Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Budget Estimates 2012-2013, 30 & 31 May and 1 June 2012

Question: E12-200

OUTCOME 10: Health System Capacity and Quality

Topic: EHealth

Type of Question: Written Question on Notice

Number of pages: 2

Senator: Senator Wright

Question:

The use of communication technology is one way to overcome the barrier of distance in rural and remote Australia. Videoconferencing can be used to communicate with other health professionals (e.g. specialists in a larger centre, general practitioners in remote towns) and even to hold patient consultations at a distance. While these telehealth services are no substitute for face to face medical and counselling support, they are an important tool in the rural health setting and enable greater access to essential mental health services for many people living in rural or remote Australia.

Under this year's Budget the Government has stated that it will provide $233.7 million over three years to implement the National eHealth Program, which is a continuation of funding.

a) Will this program fund telehealth services in the mental health sector, such as telepsychiatry?

b) If yes: What is the total amount allocated under this year's Budget to telepsychiatry services?

c) What is the total amount allocated under this year's Budget to other telehealth services provided in the mental health sector?

d) Is it possible to provide a further breakdown of the total amount allocated to telepsychiatry and other telehealth services that are utilised by mental health practitioners (i.e. psychologists, social workers, GPs etc) in rural and remote Australia?

e) Please provide details of the annual amounts allocated to telepsychiatry and other telehealth services utilised by the mental health sector over the past 5 years (2007-08; 2008-09; 2009-10; 2010-11; 2011-12)

Answer:

a) to c)
Patients located in regional, rural or remote areas have access to telepsychiatry Medicare Benefits Schedule (MBS) items for a referred video consultation with a consultant psychiatrist. New MBS items were introduced on 1 July 2011 for people located in remote, regional and outer metropolitan areas for referred specialist video consultation services, including psychiatrists. Also, on 1 July 2011 new MBS items were introduced for practitioners, where clinically relevant, to support the video consultation at the patient-end.

There is no specific allocation for these services as MBS items are demand driven and funded from a special appropriation. In addition to the MBS rebates, $19.7 million is available in 2012-13 as financial incentives for health professionals to encourage the uptake of telehealth specialist services.

d) There is no specific allocation for telepsychiatry services as MBS items are funded from a demand driven special appropriation. Medicare telehealth services are for medical doctors only.

e) MBS Expenditure on telehealth for psychiatry services; (note including expenditure for telepsychiatry items from July 2007- May 2012 and the new specialist psychiatrist items from July 2011- May 2012).

MBS Expenditure	2007-08 $	2008-09 $	2009-10 $	2010-11 $	2011-12* $
Telehealth – psychiatry services	118,619	144,387	208,276	329,398	1,096,523

* 2011-12 data is based on date of processing up to 31 May 2012