# Improving healthcare access and affordability

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### **Overview: Primary Care in Australia**

Figure 5.2. Population satisfied with the availability of quality healthcare in the area where they live, 2012 and 2022

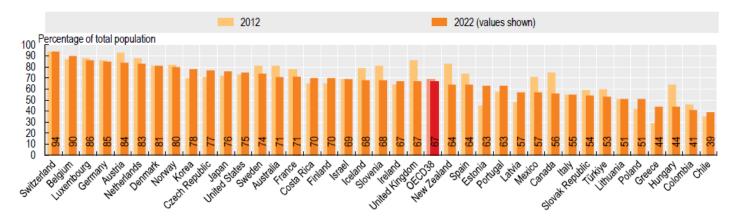
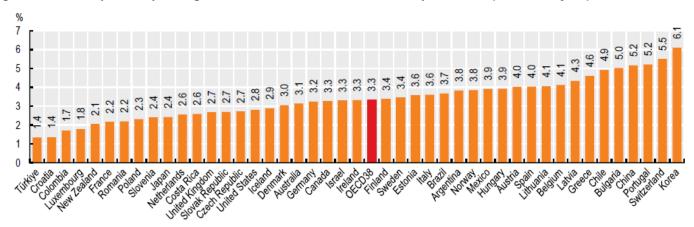


Figure 5.8. Out-of-pocket spending as share of final household consumption, 2021 (or nearest year)



Source: OECD Health Statistics 2023, OECD National Accounts Database

- Australians are satisfied with the availability of quality health care at 71% (higher than the OECD average of 67%).
- Australia ranks lower at 3.1% than the OECD average of 3.3% in the out-of-pocket spending as share of final household consumption.
- Australia has one of the highest numbers of practicing nurses (12.8 per 1000) compared to the OECD average of 9.2.
- Australia has the highest number of nursing graduates in 2021 with 115.7 per 100,000. The rate of nursing graduates has been trending up from 2001 to 2021.

#### Affordability of primary care in Australia



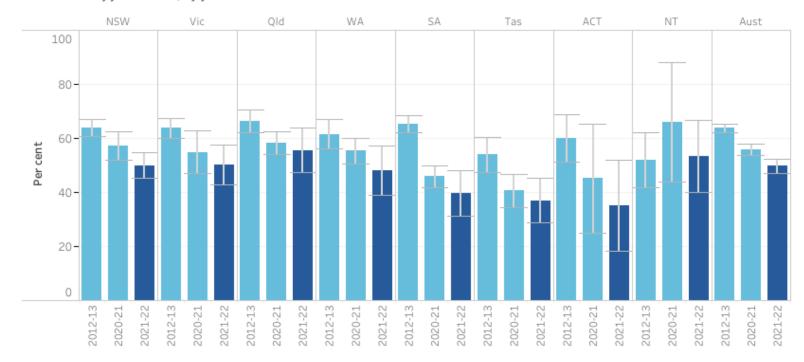


- Measure 1: In 2021-22, 3.5% of respondents delayed or did not see a GP in the last 12 months due to cost across Australia.
- Measure 2: In 2021-22, 5.6% of respondents delayed or did not fill a prescription the last 12 months due to cost across Australia.
- This was an increase compared to the previous periods, but lower than in the last decade (5.4% and 7.9% respectively in 2012-13).

### Availability of primary care in Australia

Waiting time for GPs for an urgent appointment, within 4 hours, by jurisdiction, by year.

Figure 10.5b Measure 2: Waiting time for GPs for an urgent appointment, Within four hours by jurisdiction, by year



Nationally in 2021-22, for people who saw a GP for urgent care:

- 49.7 per cent waited less than
  4 hours, down from 55.8 per cent in 2020-21.
- 10.9 per cent waited from 4 to less than 24 hours, similar to 2020-21.

Source: table 10A.42

GP waiting times for urgent medical care is defined as the proportion of people who, in the previous 12 months, saw a GP for urgent medical care within specified times from making the appointment. Specified waiting times are less than 4 hours, and 4 to less than 24 hours.

## Strengthening Medicare through the 2023-24 Budget

- Historic \$6.1 billion investment to build a stronger Medicare: increase affordability for patients, give more certainty and confidence to doctors, and take pressure off hospitals.
- Address declining bulk billing rates and doctor availability.
- Rebuild primary care and encourage more multidisciplinary care and wrap-around care.
- Build a bigger health and aged care **workforce** that is skilled, diverse, motivated, well-distributed and sustainable, and has all clinicians working to the full extent of their skills and training.
- Monitoring and evaluation framework to monitor progress of the staged implementation of the Strengthening Medicare reforms.

\$79.4 million over 4 years from 2023–24 to support Primary Health Networks to **commission allied health services to improve access to multidisciplinary care** for people with chronic conditions in underserviced communities.

\$27 million over 4 years from 2023–24 to trial integrated primary care and support services and joint commissioning across primary health, First Nations health services, disability, aged care and veterans' care services in up to 10 locations considered to be 'thin markets'

Increase access to primary care, with a vision:

All Australians are supported to be healthy and well, through access to equitable, affordable, person-centred primary care services, regardless of where they live and when they need care, with financing that supports sustainable primary care, and a system that is simple and easy to navigate for people and their healthcare providers.

