

DEPARTMENT OF HEALTH AND AGEING

Department

Agency Resources and Planned Performance

Department of Health and Ageing

Portfolio Department

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Department

Section 1: Department Overview and Resources

1.1 Strategic Direction Statement

A National Health and Hospitals Network for Australia's future

Over the past two years the Australian Government has taken on the challenge of reforming Australia's health system to meet the needs of patients today and the growing demand for health services in the future. The Government commissioned three policy reviews to assist the reform process:

- the report of the National Health and Hospitals Reform Commission, *A Healthier Future for all Australians*;
- the draft National Primary Healthcare Strategy, *Building a 21st Century Primary Health Care System*; and
- the report of the Preventative Health Taskforce, *Australia: The Healthiest Country by 2020*.

The three reports were presented to Government in June 2009 and released in July, August and September respectively. The Government consulted widely on the recommendations of the reports in 103 forums conducted nationwide with patients, clinicians and health experts and the Government's responses to these reports are included in the 2010-11 Budget.

Against the backdrop of the reports and consultations, the Government agreed with states and territories through the Council of Australian Governments (COAG)¹ on 20 April 2010 to establish a *National Health and Hospitals Network*.

This Network will deliver the most significant reforms to Australia's health and hospital system since the introduction of Medicare, and one of the biggest reforms to the federation in its history.

These reforms have three primary objectives:

1. Reforming the fundamentals of our health and hospital system, including funding and governance, to provide a sustainable foundation for providing better services now and in the future.
2. Changing the way health services are delivered, through better access to quality services designed around the needs of patients, and a greater focus on prevention, early intervention and the provision of care outside of hospitals.
3. Providing better care and better access to services for patients right now, through increased investments to provide better hospitals, better infrastructure, and more doctors and nurses.

These reforms to establish the *National Health and Hospitals Network* will drive major improvements in service delivery and better health for patients. They will equip the health and hospital system well to serve the Australian community into the future.

¹ At the time of publication, Western Australia had not agreed to be a party to the reforms under the *National Health and Hospitals Network*. The Government is continuing to actively negotiate with Western Australia.

1. Funding and governance reforms

Key features of the *National Health and Hospitals Network*¹ are:

- the Australian Government will become the majority funder of public hospitals in Australia by funding 60 per cent of the efficient price of all public hospital services delivered to public patients;
- responsibility for hospital management will be devolved to new Local Hospital Networks in order to increase local autonomy and flexibility so that services are more innovative and responsive to local needs;
- Local Hospital Networks will be paid on the basis of a national efficient price for each public hospital service they provide to public patients under Local Hospital Network Service Agreements with the states and territories;
- the Australian Government will have funding and policy responsibility for general practice and primary health care and will establish Medicare Locals, which will improve the integration of primary health care services and reduce access gaps in their local communities;
- the Australian Government will also have funding and policy responsibility for aged care services and will establish aged care one stop shops across the country to provide advice and help people access the care that meets their needs; and
- new, higher national standards and transparent reporting will provide Australians with more information than ever before about the national, state and local performance of the health system.

Funded nationally

The Australian Government will fund 60 per cent of the national efficient price of public hospital services delivered to public patients.¹ The national efficient price is an independent and objectively determined calculation of the cost of providing public hospital services. The Government will also fund 60 per cent of capital, research and training in public hospitals, and over time move to fund 100 per cent of the national efficient price of 'primary care equivalent' outpatient services.

Some small regional and rural public hospitals, and other agreed services, will be block funded consistent with Community Service Obligations, reflecting the higher costs associated with delivering services in these areas.

This commitment means that the Australian Government will be responsible for absorbing the majority of cost growth in the health and hospital system, permanently reversing the decline in the Australian Government funding contribution for public hospital services that has occurred over the past decade.

State and territory governments will negotiate and agree Service Agreements with Local Hospital Networks on the public hospital services they will deliver.¹ State and territory governments will be held to account for meeting strong national standards.

Run locally

Responsibility for hospital management will be devolved to Local Hospital Networks. The Networks will be the direct managers of single or small groups of public hospital services and their budgets each with a professional Governing Council that will be directly accountable for hospital performance. Local Hospital Networks will engage with the local community and local clinicians to incorporate their views into the day-to-day operation of

hospitals, especially regarding the quality and safety of patient care and the effectiveness of clinical pathways through the hospital and broader health system.

The Government will build on its responsibility for general practice and primary health care with the introduction of primary health care organisations known as Medicare Locals. These bodies will be responsible for improving integration of services and reducing access gaps so that their local community can access care that meets local needs. Medicare Locals will work closely with Local Hospital Networks to support more integrated care and help ensure patients experience smooth transitions between sectors of the health system.

Aged care one stop shops will ensure Australians can more easily access information and assessment of aged care services and ensure that people access the care that meets their needs.

Clear and transparent performance reporting

The Australian Government will implement transparent performance reporting against high national standards and other performance indicators to provide Australians with more information than ever before about the performance of their health and hospital services.¹ Hospital Performance Reports and Healthy Community Reports on primary health care will help Australians make more informed choices about their health services, and support the spread of effective practices across the country.

A new, independent National Performance Authority will be responsible for local level performance reporting. The Hospital Performance Reports prepared by the Authority will show how public and private hospitals perform against new national standards, and other performance indicators, including on public hospital emergency department and elective surgery waiting times; adverse events in hospitals; patient satisfaction; and financial management.

In addition, new clinical safety and quality standards will be developed by a permanent Australian Commission on Safety and Quality in Health Care.

Independent Hospital Pricing Authority

An Independent Hospital Pricing Authority, at arm's length from Australian and state and territory governments, will set the national efficient price for the Australian Government's contribution to public hospital services.¹ The Australian Government will provide funding for hospitals through Local Hospital Networks, for each service they provide to a public patient, through activity based funding.¹ This reform will deliver much greater transparency than current arrangements, under which Australian Government contributions to public hospital funding are not explicitly tied to the delivery of services. It will give governments and the community confidence that scarce health funds are being used as efficiently as possible.

This Authority will also be responsible for determining the Australian Government's payments for block funding. To ensure a smooth transition for services and ensure that no state or territory is worse off, the transition to activity based funding will occur over time, beginning with admitted patient services from 1 July 2012. As a further measure to address cost-shifting, the Authority will be empowered to make binding determinations about cost-shifting and cross border issues in the health and hospital system.

The state-specific prices and national efficient price to be used for Australian Government funding will be calculated in a manner which ensures reasonable access to public hospital services, clinical safety and quality, efficiency and effectiveness; and financial sustainability of the public hospital system.

Financing the network

These reforms will be financed through a combination¹ of:

- funding sourced from the National Healthcare Specific Purpose Payment;
- an agreed amount of state and territory GST revenue, which would then be allocated on behalf of states and territories to health and hospitals reform; and
- additional top-up funding to be paid by the Australian Government, reflecting the Australian Government’s greater responsibility for financing growth in hospital costs.

The Australian Government’s funding contribution will be paid into a National Health and Hospitals Network Fund. Joint Intergovernmental Funding Authorities (which will be state and territory-based) will receive funding from both the National Health and Hospitals Network Fund and state and territory governments, and will directly pay Local Hospital Networks on an activity basis for public hospital services.

The National Health and Hospitals Network Fund will make direct payments to the states and territories as part of the Australian Government’s contribution of 60 per cent of the cost of research and training undertaken in public hospitals, large-scale capital investment, and block funding for agreed functions and services and community service obligations required to support small regional and rural hospitals. The Fund will also provide a stream of funding to the states and territories for the continued delivery of GP and primary health care services for which full funding and policy responsibility is being transferred to the Australian Government. These arrangements will provide transparency on governments’ funding flows and service delivery in health care.

2. Health service delivery reforms and investments

The Australian Government will provide \$7.3 billion, from 1 July 2010, for the *National Health and Hospital Network* package to tackle key pressure points in the health and hospitals system now and help meet the growing demands of the future.¹ Together with other Budget funding, the initiatives include:

- \$3.5² billion to improve access to public hospital services, including \$1.62 billion to deliver 1,316 subacute care beds;
- \$1.2 billion for the health workforce – to train more health professionals and make the most of the skills and dedication of our existing workforce;
- \$812.9 million to improve access in the community to high-quality aged care, including \$532.9 million in new funding;
- \$772 million to strengthen access to primary care services, including around 23 new GP Super Clinics and improved access to GP after hours services;
- \$466.7 million to develop and implement a national system for personally controlled electronic health records;
- \$449.2 million to deliver coordinated primary health care for people with diabetes;
- \$266 million – to establish governance arrangements under the Network;
- \$175.8 million to improve our mental health system, including \$123.2 million in new funding; and
- \$52.6 million for prevention, including significant new initiatives to tackle smoking and binge drinking.

The Australian Government's majority funding responsibility across the health and hospital system is a critical platform for driving changes in the way services are delivered – so that health services are designed around the needs of patients, and more strongly oriented to early intervention and high quality integrated care in the community. Better treatment in the community will help keep Australians healthy, out of hospital, and in many cases in the workforce. To achieve this, the Government will deliver reforms that:

- focus on prevention and early intervention, rather than waiting until patients become more seriously unwell;
- organise care around the needs of patients, rather than governments or care providers;
- ensure patients experience smoother transitions between different kinds of care;
- expand access to care outside the acute hospital setting, including GP and primary health care, aged care and sub-acute care, as well as ensuring better integration within and between these sectors;
- make much better use of patients' health information to improve the quality of care they receive, and reduce inefficiency and avoidable errors; and
- ensure there are more doctors, nurses and allied health professionals to meet the growing need for health and hospital services across the country.

These reforms will improve patients' quality of life, take pressure off our public hospitals, and improve the financial sustainability of our health and hospital system.

