

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2011-2012, 19 October 2011

Question: E11-086

OUTCOME 2: Access to Pharmaceutical Services

Topic: CLOSING THE GAP PHARMACEUTICAL BENEFITS SCHEME
CO-PAYMENT MEASURE

Written Question on Notice

Senator Siewert asked:

- a) How many Closing the Gap Pharmaceutical Benefits Scheme scripts have been dispensed since the PBS co-pay relief measure (ICDP B1 measure) commenced in July 2011?
- b) How many of these were from scripts generated from prescribers:
 - i. within Aboriginal Community Controlled Health Services?
 - ii. Private GPs?
 - iii. How many were from remote area private GPs?
 - iv. If you cannot automatically report on numbers from different sectors – why not?

Answer:

- a) The Closing the Gap (CTG) Pharmaceutical Benefits Scheme (PBS) Co-payment relief measure (ICDP B1 measure) commenced on 1 July 2010. A total of 1,244,589 Closing the Gap PBS scripts were processed by the Department of Human Services (Medicare Australia) between 1 July 2010 and 30 September 2011.
- b)
 - i. This information is not available as the PBS data sets do not capture this specific information.
 - ii. It is unclear what is meant by private GPs. However, it is possible to identify a PBS prescriber by their speciality, for example, if a prescriber is a general practitioner, a specialist or other eligible prescriber. Between 1 July 2010 and 30 September 2011 there were 1,216,306 Closing the Gap prescriptions written by general practitioners.
 - iii. PBS data for the PBS Co-payment measure is not currently collated to identify general practitioners by the exact locality of where they write a prescription. However, it is possible to identify the regions in which a general practitioners major practice is located and from which how many CTG PBS Co-payment scripts are written. Between 1 July 2010 and 30 September 2011 there were 96,363 CTG prescriptions written by general practitioners in remote localities.

- iv The PBS information collected for the PBS Co-payment measure identifies a prescriber's unique prescribing number, the location of their major practice and their area of medical speciality.

There are no plans to undertake additional data recording as such an activity would require detailed consideration and substantial resourcing. This is because the PBS Co-payment measure is to ensure access to PBS medicines by Aboriginal and Torres Strait Islander people and not recording where a PBS script was written.