

# Overview of the Federal Budget 2023-24 (Health)

10 May 2023

## Overview

The 2023-24 Federal Budget (the budget) was released on Tuesday 9 May. The Budget outlines the government's priorities and funding allocations for the next three years.

The primary focus of this budget was on cost-of-living relief, including broad measures across health, social welfare, housing and the energy sector. Within health, there was significant emphasis on improving access to primary healthcare and reducing out-of-pocket costs for patients. On 9 May, the RACGP [acknowledged](#) this federal Budget as a game-changer for GPs, practice teams and the patients they care for across Australia.

Specific measures relevant to general practice include:

- \$3.5 billion in funding over five years from 2023-24 for a tripling of the bulk billing incentive.
- \$445.1 million over five years from 2023-24 to increase to the Workforce Incentive Payment – Practice Stream.
- \$98.9 million over four years from 2023-24 for connecting frequent hospital users to general practice to receive multidisciplinary care in the community.
- \$99.1 million over five years from 2023-24 for a level E consultation item.

These measures constitute significant additional investment in general practice and are reflective of the ongoing advocacy by the RACGP on behalf of our members and patients across Australia. They will help to stem the bleeding, relieve pressure on our entire healthcare system, including our hospitals, and ease pressures on people struggling to afford the care they need.

The general practice funding introduced in this budget will effectively support GPs to flexibly provide care to their patients in the way that works best for them, including bulk billing patients who need it.

The budget commitments for general practice clearly show that Government has listened and responded to the RACGP's calls to support our GPs, practice teams and the patients so that everyone can access a strong primary care system. The RACGP will continue to work collaboratively with the Government on longer-term reforms to strengthen Medicare and rebuild general practice care for patients.

## Where to next?

The RACGP is looking forward to working with government on the implementation of the various reforms and funding measures outlined in the budget yesterday. We will also continue to gather and represent member views throughout this process, ensuring our work is focussed on ensuring optimal outcomes for patients across the health system.

The full Federal Budget documents are available on the Federal Government [Budget webpage](#). If you have any insights or feedback on the budget that you would like to share, please do not hesitate to contact [healthreform@racgp.org.au](mailto:healthreform@racgp.org.au).

## Key expenses relevant to general practice

Federal Budget topic area	Selected measures of note
<b>Medicare and primary care</b>	<p>\$3.5 billion in funding over five years for a tripling of the bulk billing incentive.</p> <p>\$445.1 million over five years to increase to the Workforce Incentive Payment – Practice Stream.</p> <p>\$98.9 million over four years for connecting frequent hospital users to general practice to receive multidisciplinary care in the community.</p> <p>\$99.1 million over five years for a level E consultation item.</p>
<b>Rural health</b>	<p>\$4.5 million over five years from 2022–23 to increase rural generalist trainees by expanding the single employer model trials by a further 10 trial sites from 1 July 2022.</p>
<b>Aboriginal and Torres Strait Islander Health</b>	<p>\$16.7 million over four years from 2023–24 to develop a national campaign to promote increased uptake of First Nations Australians' health assessments, and improve administration and coordination of health assessments and linkages with allied health services and update eligibility for outcome payments under the Practice Incentives Program – Indigenous Health Incentive to include all Medicare Benefits Schedule items for the preparation and review of a Mental Health Treatment Plan.</p> <p>\$7.6 million over two years from 2023–24 to fund capacity building of Aboriginal Community Controlled Organisations to potentially provide aged care services.</p>
<b>Access to medicines</b>	<p>\$2.2 billion over five years from 2022-23 on new and amended listings on the Pharmaceutical Benefits Scheme (PBS).</p> <p>Saving \$1.2 billion over five years from 2022-23 (and \$438.7m ongoing) by allowing 2 months' worth of more than 300 PBS medicines to be dispensed by pharmacies, phased in from 1 September 2023.</p>
<b>Aged care reform</b>	<p>\$112.0 million over four years from 2023–24 to Introduce a new General Practice in Aged Care incentive payment to improve general practitioner attendance and continuity of care in residential aged care homes, and to reduce avoidable hospitalisations.</p>
<b>Disability sector</b>	<p>\$260.2 million over two years from 2023–24 to extend Commonwealth psychosocial supports for people with severe mental illness who are not in the National Disability Insurance Scheme.</p>