² Funding for this measure includes the full amount of funding allocated to Western Australia. This funding is dependent on the Western Australian government becoming a signatory to the *National Health and Hospitals Network Agreement*

Prevention, early intervention and coordinated care

Central to keeping Australians healthy will be countering the high and increasing rates of chronic disease, much of which is avoidable. This is the focus of *Preventative Health Action*, a comprehensive response to the report of the Preventative Health Taskforce released by the Australian Government in conjunction with the 2010-11 Budget. The actions included in the Budget build on a strong record of action in prevention since the Government came to office in 2007.

The Australian Government will continue its efforts to address lifestyle related risks that cause chronic disease, especially tobacco smoking which is among the leading causes of premature death and disease in Australia and kills more than 15,000 Australians each year. The adverse health impacts of tobacco smoking are well known: smoking significantly raises the risk of cardiovascular disease, respiratory disease, cancers of the respiratory, digestive and reproductive organs, and premature births. Despite this, nearly three million Australian adults smoke daily.

In a world first, the Government announced in the 2010-11 Budget context that it will be developing and implementing legislation to mandate plain packaging for tobacco products as part of the health reform agenda. Over four years, \$2.6 million will be provided for this measure, which will remove one of the last key forms of tobacco advertising permitted in Australia. This measure will be implemented alongside the 25 per cent tobacco excise increase announced in the 2010-11 Budget and the redirection of \$27.8 million in funding to support anti-smoking campaigns targeting high-need and hard to reach groups.

Alcohol misuse, particularly binge drinking, causes significant health and social harms in Australia. In 2010-11 the Australian Government will invest \$50 million for the next phase of the National Binge Drinking Strategy, building on initiatives undertaken in 2008. This will include a Community Sponsorship Fund to provide an alternative to alcohol sponsorship for local community sporting and cultural organisations; community-level initiative grants; enhancements to alcohol helplines; and social marketing activity building on the 2008 ‘Don’t turn a night out into a nightmare’ campaign.

The Australian Government will also invest \$449.2 million to transform the way patients with chronic disease are treated, beginning with the nearly one million patients who suffer from diabetes. Patients will be able to enrol with a GP who will become responsible for managing their care; help organise access to additional services as set out in a personalised care plan; and be paid, in part, on the basis of their performance in keeping their patients healthier. The Government expects that around 260,000 patients with diabetes will be enrolled with a GP by 2013-14, providing more personalised, flexible care resulting in better managed diabetes and fewer avoidable hospital admissions.

Primary health care

The Australian Government will have full funding and policy responsibility for GP and primary health care, as defined in the *National Health and Hospitals Network Agreement*, including community health centres, primary mental health care, immunisation, and cancer screening programs.¹ The Government has also responded to the review of primary health care it commissioned as part of the health reform process, with the release of Australia’s first *National Primary Health Care Strategy*. Many of the recommendations in the Strategy are given effect in the *National Health and Hospitals Network* and the 2010-11 Budget.

In 2010-11, the Australian Government will introduce a range of measures to improve equity and access to primary health care services in the community. The Government will introduce Medicare Locals to strengthen the integration of primary health care and make it easier for patients to navigate their way through the health system. Medicare Locals will

improve the planning and coordination of services at the local level, support the delivery of a range of primary health care initiatives, and improve collaboration between practitioners and service providers across the health system. The Australian Government will invest in the construction of around 23 new GP Super Clinics and upgrade and extend approximately 425 existing primary health care facilities to improve team-based care. Improved access to GP after-hours services will also be established through a 24 hour telephone health service as part of the National Health Call Centre Network. A new Practice Nurse Incentive Program will be introduced, which will provide funding to practices to support the employment of practice nurses and Aboriginal Health Workers. This will enable GPs to focus on more clinically complex care.

Public hospitals - emergency departments

In order to improve timely treatment in emergency departments, there will be a staged implementation of a four-hour National Access Target.¹ When fully implemented, this means that anyone presenting to a public hospital emergency department will be admitted, referred for treatment or discharged within four hours of presentation, where it is clinically appropriate to do so. Patients who present to an emergency department are prioritised based on the severity of their condition. For triage category 1 patients (critically ill patients requiring immediate attention) the target will commence from 1 January 2011. All triage category patients will be subject to the access target by 1 January 2015.

To support the achievement of this target, the Australian Government will provide states and territories up to \$750 million in facilitation, reward and capital funding over four years.² This will support the delivery of around 805,000 emergency department attendances in 2013-14.

The funding will comprise:

- \$250 million in upfront payments to the states and territories to facilitate improved emergency department performance;
- \$250 million in reward payments over four years from 1 January 2011; and
- \$250 million for emergency department capital.

The implementation of the four-hour National Access Target will be developed in consultation with the clinical community and will apply to patients where this is clinically appropriate and consistent with national clinical guidelines where these are available.

Public hospitals – elective surgery

The Australian Government will implement access targets for elective surgery so that, by December 2014, 95 per cent of patients waiting for surgery in categories 1 and 2 will be treated within clinically recommended times.¹ By December 2015, 95 per cent of patients in category 3 would be treated within clinically recommended times.¹ Implementation of this elective surgery access target will be staged to allow for gradual improvements each year, building on the targets set for the Elective Surgery Waiting List Reduction Plan, with interim annual targets agreed between the Australian Government and each state and territory.

In addition, there will be an Elective Surgery Access Guarantee that will give patients who have waited longer than the clinically recommended time the opportunity to have their surgery conducted elsewhere in either the public or private sectors.

The Australian Government will provide \$652.2 million over four years to implement these targets and guarantees, expected to support an additional 22,000 elective surgery procedures each year by 2013-14, and will provide a further \$150.7 million for elective surgery capital to support the construction of facilities such as day surgery centres, elective

surgery centres, and information technology to reform clinical and management systems.² The Australian Government will meet 60 per cent of the recurrent cost of services provided from 2014-15.

Public hospitals – subacute care

The Australian Government will provide \$1.6 billion to fund fully the capital and recurrent costs of an estimated 1,316 additional subacute care beds by 2013-14.² The new beds will improve access to subacute care for patients needing these services, while reducing pressure on public hospitals. By improving the capacity of the public hospital system to provide appropriate care for people with subacute care needs (including some patients with mental illness and those requiring palliative care), health outcomes and quality of life will improve for many vulnerable patients who would otherwise be inappropriately cared for in an acute care facility or discharged prematurely to residential care or into the community. The Australian Government will meet 60 per cent of the recurrent costs of these services from 2014-15.

Public hospitals – flexibility to establish priorities

In implementing action in the areas of emergency departments, elective surgery and subacute care, it is recognised that each state and territory is at different stages of progress. For this reason, an individual state or territory, with the agreement of the Australian Government, will have the flexibility to direct funds allocated across the emergency department, elective surgery and subacute measures to the highest priority within their jurisdiction.¹ A further \$200 million² will be provided by the Australian Government for states and territories to use flexibly across the three measures to drive improvements in health system and hospital performance. States and territories will need to meet all relevant targets in order for reward payments to be made.

Aged care

The Australian Government will take full funding and policy responsibility for aged care.¹ These reforms include a transfer to the Australian Government of current resourcing for aged care services from the Home and Community Care (HACC) program (except in Victoria). In aged care, these reforms will support the development of a nationally consistent aged care system, covering basic home care through to nursing homes.

The Australian Government will invest \$812.9 million in aged care, including \$280 million² to the states and territories to support older Australians eligible for aged care who are staying a long time in public hospitals.¹ This investment will support more than 5,000 places or beds comprising 2,000 aged care places to support long stay older patients in hospitals, 2,500 additional residential care places in areas of high need supported by zero real interest loans, 286 sub-acute beds or bed equivalents in Multi-Purpose Services, and 300 additional aged care places for multi-service places. The Australian Government will also support 1,200 community care consumer directed care packages to enable older people to have more say in the care they receive. This funding will increase the capacity of the aged care system, increase primary care services provided to people in aged care, and strengthen consumer protection in aged care. The reform will also improve care for older people in rural and remote areas, including provision of capital funding to support more Multi-Purpose Services.

The Australian Government and state and territory governments will work together to support the development of a nationally consistent aged care system, covering basic home care through to nursing homes.¹ A network of one-stop shops will be established for people needing information and access to aged care. Over time these may link with Local Hospital Networks and Medicare Locals to create communities of interest at the local level.

To increase further the capacity of the aged care system, governments will work together to release more land for aged care facilities and accelerate planning approval processes so that aged care facilities and places become operational more quickly.¹

Transition to the new aged care arrangements will occur in a way that ensures there is no disruption to the current recipients of these services, including younger people with disabilities who are currently receiving care in aged care services. States and territories will work with the Australian Government on system-wide primary health care policy, including where coordination is required to improve system integration or service planning.¹

Mental health

The Australian Government will take responsibility for primary mental health care services for common disorders such as anxiety and depression, including those currently provided by the states and territories.¹ The Government will provide \$175.8 million to improve our mental health system, including \$123.2 million in new funding. This includes \$78.8 million over four years to deliver up to 30 new youth-friendly services and to provide extra funding for the existing 30 *headspace* sites. Once the new sites are fully established they should provide support and early intervention services for an additional 20,000 young people each year.

Funding of \$25.5 million over four years will be provided to expand the Early Psychosis Prevention and Intervention Centre (EPPIC) model beyond Victoria, building on the successful implementation of this model in Victoria. With state and territory contributions this will mean that up to 3,500 young people aged between 16 and 25 years and their families will benefit from improved detection of, and earlier treatment and support for, early psychosis.

