

Chapter 2

Health Portfolio

Department of Health

2.1 This chapter outlines key issues discussed during the 2013-2014 additional estimates hearings for the Health portfolio.

2.2 The committee heard evidence from the Health portfolio department on Wednesday 26 February 2014. Areas of the portfolio were called in the following order:

- Cross Portfolio/Corporate Matters;
- Australian Institute of Health and Welfare (AIHW);
- Private Health;
- Population Health;
- Therapeutic Goods Administration (TGA);
- Food Standards Australia New Zealand (FSANZ);
- National Health and Medical Research Council (NHMRC);
- Australian National Preventive Health Agency (ANPHA);
- Office of the Gene Technology Regulator;
- Primary Care;
- Sport and Recreation;
- Office of Sport;
- Australian Sport Commission;
- Australian Sports Anti-Doping Authority;
- Acute Care;
- Australian Organ and Tissue Donation and Transplantation Authority;
- National Blood Authority;
- National Mental Health Commission;
- Health System Capacity and Quality;
- Health Workforce Capacity;
- Access to Medical Services;
- Access to Pharmaceutical Services;
- Rural Health; and
- Biosecurity and Emergency Response.

Cross Portfolio/Corporate Matters¹

2.3 Proceedings commenced with questions to Minister Nash regarding her former chief of staff, Mr Alistair Furnival, in the context of allegations that a conflict of interest existed between his duties in the Minister's office and involvement with the Australian Public Affairs lobby group. Senator Wong drew attention to the *Statement of Ministerial Standards*, asking Minister Nash about the appointment of Mr Furnival, the disclosure and management of any conflicts of interest and the circumstances of his resignation. The Minister informed the committee of undertakings that had been entered into at the commencement of Mr Furnival's role as her chief of staff, but did not disclose the contents of these undertakings. However, as no explicit request was made to table the document, a public interest immunity claim on the matter was not made. Other issues discussed included the timeliness in delisting Mr Furnival from the register of Australian Public Affairs' directors and the timing and reasoning behind Minister Nash's revised address to the Senate on 11 February 2014. Senator Parry later provided a statement to the committee in response to the questions regarding the sequence of events and procedural opportunities available for Senator Nash's response to the Senate on this day.²

2.4 Senator Faulkner questioned the Department on whether it informs itself of clients on the Commonwealth Register of Lobbyists, as well as that of the states and territories.³ Professor Halton advised her understanding that, as a matter of practice, it is not the responsibility of the Commonwealth to know who sees a state or territory minister, and whether they are on any registers, but undertook to take this on notice. Senator Faulkner emphasised the importance of the food labelling industry, in particular, being one where ministers from all jurisdictions needed to be involved.

2.5 Senator Seselja asked for particulars of the Department's staffing levels and meeting of efficiency dividend targets. Professor Halton provided a headcount of the Department from 30 June 2011 through to 31 January 2014, excluding former aged care staff from the data to account for recent machinery of government changes. The job reduction amount in that period roughly equated to a figure of 600 staff members, with the majority of those achieved through attrition. Professor Halton also confirmed the Department has not renewed contracts for the majority of its non-ongoing staff in that period.

Population Health⁴

2.6 Questions were asked in relation to the removal of the Department's health star rating website and Mr Furnival's involvement in the matter. Senator Wong took issue with the absence from the Estimates hearing of the officer who took the initial

1 *Proof Estimates Hansard*, 26 February 2014, p. 6 - 13.

2 *Proof Estimates Hansard*, 26 February 2014, p. 38.

3 *Proof Estimates Hansard*, 26 February 2014, p. 36.