## Detailed overview of relevant measures

### Medicare

#### Bulk billing incentive triples

The federal government has sought to address the decline in general practitioners' bulk billing of patients on low incomes and children by tripling bulk billing incentives for consultations for Commonwealth concession card holders and patients aged under 16 years of age. These increased incentives would apply to:

- all face-to-face general practice consultations more than 6 minutes in length.
- all telehealth general practice services which are between 6 and 20 minutes in length (Level B consultations).

– longer telehealth general practice consultations where a patient is registered with their GP through MyMedicare.

The RACGP called for a tripling of bulk billing incentives in our [2023-24 Pre-budget submission](#) and warmly welcomes this measure to improve the affordability of care for Australians. The bulk billing incentive is currently between \$6.60 and \$12.70 for each consultation, depending on the rurality of the consultation. The tripling of these payments will give GPs more flexibility when looking to bulk bill patients that are eligible for the incentive.

Given the above funding measure only applies to consultations over 6 minutes in length, further information is being sought regarding the ongoing status of bulk billing incentives for shorter consultations.

### **Indexation of Medicare Benefits Schedule (MBS)**

On Sunday 7 May, the Finance Minister Katy Gallagher announced changes to indexation to address funding for services not keeping up with rising wage costs. Government have now confirmed in the budget materials an indexation boost to Medicare rebates, reporting that more than \$1.5 billion in funding will be allocated to this increase.

As per [MBS Online](#), the MBS indexation factor for 1 July 2023 is currently 3.6 per cent. This will result in an increase to the rebate for a Level B GP consultation from the current rebate of \$39.75 to \$41.20. This measure is reflective of the strong RACGP advocacy for increased investment in rebates for general practice services.

### **New MBS item for a longer consultation of 60 minutes or more (Level E)**

The Federal Government will be providing \$99.1 million in funding over five years to establish a new general practice MBS item to support longer consultations. The RACGP has previously advocated for this measure and welcomes it as a key step to support improved access to care for patients with complex needs.

This measure will be funded through efficiencies of \$250.8 million achieved by introducing a minimum consultation time for Level B items for GPs. The RACGP previously opposed this change in our [submission](#) to the MBS Review Taskforce General Practice and Primary Care Clinical Committee, noting that enforcing a minimum time will act as a disincentive for efficient practices and patients receiving efficient services will effectively have their patient rebate cut. We will be carefully considering the implications of this change for GPs and patients and will respond in due course.

### **Medicare integrity and compliance**

The Federal Government is providing \$29.8 million over four years from 2023-24 to strengthen the integrity of the Medicare system in response to key recommendations from the Review of Medicare Integrity and Compliance (Philip Review). This includes the establishment of a taskforce within the Department of Health and Aged Care to identify and disrupt instances of fraud and serious non-compliance before they occur. The taskforce will also produce immediate policy and legislative amendments, including to:

- limit the duration of backdated patient-billed claims through practices, to prevent fraudulent claims being submitted through practices.
- permit appropriate data sharing with Services Australia to allow entities and bank accounts associated with known fraud to be blocked from receiving claims payments.
- enable the Department of Health and Aged Care to audit providers by removing the requirement for external consultation with peak bodies to occur before issuing a notice to produce.

The Government may consider additional measures to improve Medicare integrity in response to the Philip Review, pending consideration of broader policy aspects.

The RACGP has always supported ethical and responsible billing practices. However, we have long maintained that the MBS is unnecessarily complex and does not reflect the way GPs deliver person-centred, comprehensive, and holistic healthcare. This complexity is contributing to inadvertent billing errors and technical non-compliance, rather than deliberate non-compliance.

