



NATIONAL RURAL  
HEALTH  
ALLIANCE INC.

## Media Release

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### **Health Alliance backs needs-based funding for rural Australia**

The interim report of the National Health and Hospitals Reform Commission highlights the relatively low level of Medicare expenditure in the bush and proposes increased funding for under-serviced areas.

The increased funding would be based on the national average in payments under Medicare and other primary care benefits, adjusted for remoteness and health need.

If included in the Commission's final report and adopted by Government, this would be a critical breakthrough for improved rural and remote health and could underpin efforts to improve the availability of health professionals in rural and remote areas.

Dr Jenny May, Chair of the National Rural Health Alliance, also welcomed the report's emphasis on Aboriginal disadvantage and on the fundamental importance of better-funded patients' accommodation and travel schemes.

"The Alliance also supports a focus on providing dental health services to all Australians, since the lack of rural dentists and the poor state of oral and dental health has been a long-term priority issue," Dr May said.

The Commission report recognises the health workforce problem in rural areas and recommends improving access by having Medicare rebates for selected services ordered or referred by nurse practitioners, and further extending Medicare to cover work performed for and on behalf of GPs by a suitably trained health professional.

Today's report, which has been widely circulated for comment by health sector stakeholders ahead of a final version due in June, also focuses on the need for rural based training as a key rural workforce policy.

This could be seen as a necessary, but not sufficient condition, for more doctors and nurses to go to rural areas. An incentive structure that is competitive with urban working conditions is also a priority issue.

The Commission's three options for health governance in Australia will be strongly debated among health organisations and the community. A key component of its report was that the time to tackle inefficiencies, cost shifting and the blame game between Federal and State governments has long past.

“We would welcome a simplification of the current system as a means of putting an end to the blame game. Today's report offers a prescription for improving the health of the more than seven million Australians currently living in rural, regional and remote areas – but it also remains to be seen whether there is money in the till to buy the product and sufficient people on the ground to deliver it,” Dr May said.

"As one would expect there are still many details to be sure about in the proposed reforms. However, the sentiment is clear, and assistance with PATs, MBS top-up and flexible workforce options are all ideas with the potential to deliver better health to rural consumers.

“The burning issue of governance needs further work and the Alliance looks forward to participating in further discussions on the matter," Dr May said.

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