

Australian Medical Association Limited

ABN 37 008 426 793

42 Macquarie Street, Barton ACT 2600: PO Box 6090, Kingston ACT 2604

Telephone: (02) 6270 5400 Facsimile (02) 6270 5499

Website : <http://www.ama.com.au/>



Transcript: AMA Vice President, Dr Tony Bartone, with Laura Jayes, News Day, Sky News Live, Thursday 12 January 2017

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The AMA has called on the Government to set a target for funding GP services to deliver extra funding for research. There has been evidence, according to the AMA today, that shows countries with strong general practice have lower rates of ill-health.

Joining me now is the vice-president of the AMA, Tony Bartone. He joins me from Melbourne this afternoon.

Tony, good to see you. What are you actually calling on the Government to do? Because we know that if the Government could afford to spend as much money on health it would do, but within budget constraints what are you calling on?

TONY BARTONE:

What we're asking the Government to do in the current setting is to basically set a target for general practice funding. We're asking it to set a target of 10 per cent of its health expenditure budget. General practice expenditure in the Government budget has roughly been running at around eight per cent over the current time.

Of course, the ongoing Medicare freeze is putting downward pressure on that, and we know that Government expenditure has been reducing in health over the last few years.

But if we look at overseas experience, we look at overseas countries of comparable nature in the OECD, we feel that a strong general practice funding envelope will send the right message in terms of prevention and returning dividends to the health budget, which will actually save money in the future.

LAURA JAYES:

What comparable countries are you talking about? What are those comparable countries? Is it Canada, the United States, or something else?

TONY BARTONE:

Yeah, Canada, the UK, some of the European countries as well. When it comes to OECD funding in terms of health expenditure, our total health expenditure, we come in at 9.8 per cent, and that's well under the average for 18 of these other OECD countries.

What we're saying is general practice, eight per cent of the total health expenditure by the Government is a really small amount to pay for the dividends and for the rewards that the Government gets from a really strong, functioning general practice community.

LAURA JAYES:

Dr Bartone, how are you suggesting that the Government pays for this though? Because that is going to be its question to the AMA. Are you suggesting there should be a dedicated revenue stream to health funding? Because health, as we know, is one of the biggest pressures on a Federal budget, and indeed State budgets too.

TONY BARTONE:

And look, just before we move onto that, it's been said that health spending, or the health budget is out of control, and really it's anything but. The level of growth in the health budget over the last few years has been below the long-term average of five per cent, in particular when it comes to general practice or primary health care spending. That amount has virtually been stagnant over a number of years, and we know that general practice is performing an incredibly higher number of duties and consultations. We know that the average consultation now is significantly longer than 10 years ago, coping with nearly twice as many problems.

The burden of complex and chronic disease and the increasing age of the population means that you need to invest more in general practice.

So what we're saying then is over time it's a long-term reorientating of that health budget expenditure, approaching a minimum target in the years that go out from now to ensure that the benefits of a strong functioning general practice sector are felt right through the entire community.

LAURA JAYES:

You have a long list of requests into the Government at the moment. I know the AMA has been pushing for the unfreezing of the Medicare rebate for GPs. Has there been any progress with that over the last couple of months?

TONY BARTONE:

We're calling for the unfreezing of the Medicare rebate, not just for GPs, but for all doctors. When we look at ... there's been virtually a freeze in place since 2014, and no sign of it letting up until 2020. That's a significantly long period of time to freeze that Medicare rebate, which potentially puts at risk the delivery of quality health care services to those who can least afford it. What we also know ...

LAURA JAYES: [Interrupts] But is there any evidence that it has put that at risk? Because from the last figures I saw there was no change in the rate to bulk billing, some areas I think there might've been a slight decrease.

TONY BARTONE: And that's an interesting point you make Laura, but the thing is that when you continue to tighten the purse, continue to tighten the top-line income into a practice in the face of increasing costs year on year, and the increasing costs that come with technology, and the increased quality of care, you know that you're going to reach a point beyond which you can't tighten any further and something's got to give.

And that's what we're saying about the Medicare freeze. It needs to be unwound immediately to ensure that those who can least afford it aren't put at risk. We know that out-of-pocket healthcare expenses to the average Australian are increasing, and increasing at a rate faster than most countries in the world – almost second highest, I believe, in the world at the current time – and that is putting significant pressure on everybody.

LAURA JAYES: How difficult is it when you have a stood-aside Health Minister for the portfolio – Arthur Sinodinos is the acting Health Minister. Does this give you any confidence, or is this creating more uncertainty unnecessarily?

TONY BARTONE: The health portfolio is an extremely important portfolio and it's an extremely important time in the lead-up and the preparations for the Budget this year. What we would like to see happen is that the investigation that's currently underway happens as expeditiously, as transparently, and as appropriately, as quickly as possible to allow the portfolio to have a full-time Minister back in place at such an important and critically important time for us in the Australian community.

LAURA JAYES: Yeah, so Dr Bartone, to be clear, how would it happen normally with the AMA?

Would you start negotiating or at least talking with the Minister in charge of health a couple of months out from the Budget, making representations to her, and then, you know, if there is a change do you have to start all over again? Is that a fear?

TONY BARTONE: Well what would normally happen is that we will put out in the public space our budget policy document in the lead-up to the budget. That will happen very soon irrespective of what is happening in the Ministry.

But of course, importantly, it's back to work, roll up the sleeves in time with Parliament returning this year, and of course we'd be talking to the Minister and that needs to happen as expeditiously as possible.

LAURA JAYES: Do you want to see Sussan Ley stay in place?

TONY BARTONE: Look, that is a matter for obviously the Prime Minister to decide who is the Minister for that portfolio. It's an important portfolio, and I just ask the Prime Minister to essentially make that decision and finish that investigation as quickly as possible.

LAURA JAYES: Dr Tony Bartone, the vice-president of the AMA, thank you for your time.

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CONTACT: John Flannery 02 6270 5477 / 0419 494 761
Maria Hawthorne 02 6270 5478 / 0427 209 753

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