The [final report](#) from the Review of Medicare Integrity and Compliance commissioned by the Minister for Health found no evidence of allegations of Medicare robbing amounting to \$8 billion a year, as had been reported in the media. It concluded that the majority of Medicare leakage stems from non-compliance errors rather than deliberate fraud. This was vindication for honest and hardworking GPs who are overwhelmingly doing the right thing.

The RACGP supports measures to improve the efficiency of compliance processes and ensure interventions are appropriately targeted. We have repeatedly stressed to the Department of Health and Aged Care that increased compliance activities should be balanced with corresponding educational activities. Where reasonable, health professionals must be given an opportunity to adapt their billing practices prior to being subject to compliance action. We will continue to advocate for changes to the way compliance activities are undertaken and look forward to engaging with the new taskforce.

The RACGP will be seeking further detail around the specific measures announced in this year's budget at our next quarterly meeting with the Department's compliance team (June 2023).

### **New and amended MBS listings**

The Federal Government will provide \$118.2 million over five years for new and amended MBS listings. This includes extending MBS heart health assessment items for a further two years until 30 June 2025. The items will also be amended to remove restrictions preventing Aboriginal and Torres Strait Islander people from receiving a heart health assessment within 12 months of an Aboriginal and Torres Strait Islander peoples' health assessment (MBS item 715).

The RACGP highlights that it continues to have concerns around disease-specific MBS items. As specialist generalists, GPs are trained to treat a patient as a whole person, not a specific illness or issue in isolation. We welcome the decision to remove the restriction preventing Aboriginal and Torres Strait Islander patients from accessing multiple health assessments in a 12-month period. This is something the RACGP had called for in the event of a temporary extension of the heart health items.

### **Longer telephone consultations**

The Federal Government is providing \$5.9 million over five years from 2022-23 to enable access to longer telehealth consultations through the MBS for patients and general practices under MyMedicare from 1 November 2023. There will be no bulk billing requirement attached to these items.

The RACGP cautiously welcomes the re-introduction of Medicare patient rebates for telehealth consultations lasting longer than 20 minutes, however, this announcement lacks detail. We will seek further clarity on exactly which patients and consultations are covered.

Telehealth has become a critical part of Australia's healthcare system. It helps facilitate a person's access to their usual GP, meaning patients can more easily receive high-quality, personalised health services when and where it suits them. Given telehealth use in Australia is overwhelmingly phone-based, enabling access to longer telephone consultations will improve access to care for many Australians and expand patient choice.

### **Introduction of MyMedicare**

The Federal government will provide \$19.7 million over four years from 2023-24 (and \$3.2 million per year ongoing) to implement the MyMedicare scheme. This measure was informed by the [Strengthening Medicare Taskforce Report](#), released February 2023, which recommended the introduction of patient registration to support continuity of care. Limited information is currently available regarding the MyMedicare and how this scheme will operate.

The RACGP continues to work with government to ensure that any reforms are fit-for-purpose to the Australian healthcare system, improving the integration of health services and improving the continuity of care for patients. We continue to highlight the importance of fee-for-service funding for patients and note that this funding should remain at the centre of general practice care.

### **Non-vocationally recognised doctors to receive MBS rebates**

Government will provide \$34.6 million over two years from 2023–24 to enable non-vocationally recognised doctors to receive MBS rebates under the Other Medical Practitioner Program. The RACGP recognises the government's support for GPs in training and awaits further detail to better understand how this will impact those on their path to fellowship.

### **MBS Continuous Review program**

The Federal Government is providing \$10.9 million in 2023-24 to support the MBS Continuous Review program and ensure the MBS remains clinically appropriate. The RACGP welcomes this funding. It is important that the MBS is regularly reviewed to ensure it remains contemporary and responsive to the healthcare needs of all Australians.

### **Chronic disease management services**

The Federal Government will achieve efficiencies of \$301.9 million over three years from 2024-25 by streamlining and modernising chronic disease management planning items and improving associated regulations from 1 November 2024. This is consistent with recommendations from the [MBS Review Taskforce report on Primary Care](#). The RACGP will be seeking further detail on this budget measure and the implications for GPs and patients.

