

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 -234

OUTCOME 0: Whole of Portfolio

Topic: National Health Priority Areas

Type of Question: Written Question on Notice

Number of pages: 1

Senator: Senator Di Natale

Question:

Over the forward estimates, how much funding has been allocated to programs that specifically target each of the national health priority areas?

Answer:

Most Commonwealth expenditure addressing the National Health Priorities Areas is channelled as treatment subsidies via the Medical Benefits Schedule (MBS) and the Pharmaceutical Benefits Schedule (PBS), as transfer payments to the states and territories for hospitals, preventative and community health, and as subsidies for private health insurance via the Private Health Insurance rebate. A lesser portion of funding is channelled through grant programs. The more important programs relevant to the National Health Priorities are summarised below.

Because most funding for the National Health Priorities is embedded in the MBS, PBS, private health insurance rebate and transfers to the states, this funding can not be mapped in the Forward Estimates. Some broad aggregates of funding attributable to the National Health Priorities in 2012-13 are:

- \$1.2 billion for mental health programs;
- \$405.0 million for cancer programs;
- \$224.4 million for preventative health programs;
- \$228.2 million for diabetes; and
- \$318.0 million for the National Partnership Agreement in Closing the Gap in Indigenous Health.

These aggregates are exclusive of MBS and PBS funding, and the relevant value of the private health insurance rebate, with the exception of the diabetes figure, which includes a small PBS component. In addition, these aggregates are not mutually exclusive. For example, bowel cancer screening is included in both cancer programs and preventative health programs.