A further \$13 million over two years will be provided to employ an additional 136 mental health nurses and provide an estimated 11,700 extra services. The Mental Health Nurse Incentive Program is demand-driven and the places will be available nationally. Some \$58.5 million over four years will be directed to care packages to better support up to 25,000 people with severe mental illness, to be delivered by Access to Allied Psychological Services arrangements. Funding and packages will be broadly distributed to services on a per capita basis.

eHealth

The Australian Government will provide \$466.7 million over two years to establish the national components of a secure national system for personally controlled electronic health records. This investment will provide the national core infrastructure, governance standards and tools to enable all Australians who choose to participate to register online from 2012-13.

The national system will enable an individual's key health information to be securely available when and where it is required for their care across the health and hospital system. It will improve the efficiency and support the effectiveness of health services. It will assist to reduce the human and financial costs associated with poor health information availability.

Implementation of the national system will initially focus on people who have the most contact with the health and hospital system. These include people with chronic and complex health conditions, older Australians, Aboriginal and Torres Strait Islander peoples and mothers and their newborn children. A key step in the establishment of the national system is the participation of a number of lead implementation sites. This will allow a staged approach to the rollout and careful evaluation of the system. It will also provide early benefits for patients and their health care providers.

To ensure that the national system will be of greatest value to Australians and their health and hospital system, it will be implemented in close consultation with patients, state and territory governments, and health care organisations and providers.

Workforce

The Australian Government will make a \$1.2 billion investment to ensure there are more doctors, nurses and allied health professionals to meet the growing need for health and hospital services across the country.

This will result in 1,375 more GPs practising or in training by 2013, and 5,500 new GPs or GPs undergoing training in the next decade, with fifty per cent of the GP training occurring in rural and regional Australia. There will also be 975 places each year for junior doctors to experience a career in general practice during their postgraduate training period. Funding will also be made available to train 680 more specialist doctors in the next decade, with the delivery of training in rural areas being a priority under the Specialist Training program.

There will be a significant investment in the nursing workforce, with the introduction of a rural locum scheme which will enable 3,000 nurses to access continuing professional development. The Practice Nurse Incentive Program will also free up the time of GPs and enable them to focus on more complex care by providing funding to general practices to employ practice nurses and Aboriginal Health Workers.

The aged care workforce will be strengthened through a range of measures to ensure that older people continue to receive high quality care. This includes bonus payments for aged care workers who study and stay in aged care; funding for training and scholarships for enrolled and registered nurses; seed funding to establish ways to better utilise nurse practitioners in aged care; and funding to develop a national scope of practice for personal care workers and assistants in nursing.

To strengthen the allied health workforce 400 additional clinical training scholarships will be made available over four years for allied health students in rural and regional areas and a rural locum scheme will support 400 allied health professionals.

Other measures in the 2010-11 Budget

Community pharmacy and the Pharmaceutical Benefits Scheme

The five year Fifth Community Pharmacy Agreement (the Agreement) between the Australian Government and the Pharmacy Guild of Australia will commence on 1 July 2010. The Agreement provides \$15.4 billion in remuneration for around 5,000 community pharmacies for dispensing Pharmaceutical Benefits Scheme (PBS) medicines, the provision of a range of patient-focussed programs and services, and the Community Services Obligation arrangements with pharmaceutical wholesalers. The Agreement also includes a commitment to maintain location rules for approved pharmacies as well as maintaining the commitment to rural pharmacy. The Agreement will result in a gross saving of \$1 billion against Australian Government forward estimates. The Agreement provides funding to enhance patient medication management, including a focus on improving the quality use of medicines by Aboriginal and Torres Strait Islander peoples. New programs will be introduced as part of a quality framework, with incentives available to accredited community pharmacies that deliver high quality patient services.

To secure a more sustainable PBS, further pricing reforms have been agreed with Medicines Australia, the peak body for the innovator medicines industry. This Memorandum of Understanding (MOU) will provide the Government with savings of \$1.9 billion from 2010-11 to 2014-15 through a range of statutory price reductions and the

expansion and acceleration of the existing price disclosure program from 162 to over 1,600 brands of medicines.

The savings will ensure that the Australian community has ongoing access to existing, new and innovative medicines, now and into the future, whilst also providing a period of stability in PBS pricing policy for the medicines industry. For example the new listing of Revlimid® (lenalidomide) on the PBS represents an investment of an additional \$104 million over the next four years in the fight against cancer. A number of innovations designed to improve the operations of the PBS listing process and reduce delays in making new and innovative medicines widely available to patients through the PBS will also be introduced as part of the MOU.

Indigenous health

The Australian Government is providing \$38.5 million over four years to further expand the voluntary rollout of Opal fuel to regional and remote Indigenous communities. This funding fulfils the Government's commitment to continue the current voluntary rollout of Opal fuel by addressing the storage and distribution problems in northern Australia. The Australian Government is establishing storage facilities for Opal fuel in Darwin and north Queensland enabling Opal fuel to be distributed to 39 new sites in the Top End of the Northern Territory, the East Kimberley and the Gulf Region of Queensland.

The expanded rollout of Opal fuel will be accompanied by a comprehensive communication strategy, which targets communities and tourists. The funding also provides for the collection of data to assess the effectiveness of the Opal fuel program in reducing petrol sniffing.

The Australian Government will continue to invest in preventing, detecting and managing chronic disease for Aboriginal and Torres Strait Islander peoples as part of the Australian Government's contribution to the \$1.6 billion National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes. This will be the first full year of the Practice Incentives Program Indigenous Health Incentive, and the new Pharmaceutical Benefits Schedule co-payment measure will commence operation in July 2010. Measures that received initial funding late in 2009-10 will be consolidated during 2010-11 as the basis for further expansion in 2011-12. These include the Medical Specialist Outreach Assistance Program – Indigenous Chronic Disease, the Urban Specialist Outreach Assistance Program and Care Coordination and Supplementary Services. Training for health professionals in chronic disease self-management sessions/activities will commence in 2010-11 and 42 healthy lifestyle workers and 40 tobacco workers (Regional Tobacco Coordinators and Tobacco Action Workers) will be recruited and trained. This new workforce will work with individuals, families and communities in an initial 20 regions across Australia. Also in 2010-11, Aboriginal and Torres Strait Islander secondary school students will be encouraged to consider careers in health, and a comprehensive primary health care resource will be developed for use by health care professionals in the prevention and management of key chronic diseases for Indigenous Australians.

Pandemic preparedness

Protecting the health and wellbeing of Australians remains a priority for the Government. The response to the pandemic (H1N1) 2009 influenza outbreak in 2009-10 demonstrated that Australia is well placed to deal with pandemics. We will continue to refine and develop our pandemic capacity and to ensure we respond to other national health threats or emergencies effectively, including through enhanced capacity at the border. The Australian Government will invest approximately \$38.2 million to replenish elements of the National Medical Stockpile that will expire over the next 12 months, as well as restock material which was used during the response to pandemic (H1N1) 2009 influenza. The expansion of

eligibility criteria for the free seasonal influenza vaccine will contribute to a reduction in mortality and morbidity due to vaccine preventable disease.

Sport

The Australian Government has responded to the findings of the Independent Sport Panel's review (Crawford Report) with the release of *Australian Sport: The Pathway to Success*. Consistent with this response, the Government has provided an additional \$262.7 million over four years in sport funding, bringing total funding for sport to \$1.2 billion over four years. The additional funding restores terminating high performance funding of \$51.6 million over four years for national sporting organisations and targeted athletes to support the national elite sport program, includes \$195.2 million over four years to build the capacity of Australian sports by supporting coaching and officiating, talent identification, sport training environments, and improving international performance and community participation in sport and physical recreation and separate funding of \$15.9 million over four years for Paralympic sport. This funding package will support a whole-of-sport approach. It will benefit all levels, from community clubs to high-performance sport and includes a significant increase for the high-performance programs of Olympic and Paralympic Games sports. This investment will continue funding for the Australian Institute of Sport. The implementation of these measures will outline clear indicators of success for the sport sector and enable strategic coordination of sports services and infrastructure across all levels of government.

1.2 Department Resource Statement

Table 1.2.1 shows the total resources from all origins. The table summarises how resources will be applied by Outcome and by administered and departmental classification.

The total resourcing for the Department in the 2010-11 Budget is \$45.3 billion.

Table 1.2.1: Department Resource Statement – Budget Estimates for 2010-11 as at Budget May 2010

	Estimate of prior year amounts available in 2010-11 \$'000	Proposed at Budget 2010-11 \$'000	Total Estimate 2010-11 \$'000	Estimated Available Appropriation 2009-10 \$'000
Departmental appropriation				
Prior year departmental appropriation ¹	79,738	-	79,738	127,588
Departmental appropriation ^{2,3}	-	607,984	607,984	584,703
s31 Relevant agency receipts ⁴	-	19,590	19,590	19,300
Total	79,738	627,574	707,312	731,591
Departmental Special Accounts				
Opening balance ⁵	45,555		45,555	46,923
Appropriation Receipts ⁶	-	9,757	9,757	10,252
Non-Appropriation receipts to Special Accounts		114,319	114,319	110,598
Total Special Account	45,555	124,076	169,631	167,773
Departmental non-operating⁷				
Equity injections	-	99,959	99,959	7,093
Previous years' outputs	-		-	3,236
Total	-	99,959	99,959	10,329
Total Departmental Resourcing	125,293	851,609	976,902	909,693
Less appropriations drawn from annual or special appropriations above and credited to special accounts and/or CAC Act bodies through annual appropriations	-	(9,757)	(9,757)	(10,252)
Total net Departmental resourcing for Health and Ageing	125,293	841,852	967,145	899,441
Administered expenses²				
Outcome 1: Population Health	-	307,856	307,856	287,603
Outcome 2: Access to Pharmaceutical Services	-	575,516	575,516	673,999
Outcome 3: Access to Medical Services	-	107,042	107,042	142,510
Outcome 4: Aged Care and Population Ageing	-	869,718	869,718	613,770
Outcome 5: Primary Care	-	836,515	836,515	849,631
Outcome 6: Rural Health	-	183,289	183,289	175,111
Outcome 7: Hearing Services	-	357,766	357,766	348,631
Outcome 8: Indigenous Health	-	661,464	661,464	607,449
Outcome 9: Private Health	-	14,624	14,624	1,747
Outcome 10: Health System Capacity and Quality	-	349,145	349,145	196,964
Outcome 11: Mental Health	-	173,941	173,941	145,991
Outcome 12: Health Workforce Capacity	-	725,923	725,923	394,764
Outcome 13: Acute Care	-	135,490	135,490	92,061

Section 1 – Department Overview and Resources

Table 1.2.1: Department Resource Statement – Budget Estimates for 2010-11 as at Budget May 2010 (cont.)