## **Broader primary care**

### **Chronic Wound Consumables Scheme for people with diabetes**

The Federal Government will be providing \$47.8 million over five years (and \$12.3 million per year ongoing) from 2022-2023. The scheme will be limited to people aged over 65 years and First Nations people aged over 50 years. The RACGP is supportive of the introduction of a wound consumables scheme to address the costs of chronic wound care in the community. The management of wounds presents a significant burden to healthcare services, consuming a large amount of resources and impacting the sustainability of general practices.

### **Medicare Urgent Care Clinics**

The Federal Government will provide additional funding of \$358.5 million over five years from 2022–23 to deliver Medicare Urgent Care Clinics by the end of 2023, including for 8 new Clinics. This measure builds on the 2022–23 October Budget measure titled Urgent Care Clinics, which allocated \$235 million over four years to establish 50 urgent care clinics across Australia.

The RACGP is supportive of increasing access to GP for acute illnesses to reduce pressure on hospital emergency departments. The RACGP supports this funding going towards upgrading and investing in existing practices to become Urgent Care Clinics rather than the creation of new infrastructure.

\$21.9 million will also be provided over two years from 2023–24 to raise awareness of Medicare Urgent Care Clinics and MyMedicare.

### **Extending the General Practice Incentive Fund**

\$17.5 million will be provided over two years from 2022–23 to extend the General Practice Incentive Fund until 30 June 2024 and to expand its eligibility to all PHNs to improve access to primary care in thin markets. The RACGP is supportive of measures that seek to address the maldistribution of GPs across Australia and seek to retain existing GPs as part of the primary health workforce. Such measures need to be matched with efforts to grow the general practice workforce to create long term sustainability.

### **Preventive health reform**

The Federal Government will provide \$53.4 million over five years from 2022–23 (and \$0.4 million ongoing) for preventive and other health initiatives, including:

- \$26.4 million over four years from 2023–24 to extend support for research and data collection activities that support women and girls' health outcomes.
- \$10.9 million over two years from 2023–24 to continue support for Men's Sheds and existing national men's health research and data collection initiatives, in line with the National Men's Health Strategy 2020–2030.
- \$6.3 million over three years from 2023–24 to continue the Australian Burden of Disease Study and initiatives to monitor and improve the evidence base of health and wellbeing outcomes, in line with the National Preventive Health Strategy 2021–2030.
- \$4.3 million over two years from 2023–24 to continue research that supports prevention and early intervention initiatives for chronic conditions.

The RACGP welcomes spending on research and data collection that support preventive care and improved health outcomes. As general practice is central to the provision of preventive care in the community, it is vital that this research is led by general practitioners.

### **After-hours primary care**

The Federal Government will be providing \$143.9 million over two years from 2023-24 to improve access to primary care after-hours programs. This funding package includes:

- \$77.9 million to extend the Primary Health Networks (PHN) After Hours Program to support general practices to fill access gaps.
- \$25.4 million to establish a Homelessness Support Program to support homeless people's access to primary care services.
- \$15.3 million to establish a PHN Multicultural Access Program to support multicultural communities to access primary care services.
- -\$7.0 million to support Healthdirect's after-hours GP helpline.

The RACGP acknowledges the importance of improving access to general practice after-hours, particularly for communities experiencing additional barriers to access and welcomes these measures.

### **Boosting the primary care team and providing coordinated multidisciplinary team-based care**

The Federal Government will spend \$445.1 million over five years on increases to the Workforce Incentive Payment – Practice Stream to enable GPs to have nurses and allied health professionals working with them in cooperation for better care. The Practice Stream of the WIP is critical to assisting practices with the cost of engaging nurses, allied health professionals and/or Aboriginal and Torres Strait Islander health workers and health practitioners.

The maximum payment under the WIP – Practice Stream is being increased from \$125,000 to \$130,000 per practice, and government have signalled they will be changing the eligibility criteria to make more practices eligible for this payment. The Minister for Health and Aged Care has also committed to yearly indexation of the payment to ensure it aligns with increasing costs year-on-year. The RACGP will work closely with government to ensure any changes support practices to deliver high-quality multidisciplinary care to all patients.

