

# It's time to care about ... **the health of Australians in rural and remote communities**

**The Royal Australian College of General Practitioners (RACGP) is calling on the Federal Government to help GPs and the patients they care for**



## Did you know?

Certain chronic conditions are more common in rural and remote communities, and people living in these areas are more likely to die from their chronic or mental health condition.

People in rural and remote communities are:

up to **3.5 times** as likely to die from diabetes

up to **1.5 times** as likely to die from coronary heart disease

**twice** as likely to die from suicide

## The RACGP is calling on the Federal Government to:

**1 Encourage regular, continuous general practice care to support the health of our most vulnerable Australians by establishing new service incentive payments to provide services that will improve care for:**

- older people in the community
- people with mental health conditions
- people living with disability.

Rural Australia has a higher proportion of people with more complex health needs, including more people over the age of 65, higher rates of mental health conditions and higher rates of disability.

**2 Increase the value of Medicare rebates by 10% for GP consultations longer than 20 minutes**

- Because they generally have more complex health needs and higher rates of chronic disease, Australians living outside major cities are more likely to need longer GP consultations.
- Longer consultations are undervalued in the current system. The Medicare rebate per minute decreases the longer a person spends with their GP, meaning Australians in rural and remote areas are likely to pay relatively more to see their GP.

- People living in remote and very remote areas already pay higher out-of-pocket costs on top of indirect costs such as longer travel times to reach their GP and income lost due to increased time away from work.
- This would also help recognise the additional services offered by rural GPs, who deliver services outside the normal scope of general practice to meet the needs of their community. They aren't currently recognised or appropriately remunerated for doing so.

**3 Reinstigate Medicare rebates for long phone consultations**

- People living in rural communities suffer from digital exclusion compared to people living in major cities in terms of access, affordability and ability. This makes it very difficult for people living in these areas to use telehealth video consultations.
- Keeping Medicare rebates for phone consultations of any length is particularly important for rural and remote communities. Telehealth improves access to GPs, and people in remote areas are significantly more likely to report barriers to accessing GPs compared with other Australians.

## 4 Introduce a follow-up appointment with a GP within seven days of an emergency department visit or hospital admission

- There is no formal process for patients to see their GP following an unplanned hospital admission or emergency department visit.
- Patients who have a post-hospital visit with their GP within seven days of an unplanned hospitalisation have a significantly lower risk of readmission within 30 days.
- Potentially preventable hospitalisation rates increase by remoteness – the rate in very remote areas is 2.5 times higher than in major cities.

## 5 Strengthen rural healthcare

The RACGP is calling for investment in rural healthcare by:

- Practical measures are needed to support rural GP's.
- Increasing Workforce Incentive Programs with additional payments for those doctors who use additional advanced skills in the rural areas scaled to rurality will reward rural GP's.
- Providing access to the relevant speciality MBS items when a GP holds advanced skills in a rural area compensates GPs for gaining additional expertise.