



2024–25 BUDGET COMMUNICATION PACK

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MEDIA RELEASE

MINISTER MARK BUTLER
MINISTER FOR HEALTH AND AGED CARE

CHEAPER MEDICINES, NEW MEDICARE URGENT CARE CLINICS AND MORE FREE MENTAL HEALTH SERVICES IN A STRONGER MEDICARE

The Albanese Labor Government is continuing to improve our health system: strengthening Medicare, the heart of universal healthcare, easing cost-of-living pressures with cheaper medicines, and embedding new mental health services in Medicare.

Our first Budgets rolled out 58 Medicare Urgent Care Clinics. This Budget adds a further 29 Medicare Urgent Care Clinics, investing \$227.0 million so more Australians in more locations can walk in and get the urgent care they need - fully bulk-billed - without waiting hours in busy hospital emergency departments.

Our first Budgets made medicines cheaper, with lower co-payments and 60-day prescriptions already saving Australians more than \$370 million. The Government has committed up to an additional \$3 billion for an Eighth Community Pharmacy Agreement to strengthen community pharmacies and keep medicines cheaper. The Government will deliver a one-year freeze on the maximum co-payment for a PBS prescription for everyone with a Medicare card and up to a five-year freeze for pensioners and other Commonwealth concession cardholders. So medicines stay cheaper, instead of rising with inflation.

Our first Budgets took pressure off hospitals by making it easier to see a doctor, with the largest investment in bulk billing in the 40-year history of Medicare. This Budget delivers \$882.2 million to ensure that older Australians get the medical support they need in a safe and comfortable environment when they don't need to stay in hospital, while freeing up beds for other patients who do.

This comes on top of the Albanese Government's commitment to significantly increase funding for public hospitals from 2025. Health Ministers have commenced negotiating the new National Health Reform Agreement Addendum to give Australians better access to healthcare services they need, when they need them, and alleviate current pressures in public hospitals across the country. The Australian Government will provide more funding to state public hospitals from 2025-2030, increasing the Commonwealth contribution to the cost of care to 45 per cent, from around 40 per cent, over the next 10 years.

Overall spending on health and aged care in 2024-25 is \$146.1 billion, with a five-year commitment to invest \$10.7 billion, including \$8.5 billion in health and \$2.2 billion in aged care. This includes investments to strengthen Medicare (\$2.8 billion), deliver cheaper medicines (\$4.3 billion) and invest in a fit and healthy

Australia (\$1.3 billion).

Strengthening Medicare

The Albanese Government is strengthening Medicare with more Medicare Urgent Care Clinics, more free mental health services, higher Medicare rebates for many common medical tests, and over \$160 million for a women's health package:

- **\$227.0 million to grow the number of Medicare Urgent Care Clinics to 87.** A boost in funding will allow for more patients to get urgent care from a doctor or nurse, and take pressure off busy hospital emergency departments.
- **\$882.2 million to take pressure off hospitals,** by ensuring that older Australians get the medical support they need in a safe and comfortable environment when they don't need to stay in hospital, while freeing up beds for other patients who do. Funding will support states and territories to provide hospital outreach in the community, deliver virtual care to prevent avoidable hospitalisations and upskill the residential aged care workforce.
- **\$361.0 million over four years to expand the range of free mental health services,** so that Australians get the right level of care for their level of need.
 - Launching a new national early intervention service to ensure people can access support before their distress escalates to needing higher intensity services like a mental health treatment plan, acute in-patient service or crisis line.
 - Providing free mental health services through a network of 61 walk-in Medicare Mental Health Centres, building on the established Head to Health network. They will have their clinical capability upgraded to ensure every centre has psychiatrists, psychologists and GPs on call.
 - Funding Primary Health Networks, in partnership with general practices, to bring on mental health nurses and other allied health supports to provide free care coordination and support to patients with complex needs, in between GP and specialist appointments.