\$98.9 million over four years from 2023-24 will be provided to connect frequent hospital users to general practices to receive comprehensive multidisciplinary care in the community.

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PHNs will be supported with \$79.4 million over four years from 2023-24 to commission allied health, nurses and midwives services to support smaller or solo primary care practices, to increase patient access to multidisciplinary care and improve the management of chronic conditions to underserved communities.

Government will also provide \$46.8 million over four years from 2023-24 will be provided for nurse practitioners and midwives to deliver health care services through:

- increasing the Medicare patient rebate for a standard consultation with nurse practitioners by 30%
- expanding the eligibility for MBS case conferencing items to enable nurse practitioners to participate in allied health multidisciplinary case conferences.
- enabling Nurse Practitioners and participating midwives to prescribe PBS medicines and provide services under Medicare without the need for a legislated collaborative arrangement.

Other investment in the primary care workforce include:

- \$10.7 million over four years from 2023-24 to boost the primary care nursing workforce by creating 6000 primary care clinical placements and providing incentives to clinics employing returning nurses. This measure will also fund a scope of practice review to examine current models of primary care.
- \$50.2 million over four years from 2023-24 to establish the Primary Care and Midwifery Scholarship program to support registered nurses and midwives to undertake post-graduate study and improve their skills.

The RACGP welcomes all budget measures that support coordinated, culturally safe multidisciplinary general practice team-based care. However, it is important that team-based care is supported by the retention of appropriate collaborative arrangements, including between nurse practitioners, midwives and general practitioners. The RACGP looks forward to hearing more detail on a number of these measures and working with general practices and other key stakeholders to build capacity in general practice teams.

### **Vaping Regulation Reform and Smoking Cessation**

The Federal Government will be providing funding of \$511.1 million over four years from 2023-24 (and \$101.1 million ongoing) for Vaping Regulation Reform and Smoking Cessation including:

- \$263.8 million over four years from 2023–24 (and up to \$101.1 million per year ongoing) to establish and maintain a national lung cancer screening program, including program design, implementation and monitoring, National Cancer Screening Register expansion, communications, workforce training and updated clinical guidance.
- 141.2 million over four years from 2023–24 to expand the Tackling Indigenous Smoking program to prevent the uptake, and reduce the prevalence, of vaping by First Nations Australians.
- \$63.4 million over four years from 2023–24 for national public health campaigns to prevent uptake and reduce smoking and vaping, including additional funding provisioned in the Contingency Reserve for a targeted youth campaign.
- \$29.5 million over four years from 2023–24 to increase and enhance smoking and vaping cessation support.
- \$13.3 million over four years from 2023–24 for legislative and regulatory reform, the testing of tobacco products for prohibited ingredients, to increase inspections of manufacturers, importers, wholesalers and retailers, and to communicate these changes to stakeholders.

The RACGP welcomes the initiatives and ongoing support on regulation, reform and cessation activities for tobacco and vaping use. The RACGP is cautiously supportive of a lung cancer screening program for high-risk populations. General practice should be central to the implementation of the screening program.



### **Extension of Practice Incentive Program – Quality Improvement and review of general practice incentive programs**

The Federal Government will be providing funding of \$60.2 million in 2023–24 to extend Practice Incentive Program–Quality Improvement payments for an additional year to 30 June 2024, and to undertake an intensive review of all general practice incentive programs.

The RACGP welcomes the opportunity to provide feedback on reforms to general practice incentive programs and looks forward to engaging closely with government on this review. It is critical that incentives are targeted towards improving patient care with their usual GP, and do not overburden general practices with administrative burdens that take GPs away from patient-facing activities.

### **My Health Record**

The government has committed \$429.0 million over two years from 2023–24 to Modernise My Health Record (MHR) including creating a new National Repository platform that supports easier, more secure data sharing across all healthcare settings.

The RACGP welcomes this announcement and has previously called for the implementation of seamless technologies that integrate with general practice, enabling GPs to oversee and coordinate their patients' medical care. Any funding to improve access to the My Health Record needs to include a focus on the importance of equity of access to digital health for all Australians.