	Estimate of prior year amounts available in 2010-11 \$'000	Proposed at Budget 2010-11 \$'000	Total Estimate 2010-11 \$'000	Estimated Available Appropriation 2009-10 \$'000
Administered expenses (continued)²				
Outcome 14: Biosecurity and Emergency Response	-	26,841	26,841	66,619
Outcome 15: Sport Performance and Participation	-	61,020	61,020	76,131
Payments to CAC Act Bodies		288,736	288,736	263,318
Total	-	5,674,886	5,674,886	4,936,299
Other services - Bill 2⁷				
Administered expenses				
Specific payments to States, ACT, NT and local government				
Outcome 1: Population Health	-	7,841	7,841	1,620
Outcome 15: Sport Performance and Participation	-	2,400	2,400	2,300
Total	-	10,241	10,241	3,920
Administered non-operating				
Administered Assets and Liabilities	-	37,300	37,300	67,226
Payments to CAC Act Bodies - non operating	-	300	300	1,820
Total	-	37,600	37,600	69,046
Total other services	-	47,841	47,841	72,966
Special Appropriations				
Special Appropriations limited by criteria/entitlement				
<i>Aged Care Act 1997 -</i> Residential Care Subsidies		6,239,441	6,239,441	5,896,807
<i>National Health Act 1953 -</i> Blood fractionation, products and blood related products to National Blood Authority		613,409	613,409	548,056
<i>Medical Indemnity Act 2002</i>		115,409	115,409	100,900
<i>Aged Care Act 1997 -</i> Flexible Care Subsidies		724,513	724,513	517,842
<i>Aged Care Act 1997 -</i> Community Care Subsidies		583,973	583,973	508,191
<i>Health Insurance Act 1973 -</i> Medical Benefits		16,171,456	16,171,456	15,635,669
<i>National Health Act 1953 -</i> Aids and Appliances		248,579	248,579	230,098
<i>National Health Act 1953 -</i> Essential Vaccines		19,314	19,314	17,450
<i>National Health Act 1953 -</i> Pharmaceutical Benefits		9,038,627	9,038,627	8,486,519

Department
Resources

Budget Statements – Department of Health and Ageing

Table 1.2.1: Department Resource Statement – Budget Estimates for 2010-11 as at Budget May 2010 (cont.)

	Estimate of prior year	Proposed at Budget	Total Estimate	Estimated Available
	amounts available in 2010-11	2010-11	2010-11	Appropriation 2009-10
	\$'000	\$'000	\$'000	\$'000
Special Appropriations				
Special Appropriations limited by criteria/entitlement (continued)				
<i>Private Health Insurance Act 2007</i>		4,426,001	4,426,001	4,310,420
<i>Aged Care (Bond Security) Act 2006</i>		-	-	15,900
<i>Dental Benefits Act 2008</i>		68,523	68,523	63,121
Payments to CAC Act Bodies				
<i>Private Health Insurance Act 2007 - Risk Equalisation Trust Fund</i>		290,000	290,000	275,000
<i>Private Health Insurance Act 2007 - Council Administration Levy</i>		5,235	5,235	5,085
Total Special Appropriations		38,544,480	38,544,480	36,611,058
Special Accounts⁸				
Opening balance ⁵	32,675		32,675	46,081
Appropriation Receipts ⁶	-	18,052	18,052	23,658
Non-Appropriation receipts to Special Accounts		969,503	969,503	451,527
Total Special Account	32,675	987,555	1,020,230	521,266
Total Administered resourcing	32,675	45,254,762	45,287,437	42,141,589
Less appropriations drawn from annual or special appropriations above and credited to special accounts and/or CAC Act bodies through annual appropriations	-	(602,323)	(602,323)	(568,881)
Total net administered resourcing for Health and Ageing	32,675	44,652,439	44,685,114	41,572,708
Total net resourcing for Health and Ageing	157,968	45,494,291	45,652,259	42,472,149

Note: All amounts are GST exclusive.

¹ Estimated adjusted balance carried from previous year for annual appropriations.

² Appropriation Bill (No.1) 2010-11.

³ 2010-11 departmental appropriation includes departmental supplementary appropriation of \$0.152 million and \$7.723 million in 2010-11 for the Departmental Capital Budget (refer to table 3.2.5 for further details). For accounting purposes this amount has been designated as 'contributions by owners'.

⁴ section 31 Relevant Agency receipts – estimate.

⁵ Estimated opening balance for special accounts. For further information on special accounts see Table 3.1.2.

⁶ Appropriation receipts in Department of Health and Ageing annual and special appropriations for 2010-11 and included above.

⁷ Appropriation Bill (No.2) 2010-11.

⁸ Excludes Other Trust Moneys Special Account and Services for Other Governments Special Account as these accounts are not considered resourcing for the Department of Health and Ageing.

Section 1 – Department Overview and Resources

Third Party Payments from and on behalf of other agencies

	2010-11 \$'000	2009-10 \$'000
Receipts received from other agencies for the provision of services (disclosed above within departmental section31)	11,410	11,131
Payments made by other agencies on behalf of Health and Ageing (disclosed above)	34,903,434	35,565,328
Payments made to other agencies for the provision of services (disclosed above)	30,298	30,571
Payments made to CAC Act bodies within the Portfolio	584,271	545,223

COAG Federal Financial Framework Reforms

Following COAG's Federal Financial Framework Reforms, the Treasury is appropriated for the National Specific Purpose Payments, National Partnership payment or general revenue assistance payment components that were previously a part of this Department's resourcing.

1.3 Budget Measures

Budget measures relating to the Department are detailed in *Budget Paper No. 2, Budget Measures 2010-11*. Table 1.3.1 provides a summary of Government measures and identifies the relevant Outcomes and Programs associated with each measure.

Budget Paper No. 2, Budget Measures 2010-11 can be located on the Australian Government Budget website at: <www.budget.gov.au>.

Table 1.3.1: Department of Health and Ageing Budget Measures

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
OUTCOME 1: Population Health					
Combating Illicit Drug Use - continuation of media campaign funding					
Department of Health and Ageing					
Administered expenses	1.3	(1,114)	(1,228)	(790)	(889)
Departmental expenses	-	5	3	2	-
Total	-	(1,109)	(1,225)	(788)	(889)
Department of Health and Ageing Grant Programs - reprioritisation					
Department of Health and Ageing					
Administered expenses	1.1	(80)	(162)	(249)	(252)
	1.3	(3,021)	(4,323)	(4,674)	(4,680)
	3.3	(150)	(700)	(1,250)	(2,600)
	3.4	(677)	(881)	(731)	(610)
	5.1	(170)	(39)	(40)	(40)
	5.2	(2,064)	(2,050)	(2,104)	(2,140)
	5.3	(13)	(13)	(14)	(10)
	7.1	(1,510)	(2,320)	(2,950)	(4,731)
	10.1	(246)	(250)	(254)	(260)
	12.2	(5,299)	(7,682)	(12,766)	(15,877)
	14.1	(107)	(218)	(330)	(336)
Total	-	(13,337)	(18,638)	(25,362)	(31,536)
National Binge Drinking Strategy - expansion					
Department of Health and Ageing					
Administered expenses	1.3	9,530	11,823	14,323	14,324
Total	-	9,530	11,823	14,323	14,324
National Health and Hospitals Network - Prevention - plain packaging of tobacco products					
Department of Health and Ageing					
Administered expenses	1.3	850	605	-	-
Departmental expenses	-	452	431	154	96
Total	-	1,302	1,036	154	96
National Health and Hospitals Network - Prevention - National Tobacco Campaign - more targeted approach					
Administered expenses	1.3	-	-	-	-
Departmental expenses	-	-	-	-	-
Total	-	-	-	-	-

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Male Health Policy - building on the strengths of Australian males					
Department of Health and Ageing					
Administered expenses	Various	-	-	-	-
Departmental expenses		-	-	-	-
Total		-	-	-	-
Outcome 2: Access to Pharmaceutical Services					
Fifth Community Pharmacy Agreement					
Department of Health and Ageing					
Administered expenses	2.1	(100,017)	(49,777)	(62,357)	(47,680)
	2.2	(35,166)	(65,138)	(64,923)	(70,301)
Departmental expenses		2,033	1,193	778	443
Department of Veterans' Affairs					
Administered expenses		(7,270)	(8,421)	(7,658)	(7,313)
Medicare Australia					
Departmental expenses	448	10,657	9,384	4,940	4,575
Departmental capital	-	4,632	3,426	-	-
Total	448	(125,131)	(109,333)	(129,220)	(120,276)
Medicare Benefits Schedule - removal of practice accreditation requirements for General Practice Focussed Psychological Strategies services					
Department of Health and Ageing					
Administered expenses	2.2	(213)	(324)	(373)	(380)
	3.1	(100)	(155)	(173)	(172)
Total		(313)	(479)	(546)	(552)
Medicare Benefits Schedule - restructure of items to provide better primary care services					
Department of Health and Ageing					
Administered expenses	2.2	(46,214)	(48,460)	(51,125)	(53,976)
	3.1	7,150	48,205	50,800	53,600
Departmental expenses	14	55	-	-	-
Department of Veterans' Affairs					
Administered expenses		(1,708)	(1,667)	(1,684)	(1,636)
Medicare Australia					
Departmental expenses		(2,021)	(2,089)	(2,172)	(2,251)
Total	1,240	(4,261)	(4,011)	(4,181)	(4,263)