4 *Proof Estimates Hansard*, 26 February 2014, pp 13 – 27.

call from Mr Furnival requesting the website be taken down.⁵ Professor Halton explained the decision behind the officer not to appear was taken out of concern for the welfare of the officer and reassured the committee that senior officers present had been sufficiently briefed to handle questions on the matter.⁶ Much of the subsequent discussion focussed on the precise wording of Mr Furnival's requests to the Department. The Department took a question on notice from Senator Wong as to the existence of any file notes detailing the relevant conversations, and the likelihood that these could be provided to the committee.⁷

2.7 The reasoning behind the government's decision to take down the website was also a subject of interest, with Senator Wong noting her understanding that the website was a multi-jurisdictional initiative.⁸ Professor Halton indicated that the Commonwealth-state relations in this regard are very complex⁹ and certain work had been delegated to the secretariat, which, alongside Minister Nash's view of requiring more education and information for people, gave the secretariat a clear understanding of the work it had to do.¹⁰

2.8 Senator Smith expressed his concern at a significant increase reported in HIV infection rates. Professor Baggoley related this to a 'composite of issues' and mentioned the AIDS 2014 conference in Melbourne as an important opportunity to help shed light on these. The Department conveyed there were five national strategies, including on blood borne virus and sexually transmitted infections, currently going through a process of being updated and at the beginning of a long period of consultation.¹¹

2.9 Senator McLucas enquired about the decision to cease funding to the Alcohol and other Drugs Advisory Council (ADCA), and particularly, whether Minister Nash had any meetings or briefings with the ADCA board or secretariat.¹² The Minister took this as a question on notice. She also noted that ADCA was not funded from 30 June 2013 as the previous government had not put funding arrangements in place, and cited duplication as her reason for the decision.¹³ A discussion was held as to how the National Drug Sector Information Service would be accommodated and Minister Nash acknowledged that there were no firm plans at this stage¹⁴ but that a review of drug

5 *Proof Estimates Hansard*, 26 February 2014, pp 41 – 42.

6 *Proof Estimates Hansard*, 26 February 2014, pp 41 – 42.

7 *Proof Estimates Hansard*, 26 February 2014, p. 45.

8 *Proof Estimates Hansard*, 26 February 2014, p. 49.

9 *Proof Estimates Hansard*, 26 February 2014, p. 51.

10 *Proof Estimates Hansard*, 26 February 2014, p. 50.

11 *Proof Estimates Hansard*, 26 February 2014, p. 54.

12 *Proof Estimates Hansard*, 26 February 2014, p. 55.

13 *Proof Estimates Hansard*, 26 February 2014, p. 56.

14 *Proof Estimates Hansard*, 26 February 2014, p. 58.

and alcohol organisations across the sector was currently taking place.¹⁵ Minister Nash took a question on notice from Senator McLucas as to whether and when the terms of reference for this review would be publicly released.¹⁶

2.10 The committee inquired into the status of the plain packaging of cigarettes initiative with the Department indicating that a post-implementation review is to commence by 1 December 2014.¹⁷ International attitudes and experiences were also canvassed, with particular mention made of New Zealand, the United Kingdom and Africa having an interest in the matter.¹⁸

2.11 The committee also discussed the following topics:

- (a) binge drinking, pregnancy warning labels and the National Alcohol Strategy;¹⁹
- (b) the National Diabetes Strategy and the appointment of the advisory committee;²⁰ and
- (c) the abolition of the advisory panel on infant formula and the current opportunities for complaints of a breach of the code.²¹

National Health and Medical Research Council (NHMRC)²²

2.12 Senator Madigan directed questions to National Health and Medical Research Council (NHMRC) on the process for identifying and managing any conflicts of interest in preparing the draft information paper on the evidence on wind farms and human health. NHMRC responded that there was a defined process and policy for the identification of conflicts and those deemed major resulted in exclusion in meetings on those issues. However, it pointed out a need to balance expertise in a specialised area and any interests that people may declare.²³ It also confirmed that further research would not be conducted by NHMRC officers, but in universities, medical research institutes and hospitals through an advertised process and with the use of peer review panels to do analysis on which research should be funded.²⁴ Further discussion was had regarding the conclusions drawn by the draft report and the growth of applications for project grants.²⁵

15 *Proof Estimates Hansard*, 26 February 2014, pp 57 – 59.

16 *Proof Estimates Hansard*, 26 February 2014, p. 60.

17 *Proof Estimates Hansard*, 26 February 2014, p. 62.

18 *Proof Estimates Hansard*, 26 February 2014, p. 62.

19 *Proof Estimates Hansard*, 26 February 2014, pp 60 – 61.

20 *Proof Estimates Hansard*, 26 February 2014, p. 63.

