

The Hon Greg Hunt MP
Member for Flinders
Minister for Health and Sport

4th May 2017

Dear Minister Hunt,

We are writing on behalf of the allied health community's 175,000 allied health practitioners, to call upon your government to make an immediate commitment to lifting the freeze on allied health Medicare Benefits Schedule items, including optometric and diagnostic imaging items, as part of the 2017-18 Federal Budget. Medicare funding is a vital means of ensuring access for people in need of care. Re-introducing indexation to allied health items is a key factor in supporting accessible care and a sustainable allied health workforce.

Allied Health Professions Australia (AHPA) and its members understand the challenge faced by government in balancing the health budget and we are committed to positive, practical engagement in support of a sustainable health sector. However, we note the difficult task faced by a majority of allied health practitioners who practice in small and solo practices and are finding it ever more difficult to run sustainable businesses. Those practitioners provide essential care to people experiencing chronic illness, disability and a myriad of other health issues. Research shows that many of the people most in need of care lack the financial resources to pay for services. This often means people don't access the services they need or that allied health practitioners must undercharge or find other ways to reduce gap payments. By lifting the freeze on allied health items, your government has the opportunity to take an important step in improving health outcomes and strengthening our health system.

AHPA and its members also call upon your government to commit to a timeline for the formal review of allied health Medicare items. The current Medicare funding regime is inequitable and resulting in reduced access to allied health services, poorer health outcomes and increased health system costs. Some of the key issues are:

1. Current MBS Chronic Disease Management rebates don't reflect the cost of many allied health services resulting in large gap payments, which impact on consumers.
2. The number of funded consultations (5) is well below the amount recommended for appropriate treatment of many chronic and complex conditions.
3. Allied health participation in case conferences is not funded, resulting in a system that funds GPs while relying on allied health practitioners to contribute their time and expertise for free.
4. Current referral pathways don't allow allied health practitioners to refer directly to specialists or to diagnostic services even where this falls within their scope of practice. This overloads GPs with perfunctory visits and results in delays in services and increased costs for patients and the health system.
5. A range of allied health professions, which deliver demonstrated, evidence-based outcomes for patients are not currently eligible for MBS funding.

Your government could take important steps to improve equity within the health sector and to improve access to vital services for Australian health consumers. We firmly believe that only a strong allied health sector working effectively as an integrated part of the broader health system can ensure the right health outcomes for consumers and the most effective spending of health dollars.

Sincerely,



Lyn Littlefield
Chair, AHPA



Lin Oke
Executive Officer, AHPA