# **Strengthening Primary Care**

- Around 7 million Australians in rural & remote areas: barriers to primary care access due to challenges of geographic spread, low population density, limited infrastructure & higher costs of healthcare delivery.
  - Will benefit from the \$3.5 billion investment to triple Medicare bulk billing incentives
- GP consultations of 60 minutes or more (Level E) to support improved access and service affordability for patients with chronic conditions and complex needs.
- \$824.4 million to fund digital health initiatives to empower health professionals with data & tools to provide improved and coordinated care; modernising the My Health Record System; introduce MyMedicare, a voluntary patient registration model.

\$445.1 million: multidisciplinary primary care financially sustainable with the Workforce Incentive Program – Practice Stream.

\$50.2 million: over 4 years to establish **Primary Care and Midwifery Scholarships** program.

\$31.6 million: over 2 years to improve training arrangements for international medical students working rural and remote locations.

\$10.7 million to increase the **nursing workforce** providing 6,000 additional clinical placements, attracting 500 previously enrolled and registered **nurses back to the workforce**.

Supporting the medical and health workforce

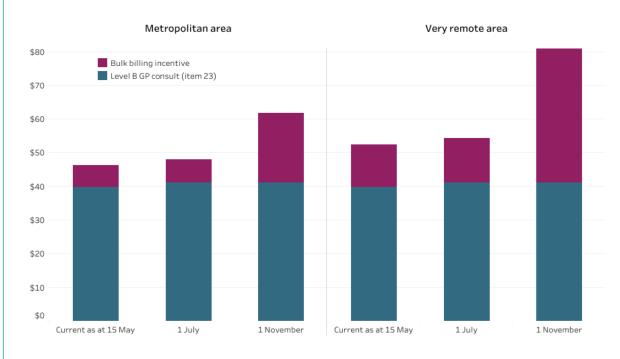
## Improving affordability with the Bulk Billing incentive

\$3.5 billion to triple the incentive paid to GPs to bulk bill families with children under 16 years, pensioners and Commonwealth Concession Card holders. Nationally, the **GP bulk billing rate has risen by 2.1% points from Oct to Dec 2023.** 

	GP Bulk	% nt change since		
	Oct 2023 (before incentive increase)	Nov 2023	Dec 2023	% pt change since Oct 2023 (in Dec 2023)
NSW	80.6%	81.2%	82.3%	Up 1.7
VIC	76.8%	77.4%	78.3%	Up 1.5
QLD	73.6%	74.5%	75.8%	Up 2.2
SA	70.7%	73.2%	74.5%	Up 3.8
WA	68.4%	69.6%	70.8%	Up 2.4
TAS	66.3%	68.9%	72.0%	Up 5.7
NT	71.5%	73.0%	73.6%	Up 2.1
ACT	51.5%	51.4%	53.4%	Up 1.9
Australia	75.6%	76.5%	77.7%	Up 2.1

- ✓ From 71.3% of all bulk billed GP visits bulk billed to **75.7%** across the Central Coast electorates of Dobell & Robertson by Dec 2023.
- ✓ From 72.3% of all bulk billed GP visits to 77% across the 10 electorates that make up rural and regional Victoria by Dec 2023.
- ✓ An estimated 60,000 additional trips to the GP were bulk billed in regional Victoria since the tripled incentive began on 1 November.

#### Indicative Medicare benefits for a standard GP consultation eligible for the incentive



✓ In metropolitan areas, benefits rise from around \$46 to \$62; in very remote areas, the increase will be from around \$52 to \$81.

Source: Medicare Statistics (MBS), Department of Health and Aged Care

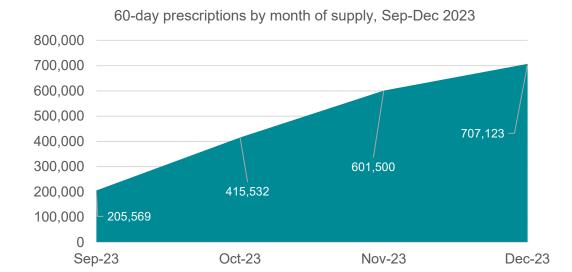
#### Improving affordability: medicines

#### **60 Day Dispensing:**

- Consumers with chronic, stable medical conditions can be prescribed and dispensed a 2-month supply of some medicines rather than a 1-month supply.
- 18% more 60-day prescriptions (over 707,100) were dispensed in December 2023 than in November 2023.

#### **Safety Net Threshold:**

- In July 2022, the PBS Safety Net threshold was lowered by the equivalent of 12 fully priced scripts for concession card holders. In 2023, the concessional Safety Net threshold was \$262.80.
- The number of patients who had at least one concessional PBS Safety Net prescription dispensed in 2023 significantly increased since 2021 and sees an upward trend YoY.



Patients who have had at least one concessional PBS Safety Net prescription dispensed in 2021, 2022 or 2023, by State

State	2021*	2022	2023
ACT	17,935	23,851	25,357
NSW	546,939	707,637	729,306
NT	4,200	5,827	6,136
QLD	343,023	447,068	466,357
SA	140,577	185,285	194,661
TAS	51,746	67,550	69,824
VIC	403,848	530,123	550,245
WA	152,926	203,898	212,798
Grand Total	1,661,194	2,171,239	2,254,684

Source: PBS online claims data extracted 12 January 2024

#### Conclusion

- The Australian Government is investing in Strengthening Medicare to meet the current and future needs of Australians and to modernise primary care
- General practice, multi-disciplinary care, medicines, bulk billing, primary health networks, and targeted initiatives continue to be strong focus area
- As we celebrate 40 years of Medicare, we will continue to focus on improving access and affordability to primary care, particularly for vulnerable groups and people in rural and remote areas