21 *Proof Estimates Hansard*, 26 February 2014, p. 66.

22 *Proof Estimates Hansard*, 26 February 2014, pp 68 – 72.

23 *Proof Estimates Hansard*, 26 February 2014, p. 68.

24 *Proof Estimates Hansard*, 26 February 2014, p. 69.

25 *Proof Estimates Hansard*, 26 February 2014, pp 70 – 71.

Therapeutic Goods Administration (TGA)²⁶

2.13 Senator Di Natale queried the Therapeutic Goods Administration (TGA) on the lack of information he was able to access on levels of non-compliance and recall of products, especially in light of the Auditor-General's report in 2011–12 and a subsequent transparency review. The TGA confirmed that information on all compliance reviews and where products have been cancelled or removed from the register are available on their website.²⁷ The TGA took questions on notice as to the total number of products that had been reviewed and cancelled. However, it noted that an issue of concern for the TGA was the possibility of cancelled products reappearing on the shelves under a different name and it was looking at this alongside the overall regulation of complementary medicines.²⁸

Food Standards Australia New Zealand (FSANZ)²⁹

2.14 Senator Whish-Wilson's asked about the COAG legislative and governance forum for food regulation and the agreement to extend the review period for the use of hemp for food until 30 June 2014. Food Standards Australia New Zealand (FSANZ) explained the extension was to allow for, on the request of police ministers, further exploration on the potential for hemp foods to interfere with other drugs strategies, such as random roadside oral fluid drug testing.³⁰ The committee also discussed country of origin labelling for seafood in restaurants and standards for use of the term 'organic'.³¹

National Preventative Health Agency (NPHA)³²

2.15 Senator Moore had a discussion with the National Preventative Health Agency (NPHA) on the process for appointment of its advisory council. Professor Halton indicated that the 'standard practice' for such appointments, especially in relation to advice sought, was not yet established under the new government.³³ NPHA was asked for details on the progress of the prevention network with Medicare Locals and the committee heard that it had funding of \$5.17 million over three years from 2012 – 2015. It undertook to provide on notice a list of seven grants it had awarded using this funding and the terms and basis for which these were offered. NPHA noted a review looking into performance indicators and progress reports for grants issued to Medicare Locals, expected to be completed by the end of June 2015.³⁴ Senator Moore

26 *Proof Estimates Hansard*, 26 February 2014, pp 72 – 75.

27 *Proof Estimates Hansard*, 26 February 2014, p. 73.

28 *Proof Estimates Hansard*, 26 February 2014, p. 74.

29 *Proof Estimates Hansard*, 26 February 2014, pp 75 – 77.

30 *Proof Estimates Hansard*, 26 February 2014, p. 75.

31 *Proof Estimates Hansard*, 26 February 2014, p. 76 – 77.

32 *Proof Estimates Hansard*, 26 February 2014, pp 77 – 80.

33 *Proof Estimates Hansard*, 26 February 2014, p. 78.

34 *Proof Estimates Hansard*, 26 February 2014, pp 78 – 79.

also inquired into the release of the draft paper on alcohol advertising and key recommendations to free-to-air television bodies.³⁵

Office of the Gene Technology Regulator³⁶

2.16 The Office of the Gene Technology Regulator (OGTR) emphasised that its function and role related to risk assessment and management of risk to public health and human health and the environment, but noted its lack of jurisdiction to take decisions based on economic and trade related issues. Senator Siewert followed with questions on monitoring trials, coexistence, swathing and individual licence conditions, several of which were taken on notice.³⁷

Primary Care³⁸

2.17 Senator McLucas had questions into the processes for review of Medicare Locals, the Chief Allied Health Officer, practice incentive payments and GP super clinics. With regard to Medicare Locals, the Department advised that submissions were invited from a select group but that unsolicited responses were also accepted.³⁹ Several follow up questions relating to the publication of submissions and the Deloitte audit of Medicare Locals were taken on notice by Minister Nash and her Department.⁴⁰ The Department confirmed the terms of reference for the audit were made public by the Minister in a press release dated 16 December 2013.⁴¹ Senator Smith had a discussion with the Department on concerns raised by the Wheatbelt GP Network and the ceasing of funding for allied health services by south-west Western Australian Medicare Locals from 1 July 2014.⁴²

