



## **Submission to Senate Inquiry into the Government's administration of the Pharmaceutical Benefits Scheme**

Diabetes Australia wishes to express a position on behalf of the 1,000,000 people now diagnosed and living with diabetes, the estimated 700,000 people living with undiagnosed diabetes and the 2,000,000 identified as being at high risk of developing diabetes.

While we encourage people at risk of or in the early stages of type 2 diabetes to modify their lifestyles to assist in managing their condition, this approach does not work for many people.

Data from the National Diabetes Services Scheme administered by Diabetes Australia on behalf of the Australian Government indicate that around 40% of registrants are inactive in any given year.

New pharmaceutical interventions are being developed and brought to market on a regular basis. Some of these make "compliance" with medication regimes more accessible to more people living with diabetes. As such, any delays in access to newly developed pharmaceuticals may have negative impacts on consumers.

We understand that the Government has determined not to list new pharmaceuticals unless they are innovative and life-saving, with no equivalent. We believe the lack of transparency in how Cabinet makes these decisions potentially leads to politicisation – exactly the reason the PBAC was established in the first place.

Diabetes Australia is also concerned that healthcare and other costs may well escalate for people living diabetes who are not accessing the best medications for their condition. These costs are not necessarily measured against the PBS budget or even the health budget, but they are a cost to society, to the taxpayer and to the individuals and their families, e.g. being less productive in the workplace.

In summary we see the decision to delay listing of drugs which have been through the PBAC process as poor policy with possible short-term budgetary gains but definite medium to longer term costs which are likely to outweigh any savings.

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CEO  
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