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AMA SUPPORTS GOVERNMENT'S SENSIBLE CHANGES FOR ACCESS TO MEDICARE TELEHEALTH SERVICES

AMA President, Dr Tony Bartone, said today that the AMA strongly supports the Government's changes to ensure appropriate access to Medicare-funded telehealth services.

Dr Bartone said the AMA advocated for the changes, which better target the temporary Medicare COVID-19 telehealth items for patients who need a telehealth consultation with a GP.

"The COVID-19 telehealth items have generally been an outstanding success, supporting high quality patient care from both GPs and non-GP specialists," Dr Bartone said.

"The new items were developed and implemented very rapidly. Over the past few months, we have been able to learn a great deal about how they have been working in general practice.

"The great majority of GP telehealth consultations to date have been in circumstances where a patient has an existing relationship with a GP, but we have seen the increasing and disturbing emergence of 'pop-up' telehealth models and models that are linked to pharmacies.

"The pharmacy arrangements fragment care and blur the important distinction between the prescribing and dispensing of medicines.

"Both the pop-up and pharmacy telehealth models are also unable to facilitate access to a faceto-face consultation when a patient needs one.

"Today's changes will put an end to these inappropriate models of care. These are sensible changes that support high-quality care.

"The Government will now restrict COVID-19 Medicare GP telehealth items to circumstances where a patient has an existing relationship with a GP or general practice, other than for children aged under 12 months or patients who are homeless.

[The Government advises that: 'In areas under stage three restrictions in Victoria, this requirement will not apply to those living under new restrictions in Victoria'.]

"A relationship is defined as having seen the practitioner face to face in the last 12 months, or having seen a doctor at the same practice during the same period.

"This recognises that social isolation restrictions are now being lifted in many parts of Australia, and it is important for patients to continue seeing their regular doctor, or to establish a relationship with a doctor in order to access telehealth services.

"This preserves the foundation of quality primary care - the very real benefit of patients having a regular ongoing relationship with their GP, one benefit of which is now the ability to access bulk billed telehealth services.

"This will ensure that patients will receive continuous care from a GP who is aware of their medical history.

"A patient's usual GP or general practice will have access to a patient's clinical records and know their circumstances. This is the patient-centred approach that we know works so well in Australia."

Dr Bartone said that the COVID-19 Medicare telehealth items are due to end at the end of September, but the AMA wants to see telehealth for GPs and non-GP specialists continue beyond this date.

"Around 20 per cent of all Medicare-funded consultations with a doctor are now being provided by telehealth, either over the phone or via video, since temporary the Medicare telehealth items were introduced in March.

"Patients are clearly making the case for these to become a permanent feature of our health system for both GPs and non-GP specialists.

"Telehealth is key to continuity of care and quality of care.

"The AMA will continue to have constructive discussions with the Government over further refinements that can support the broad retention of telehealth beyond September."

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