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - Workforce - more general practice training rotations for junior doctors						
Department of Health and Ageing						
Administered expenses	2.2	-	161	216	282	284
	3.1	-	6,567	8,583	11,165	11,365
Departmental expenses		-	318	134	52	52
Department of Veterans' Affairs						
Administered expenses		-	92	104	126	117
General Practice Education and Training Limited						
Departmental expenses		-	19,100	24,924	32,326	32,843
Medicare Australia						
Departmental expenses		-	132	171	222	224
Total		-	26,370	34,132	44,173	44,885
National Health and Hospitals Network - Workforce - more places on the General Practice Training Program						
Department of Health and Ageing						
Administered expenses	2.2	-	-	6,459	27,438	58,176
	3.1	-	-	9,390	39,499	82,990
	5.4	-	-	833	3,500	7,347
	12.1	-	617	2,554	5,893	10,018
Department of Veterans' Affairs						
Administered expenses		-	-	186	716	1,375
General Practice Education and Training Limited						
Departmental expenses		-	2,640	11,084	25,962	44,841
Medicare Australia						
Departmental expenses		-	-	246	1,033	2,149
Total		-	3,257	30,752	104,041	206,896
Pharmaceutical Benefits Scheme - biological disease-modifying antirheumatic drugs - more cost-effective arrangements						
Department of Health and Ageing						
Administered expenses	2.2	nfp	nfp	nfp	nfp	nfp
Departmental expenses		nfp	nfp	nfp	nfp	nfp
Department of Veterans' Affairs						
Administered expenses		nfp	nfp	nfp	nfp	nfp
Total		nfp	nfp	nfp	nfp	nfp
Pharmaceutical Benefits Scheme - community information on generic medicines						
Department of Health and Ageing						
Administered expenses	2.1	-	4,140	2,620	1,520	1,570
Departmental expenses		-	58	35	30	30
Total		-	4,198	2,655	1,550	1,600

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Pharmaceutical Benefits Scheme - further pricing reform						
Department of Health and Ageing						
Administered expenses	2.2	-	(32,266)	(181,630)	(500,683)	(518,469)
Departmental expenses		-	3,591	1,386	1,252	1,261
Department of Veterans' Affairs						
Administered expenses		-	(2,012)	(10,924)	(28,979)	(29,218)
Total		-	(30,687)	(191,168)	(528,410)	(546,426)
Pharmaceutical Benefits Scheme - minor new listings						
Department of Health and Ageing						
Administered expenses	2.2	6,754	18,657	26,768	34,578	40,861
Department of Veterans' Affairs						
Administered expenses		267	890	1,352	1,766	2,069
Medicare Australia						
Departmental expenses		82	154	240	307	368
Expense Total		7,103	19,701	28,360	36,651	43,298
Administered revenues		nfp	nfp	nfp	nfp	nfp
Revenue Total		nfp	nfp	nfp	nfp	nfp
Revised arrangements for efficient funding of chemotherapy drugs						
Department of Health and Ageing						
Administered expenses	2.2	-	36,680	20,321	6,189	7,815
Departmental expenses		-	337	247	81	72
Department of Veterans' Affairs						
Administered expenses		-	3,239	1,993	1,612	1,603
Medicare Australia						
Departmental expenses		61	1,883	1,727	780	501
Departmental capital		-	1,707	1,090	-	-
Total		61	43,846	25,378	8,662	9,991
Type 1 Diabetes Insulin Pump Program - increased subsidies						
Department of Health and Ageing						
Administered expenses	2.4	(544)	505	(16)	(332)	(237)
Total		(544)	505	(16)	(332)	(237)
Outcome 3: Access to Medicare Services						
Better Access to Radiation Oncology Services - further efficiency						
Department of Health and Ageing						
Administered expenses	3.5	-	(21,755)	(22,125)	(22,523)	(22,928)
Departmental expenses		-	(29)	(29)	(30)	(30)
Total		-	(21,784)	(22,154)	(22,553)	(22,958)

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Department of Health and Ageing Grant Programs - reprioritisation						
Department of Health and Ageing						
Administered expenses	1.1	-	(80)	(162)	(249)	(252)
	1.3	-	(3,021)	(4,323)	(4,674)	(4,680)
	3.3	-	(150)	(700)	(1,250)	(2,600)
	3.4	-	(677)	(881)	(731)	(610)
	5.1	-	(170)	(39)	(40)	(40)
	5.2	-	(2,064)	(2,050)	(2,104)	(2,140)
	5.3	-	(13)	(13)	(14)	(10)
	7.1	-	(1,510)	(2,320)	(2,950)	(4,731)
	10.1	-	(246)	(250)	(254)	(260)
	12.2	-	(5,299)	(7,682)	(12,766)	(15,877)
	14.1	-	(107)	(218)	(330)	(336)
Total		-	(13,337)	(18,638)	(25,362)	(31,536)
Medicare Benefits Schedule - new and revised listings						
Department of Health and Ageing						
Administered expenses	3.1	(237)	(1,276)	(1,435)	(1,618)	(1,829)
Department of Veterans' Affairs						
Administered expenses		(8)	(99)	(100)	(95)	(93)
Medicare Australia						
Departmental expenses		(1)	(3)	(3)	(3)	(4)
Total		(246)	(1,378)	(1,538)	(1,716)	(1,926)
Medicare Benefits Schedule - Rebates for cataracts-related Items - revision						
Department of Health and Ageing						
Administered expenses	3.1	10,872	12,372	13,048	14,132	15,299
Department of Veterans' Affairs						
Administered expenses		760	1,092	997	946	925
Total		11,632	13,464	14,045	15,078	16,224
Medicare Benefits Schedule - removal of practice accreditation requirements for General Practice Focussed Psychological Strategies services						
Department of Health and Ageing						
Administered expenses	2.2	-	(213)	(324)	(373)	(380)
	3.1	-	(100)	(155)	(173)	(172)
Total		-	(313)	(479)	(546)	(552)
Medicare Benefits Schedule - restructure of items to provide better primary care services						
Department of Health and Ageing						
Administered expenses	2.2	(5,672)	(46,214)	(48,460)	(51,125)	(53,976)
	3.1	7,150	45,627	48,205	50,800	53,600
Departmental expenses		14	55	-	-	-
Department of Veterans' Affairs						
Administered expenses		(138)	(1,708)	(1,667)	(1,684)	(1,636)
Medicare Australia						
Departmental expenses		(114)	(2,021)	(2,089)	(2,172)	(2,251)
Total		1,240	(4,261)	(4,011)	(4,181)	(4,263)

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Medicare Benefits Schedule - revision of access for specialist consultation items					
Department of Health and Ageing					
Administered expenses	3.1	1,927	3,614	4,354	5,175
Departmental expenses	-	146	46	23	18
Medicare Australia					
Departmental expenses	-	303	221	239	261
Department of Veterans' Affairs					
Administered expenses	-	90	162	170	187
Total	-	2,466	4,043	4,786	5,641
National Health and Hospital Network - General Practice and Primary Care - improving access to primary care					
Department of Health and Ageing					
Administered expenses	3.1	-	-	-	-
Departmental expenses	-	-	-	-	-
Medicare					
Departmental expenses	-	-	-	-	-
Total	-	-	-	-	-
National Health and Hospitals Network - General Practice and Primary Care - coordinated diabetes care					
Department of Health and Ageing					
Administered expenses	3.1	-	-	(139,971)	(197,415)
	5.2	2,626	4,142	9,053	8,107
	5.4	-	4,151	309,296	431,117
Departmental expenses	-	1,684	1,494	863	869
Department of Veterans' Affairs					
Administered expenses	-	-	-	590	700
Departmental expenses	-	68	128	137	59
Medicare Australia					
Departmental expenses	-	1,308	2,051	3,257	3,573
Departmental capital	-	-	1,319	-	-
Total	-	5,686	13,285	183,225	247,010
National Health and Hospitals Network - Mental Health - flexible care packages for patients with severe mental illnesses					
Department of Health and Ageing					
Administered expenses	3.1	(10,650)	(11,563)	(14,295)	(15,889)
	11.1	7,250	16,342	16,587	17,219
Departmental expenses	-	369	371	230	116
Medicare Australia					
Departmental expenses	56	57	(36)	(122)	(136)
Total	56	(2,974)	5,114	2,400	1,310

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - Workforce - more general practice training rotations for junior doctors						
Department of Health and Ageing						
Administered expenses	2.2	-	161	216	282	284
	3.1	-	6,567	8,583	11,165	11,365
Departmental expenses		-	318	134	52	52
Department of Veterans' Affairs						
Administered expenses		-	92	104	126	117
General Practice Education and Training Limited						
Departmental expenses		-	19,100	24,924	32,326	32,843
Medicare Australia						
Departmental expenses		-	132	171	222	224
Total		-	26,370	34,132	44,173	44,885
National Health and Hospitals Network - Workforce - more places on the General Practice Training Program						
Department of Health and Ageing						
Administered expenses	2.2	-	-	6,459	27,438	58,176
	3.1	-	-	9,390	39,499	82,990
	5.4	-	-	833	3,500	7,347
	12.1	-	617	2,554	5,893	10,018
Department of Veterans' Affairs						
Administered expenses		-	-	186	716	1,375
General Practice Education and Training Limited						
Departmental expenses		-	2,640	11,084	25,962	44,841
Medicare Australia						
Departmental expenses		-	-	246	1,033	2,149
Total		-	3,257	30,752	104,041	206,896
National Health and Hospitals Network - Workforce - support for practice nurses						
Department of Health and Ageing						
Administered expenses	3.1	-	-	(53,676)	(116,697)	(126,857)
	5.2	-	221	142,646	301,135	328,958
	5.4	-	-	(22,389)	(43,774)	(40,800)
Departmental expenses		-	106	86	28	28
Department of Veterans' Affairs						
Administered expenses		-	-	2,972	6,102	6,254
Departmental expenses		-	-	469	118	119
Medicare						
Departmental expenses		-	2,139	542	715	474
Departmental capital		-	1,383	-	-	-
Total		-	3,849	70,650	147,627	168,176

