



**Senator the Hon Fiona Nash
ASSISTANT MINISTER FOR HEALTH**

MEDIA RELEASE

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Minister Reaffirms Commitment to Closing The Gap

Assistant Minister for Health Fiona Nash today met with Indigenous health stakeholders, including the National Aboriginal Community Controlled Health Organisation and state and territory peak bodies.

Minister Nash has reaffirmed the Federal Government's commitment to closing the gap in health outcomes between Aboriginal and Torres Strait Islanders and non-Indigenous Australians.

Minister Nash said to close the gap it is imperative we work collaboratively to continue joint efforts to improve Indigenous health outcomes.

Almost \$1 billion dollars will be spent by the Australian Government next financial year on Indigenous health programmes, Medicare and Pharmaceutical Benefits Scheme items for Aboriginal and Torres Strait Islander people.

“Overall funding for Indigenous health will continue to grow over the next four years.

“Core front-line primary health care services have not been affected,” Minister Nash said.

Over the next four years from 2014-15 to 2017-18, the Government will invest \$3.1 billion in Indigenous specific health programmes and activities.

This is an increase of over \$500 million compared to 2009-10 to 2012-13.

“The Government is committed to the development of more sustainable and viable services. It will expand activity in the key areas of child and maternal health, and improved chronic disease prevention and management.”

“These are key priority areas to close the gap and achieve health equality between Indigenous and non-Indigenous Australians.”

\$94 million will be invested to expand efforts to improve child and maternal health through Better Start to Life announced in the Budget.

In addition, \$36.2 million will expand the Healthy for Life programme into a further 32 Aboriginal community controlled health organisations to improve management of chronic disease.

“We are expanding our investment in programmes that have demonstrated their effectiveness and where we are seeing a direct improvement in health outcomes - we want to ensure the dollars spent are making a real difference on the ground.”

Minister Nash met today with key stakeholders to hear views in relation to the Budget and particularly the co-payment measure, which will not come into effect until 1 July 2015.

“I am meeting with key stakeholders to ensure concerns being raised can be considered and constructively worked through over the next 14 months.”

Minister Nash said the Government was determined to put Australia’s health system on a sustainable footing while also ensuring vulnerable people who need frequent care were appropriately supported.

“There are 97 Medicare Benefits Schedule GP items that are exempt from the co-payment measure. These include key items that support the management of chronic disease and health checks.”

“Further, the \$7 contribution, which starts 1 July 2015, is capped at 10 payments per year for concession card holders and children under the age of 16. These 10 payments can be made up of any mix of relevant GP, pathology and diagnostic imaging services.

“That means the eleventh and every subsequent visit to an Aboriginal Medical Service or other service, including pathology and diagnostic imaging, reverts to normal bulk-billing arrangements.”

Minister Nash said the Australian Government would continue to consult with key stakeholders, including Aboriginal Community Controlled Health Organisations, to inform the implementation of Budget measures.

“The Government recognises that while some improvements in Indigenous health outcomes have been achieved over recent years, there is still a long way to go to close the gap between the health and life expectancy of Aboriginal and Torres Strait Islander people and non-Indigenous Australians.”

“The role that Aboriginal Community Controlled Health Organisations continue to play in the delivery of health services to Aboriginal and Torres Strait Islander people is therefore vital.”

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