2.18 The committee requested Minister Nash to consider continuing the long standing practice of providing updates on the GP super clinics through a table populated by the Department for estimates. Minister Nash agreed to take this on notice.⁴³ Senator Seselja asked for updates on the construction of GP super clinics across the country, and the Department indicated it would take these questions on notice.⁴⁴

2.19 A final discussion occurred around the practice incentive payments for teaching, and the Department informed the committee that consideration of the

35 *Proof Estimates Hansard*, 26 February 2014, p. 79

36 *Proof Estimates Hansard*, 26 February 2014, pp 80 – 82.

37 *Proof Estimates Hansard*, 26 February 2014, pp 81 – 82.

38 *Proof Estimates Hansard*, 26 February 2014, pp 82 – 90.

39 *Proof Estimates Hansard*, 26 February 2014, p. 82

40 *Proof Estimates Hansard*, 26 February 2014, pp 83 – 85.

41 *Proof Estimates Hansard*, 26 February 2014, p. 85

42 *Proof Estimates Hansard*, 26 February 2014, p. 85

43 *Proof Estimates Hansard*, 26 February 2014, p. 87

44 *Proof Estimates Hansard*, 26 February 2014, p. 87.

government's election commitment to double these payments was currently underway.⁴⁵

Australian Sports Commission (ASC)⁴⁶

2.20 Senator Lundy invited the Australian Sports Commission (ASC) to give the committee an update on the Sport Leadership Grants and Scholarship for Women program. The ASC advised it is currently undertaking a review to understand what its future budgetary requirements were in response to a question about whether it intended to continue this program in 2014 – 2015.⁴⁷ It took several questions on notice related to details about current grants and the future of grants.⁴⁸ The ASC drew attention to the recent release of the ASC mandatory sports governance principles which apply to the seven largest funded sports and efforts to increase equal gender representation and diversity across sports boards.⁴⁹ The committee heard of the ASC's new approach to high performance sports, through its *Winning Edge* program, and changes to the way the Australian Institute of Sport operates now as an investor in sports and a provider of key services.⁵⁰

Office for Sport⁵¹

2.21 The Office of Sport was questioned on changes to the sporting communities grants program by Senator Farrell, with particular reference to the reversal of some of these grants.⁵² The committee heard that of nine projects announced in the pre-election fiscal outlook, five of them were reversed in MYEFO.⁵³

Australian Sports Anti-Doping Authority (ASADA)⁵⁴

2.22 Senator Farrell had questions for the Australian Sports Anti-Doping Authority (ASADA) on an investigation by the Australian Federal Police and Deloitte that concluded information leaks from ASADA had not occurred. ASADA gave evidence as to the independent involvement of Garry Downes and Mick Palmer into its investigations.⁵⁵ The committee heard the investigation phase of Operation Cobia into

45 *Proof Estimates Hansard*, 26 February 2014, p. 89.

46 *Proof Estimates Hansard*, 26 February 2014, pp 90 – 93.

47 *Proof Estimates Hansard*, 26 February 2014, p. 90

48 *Proof Estimates Hansard*, 26 February 2014, p. 91

49 *Proof Estimates Hansard*, 26 February 2014, pp 91 – 92.

50 *Proof Estimates Hansard*, 26 February 2014, p. 93.

51 *Proof Estimates Hansard*, 26 February 2014, pp 93 – 95.

52 *Proof Estimates Hansard*, 26 February 2014, p. 93.

53 *Proof Estimates Hansard*, 26 February 2014, p. 94.

54 *Proof Estimates Hansard*, 26 February 2014, p. 95.