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Port Augusta Magnetic Resonance Imaging Unit - discontinuation						
Department of Health and Ageing						
	Administered expenses	3.1	(1,200)	(1,200)	(1,200)	(1,200)
Total		-	(1,200)	(1,200)	(1,200)	(1,200)
Outcome 4: Aged Care and Population Ageing						
Aged Care Assessments - Improving Access and Entry - continuation of funding						
Department of Health and Ageing						
	Administered expenses	4.1	-	-	-	-
		4.4	-	-	-	-
	Departmental expenses	-	-	-	-	-
Total		-	-	-	-	-
Aged Care - meeting demand for high-level aged care						
Department of Health and Ageing						
	Administered expenses	4.7	65,209	80,013	70,409	59,071
		4.8	(43,566)	(69,530)	(66,244)	(60,670)
Department of Veterans' Affairs						
	Administered expenses	-	(7,930)	(12,657)	(12,059)	(11,044)
Total		-	13,713	(2,174)	(7,894)	(12,643)
Aged Care Assessment Teams - continuation of funding						
Department of Health and Ageing						
	Administered expenses	4.1	-	-	-	-
	Departmental expenses	-	-	-	-	-
Department of Treasury						
	Administered expenses	-	-	-	-	-
Total		-	-	-	-	-
National Health and Hospitals Network - Aged Care - expand access to multi-purpose services						
Department of Health and Ageing						
	Administered expenses	4.7	50,000	35,000	35,000	-
	Departmental expenses	-	657	544	548	280
Total		-	50,657	35,544	35,548	280
National Health and Hospitals Network - Aged Care - expansion of zero real interest loans						
Department of Health and Ageing						
	Administered expenses	4.8	71,607	71,607	-	-
	Departmental expenses	-	525	529	355	358
Total		-	72,132	72,136	355	358
National Health and Hospitals Network - Aged Care - improving the viability of community care providers						
Department of Health and Ageing						
	Administered expenses	4.4	1,641	1,723	1,797	1,887
		4.5	303	321	326	332
		4.7	386	429	451	457
Total		-	2,330	2,473	2,574	2,676

Department
Resources

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - Aged Care - increasing business efficiency						
Department of Health and Ageing						
Administered expenses	4.3	-	-	1,778	1,807	1,836
Departmental expenses		-	304	295	368	371
Departmental capital		-	250	-	-	-
Total		-	554	2,073	2,175	2,207
National Health and Hospitals Network - Aged Care - one-stop shops						
Department of Health and Ageing						
Administered expenses	4.3	-	-	1,176	5,161	5,244
Departmental expenses		-	3,192	1,348	154	143
Departmental capital		-	20,000	-	-	-
Department of Finance and Deregulation						
Departmental expenses		-	100	100	100	100
Total		-	23,292	2,624	5,415	5,487
National Health and Hospitals Network - Aged Care - protecting savings						
Department of Health and Ageing						
Administered expenses	4.3	-	1,577	1,237	1,298	1,360
Departmental expenses		-	3,723	3,850	3,876	3,902
Departmental capital		-	1,000	-	-	-
Total		-	6,300	5,087	5,174	5,262
National Health and Hospitals Network - Aged Care - Reform of Roles and Responsibilities - Home and Community Care and related programs						
Department of Health and Ageing						
Administered expenses	4.3	-	3,620	4,068	-	-
Departmental expenses		-	3,398	1,346	-	-
Departmental capital		-	12,000	-	13,844	-
Total		-	19,018	5,414	13,844	-
National Health and Hospitals Network - Aged Care - strengthening arrangements for complaints						
Department of Health and Ageing						
Departmental expenses		-	9,571	11,902	12,688	13,690
Aged Care Standards and Accreditation Agency						
Departmental expenses		-	517	668	741	818
Total		-	10,088	12,570	13,429	14,508
National Health and Hospitals Network - Aged Care - supporting long stay older patients						
Department of Health and Ageing						
Administered expenses	4.7	-	-	105,937	92,337	78,155
	4.8	-	-	(105,937)	(92,337)	(78,155)
Departmental expenses		-	977	974	391	394
Total		-	977	974	391	394

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - rebalancing financial responsibility in the federation					
Department of Health and Ageing					
Administered expenses 4.4	-	-	321,110	356,695	384,023
Department of the Treasury					
Administered expenses	-	-	(38,110)	(61,695)	(77,023)
Expense Total	-	-	283,000	295,000	307,000
Department of Health and Ageing					
Administered revenues	-	-	283,000	295,000	307,000
Revenue Total	-	-	283,000	295,000	307,000
National Health and Hospitals Network - Workforce - training and education incentive payments					
Department of Health and Ageing					
Administered expenses 4.2	-	11,194	14,186	16,867	17,249
Departmental expenses	-	142	100	101	101
Total	-	11,336	14,286	16,968	17,350
National Health and Hospitals Network - Workforce - research into aged care staffing levels					
Department of Health and Ageing					
Administered expenses 4.3	-	250	254	-	-
Total	-	250	254	-	-
National Health and Hospitals Network - Workforce - supporting a professional aged care workforce					
Department of Health and Ageing					
Administered expenses 4.2	-	-	-	-	-
Departmental expenses	-	-	-	-	-
Total	-	-	-	-	-
National Health and Hospitals Network - Workforce - nurse practitioners					
Department of Health and Ageing					
Administered expenses 4.2	-	2,019	6,693	6,243	3,294
Departmental expenses	-	99	100	101	101
Total	-	2,118	6,793	6,344	3,395
National Health and Hospitals Network - Workforce - building nursing careers					
Department of Health and Ageing					
Administered expenses 4.2	-	1,579	4,757	6,919	7,551
Departmental expenses	-	42	43	43	43
Total	-	1,621	4,800	6,962	7,594

Department
Resources

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Outcome 5: Primary Care						
Addressing Domestic Violence - continuing training for health workers in regional and rural areas						
Department of Health and Ageing						
Administered expenses	5.2	-	-	-	-	-
	5.4	-	-	-	-	-
Departmental expenses		-	-	-	-	-
Medicare Australia						
Departmental expenses		-	-	-	-	-
Total		-	-	-	-	-
Department of Health and Ageing Grant Programs - reprioritisation						
Department of Health and Ageing						
Administered expenses	1.1	-	(80)	(162)	(249)	(252)
	1.3	-	(3,021)	(4,323)	(4,674)	(4,680)
	3.3	-	(150)	(700)	(1,250)	(2,600)
	3.4	-	(677)	(881)	(731)	(610)
	5.1	-	(170)	(39)	(40)	(40)
	5.2	-	(2,064)	(2,050)	(2,104)	(2,140)
	5.3	-	(13)	(13)	(14)	(10)
	7.1	-	(1,510)	(2,320)	(2,950)	(4,731)
	10.1	-	(246)	(250)	(254)	(260)
	12.2	-	(5,299)	(7,682)	(12,766)	(15,877)
	14.1	-	(107)	(218)	(330)	(336)
Total		-	(13,337)	(18,638)	(25,362)	(31,536)
National Health and Hospitals Network - Aged Care - improving access to general practice and primary health care						
Department of Health and Ageing						
Administered expenses	5.2	-	12,992	13,776	34,687	34,063
Departmental expenses		-	391	288	466	465
Medicare Australia						
Departmental expenses		224	487	183	139	50
Departmental capital		-	254	88	-	-
Total		224	14,124	14,335	35,292	34,578
National Health and Hospitals Network - General Practice and Primary Care - improved primary care infrastructure						
Department of Health and Ageing						
Administered expenses	5.2	-	55,873	178,287	118,710	-
Departmental expenses		-	876	1,066	357	-
Total		-	56,749	179,353	119,067	-

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - General Practice and Primary Care - coordinated diabetes care						
Department of Health and Ageing						
Administered expenses	3.1	-	-	-	(139,971)	(197,415)
	5.2	-	2,626	4,142	9,053	8,107
	5.4	-	-	4,151	309,296	431,117
Departmental expenses		-	1,684	1,494	863	869
Department of Veterans' Affairs						
Administered expenses		-	-	-	590	700
Departmental expenses		-	68	128	137	59
Medicare Australia						
Departmental expenses		-	1,308	2,051	3,257	3,573
Departmental capital		-	-	1,319	-	-
Total		-	5,686	13,285	183,225	247,010
National Health and Hospitals Network - General Practice and Primary Care - establishing Medicare Locals and improving access to after hours primary care						
Department of Health and Ageing						
Administered expenses	5.2	-	12,464	94,269	177,441	236,063
	5.4	-	-	(28,491)	(21,368)	(56,356)
Departmental expenses		-	910	808	36	36
Medicare Australia						
Departmental expenses		-	592	40	388	-
Total		-	13,966	66,626	156,497	179,743
National Health and Hospitals Network - Mental Health - additional mental health nurses						
Department of Health and Ageing						
Administered expenses	5.2	-	(18,201)	(18,591)	(18,925)	(19,267)
	12.2	-	23,500	26,273	18,925	19,267
Total		-	5,299	7,682	-	-
National Health and Hospitals Network - Workforce - more places on the General Practice Training Program						
Department of Health and Ageing						
Administered expenses	2.2	-	-	6,459	27,438	58,176
	3.1	-	-	9,390	39,499	82,990
	5.4	-	-	833	3,500	7,347
	12.1	-	617	2,554	5,893	10,018
Department of Veterans' Affairs						
Administered expenses		-	-	186	716	1,375
General Practice Education and Training Limited						
Departmental expenses		-	2,640	11,084	25,962	44,841
Medicare Australia						
Departmental expenses		-	-	246	1,033	2,149
Total		-	3,257	30,752	104,041	206,896

