

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH PORTFOLIO

Supplementary Budget Estimates 2016 - 2017, 19 October 2016

Ref No: SQ16-000474

OUTCOME: 4 - Individual Health Benefits

Topic: Excessive Surgeons' Fees - Out-of-Pocket

Type of Question: Written Question on Notice

Senator: Griff, Stirling

Question:

For some procedures, the range of gaps payable by patients is said to vary from \$0 to \$10 000. Can the Department provide details of the following:

- * the number of patients charged gaps between \$0 - \$2000;
- * the number of patients charged gaps between \$2001-\$4000;
- * the number of patients charged gaps between \$4001-\$6000;
- * the number of patients charged gaps between \$6001-\$8000;
- * the number of patients charged gaps between \$8001-\$10 000.

Answer:

The Department of Health regularly publishes Medicare Benefits Schedule (MBS) data which includes information on the average patient contribution per service for out of hospital, patient billed services by broad service type. This information is available at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/Annual-Medicare-statistics>

MBS data on fees charged are captured on an item by item basis. Actual gaps experienced by patients for an episode of care is not captured in MBS data as one episode of care would usually consist of multiple MBS items charged by different providers. Additionally, MBS data does not capture payments by private health insurers, including any gap arrangements. This information is held by the Australian Prudential Regulation Authority (APRA).

APRA publish information on the average gaps payable by patients for MBS funded in hospital services that attract a private health insurance benefit, available at <http://www.apra.gov.au/PHI/Publications/Pages/Medical-Gap.aspx>. This information is not broken down by patient. APRA is a statutory authority under the Treasury.