55 *Proof Estimates Hansard*, 26 February 2014, p. 96.

the AFL and the NRL had been completed and the next steps were to review the evidence and form briefs.⁵⁶

Acute Care⁵⁷

2.23 The Department provided the committee with an update on the progress of the public dental national partnership agreement.⁵⁸

2.24 Senator McLucas inquired into the latest figures on organ donation, and four consecutive years of growth in deceased donation and transplantation were reported by the Department.⁵⁹ The Living Donors program was also discussed, and in particular, efforts to communicate the existence of the program more broadly to employers and the community.⁶⁰ The Department took a question on notice on whether a particular advertising campaign existed.⁶¹

2.25 Senator Brown asked questions in relation to the Child Dental Benefits Schedule including the eligibility criteria, communications strategies and administrative arrangements between the Department of Health and the Department of Human Services to manage the schedule.⁶²

2.26 Senator Whish-Wilson and Senator Peris asked for information relating to updates and progress of specific hospitals, respectively, the Mersey Community Hospital in Tasmania, and Palmerston Hospital and Darwin Hospital in the Northern Territory, most of which were taken on notice by the Department.⁶³ With regard to the Palmerston Hospital, the committee was told the change of government in the Northern Territory has also resulted in a different direction for the project but negotiations are still underway to provide further detail.⁶⁴

National Blood Authority (NBA)⁶⁵

2.27 The National Blood Authority (NBA) informed the committee of a return of \$85 million to the budget which could be partly attributed to a dramatic reduction in the demand for fresh blood. The committee heard blood donations were still necessary, but the key message was better handling was increasing the utility of

56 *Proof Estimates Hansard*, 26 February 2014, p. 96.

57 *Proof Estimates Hansard*, 26 February 2014, pp 97 – 108.

58 *Proof Estimates Hansard*, 26 February 2014, p. 97.

59 *Proof Estimates Hansard*, 26 February 2014, p. 99.

60 *Proof Estimates Hansard*, 26 February 2014, p. 100.

61 *Proof Estimates Hansard*, 26 February 2014, p. 100.

62 *Proof Estimates Hansard*, 26 February 2014, pp 103 – 104.

63 *Proof Estimates Hansard*, 26 February 2014, pp 105 – 107.

64 *Proof Estimates Hansard*, 26 February 2014, p. 106

65 *Proof Estimates Hansard*, 26 February 2014, pp 102 – 108.

these.⁶⁶ Senator Seselja also inquired into comprehensive care arrangements for treatment of bleeding disorders, such as haemophilia.⁶⁷

Mental Health⁶⁸

2.28 Senator McLucas requested an update on headspace, including future funding and the evaluation of the headspace model which commenced in January 2013 and is expected to conclude in May 2015.⁶⁹ The Department also confirmed a \$5 million commitment had been made for the Young and Well Cooperative Research Centre to deliver a comprehensive new e-mental health platform connecting young people to online resources.⁷⁰

2.29 Senator McLucas made some enquiries into the National Centre of Excellence in Youth Mental Health, and was informed that discussions with Orygen on the delivery of that commitment had commenced, but that funding was yet to be endorsed.⁷¹ Another topic of interest to the committee related to gaps highlighted by the Royal Commission into Institutional Responses to Child Sexual Abuse in dealing effectively with adult survivors of childhood trauma. Senator Wright requested further detail on what plans, if any, existed for the government and Department to respond to the gaps highlighted by the Royal Commission into Institutional Responses to Child Sexual Abuse in dealing effectively with adult survivors of childhood trauma.⁷² Professor Baggoley described the training general practitioner's received in mental health and undertook to provide further specific detail.⁷³ The Department also took questions on notice for any work it has performed to integrate care for those who have drug and alcohol dependencies in the context of childhood trauma.⁷⁴

National Mental Health Commission (NMHC)⁷⁵

2.30 Senator Wright led questions on the National Mental Health Commission's review, and in particular, plans for engagement with the mental health sector and the process for inviting and publishing submissions.⁷⁶ Senator McLucas supplemented this with a question on how the terms of reference for the review were established.⁷⁷

66 *Proof Estimates Hansard*, 26 February 2014, p. 102

67 *Proof Estimates Hansard*, 26 February 2014, p. 103

68 *Proof Estimates Hansard*, 26 February 2014, pp 113 – 119.