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - Workforce - support for practice nurses						
Department of Health and Ageing						
Administered expenses	3.1	-	-	(53,676)	(116,697)	(126,857)
	5.2	-	221	142,646	301,135	328,958
	5.4	-	-	(22,389)	(43,774)	(40,800)
Departmental expenses		-	106	86	28	28
Department of Veterans' Affairs						
Administered expenses		-	-	2,972	6,102	6,254
Departmental expenses		-	-	469	118	119
Medicare						
Departmental expenses		-	2,139	542	715	474
Departmental capital		-	1,383	-	-	-
Total		-	3,849	70,650	147,627	168,176
Practice Incentives Program - changes to incentive payments for cervical cancer screening						
Department of Health and Ageing						
Administered expenses	5.4	-	-	(7,963)	(7,856)	(8,032)
Medicare Australia						
Departmental expenses		-	283	9	-	-
Departmental capital		-	92	-	-	-
Total		-	375	(7,954)	(7,856)	(8,032)
Outcome 6: Rural Health						
COAG Health Services - Aligning Services in Rural and Remote Areas - more efficient arrangements						
Department of Health and Ageing						
Departmental expenses		-	(2,072)	(2,087)	(2,106)	(2,125)
Total		-	(2,072)	(2,087)	(2,106)	(2,125)
Rural Health - additional funding for cataract surgery						
Department of Health and Ageing						
Administered expenses	6.1	-	1,012	1,086	1,295	1,560
Total		-	1,012	1,086	1,295	1,560

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000	
Outcome 7: Hearing Services						
Department of Health and Ageing Grant Programs - reprioritisation						
Department of Health and Ageing						
Administered expenses						
1.1	-	(80)	(162)	(249)	(252)	
1.3	-	(3,021)	(4,323)	(4,674)	(4,680)	
3.3	-	(150)	(700)	(1,250)	(2,600)	
3.4	-	(677)	(881)	(731)	(610)	
5.1	-	(170)	(39)	(40)	(40)	
5.2	-	(2,064)	(2,050)	(2,104)	(2,140)	
5.3	-	(13)	(13)	(14)	(10)	
7.1	-	(1,510)	(2,320)	(2,950)	(4,731)	
10.1	-	(246)	(250)	(254)	(260)	
12.2	-	(5,299)	(7,682)	(12,766)	(15,877)	
14.1	-	(107)	(218)	(330)	(336)	
Total	-	(13,337)	(18,638)	(25,362)	(31,536)	
Outcome 8: Indigenous Health						
Combating Petrol Sniffing - expanding the supply and uptake of Opal fuel						
Department of Health and Ageing						
Administered expenses	8.1	-	5,210	7,444	11,513	11,661
Departmental expenses		-	781	715	616	561
Total		-	5,991	8,159	12,129	12,222
Outcome 9: Private Health						
Private Health Insurance - supporting lifetime health cover						
Department of Health and Ageing						
Administered expenses	9.1	-	85	85	85	85
Departmental expenses		-	252	253	255	257
Medicare Australia						
Departmental expenses		-	217	219	220	222
Expense Total		-	554	557	560	564
Administered revenues		-	554	557	560	564
Revenue Total		-	554	557	560	564
OUTCOME 10: Health System Capacity and Quality						
Bernie Banton Foundation - donation						
Department of Health and Ageing						
Administered expenses	10.6	-	-	-	-	-
Departmental expenses		-	-	-	-	-
Total		-	-	-	-	-

Department Resources

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Department of Health and Ageing Grant Programs - reprioritisation						
Department of Health and Ageing						
Administered expenses	1.1	-	(80)	(162)	(249)	(252)
	1.3	-	(3,021)	(4,323)	(4,674)	(4,680)
	3.3	-	(150)	(700)	(1,250)	(2,600)
	3.4	-	(677)	(881)	(731)	(610)
	5.1	-	(170)	(39)	(40)	(40)
	5.2	-	(2,064)	(2,050)	(2,104)	(2,140)
	5.3	-	(13)	(13)	(14)	(10)
	7.1	-	(1,510)	(2,320)	(2,950)	(4,731)
	10.1	-	(246)	(250)	(254)	(260)
	12.2	-	(5,299)	(7,682)	(12,766)	(15,877)
	14.1	-	(107)	(218)	(330)	(336)
Total		-	(13,337)	(18,638)	(25,362)	(31,536)
Jigsaw Foundation - support for craniofacial surgery						
Department of Health and Ageing						
Administered expenses	10.6	-	1,250	1,250	1,250	1,250
Total		-	1,250	1,250	1,250	1,250
National Health and Hospitals Network - eHealth - personally controlled electronic health records						
Department of Health and Ageing						
Administered expenses	10.2	-	181,334	278,292	-	-
Departmental expenses		-	4,236	2,868	-	-
Total		-	185,570	281,160	-	-
National Health and Hospitals Network - expansion of the Australian Commission on Safety and Quality in Health Care						
Department of Health and Ageing						
Administered expenses	10.6	-	-	6,348	10,770	11,869
Departmental expenses		-	677	852	858	865
National Health and Medical Research Council						
Departmental expenses		-	-	994	1,001	1,008
Total		-	677	8,194	12,629	13,742
Western Australia's Children's Health Telethon - donation						
Department of Health and Ageing						
Administered expenses	10.6	-	-	-	-	-
Departmental expenses		-	-	-	-	-
Total		-	-	-	-	-

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
OUTCOME 11: Mental Health					
National Health and Hospitals Network - Mental Health - expanding the Early Psychosis Prevention and Intervention Centre model					
Department of Health and Ageing					
Administered expenses	11.1	- 315	320	325	330
Departmental expenses		- 275	139	140	141
Department of Treasury					
Administered expenses		- 5,885	5,885	5,885	5,885
Total		- 6,475	6,344	6,350	6,356
National Health and Hospitals Network - Mental Health - flexible care packages for patients with severe mental illnesses					
Department of Health and Ageing					
Administered expenses	3.1	- (10,650)	(11,563)	(14,295)	(15,889)
	11.1	- 7,250	16,342	16,587	17,219
Departmental expenses		- 369	371	230	116
Medicare Australia					
Departmental expenses		56 57	(36)	(122)	(136)
Total		56 (2,974)	5,114	2,400	1,310
National Health and Hospitals Network - Mental Health - more youth friendly services					
Department of Health and Ageing					
Administered expenses	11.1	- 10,670	19,730	23,659	24,248
Departmental expenses		- 137	173	109	66
Total		- 10,807	19,903	23,768	24,314
OUTCOME 12: Health Workforce Capacity					
Department of Health and Ageing Grant Programs - reprioritisation					
Department of Health and Ageing					
Administered expenses	1.1	- (80)	(162)	(249)	(252)
	1.3	- (3,021)	(4,323)	(4,674)	(4,680)
	3.3	- (150)	(700)	(1,250)	(2,600)
	3.4	- (677)	(881)	(731)	(610)
	5.1	- (170)	(39)	(40)	(40)
	5.2	- (2,064)	(2,050)	(2,104)	(2,140)
	5.3	- (13)	(13)	(14)	(10)
	7.1	- (1,510)	(2,320)	(2,950)	(4,731)
	10.1	- (246)	(250)	(254)	(260)
	12.2	- (5,299)	(7,682)	(12,766)	(15,877)
	14.1	- (107)	(218)	(330)	(336)
Total		- (13,337)	(18,638)	(25,362)	(31,536)

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Health Workforce - Supporting Nurses Back into the Workforce - redirection of funding						
Department of Health and Ageing						
Administered expenses	12.2	-	(1,324)	(2,209)	(2,451)	(1,575)
Department of Treasury						
Administered expenses		-	(6,643)	(8,839)	(9,808)	(6,300)
Total		-	(7,967)	(11,048)	(12,259)	(7,875)
National Health and Hospitals Network - Mental Health - additional mental health nurses						
Department of Health and Ageing						
Administered expenses	5.2	-	(18,201)	(18,591)	(18,925)	(19,267)
	12.2	-	23,500	26,273	18,925	19,267
Total		-	5,299	7,682	-	-
National Health and Hospitals Network - Workforce - expanding clinical placement scholarships for allied health students						
Department of Health and Ageing						
Administered expenses	12.2	-	1,500	1,524	1,548	1,573
Departmental expenses		-	103	102	68	70
Total		-	1,603	1,626	1,616	1,643
National Health and Hospitals Network - Workforce - exploring regulation of the personal care workforce						
Department of Health and Ageing						
Administered expenses	12.2	-	1,000	1,500	800	-
Departmental expenses		-	142	36	36	-
Total		-	1,142	1,536	836	-
National Health and Hospitals Network - Workforce - rural locum scheme for allied health professionals						
Department of Health and Ageing						
Administered expenses	12.1	-	1,178	1,197	1,216	1,235
Departmental expenses		-	239	102	55	56
Total		-	1,417	1,299	1,271	1,291
National Health and Hospitals Network - Workforce - rural locum scheme for nurses						
Department of Health and Ageing						
Administered expenses	12.1	-	7,660	6,767	6,875	6,985
Departmental expenses		-	238	136	69	69
Total		-	7,898	6,903	6,944	7,054
National Health and Hospitals Network - Workforce - training specialist doctors						
Department of Health and Ageing						
Administered expenses	12.2	-	13,700	28,654	43,228	58,291
Departmental expenses		-	272	128	130	66
Total		-	13,972	28,782	43,358	58,357

