenous doctors and health professionals was an important part of closing the health and life expectancy gap between Aboriginal and Torres Strait Islander people and the rest of the community.

"The AMA Scholarship aims to help

increase the number of Aboriginal and Torres Strait Islander people in the medical workforce," A/Professor Owler said. "Previous AMA Scholarship recipients have graduated to work in Indigenous and mainstream health services, and some have spent time providing care in their own communities."

Since 1994, the Scholarship has assisted more than 20 Indigenous men and women to become doctors – many of whom would not otherwise not have had the money needed to study medicine.

"Increasing the number of Indigenous doctors and health workers improves access to culturally appropriate health care and services, and ensures medical services respond properly to the unique needs of Aboriginal peoples and Torres Strait Islanders," A/Professor Owler said.

Applications for the Scholarship must be received by 30 January, 2015.

To be eligible, applicants must be currently enrolled at an Australian medical school, be in at least their first year of medicine, and be of Australian Aboriginal and/or Torres Strait Islander background.

For more information, including how to apply, visit: https://ama.com.au/ama-indigenous-peoples-medical-scholarship-2015