Whether in person, over the phone or on a device, at a free walk-in centre or from the comfort of your bedroom, we are expanding the ways Australians can get mental health care. This will help people get the care they need at every stage of distress, while relieving the pressure on the current Better Access scheme to be all things to all people, which in turn will make it easier for Australians who need a psychologist to get in to see one.

- **\$69.8 million to increase the number of Medicare eligible MRI machines.** Every single practice with MRI equipment will be able to provide Medicare funded services, almost tripling the number of fully Medicare eligible MRIs since we came to government, from 227 machines to 620 machines.
- **\$266.9 million so Medicare rebates rise each year for nuclear medicine imaging and many common medical tests,** which means more funding for the tests that matter, to reduce waiting times, catch health problems sooner, and prevent patients from having to settle for less appropriate tests.
- **\$91.1 million to boost the supply of healthcare in areas of shortage.** Primary Health Networks will support health services at risk of closing, the iconic Royal Flying Doctor Service will deliver its health and dental services across outback Australia.

Cheaper medicines

The Albanese Government is delivering cheaper medicines to ease pressure on household budgets, freezing the maximum cost of a PBS medicine, making Australia a destination for clinical trials so Australians get early access to life-changing medicines, and adding more medicines to the PBS.

- **\$469.1 million to reduce patient costs and improve access to medicines**, with more funding for Dose Administration Aids and a one-year freeze on the maximum co-payment of a PBS prescription for everyone with a Medicare card and a five-year freeze for pensioners and other concession cardholders. So medicines stay cheaper, instead of rising with inflation.
- **\$3.4 billion to list new medicines on the PBS**, including for four thousand eight hundred Australians with cardiac disease that will benefit from the listing of Tafamidis (Vyndamax®) and mavacamten (Camzyos®). Without subsidy, patients could expect to pay \$122,000 or \$30,000 a year, respectively, but instead will pay only \$31.60, or just \$7.70 for pensioners and concession cardholders.
- **\$18.8 million to make Australia a destination for clinical trials**, so Australians get early access to life-changing medicines. A national one stop shop for clinical trials will streamline the health and medical research, make it easier for patients to participate in clinical trials for emerging treatments.
- **\$1.4 billion over 13 years in ground-breaking new health and medical research** through the Medical Research Future Fund, including an additional \$411.6 million for low survival cancers and reducing health inequities.

A fit and healthy Australia

The Albanese Government is investing in a fit and healthy Australia, through new programs to address skin cancer, expanded access to free bowel cancer screening, efforts to realise Australia's goal of eliminating HIV, and a boost to sports participation from the grassroots to high performance:

- **\$25.3 million to prevent skin cancer, now and in the future.** The successful national skin cancer prevention campaign will continue to reach groups most at risk of skin cancer, including men over 40 and young adults. An investment in the Melanoma Institute Australia, led by Australians of the Year Professor Georgina Long AO and Professor Richard Scolyer AO, will see the development of a national roadmap to better skin cancer outcomes.
- **\$38.8 million to continue funding for free bowel cancer screening** under the National Bowel Cancer Screening Program. The age for free bowel cancer screening will be lowered from 50 to 45, so Australians between the age of 45 and 49 can request a screening kit.
- **\$43.9 million to work towards eliminating HIV transmission by 2030.** People with or at risk of HIV will receive better prevention, testing, and information, with the Government committed to eliminating HIV transmission by 2030. There will also be more training around HIV for the health and support workforce.
- **\$132.7 million to boost sports participation.** We're supporting grassroots community and school sport to help Australians stay fit and healthy.

Women's health

Removing the bias and barriers that hold women back in the health system will take time. That's why the

2024–25 Budget takes important next steps to build women’s health into the foundations of a stronger Medicare, with a \$49.1 million for higher Medicare rebates to see a gynaecologist for complex conditions like endometriosis, a revolutionary new medicine for breast cancer, and \$56.5 million for new Medicare services for midwives to provide longer consultations before and after the birth of a child.