### **The Australia Digital Health Agency**

Funding of \$325.7 million over four years from 2023-24 (and approximately \$79.9 million per year ongoing) to establish the Australian Digital Health Agency an ongoing entity.

The RACGP welcomes this announcement. Digital technologies can have a significant impact on the way healthcare is organised, delivered, and documented. Technology has the potential to support GPs in providing comprehensive, whole-of-person, and coordinated care. Technology must align with the real world of the patient and their healthcare providers and should be person-centred and specific, rather than disease-specific. We look forward to continuing to work with the Australia Digital Health Agency to lead changes to support the uptake and adoption of technology including greater adoption of standards to assist with interoperability of information transfer between parts of the health system.

### **Establish and maintain a scalable GP-led Respiratory Clinic Panel**

The Federal Government will be providing \$12.7 million over five years from 2022-23 to maintain a network of respiratory clinics that can be stood up to respond to disease outbreaks as required. The RACGP welcomes this announcement, recognising the need to ensure sufficient surge capacity is in place to respond to subsequent COVID-19 waves or any other future respiratory health emergencies.

## **Workforce**

### **Support James Cook University to deliver the Australian General Practice Training program.**

The Federal Government will be providing \$4.2 million over two years from 2022-23 for this measure. The AGPT Program is the leading training program for medical graduates wishing to pursue a career in General Practice in Australia. The RACGP welcomes any additional investment in GP training.



## Aboriginal and Torres Strait Islander health

### Investing in Aboriginal and Torres Strait Islander Healthcare

The Federal government will be investing in a range of measures to improve primary care access to Aboriginal and Torres Strait Islander people and strengthen the Aboriginal Community Controlled Health Organisation sector.

- \$27.0 million over four years from 2023–24 to improve the provision of, and access to, primary care and support services in thin markets by trialling integrated services and joint commissioning across primary health, First Nations health services, disability, aged care, and veterans' care sectors in up to 10 locations.
- \$16.7 million over four years from 2023–24 to develop a national campaign to promote increased uptake of First Nations Australians' health assessments, improve administration and coordination of health assessments and linkages with allied health services and update eligibility for outcome payments under the Practice Incentives Program – Indigenous Health Incentive to include all Medicare Benefits Schedule items for the preparation and review of a Mental Health Treatment Plan.
- \$6.6 million in 2023–24 for the continuation of activities through the national blood-borne viruses and sexually transmissible infections strategies, including extending sexual health services provided by Aboriginal Community Controlled Health Organisations to First Nations peoples.
- \$7.6 million over two years from 2023–24 to fund the capacity building of Aboriginal Community Controlled Organisations to potentially provide aged care services.

The RACGP welcomes this funding that will support the health of Aboriginal and Torres Strait Islander communities and support the Aboriginal Community Controlled health sector to continue to bulk bill patients. Health services must be supported to continue to provide long consultations that are the mainstay of the provision of high-quality, culturally safe health care delivery for Aboriginal and Torres Strait Islander patients.

### Improving the lives and economic opportunities of Aboriginal and Torres Strait Islander people.

The Federal Government will be investing \$1.9 billion over five years from 2022–23 through a range of major funding commitments to deliver sustained, practical actions to improve the lives and economic opportunities of Aboriginal and Torres Strait Islander people including:

- \$150.0 million over four years from 2022–23 to improve water security for regional and remote First Nations communities by investing in First Nations water infrastructure projects through the National Water Grid Fund.
- \$111.7 million in 2023–24 for a new one-year partnership with the Northern Territory Government to accelerate building of new remote housing to reduce overcrowding.
- \$145.3 million over four years from 2023–24, including a provision of \$128.6 million in the Contingency Reserve, to support activities that address immediate safety concerns for First Nations women and children who are experiencing, or at risk of experiencing, family, and domestic and sexual violence.

The RACGP welcomes this funding that aims to address a range of issues aimed at Closing the Gap. This funding will contribute to improving health and educational outcomes and protecting traditional knowledge, economic participation and investments in housing and infrastructure.