69 *Proof Estimates Hansard*, 26 February 2014, p. 115

70 *Proof Estimates Hansard*, 26 February 2014, p. 115

71 *Proof Estimates Hansard*, 26 February 2014, p. 115

72 *Proof Estimates Hansard*, 26 February 2014, p. 117

73 *Proof Estimates Hansard*, 26 February 2014, p. 118

74 *Proof Estimates Hansard*, 26 February 2014, p. 118

75 *Proof Estimates Hansard*, 26 February 2014, pp 109 – 113.

76 *Proof Estimates Hansard*, 26 February 2014, p. 109

77 *Proof Estimates Hansard*, 26 February 2014, p. 109.

The NMHC gave evidence of the review focussing on showing that action was being taken on lengthy consultations that have occurred over the past two years.⁷⁸ The submissions are intended to cover efficiency, effectiveness, gaps in services, duplication and red tape.⁷⁹ The committee heard of changes to the terms of reference following the change of government and the processes of consultation between the NMHC, the Department and the Minister's Office.⁸⁰ The NMHC informed that no public forums were being undertaken as part of the review, and instead targeted consultations were being set up.⁸¹ The NMHC accepted a question on notice to provide a list of 28 Commonwealth entities that have been spoken with.⁸² Minister Nash took some questions on notice about outcomes from the government's consideration of the terms of five mental health commissioners which expired on 31 December 2013.⁸³

Health System Capacity and Quality⁸⁴

2.31 The committee requested an update on the e-Health review and how many records have been created. The Department confirmed there were over 1.4 million consumers and the initiative was being promoted through Medicare Locals and state hospitals, noting continued growth through the latter channel.⁸⁵ Senator Moore asked for a breakdown of the data across states and month-by-month since inception, which was taken on notice by the Department.⁸⁶ Also taken on notice were several questions relating to the PCEHR review and future funding.⁸⁷

2.32 A discussion also occurred under this outcome of regional cancer centres that had been established, funding and the timing for the remaining centres to become operational.⁸⁸ The Department confirmed an evaluation was underway of these centres and undertook to provide a copy of the terms of reference to Senator Moore.⁸⁹

78 *Proof Estimates Hansard*, 26 February 2014, p. 109.

79 *Proof Estimates Hansard*, 26 February 2014, p. 109.

80 *Proof Estimates Hansard*, 26 February 2014, p. 110.

81 *Proof Estimates Hansard*, 26 February 2014, p. 111.

82 *Proof Estimates Hansard*, 26 February 2014, p. 112.

83 *Proof Estimates Hansard*, 26 February 2014, pp 111 – 112.

84 *Proof Estimates Hansard*, 26 February 2014, pp 119 – 123.

85 *Proof Estimates Hansard*, 26 February 2014, pp 119 – 120.

86 *Proof Estimates Hansard*, 26 February 2014, p. 121.

87 *Proof Estimates Hansard*, 26 February 2014, p. 121.

88 *Proof Estimates Hansard*, 26 February 2014, p. 123.

89 *Proof Estimates Hansard*, 26 February 2014, p. 125.

Health Workforce Capacity⁹⁰

2.33 Senator Di Natale inquired into the Commonwealth Medical Internships initiative and asked for an explanation as to why, despite an election promise to deliver 100 new medical internships, the government had only offered 76. The Department indicated the commitment was actually for up to 100 places, and it would depend on numerous factors including affordability and capacity of hospitals as to how many were actually offered.⁹¹

2.34 Senator McLucas then questioned whether the Department was aware of an issue involving the Queensland Department of Health implementing changes that could result in a number of doctors, particularly in rural areas, moving from the public hospital system. Professor Halton replied she was aware but there was no role for the Commonwealth in developing contingency plans, as the states are the managers of the hospital financing and industrial relations systems.⁹²

2.35 A discussion followed about the potential for an increase in medical schools, and Minister Nash agreed to accept questions on notice regarding whether the Coalition had committed to fund additional medical schools.⁹³ Professor Halton provided quite a detailed overview and history of the process by which additional medical school proposals are assessed by the Department.⁹⁴

2.36 Senator McLucas posed a series of questions to Minister Nash on whether she had met with certain organisations, to which the Minister agreed to take these on notice.⁹⁵

Access to Medical Services⁹⁶

2.37 Senator McLucas asked the Department to update the committee about work on the impact of a Medicare co-payment.⁹⁷ There was also some discussion about visits to the GP, and its proportional cost for the government compared to other specialist services and hospitalisation. Professor Halton was also asked about whether the Department shares the data it collects and analysis with Treasury, to which she replied it may from time to time on an "as required" basis.⁹⁸

90 *Proof Estimates Hansard*, 26 February 2014, pp 127 – 133.

