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PATIENTS WITH CHRONIC WOUNDS NEED BETTER SUPPORT

The AMA today called for better Medicare support for the hundreds of thousands of Australians suffering from hard-to-heal wounds, and for the GPs and health teams treating them.

The AMA has made its initial submission to the Medicare Benefits Schedule (MBS) Review Wound Management Working Group, which is reviewing MBS items around wound care.

The AMA has recommended Medicare subsidies be provided for the cost of providing bandages and dressings to patients when they visit their GP.

AMA President, Dr Tony Bartone, said it is estimated that more than 400,000 Australians are suffering from a chronic wound, including venous leg and diabetic foot ulcers, which can take months or even years to resolve.

“This can involve multiple visits to GPs and practices to have dressings changed, and to discuss nutrition, exercise, and other ways the patient can look after their wound themselves to help the healing process between appointments,” Dr Bartone said.

“Many of these patients are older Australians. Many are on limited or reduced incomes, due to their stage of life or their reduced capacity to work due to their condition.

“Wherever possible, their GP will bulk bill patients for their care. But GPs and practices are increasingly unable to absorb the cost of providing the bandages and dressings that their patients need each visit – which can cost between \$4 and \$50 per patient.

“Under Medicare restrictions, GPs cannot bulk bill a patient for a consultation and charge the patient just the cost of the bandage.

“This means that they have to decide between bulk billing the patient and absorbing the cost of the bandage themselves, or charging the patient for both the consultation and the dressing.

“General practices, after years of frozen and inadequate rebates for the cost of care, are just not in a position to subsidise this cost.

“In many cases, patients buy their bandages or dressings at market rates from a pharmacy, just so the GP treating the wound can bulk bill them for the consultation without falling foul of legislative restrictions.

“Chronic wounds are debilitating for patients, causing a myriad of complications including constant pain, social isolation, and depression or anxiety, and the cost of bandages and dressings is prohibitive for many people.

“As such, there is an imperative for the Government to support best practice care.”

The AMA has suggested two possible solutions:

- Provide general practices with a stock of Government-funded dressings; or
- Develop a wound consumables schedule that GPs could bill against to cover the costs of dressings and bandages provided to patients.

Initially, these solutions should be targeted at patients with diabetes with foot or leg ulcers, patients with venous or arterial leg ulcers, and patients 65 years or older.

“This would provide patients with access to appropriate dressings and improve the overall quality of care for patients,” Dr Bartone said.

“The AMA urges the Working Group to consider these solutions.

“The AMA supports a GP-led, team-based approach to care, utilising the skills and knowledge of other health professionals including nurses, pharmacists, allied health professionals, and other specialists.

“We would encourage the Working Group to ensure that any recommendations they make support GP stewardship, and do not undermine the collaborative care arrangements already in existence between these teams.”

The AMA will make a further submission when it has completed reviewing the draft recommendations made by other MBS Review groups around acute wound items.

The AMA submission is at <https://ama.com.au/submission/initial-ama-submission-wound-management-working-group>

Background

- In 2014, researchers from the Queensland University of Technology estimated the direct health care costs of chronic wounds at about \$3 billion a year.
- About 48,000 Australians, mostly older people, are estimated to suffer from venous leg ulcers every year.
- Venous leg ulcers take a minimum of 12 weeks to heal.
- In 2003, KPMG estimated that the use of compression bandages for patients with venous leg ulcers could save \$166 million a year.
- Four-layer compression bandages cost about \$50.
- The Medicare rebate for a Level B consultation is \$37.60.
- In April 2017, the AMA wrote to Health Minister Greg Hunt, calling for a review of the prohibition on GPs charging for consumables, such as wound dressings, when they bulk bill a wound management service.

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