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**Transcript:** AMA President Dr Michael Gannon with Luke Grant

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**Subjects:** Federal election, health policy

LUKE GRANT: Now there's certainly no shortage of criticism over the

Government's election campaign strategy or lack thereof, and one particular area copping a blow is

health.

Michael Gannon is the President of the AMA. He was on the job throughout the campaign, calling out Labor's Mediscare campaign for what it was long before

Coalition strategists realised its potential. But he's equally critical of the Coalition's approach to health, as it was hardly-discussed throughout the election campaign. Now Michael is reviving the debate of the

GP co-payment and other health options, including unfreezing the Medicare rebate, and I'm delighted to say that Michael Gannon, President of the AMA, joins

me on the line. G'day Michael.

MICHAEL GANNON: Good afternoon, Luke. How are you?

LUKE GRANT: I'm well. Really good to talk to you. You called out

Labor's Mediscare campaign early. When did it become clear to you that there was something other

than good policy at play here?

MICHAEL GANNON: Well, there was never any intention of the Coalition to

privatise Medicare, and sadly what we saw get thrown in the bin in the heat of the election campaign was a proposal to privatise the payment system. Doesn't

matter who fixes the payment system.

If it can be done in-house, that will be welcomed, but there are many elements of it that haven't changed since the mid-1980s, and you can see how much the

rest of the world's changed since then.

Now we all do everything on smartphones and tablets these days, and we've got a system that's fairly clunky and needs to be fixed, and that was never an attempt to privatise Medicare, as most of your listeners would

understand it.

LUKE GRANT:

MICHAEL GANNON:

LUKE GRANT:

Well, it's almost an attempt to improve it, because if we can spend less on clunky administration and more on treatment, that's obviously a great outcome. But is there ... it must frustrate you that we've got debate to such a level in this country that someone can put together a 30 second dishonest TV commercial and the other mob back off and aren't prepared to back or argue policy?

Look, I think you make some good points there. It was disappointing that the Coalition ran dead on health to a large extent during the campaign. They obviously regarded it as an area that was Labor's strength, and they were right, too. There are many elements of Labor's policy which they took to the election which were stronger. They promised to unravel the freeze on GP rebates.

They, both parties, promised significant increases in public hospital funding, which I'm sure every State Government will be welcoming. Another important platform where Labor was in front was to undo the copayments on pathology and radiology tests.

But my comments in the last 24 hours are not seeking a re-energisation of the co-payment debate. But what they are about is being able to have conversations about why those two proposals from two years ago were not good policy, being able to have a conversation about how we fund Medicare, 15, 20 years in advance. So hopefully we've got the payment system fixed by then, but to really future proof it, but at the same time protect those in the community that are really the most vulnerable and do need to be able to go and visit their doctor without there being the impediment of significant price signals in their way.

See, look, the question is - and I have my own answer, I'd be very keen to know yours. What is - what should the average Australian expect from their health system? Now, my view would be if you haven't got - if you're relying on government support or the like, you're a low wage-earner, then we chip in as best we can for the basic stuff. If you earn a quid, then you're expected to contribute. It might be five bucks or whatever, and it works in such a way that if you need urgent treatment, you get it urgently. If you don't, then you get it eventually. Now have I missed something there?

MICHAEL GANNON:

No, look, I think you're pretty close to the mark. When we talk about universal healthcare, what we mean is that everyone gets treatment, and we must have that. We must have that safety net so that people of limited means are looked after, and people even of means, people who have money in the bank, when they face serious health problems, that they don't go bankrupt having them dealt with.

That's the beauty of our system when you compare it to the American system, where you've got some people that might face bills of tens of thousands of dollars for an episode of care. So, look, we do have a health system that's the envy of many other parts of the world. We're better than the American system where tens of millions of people literally can't access health care. And we're better than systems in many countries in Europe which are basically bankrupt because they've promised for too long that you can have everything for free.

But we're not far off the balance in Australia, it just needs some tinkering around the edges. And I'm really keen to, in this next Parliament, with a knife-edge result in the Lower House and a very interesting Senate where it will be hard to get significant reforms through, I'm just hopeful we can have these conversations that make sure that Medicare is there to protect people in 20 years' time, and have more than that two- or three-year view of it.

Yeah, well, you've got a Prime Minister who has conceded that his Parties don't always figure favourably when voters think about health. So you might find a Prime Minister who is prepared to sit down and talk to you, Michael, let's hope so.

Did you, like many others, think that the Health Minister, Sussan Ley, and her counterpart or opposite number, whose name sadly now - Catherine King, nice save by me, they were kind of MIA during the campaign weren't they?

Oh look I think that, I mean, what I observed as someone who's interested in politics was that our campaigns have become very Presidential. I think that not only did you not see much of Sussan Ley or Catherine King, we didn't see a lot of senior ministers and shadow ministers on either side.

LUKE GRANT:

MICHAEL GANNON:

It was very much the Bill and Malcolm show with occasional guest appearances by Richard Di Natale, Barnaby Joyce, and Derryn Hinch. I think that that's the reality of the way media covers politics now, it does become very Presidential. I would have loved to have seen a greater depth of analysis in the debate on health and in other areas. But I think that says more about our media and our politics than it does necessarily about either Catherine or Sussan, two very capable women who have the interest of patients across Australia at their heart.

Well, and the other thing there is they had I think it was a people's forum on pay TV, and out of 23 million Australians I think there were 50,000 people that could care to watch it. So maybe, I don't know if it was the combatants or the length of the campaign or what it was, we didn't really engage. And that's a dangerous thing too, isn't it, because it does open up voters to those scare campaigns which can change the course of an election.

Just answer me this final question, if you wouldn't mind. We're told we've got record rates when it comes to bulk billing. So you hear things like that, and you understand that people generally get well looked after, but you hear the constant knocking of our health system - is it fair? I mean, do you reckon we all appreciate just how good we've got it?

Luke, I've more than 10 years out of the British health system and before that the Irish health system, but I can tell you that we're miles in front, especially of the British health system. One of the things which works really well, it's not perfect, but we've got a private system where people then spend more of their post-tax dollars in the health system. What that does is increases the total value of the health system.

It is very easy to point to failures of public hospitals, they're not perfect; but what you'll hear most people say is when they've got an individual dealing with the health system, whether it's an outpatient appointment or a case of trauma or elective surgery, you always hear them talk in very positive terms about the care they received from the nurses, the doctors, the other staff. I think we do pretty well, and I think that both sides of politics are not far off the health system that's the envy of the rest of the world.

LUKE GRANT:

MICHAEL GANNON:

LUKE GRANT: Good to talk, Michael, hope we can talk again. Thanks

so much.

MICHAEL GANNON: Pleasure, Luke, no trouble at all.

LUKE GRANT: All the best. Michael Gannon, President of the AMA.

Good man, isn't he? I like the way he talks. He might just be the sort of person that will get something done

there. We'll wait to see.

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