91 *Proof Estimates Hansard*, 26 February 2014, p. 127.

92 *Proof Estimates Hansard*, 26 February 2014, p. 129.

93 *Proof Estimates Hansard*, 26 February 2014, p. 131.

94 *Proof Estimates Hansard*, 26 February 2014, p. 132.

95 *Proof Estimates Hansard*, 26 February 2014, p. 132.

96 *Proof Estimates Hansard*, 26 February 2014, pp 134 – 136.

97 *Proof Estimates Hansard*, 26 February 2014, p. 134.

98 *Proof Estimates Hansard*, 26 February 2014, p. 135.

Access to Pharmaceutical Services⁹⁹

2.38 Senator Di Natale requested information on the Life Saving Drugs Program and in particular, guidelines for assessing whether a drug demonstrated substantial life assessment. The Department described the process for how a submission is assessed and then provided to the Pharmaceutical Benefits Advisory Committee consisting of 18 members from a range of fields, for the purpose of bringing balance to the assessment.¹⁰⁰ The Department indicated that the review of the Life Saving Drugs Program was awaiting decision as to whether it would proceed.¹⁰¹

2.39 A discussion occurred around which applications were currently pending or due for PBAC consideration, with the drugs Ivacaftor and Soliris receiving a specific mention.¹⁰² Companies will be advised of outcomes in relation to their application in the week following the 11 March 2014.

2.40 Senator Di Natale expressed concern in the cap of 20 home medicines reviews per month per provider. Professor Halton attributed this to an exponential growth in the program and the fact this was not an open-ended budget.¹⁰³ The Department confirmed that it was limiting the number that a pharmacist can claim and determining that only section 90 accredited pharmacists could put claims in, rather than excluding pharmacists per se as was the suggestion put to it by Senator Di Natale.¹⁰⁴ The Department agreed to take on notice the cap that was agreed to when the agreement was first negotiated for the program.¹⁰⁵

Rural Health¹⁰⁶

2.41 Some general questions were asked about rural health programs by Senator McLucas, and the Department agreed to provide a list of all programs ongoing in Rural and Regional Health Australia and how much funding was being committed for these in the next financial year and forward years.¹⁰⁷

Biosecurity and Emergency Response¹⁰⁸

2.42 Senator Di Natale requested an update on the progress with response to antimicrobial resistance.¹⁰⁹ Professor Halton agreed to make the terms of reference

99 *Proof Estimates Hansard*, 26 February 2014, pp 136 – 142.

100 *Proof Estimates Hansard*, 26 February 2014, p. 137.

101 *Proof Estimates Hansard*, 26 February 2014, p. 137.

102 *Proof Estimates Hansard*, 26 February 2014, p. 138.

103 *Proof Estimates Hansard*, 26 February 2014, p. 140.

104 *Proof Estimates Hansard*, 26 February 2014, p. 141.

105 *Proof Estimates Hansard*, 26 February 2014, p. 141.

106 *Proof Estimates Hansard*, 26 February 2014, p. 142.

107 *Proof Estimates Hansard*, 26 February 2014, p. 142.

108 *Proof Estimates Hansard*, 26 February 2014, p. 144.

109 *Proof Estimates Hansard*, 26 February 2014, p. 142.

publicly available however could not put a timetable on the development of the strategy as talks with the government had still not commenced.¹¹⁰ She expressed the Department was taking this issue very seriously, mentioning it was a global problem.¹¹¹

2.43 Minister Nash responded to an earlier question of Senator McLucas to confirm that the Public Health Association, Heart Foundation and Choice had all met with her officer and advisors.¹¹²

110 *Proof Estimates Hansard*, 26 February 2014, p. 145.

111 *Proof Estimates Hansard*, 26 February 2014, p. 145.

112 *Proof Estimates Hansard*, 26 February 2014, p. 148.