In Medicare’s 40th year, the 2024–25 Budget continues to strengthen Medicare after the damage caused by nine years of cuts and neglect that began when Peter Dutton started a six-year freeze to Medicare rebates and tried to abolish bulk billing by introducing a mandatory payment on every single visit to the GP. The 2024–25 Budget extends the generational reforms to strengthen Medicare, eases cost-of-living pressures with cheaper medicines, and embeds mental health at the heart of a stronger Medicare.

TUESDAY, 14 MAY 2024

Media Contact:

Lucy Caruso 0408 803 428 | lucy.caruso@health.gov.au



JOINT MEDIA RELEASE

MINISTER MARK BUTLER
MINISTER FOR HEALTH AND AGED CARE

MINISTER ANIKA WELLS
MINISTER FOR AGED CARE
MINISTER FOR SPORT

INVESTING IN QUALITY AGED CARE

The Albanese Labor Government has worked hard to improve the quality of life for older Australians. We have put nurses back into nursing homes, given residents more time with their carers, lifted wages in the sector and improved transparency and accountability.

Since the October 2022-23 Budget, total investment in aged care has increased by 30 per cent. This includes an \$11.3 billion investment to deliver the largest one-off increase to aged care wages in history, with more increases in future.

The investments in the 2024-25 Budget continue to strengthen aged care services and create stronger links between aged care and the rest of the health system to deliver real benefits to older Australians.

Older Australians in residential aged care now receive an additional 3.6 million minutes of care every single day. There are more 4 and 5 star homes, and fewer 1 and 2 star homes.

We will enhance the capability of the regulator to ensure older Australians are in safe and quality aged care, upgrade technology systems to make the new Aged Care Act possible, and provide an additional 24,100 Home Care Packages to shorten average wait times.

The new rights-based Aged Care Act is a once-in-a-generation reform that will put older people at the centre of the aged care system and ensure those who access Government-funded aged care services are treated with respect and have the quality of life they deserve. It will also support the Government's response to the Aged Care Taskforce. Consultation is continuing on the details of the Act and the Taskforce response.

Reducing wait lists for older Australians wanting support to age at home:

The Albanese Government is investing \$531.4 million to provide an extra 24,100 Home Care Packages in 2024-25, so more Australians than ever before have the option to remain in the home and the community

they love.

Reinforcing the foundations that underpin quality care:

The Albanese Government is reinforcing the foundations that underpin high quality and safe care, by enhancing the capability of the Aged Care Quality and Safety Commission to ensure older Australians are protected, programs to attract and retain a dedicated workforce, and more than a \$1 billion dollar investment in the technology infrastructure that will make the new Aged Care Act possible and ensure current systems are maintained:

- **\$111.0 million to enhance the capability of the Aged Care Quality and Safety Commission**, in response to the recommendations of the Independent Capability Review, as well as to implement the regulatory framework that will underpin the new Aged Care Act.
- **\$88.4 million to continue to attract and retain the aged care workforce**, including to provide better staffing solutions.
- **\$1.4 billion to upgrade the technology systems and digital infrastructure** across the sector. This includes funding to sustain current systems and to support the implementation of the new Aged Care Act.

Last year, we invested \$11.3 billion to deliver fairer wages for aged care workers in support of the Fair Work Commission's 15 per cent wage increase decision. In March this year, the Fair Work Commission made a further work value decision to increase award wages for many aged care workers. We anticipate the final decision around mid-year.

Stronger connections for quality care and cheaper medicines:

The Albanese Government is delivering a stronger Medicare for older Australians, by knitting together parts of the health system that have too often lacked integration and ensuring better connections from residential aged care into public hospitals and primary care settings, like general practice or community pharmacy.

As part of the Strengthening Medicare package, older Australians will get the health care and support they need in a safe and comfortable environment when it isn't necessary for them to stay in hospital. Using hospital outreach services in the community and more virtual care services, older patients will avoid unnecessary hospital admissions and be safely discharged sooner when they are admitted.

