

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2011-2012, 19 October 2011

Question: E11-368

OUTCOME 5: Primary Care

Topic: MEDICARE LOCALS

Written Question on Notice

Senator Fierravanti-Wells asked:

For each of the first 19 Medicare Locals:

- a) What services are being provided?
- b) Who is on the Board and in what role?

Answer:

- a) All Medicare Locals have been established to improve coordination and integration of primary health care in local communities, address service gaps, and make it easier for patients to navigate their local health care system. Some specific roles that all Medicare Locals are expected to perform include:
 - coordinating primary health care services beyond general practice, encompassing a range of primary health care practitioners in the community;
 - undertaking local health planning, identifying gaps in services at the local level, and examining opportunities for better targeting of services;
 - supporting the implementation of initiatives that improve the prevention and management of disease in general practice and primary health care;
 - driving more efficient use of health resources, including the potential for administering flexible funding pools to target gaps in primary health care service provision;
 - improving patients' access to services by improving the coordination and integration of care both within the primary health care sector and across other sectors of the health care system (including the coordination of telehealth and after hours primary health care services in the local region), out-of-hospital physician care, linkages with Local Hospital Networks and Lead Clinician Groups, once established;
 - identifying local health care needs and having the responsibility and flexibility to address these needs through coordinating and funding services;

- providing patients with increased access to information about services available in the local area; and
 - undertaking their obligations in relation to the Government's proposed transparency, performance and accountability arrangements for health reform, including Healthy Communities Reports prepared by the National Performance Authority.
- b) All Medicare Locals Boards are required to have between seven and nine Directors. These Directors must have expertise in areas including knowledge of local healthcare providers and the local community, business management, accounting and legal issues. The majority of Directors cannot be practising in the same profession.