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - Workforce - more places on the General Practice Training Program					
Department of Health and Ageing					
Administered expenses	2.2	-	6,459	27,438	58,176
	3.1	-	9,390	39,499	82,990
	5.4	-	833	3,500	7,347
	12.1	617	2,554	5,893	10,018
Department of Veterans' Affairs					
Administered expenses	-	-	186	716	1,375
General Practice Education and Training Limited					
Departmental expenses	-	2,640	11,084	25,962	44,841
Medicare Australia					
Departmental expenses	-	-	246	1,033	2,149
Total	-	3,257	30,752	104,041	206,896
OUTCOME 13: Acute Care					
Blood Products - assessing new listings					
Department of Health and Ageing					
Administered expenses	13.1	700	407	414	422
Departmental expenses	-	473	476	81	82
Total	-	1,173	883	495	504
National Cord Blood Collection Network - continuation and increased funding					
Department of Health and Ageing					
Administered expenses	13.1	5,584	3,899	3,969	4,040
Departmental expenses	-	148	149	150	151
Total	-	5,732	4,048	4,119	4,191
National Health and Hospitals Network - Building the Foundations for Reform - information and awareness					
Department of Health and Ageing					
Administered expenses	13.3	9,666	17,000	633	74
Departmental expenses	-	268	1,286	425	141
Total	-	9,934	18,286	1,058	215
National Health and Hospitals Network - Independent Hospital Pricing Authority					
Department of Health and Ageing					
Administered expenses	13.3	1,796	29,902	26,827	26,123
Departmental expenses	-	2,051	1,911	1,661	1,543
Total	-	3,847	31,813	28,488	27,666
National Health and Hospitals Network - National Performance Authority					
Department of Health and Ageing					
Administered expenses	13.3	17,684	22,911	29,720	33,609
Departmental expenses	-	4,640	702	(325)	584
Total	-	22,324	23,613	29,395	34,193

Department Resources

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

	Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
National Health and Hospitals Network - Hospitals - activity based funding						
Department of Health and Ageing						
Departmental expenses	13.3	-	1,578	2,228	19,111	17,447
Departmental capital		-	66,039	35,781	4,499	16,319
Department of Finance and Deregulation						
Departmental expenses		50	80	90	90	90
Total		50	67,697	38,099	23,700	33,856
National Health and Hospitals Network - Hospitals - four hour national access target for emergency departments - capital funding						
Department of Health and Ageing						
Departmental expenses	13.3	-	417	407	306	236
Department of Treasury						
Administered expenses		100,000	50,000	50,000	50,000	-
Total		100,000	50,417	50,407	50,306	236
National Health and Hospitals Network - Hospitals - four hour national access target for emergency departments - facilitation and reward funding						
Department of Health and Ageing						
Departmental expenses	13.3	-	544	464	421	424
Department of Treasury						
Administered expenses		-	150,000	100,000	100,000	150,000
Total		-	150,544	100,464	100,421	150,424
National Health and Hospitals Network - Hospitals - flexible funding for emergency departments, elective surgery and sub-acute care						
Department of Health and Ageing						
Departmental expenses	13.3	-	175	176	59	-
Department of Treasury						
Administered expenses		125,000	25,000	25,000	25,000	-
Total		125,000	25,175	25,176	25,059	-
National Health and Hospitals Network - Hospitals - improving access to elective surgery - facilitation and reward funding						
Department of Health and Ageing						
Departmental expenses	13.3	-	620	624	511	515
Department of Treasury						
Administered expenses		-	300,000	118,000	116,000	116,000
Total		-	300,620	118,624	116,511	116,515
National Health and Hospitals Network - Hospitals - improving access to elective surgery - capital funding						
Department of Health and Ageing						
Departmental expenses	13.3	-	362	364	-	-
Department of Treasury						
Administered expenses		75,000	50,000	25,000	-	-
Total		75,000	50,362	25,364	-	-

Section 1 – Department Overview and Resources

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000	
National Health and Hospitals Network - Hospitals - new sub-acute hospital beds						
Department of Health and Ageing						
Departmental expenses	13.3	-	655	575	508	375
Department of Treasury						
Administered expenses	-	233,600	317,600	446,600	625,500	
Total	-	234,255	318,175	447,108	625,875	
Outcome 14: Biosecurity and Emergency Response						
Department of Health and Ageing Grant Programs - reprioritisation						
Department of Health and Ageing						
Administered expenses	1.1	-	(80)	(162)	(249)	(252)
	1.3	-	(3,021)	(4,323)	(4,674)	(4,680)
	3.3	-	(150)	(700)	(1,250)	(2,600)
	3.4	-	(677)	(881)	(731)	(610)
	5.1	-	(170)	(39)	(40)	(40)
	5.2	-	(2,064)	(2,050)	(2,104)	(2,140)
	5.3	-	(13)	(13)	(14)	(10)
	7.1	-	(1,510)	(2,320)	(2,950)	(4,731)
	10.1	-	(246)	(250)	(254)	(260)
	12.2	-	(5,299)	(7,682)	(12,766)	(15,877)
	14.1	-	(107)	(218)	(330)	(336)
Total	-	-	(13,337)	(18,638)	(25,362)	(31,536)
National Medical Stockpile - replenishment						
Department of Health and Ageing						
Administered expenses	14.1	-	890	-	-	-
Administered capital	-	-	37,300	-	-	-
Total	-	-	38,190	-	-	-
Outcome 15: Sport Performance and Participation						
Penrith Valley Sports Hub - contribution						
Department of Health and Ageing						
Administered expenses	15.1	-	1,000	-	-	-
Total	-	-	1,000	-	-	-
Other Portfolio and Whole of Government Measures						
Drought Assistance - Exceptional Circumstances assistance for small business <i>(Department of Agriculture, Fisheries and Forestry)</i>						
Department of Health and Ageing						
Administered expenses	2.2	31	157	-	-	-
Total	-	31	157	-	-	-
Drought Assistance - Exceptional Circumstances assistance for primary producers <i>(Department of Agriculture, Fisheries and Forestry)</i>						
Department of Health and Ageing						
Administered expenses	2.2	458	2,366	-	-	-
Total	-	458	2,366	-	-	-

Budget Statements – Department of Health and Ageing

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000
Drought Assistance - Mental Health Support for Drought-Affected Communities					
Program - extension (<i>Department of Agriculture, Fisheries and Forestry</i>)					
Department of Health and Ageing					
Administered expenses	11.1	5,326	-	-	-
Departmental expenses	-	139	-	-	-
Total	-	5,465	-	-	-
Drought Policy Reform - pilot of new measures in Western Australia					
<i>(Department of Agriculture, Fisheries and Forestry)</i>					
Department of Health and Ageing					
Administered expenses	2.2	44	-	-	-
	11.1	777	-	-	-
Departmental expenses	-	78	-	-	-
Total	-	899	-	-	-
Clarke Review - lower the age to establish domicile to under 21 years for British Commonwealth and Allied veterans (<i>Department of Veterans' Affairs</i>)					
Department of Health and Ageing					
Administered expenses	2.2	(9)	(10)	(10)	(10)
	3.1	(9)	(10)	(11)	(12)
Total	-	(18)	(20)	(21)	(22)
Clarke Review - reclassify submarine special operations that were conducted in the period 1978 to 1992 as warlike service (<i>Department of Veterans' Affairs</i>)					
Department of Health and Ageing					
Administered expenses	2.2	(20)	(23)	(23)	(24)
	3.1	(19)	(21)	(22)	(24)
Total	-	(39)	(44)	(45)	(48)
Clarke Review - provide Australian Defence Force British nuclear test participants with compensation equivalent to non-warlike or hazardous service (<i>Department of Veterans' Affairs</i>)					
Department of Health and Ageing					
Administered expenses	2.2	(286)	(330)	(362)	(395)
	3.1	(270)	(309)	(347)	(386)
Total	-	(556)	(639)	(709)	(781)
Extend qualifying service to service in Ubon for the period 31 May 1962 to 27 July 1962 (<i>Department of Veterans' Affairs</i>)					
Department of Health and Ageing					
Administered expenses	2.2	(43)	(55)	(55)	(59)
	3.1	(52)	(60)	(67)	(71)
Total	-	(95)	(115)	(122)	(130)

Table 1.3.1: Department of Health and Ageing Budget Measures (cont.)

Program	2009-10 \$'000	2010-11 \$'000	2011-12 \$'000	2012-13 \$'000	2013-14 \$'000	
F-111 Deseal/Reseal maintenance workers - further support (<i>Department of Veterans' Affairs</i>)						
Department of Health and Ageing						
Administered expenses	3.1	(14)	(325)	(416)	(505)	(526)
Total		(14)	(325)	(416)	(505)	(526)
War Widow/er pension - removal of entitlement for new claimants who enter a de facto relationship (<i>Department of Veterans' Affairs</i>)						
Department of Health and Ageing						
Administered expenses	2.2	-	2	6	10	15
	3.1	-	3	7	11	16
Total		-	5	13	21	31
Stronger, fairer, simpler tax reform - standard deduction for work-related expenses and the cost of managing tax affairs (<i>Department of the Treasury</i>)						
Department of Health and Ageing						
Administered expenses	2.2	-	-	-	-	199
	3.1	-	-	-	537	1,463
Total		-	-	-	537	1,662
Stronger, fairer, simpler tax reform - 50 per cent discount for interest income (<i>Department of the Treasury</i>)						
Department of Health and Ageing						
Administered expenses	2.2	-	-	-	1,363	1,382
	3.1	-	-	343	1,098	1,760
Total		-	-	343	2,461	3,142

Prepared on a Government Financial Statistics (fiscal) basis.