Older people with complex care needs will be supported to move out of hospital into a residential aged care home and more short-term care will be available for older people to help them recover after a hospital stay.

- **\$882.2 million to ensure that older Australians get the medical support they need.** As part of the \$1.2 billion Strengthening Medicare package in the 2024-25 Budget, states and territories will be funded to upskill the residential aged care workforce, deliver hospital outreach services in the community, provide virtual care services, and deliver complex care for older people outside of the

hospital. \$190 million will help older Australians recover from a hospital stay with short-term care through the extended Transition Care Programme.

The measures in the 2024-25 Budget build on previous Albanese Government investments to strengthen the connection between residential aged care and the wider health system.

From 1 August 2024, people in residential aged care will be more likely to receive quality and continuous care from a general practitioner, with GPs and practices eligible to receive quarterly incentive payments, on top of Medicare rebates, to manage the health of their MyMedicare registered residents.

Older Australians are some of the highest users of PBS medicines and so have seen some of the largest benefits from the Albanese Government's commitment to cheaper medicines. In 2022-23, over 60 per cent of total PBS expenditure was towards older Australians, while through 2023, close to 240,000 older Australians in residential aged care received more than 10.7 million PBS subsidised prescriptions.

- **\$0.9 million so aged care residents have more options to receive a free vaccination.**
Community pharmacists are now paid the same fee a doctor gets to administer free vaccines to residents in aged care under the National Immunisation Program.
- **\$318 million over five years to strengthen pharmacy and keep medicines cheaper**, with up to a five-year freeze to the cost of PBS prescriptions for pensioners and Commonwealth Seniors Health Cardholders, so medicines stay cheaper, instead of rising each year with inflation, benefitting people in residential aged care homes, in particular.

Funding committed in the 2023-24 Budget will help to ensure that aged care residents are on the safest and most appropriate medication, with funding for residential aged care homes to engage a pharmacist to provide on-site advice, conduct medication reviews, and better understand individual resident needs.

Better dementia care will be delivered through a \$101.4 million investment in services and support for people living with complex care needs, as well as readying the health system for new diagnosis and treatment advances.

The investments in the 2024-25 Budget reinforce the foundations and connections that underpin quality aged care, with more Home Care Packages, more workforce support, a regulator with enhanced capabilities, and stronger links between aged care and the rest of the health system.

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Media Contacts:

Butler – Lucy Caruso 0408 803 428 | lucy.caruso@health.gov.au

Wells – Chris Garry 0472 840 665 | chris.garry@health.gov.au



BUDGET OVERVIEW

Strengthening Medicare

Boosting the number and capacity of Medicare Urgent Care Clinics, making health care more responsive and accessible for women, and ensuring mental health care meets the needs of every individual.

More Australians will have access to care for urgent, but not life-threatening, conditions. The Budget is growing the national network of Medicare Urgent Care Clinics by 29 (to a total of 87) and providing additional support for clinics located in regional, rural and remote areas (\$227m). This will help take pressure off stretched hospital emergency departments.

Using hospital outreach services in the community and more virtual care services, older Australians will get the health care and support they need in a safe and comfortable environment when it isn't necessary for them to stay in hospital, freeing up beds for other patients (\$882.2m).

A \$361 million package puts mental health at the heart of a stronger Medicare. Australians will get the right level of care for their level of need. Measures to shift away from a one-size-fits-all approach and relieve pressure on the Better Access initiative include:

- a new national early intervention service that anyone can access for free, whenever they need it (\$163.9m)
- an upgraded nationwide network of 61 Medicare Mental Health Centres to offer free, walk-in access to mental health care professionals for adults with more complex mental health needs (\$29.8m)
- funding Primary Health Networks to work in partnership with general practices to commission mental health workers to offer wraparound care for people with high needs in between medical appointments (\$71.7m)
- a new national peer workforce association will help to mobilise, professionalise and unlock the potential of this all-important workforce (\$7.1m)

Changes to MRI licencing agreements will expand access to Medicare funded services, almost tripling the number of fully Medicare eligible MRIs since 2022, from 227 to 620 machines (\$69.8m).