## Rural health

### Royal Flying Doctors Service additional funding

The Federal Government will be providing \$29.1 million in funding to the Royal Flying Doctors Service (RFDS) over two years from 2023-24. This will support additional primary care visits and increased aeromedical evacuations in remote communities. The RACGP welcomes the continued support of RFDS to deliver essential medical services to rural and very remote areas across Australia. We look forward to continuing our collaborative work with RFDS through our rural members and joint efforts to increase the rural generalist workforce.

### **Training international medical students in rural and remote Australia**

The Federal Government will be providing \$31.6 million in funding over two years from 2023-24 for trials to support international medical students' training arrangements in rural and remote locations. The RACGP welcomes commitment to trial-enhanced training arrangements for international medical students and measures that support a healthy distribution of the health workforce. We will continue to advocate for long-term supportive solutions that attract and retain international medical students and GPs in rural and remote locations.

### **Single employer model trials to boost rural generalist trainees**

The Federal Government will be providing \$4.5 million in funding over five years from 2022-23 for additional single-employer model trials. This funding will provide an additional 10 trial sites and contribute to increasing rural generalist trainees. The RACGP anticipates positive outcomes from continued single-employer model trials that support the future rural generalist workforce. We will continue to advocate for long-term measures that contribute to a sustainable general practice workforce and flexible models that attract and retain GPs across Australian communities irrespective of the postcode.

## **Aged Care**

### **New General Practice in Aged Care incentive payment**

The Federal Government will be providing \$112 million over four years from 2023-24. The RACGP has continued to push for increased funding to support GPs to provide care to older people. The RACGP welcomes this funding which is aligned with the recommendations in the RACGP's submission to the Royal Commission into Aged Care and Safety. This measure is key to ensuring older people in residential aged care can access the general practice care they need. This incentive will help support continuity of care and optimal outcomes for older people, including reducing avoidable hospitalisations for this group. More information is needed on how the incentive differs from the General Practitioner Aged Care Access Incentive.

## **Access to medicines**

### **PBS listings**

The Federal Government will spend \$2.2 billion over five years from 2022-23 on new and amended listings on the Pharmaceutical Benefits Scheme (PBS). More than 50,000 Australians who need treatment for opioid dependency will have funded support (\$337.3m over four years from 2023-24 (\$98.4 million ongoing)) from their local pharmacy to access the treatment medications they need.

A further \$449.4 million over five years from 2022-23 is also provided by new and amended listings to the National Immunisation Program including:

- The shingles vaccine Shingrix will be added to the National Immunisation program.
- Community Pharmacists being funded to deliver vaccines at no cost to eligible patients under the National Immunisation Program, with an allocation of \$114.1 million over four years (and \$31.0 million ongoing).

Governments are saving \$1.2 billion over five years from 2022-23 (and \$438.7m ongoing) by allowing 2 months' worth of more than 300 PBS medicines to be dispensed by pharmacies, phased in from 1 September 2023. This will mean general patients will be able to save up to \$180 a year per medicine and concession card holders will be able to save up to \$43.80 a year per medicine. The RACGP welcomes all budget measures that save patients money and that provide safe and easy access to medicines and immunisations.

## Community Pharmacy Support

The Federal Government will spend \$1.2 billion over five years from 2022-23 (and \$438.7 million ongoing) in community pharmacies. This includes:

- Doubling the regional pharmacy maintenance allowance to spend \$79.5 million over four years from 2023-24 (and \$19.9 million ongoing) due to reduced dispensing income, in around 1093 regional and remote community pharmacies.
- Community Pharmacists will be funded to deliver vaccines at no cost to eligible patients under the National Immunisation Program, with an allocation of \$114.1 million over five years from 2022-23 (and \$31.0 million ongoing).
- More than 50,000 Australians who need treatment for opioid dependency will have funded support from their local pharmacy to access the treatment medications they need at a cost they can afford (\$337.3m)
- Patients will have continued access to medication management and dose administration aids programs with increased funding for community pharmacy programs (\$654.9m).

