

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Additional Estimates 2011-2012, 15 February 2012

Question: E12-022

OUTCOME 1: Population Health

Topic: NATIONAL HEALTH PRIORITIES AREAS

Written Question on Notice

Senator Di Natale asked:

- a) What programs does the Department undertake to address each of the national health priority areas?
- b) How much funding is allocated to these programs in the forward estimates?
- c) Has the Department considered which recommendations from the UN High Level Meeting on Non-Communicable diseases will be acted upon in Australia?

Answer:

- a) Most Commonwealth expenditure addressing the National Health Priority 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, preventive and community health, and as subsidies for private health insurance via the Private Health Insurance rebate. A lesser proportion of funding is channelled through grant programs. The more important programs relevant to the National Health Priorities are summarised in the response to part c) below.
- b) 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 preventive 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 preventive health programs.

- c) The outcome of the UN High Level Meeting was the political declaration adopted by all Member States on 19 September 2011. The political declaration included commitments to:
- advancing population-wide interventions to reduce the impact of non-communicable disease (NCD) risk factors such as tobacco use, unhealthy diet, physical inactivity and harmful use of alcohol
 - which the Australian Government is addressing through the National Partnership Agreement on Preventive Health, the National Partnership on Closing the Gap in Indigenous Health, the Australian National Preventive Health Agency, other policies and programs directed at minimising risk behaviours including legislating for the plain packaging of tobacco products, screening programs for the early detection of breast, cervical and bowel cancer, and immunisation for the Human Papilloma Virus;
 - strengthening programs and policies to treat Non-Communicable Diseases (NCD)s
 - which the Australian Government is addressing through:
 - Medical Benefits Schedule subsidies for consultations (medical and allied health), chronic disease management plans, procedures and treatments directed at the National Health Priorities,
 - Pharmaceutical Benefits Scheme subsidies for medications relevant to the National Health Priorities Areas,
 - the Diabetes Care Project,
 - the National Diabetes Services Scheme,
 - new funding, transparency and monitoring arrangements for acute care under the National Health Reform Agreement of August 2011,
 - the establishment of Medical Locals to, amongst other things, support the integrated, seamless management of chronic disease,
 - the Mental Health Package,
 - the funding of the private health insurance tax rebate, and
 - the National Partnership on Closing the Gap in Indigenous Health;
 - improving surveillance and monitoring systems for NCDs
 - which the Australian Government is addressing through the Australian Health Survey, the Aboriginal and Torres Strait Islander Health Survey, and the National Mental Health Survey;
 - and strengthening international cooperation to support regional, national and global plans to prevent and control NCDs
 - which the Australian Government is addressing through its participation in the World Health Organisation, the Western Pacific Regional Committee of the World Health Organization, the OECD Health Committee, the APEC Health Working Group, the Pacific Senior Health Officials Network, the Framework Convention on Tobacco Control, and the overseas development programs of AusAid.