Medicare rebates for nuclear medicine imaging will receive a one-off boost and then rise each year to improve access and affordability (\$92.8m).

Rebates for many common pathology tests, including for infertility/pregnancy and tissue pathology, will rise each year for the first time in 25 years (\$174.1m) and COVID-19 tests will be permanently added to Medicare (\$335.7m).

Women with complex gynaecological conditions like endometriosis will benefit from 2 new Medicare rebates for longer gynaecologist consultations (\$49.1m).

Endorsed midwives will provide longer consultations under Medicare before and after the birth of a child (\$56.5m). There will be more access to professional indemnity insurance for midwives (\$3.5m) which will improve Birthing on Country services for First Nations mothers.

Free period products will be given to First Nations women and girls (\$12.5m), women going through menopause will have better treatment (\$1.2m) and there will be better support for families grieving miscarriage (\$7m).

A virtual contraception decision-making tool will support women and health practitioners providing contraceptive counselling (\$1.1m). More health practitioners will undertake training to deliver long-acting reversible contraception services (\$5.2m).

Outreach health care in women's crisis accommodation and services will be trialled to support women and children fleeing family, domestic and sexual violence (\$6m).

To boost the supply of health care in areas of shortage, the Budget provides \$17.4 million to support health services at risk of closing. Primary Health Networks and Rural Workforce Agencies will work with local communities to support people to get the care they need, close to home.

Charles Darwin University will be funded to establish a new medical school in the Northern Territory from 2026 (\$24.6m), and will be invited to apply for an ongoing allocation of 40 commencing medical Commonwealth Supported Places a year.

The Northern Territory Medical Program will also grow by 6 places with a total of 36 students a year to start from 2024 (\$4.7m). These investments will help develop and retain a locally trained medical workforce equipped to deal with the NT's unique health challenges.

The iconic Royal Flying Doctor Service (RFDS) will be supported to ensure that, even when emergency strikes in the bush, world-class health care is not far away. For almost 100 years, the RFDS has provided emergency medical and primary health care services to anyone in rural and remote Australia. Funding will continue to allow the RFDS to provide its primary care and dental services to more Australians across more remote communities (\$74.8m).

Total strengthening Medicare investment \$2.8 billion.

Total new investments



Total new health investments

\$8.5 billion

\$2.8 billion
Strengthening Medicare

\$4.3 billion
Cheaper medicines

\$1.3 billion
A fit and healthy Australia

Total aged care investments

\$2.2 billion

Fit and healthy Australia

Preventing illness, detecting disease earlier, treating chronic conditions and reaffirming the importance of community and elite sport in encouraging an active, healthy life.

A national skin cancer prevention campaign will reach groups most at risk, including men over 40 and young adults (\$15m). A targeted skin cancer screening program is a step closer, with funding to develop a national skin cancer screening roadmap and improve skin cancer data (\$10.3m).

Australians aged 45–49 will be able to join already eligible 50–74 year olds and screen for bowel cancer by requesting a free test kit. People who receive a positive screening result will be contacted to encourage appropriate follow-up care (\$38.8m).

Additional funding for Canteen's Youth Cancer Service Program will help meet the growing need for services for young people with cancer (\$6.9m).

The Budget furthers Australia's goal of eliminating HIV transmission by 2030 and implements HIV Taskforce recommendations (\$43.9m), including expanded access to pre-exposure prophylaxis (PrEP) and more free self-test kits.

Measures will reduce the spread of communicable diseases, including blood borne viruses, STIs and vaccine preventable illnesses (\$126.5m), especially in First Nations communities.

Continuing reforms to deliver world-class newborn bloodspot screening programs nationally will save lives and deliver better outcomes with early intervention (\$25m).