The RACGP notes that the Government has doubled the regional pharmacy maintenance allowance, increased spend on pharmacist vaccinations, increased funding for opioid dependency and continued to increase funding in community pharmacy programs which provide patients with continued access to medication and dose administration aids programs.

This demonstrates the Government's continued commitment to ensuring access to medicines and immunisations and the viability of community pharmacies. Vaccinations to children under five years and live vaccines should not be administered in pharmacy. The RACGP supports policy decisions that prevent vaccinations for children under five years and live vaccines being administered in pharmacy. Pharmacists working in general practices and nursing homes need to be afforded equitable funding to independently vaccinate.

## Disability

### Support for people with mental illness not enrolled in the National Disability Insurance Scheme (NDIS)

The Federal Government will provide \$260.2 million over two years from 2023-24 to extend Commonwealth psychosocial supports for people with severe mental illness who are not in the NDIS. The RACGP welcomes this funding. We will continue to advocate for a simplified and sustainable NDIS that is underpinned and supported by general practice.

### Disability services

The Federal Government is providing a total of \$910 million over four years to improve the NDIS, and support and safeguard people with a disability and the Scheme. This includes \$732.9 million to improve the effectiveness and sustainability of the NDIS.

Specific measures include:

- \$429.5 million over four years from 2023-24 to enhance the National Disability Insurance Agency's (NDIA) workforce capability and systems resulting in better consistency and equity in decision-making for access and planning decisions for NDIS participants.
- \$73.4 million over four years from 2023-24 to better support participants to manage their plan within budget, including assistance from the NDIA during the year and holding plan managers, support coordinators and providers to account.
- \$63.8 million over two years from 2023-24 to take a lifetime approach to ensure plans are more transparent and flexible for life events.

## Other

### **Extend telehealth consultations to evaluate eligible COVID-positive patients' suitability for oral antivirals**

The Federal Government will be providing \$14.2 million over two years from 2022-23 for this measure. The RACGP is supportive of extending this measure and has previously written to government calling for them to extend these items. This measure is in response to strong advocacy from the RACGP.

### **Digitise additional health services and better-connected health data**

The Federal government will provide \$69.7 million over four years from 2023–24 (and \$4.2 million per year ongoing). The RACGP welcomes this announcement. Many areas of healthcare would benefit from digital technology, but the literature clearly indicates technology is not a standalone solution. Digital innovations must provide benefits and, in most cases, integrate with existing proven models of care. Additionally, addressing significant barriers for patients accessing and using digital health such as digital literacy and affordability must be considered to ensure equity of health care in Australia for the future. Ongoing funding will support general practitioners and patients to use and access digital health services.

### **Establishment of an interim Centre for Disease Control**

The Federal government will provide establish an interim Australian Centre for Disease Control in the Department of Health and Aged Care at a cost of \$91.1m over two years from 2023-24.

The RACGP welcomes this announcement. Whilst the COVID-19 response has been at the forefront of challenges facing our healthcare systems and has been an impetus in establishing the CDC, it's spotlight must not overshadow the importance of the inclusion of chronic disease prevention and management in this country.

The CDC could play a role in developing and implementing nationally consistent criteria for disease definitions, testing and treatment to minimise confusion for both clinicians and patients. There should be formal and permanent GP representation in future CDC governance arrangements, that is appropriately recognised and remunerated. It is essential health policy effectively addresses issues experienced by GPs and recognises the critical role GPs play in Australia's healthcare system.

### **Strengthen consumer and community representation in the design and delivery of primary care policy**

\$13.0 million over four years from 2023–24 will be provided to strengthen consumer and community representation in the design and delivery of primary care policy. The RACGP is supportive of consumer involvement in the design and delivery of primary care. We await further details of how representation will be achieved to ensure consumers can make a meaningful contribution to primary care policy.

### **Urgent Health Supports for Flood-affected Communities**

The Federal Government will be providing \$9.8 million in 2022-23 to support flood affected communities. The RACGP welcomes this announcement as general practice has a key role in supporting the recovery of communities impacted by disasters.

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