Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Budget Estimates 2011-2012, 30/31 May 2011

Question: E11- 144

OUTCOME 9: Private Health Insurance

Topic: Improvements to the prostheses listing processes for private health insurance benefits

Written Question on Notice

Senator Adams asked:

- a) What improvements have been made to the prostheses listing processes for private health insurance benefits?
- b) Have the recommendations of the Review of Health Technology Assessment with regard to prostheses listing been implemented (as indicated on page 275 of the Portfolio Budget Statement)?

Answer:

a) Recommendations 10, 11 and 12 of the Review of health Technology Assessment contain specific changes to streamline the prostheses listing arrangements.

Recommendation 12b-e is currently being implemented with the first phase of changes to groupings and benefits to take place on the August 2011 Prostheses List after receiving approval from the Prostheses List Advisory Committee (PLAC).

Recommendation 10 has been implemented and required the terms of reference for the Prostheses Devices Committee (PDC) be amended and the development of a protocol for PLAC feedback to the Therapeutic Goods Administration (TGA) to establish a formal process for providing information to the TGA and for the TGA to respond to this information.

Recommendation 11 has been implemented and required a restructure of the PDC. This was approved on 4 October 2010 by the Minister for Health and Ageing. The PLAC replaced the PDC and has met eight times.

Recommendation 12a has been implemented and applications for new listings and amendments to the Prostheses List have been accepted from 2 August 2010 with the Prostheses List still being published every 6 months in February and August.

Recommendation 12b-e is currently being implemented, which recommends the finalisation of groups of products with similar clinical effectiveness, establishment of a single benefit for products in each group and elimination of maximum benefits mandating gap payments for consumers.

The Minister approved a phased approach and a committee of stakeholders to consult on the proposed groupings and group benefits. The HTA Consultative Committee has been established and three meetings held with a further two scheduled for the remainder of the year.

b) Page 275 of the Portfolio Budget Statement is in Outcome 10 and irrelevant to private health insurance.