

**Senate Community Affairs Committee**

**ANSWERS TO ESTIMATES QUESTIONS ON NOTICE**

**HEALTH PORTFOLIO**

**Additional Estimates 2015 - 2016, 10 February 2016**

**Ref No: SQ16-000031**

**OUTCOME:** 3 - Access to Medical and Dental Services

**Topic:** Cervical Cancer

**Type of Question:** Written Question on Notice

**Senator:** Di Natale, Richard

**Question:**

- a) For latest period for which data is available, what is the rate of cervical cancer screening in indigenous as compared to non-indigenous women?
- b) As indigenous women are approximately 3 times more likely to develop cervical cancer, and 4 times more likely to die from it than non-Indigenous women (Cancer in Aboriginal and Torres Strait Islander peoples of Australia: an overview AIHW October 2013), what measures will the government put in place to ensure pathology providers continue to bulk-bill indigenous women?

**Answer:**

- a) For clients of Indigenous specific primary health care services, the *AIHW Cervical Screening in Australia 2012-2013 Report* states 31 per cent\* of female Indigenous clients had a cervical screening test in the two years prior to June 2013. (\*Based on the Indigenous Primary Healthcare Key Performance Indicators (nKPIs) data collection). This report also stated that 58 per cent of the total population had a cervical screening test in the same period.
- b) Cervical screening tests will continue to be free where the treating GP and the Pathology provider bulk bill the service. The bulk-billing rate for pap tests has been high historically, and was 97 per cent for the year 2014-15.

The bulk billing incentive is paid directly to the pathology provider and does not affect the Medicare rebate, which remains unchanged.

There is not expected to be any change to pap testing rates under the National Cervical Screening Program as a result of the proposed changes to the Bulk Billing incentive payments due to high levels of competition in the sector.

From 1 May 2017, HPV test items will replace pap test items on the MBS. HPV tests will be free for women where the treating GP and the Pathology provider bulk bill the service, or the service is provided in a public funded health service. Post 1 May 2017, Aboriginal and Torres Strait Islander women will continue to access both public and private services

and culturally appropriate training and health and consumer resources will be available to support increased indigenous participation in the renewed program.

**Please note:** The current state and territory cervical screening registers record all cervical screening test results and indigenous status from both public and private pathology laboratories, however, not all pathology forms provide the capacity to record indigenous status. This information is not currently available through Medicare data.

Improved reporting and recording of indigenous status within the future National Cervical Screening Register is being addressed as part of the implementation of the Renewal of the National Cervical Screening Program, which will go live on 1 May 2017.