

Recommendations

Recommendation 1

The committee recommends that the government should immediately abandon its plan to implement the \$7 co-payments.

The committee is deeply concerned by the substantial body of evidence it has received regarding the negative effects of the government's proposed patient co-payments. More than 100 submitters and countless witnesses have expressed consistent and overwhelming opposition to the proposed \$7 co-payments.

Recommendation 2

The committee notes the evidence of the negative implications of the government's:

- **changed hospital funding indexation arrangements that will see public hospitals funded on the basis of population growth and CPI;**
- **cuts to the National Health Reform Agreements and associated National Partnership Agreements; and**
- **lack of commitment to Activity Based Funding.**

The evidence points to a significant loss of health services in Australia's public hospitals if these changes proceed.

On the basis of the evidence to the committee, the government should restate its commitment to Activity Based Funding and associated reforms.

Recommendation 3

The committee recommends that, based on the evidence before it, and the demonstrated benefits arising from the work of the Australian National Preventive Health Agency (ANPHA) and the National Partnership Agreement on Preventive Health, the government should drop its plans to abolish ANPHA and reinstate the National Partnership Agreement on Preventative Health.

Recommendation 4

The committee expresses its concern that the government's decision to abolish 61 Medicare Locals and establish 30 new Primary Health Networks is resulting in a loss of frontline services that will see significant cuts to services and programs at the local level. Evidence to the committee demonstrates that Medicare Locals have been improving health outcomes, promoting better integration of primary care services and reducing the need for individuals to seek hospital care.

If the goal of better integration of primary care is to be achieved, the committee recommends that the Primary Health Networks tender must include:

- **a clear statement of the population health needs to be addressed, including clear outcome measures;**
- **a statement of the population health data expected to be collected or used;**
- **a statement on the outcomes Primary Health Networks will be expected to achieve to improve access to primary care and improve primary care integration for the whole population, in particular for disadvantaged groups; and**
- **a requirement that the integrity of the data collected by Medicare Locals will be preserved.**

In considering the applications for funding for Primary Health Networks the government should have a mind to the success of Medicare Locals in:

- **reducing hospitalisations**
- **improving access to after-hours primary care services**
- **reducing rates of chronic disease**
- **reducing smoking rates**
- **increasing immunisation rates**
- **improving access to mental health services**
- **improving access to allied health services**

Recommendation 5

The committee expresses its concern that the government's decision to abolish 61 Medicare Locals and establish 30 new Primary Health Networks is resulting in loss of frontline services and will see significant cuts to services and programs at the local level that are aimed at improving population health, better integration of primary care services and keeping people out of hospital.

Recommendation 6

The committee notes the government's ongoing failure to consult with community groups, peak bodies including GPs and allied health, and state and territory governments in relation to Primary Health Networks transition arrangements.

The committee recommends that the government, as a matter of urgency, ensures certainty in regards to the maintenance of the suite of services supplied by Medicare Locals, particularly in areas of rural and remote Australia where access to medical facilities and services is less comprehensive than the level of access in metropolitan areas.

Recommendation 7

The committee recommends that the government must take immediate steps to reinstate funding to indigenous health organisations and ensure that the particular health challenges facing Aboriginal and Torres Strait Islander Australians are effectively analysed and responded to.

Recommendation 8

The committee recommends that the government should cease its planned merger of the Organ and Tissue Authority and the National Blood Authority.

The committee could find no evidence that a thorough consideration of the impacts of the merger within either agency or the broader public and health sector had been undertaken. Further, based on evidence gained in hearings, any efficiencies to be achieved are minimal and the risks to each agency continuing to improve upon their achievements to date are high.