There is funding for the highly successful Men's Sheds movement (\$6.1m) and education and training for health professionals (\$2.1m). The Male Health Initiative will continue to provide health information, awareness and support to men and boys (\$3.4m).

People struggling with or at risk from harmful alcohol and illicit drug use will benefit from extended funding for 20 treatment and prevention services (\$41.6m).

The Healthy Food Partnership and the Branded Food Database will improve the food supply and help Australians to eat better (\$1.4m).

Research at the Australian Prevention Partnership Centre will help deliver a solid evidence base for policy-makers in preventative health (\$1.1m).

More than 2 million young Australians each year will continue to have access to free school sports programs, in addition to successful programs like the Water and Snow Safety Program, the Participation Grants Program, and Sporting Schools, among others (\$132.7m).

New facilities at the AIS in Canberra will help elite and emerging athletes to be as successful as possible when representing Australia on the world stage (\$249.7m).

Anti-doping and integrity functions will continue through Sport Integrity Australia to enhance the safety, reputation and standing of sporting contests.

Total fit and healthy Australia investment \$1.3 billion.

Quality Aged Care

Strengthening the quality of aged care services and connections that underpin quality aged care. Improving wait times for in-home care, bolstering the workforce, delivering an enhanced quality and safety regulator and better technology for the sector.

An extra 24,100 Home Care Packages (\$531.4m) in 2024–25 support more Australians to access in-home aged care than ever before.

To protect older Australians accessing aged care services, and ensure a high standard of safe and quality care, the Budget will deliver a stronger regulatory framework and a well-resourced, capable Aged Care Quality and Safety Commission (\$111m).

Technology systems and digital infrastructure will be upgraded across the aged care sector (\$1.4b) in preparation for the new Act.

Measures will improve staffing solutions to create better conditions for the aged care workforce. Support will grow the number of home care workers in regional, rural and remote areas where workforce shortages are the most acute. Support for better career pathways for nurses in aged care will be extended (\$88.4m).

States and territories will be supported to upskill residential aged care workers, and deliver outreach services, virtual care and complex care to older Australians outside of hospital settings.

The Specialist Dementia Care Program will support people living with dementia to successfully transition from hospital to aged care services and fund clinical in-reach services. It will also enable Australian Dementia Network researchers to ready the health system for promising new dementia diagnostic and treatment options (\$32.1m).

Preparatory work will continue for the new rights-based Aged Care Act (\$27.8m). The new Aged Care Act will put older people at the centre of aged care. It will also support the Government's response to the Aged Care Taskforce. These reforms are crucial to create a sustainable sector that delivers high-quality care. The Government is continuing to consult with older Australians and stakeholders to ensure there is broader support for reforms to improve the standard of aged care.

Total aged care investment \$2.2 billion.

Cheaper Medicines

Making medicines cheaper for all Australians, supporting pharmacies to provide critical services, increasing access to affordable and life-changing medicines and funding our best and brightest health and medical researchers.

The Government is investing up to \$3 billion to strengthen the pharmacy sector and keep medicines cheaper.

The cost of Pharmaceutical Benefits Scheme (PBS) medicines will remain constant instead of rising with inflation. There will be a one-year freeze on the maximum cost of a PBS prescription for everyone with a Medicare card and up to a 5-year freeze for pensioners and other Commonwealth concession cardholders (\$318m).

To help patients who have difficulty managing their medicines, the number of Government-subsidised Dose Administration Aids – often known as Webster Packs – that a pharmacy can provide will increase to 90 services per week, from 60 (\$151.1m).

Eligible First Nations people will benefit from expanded access to the Closing the Gap PBS co-payment which will mean all PBS medicines are either free, or have the low co-payment of \$7.70 for eligible people (\$11.1m).

More life-changing high-cost medicines will be either added to the PBS or expanded, including medicines to treat a specific type of early breast cancer and two different types of heart disease (\$2.7b). This includes access to COVID-19 oral antiviral treatments through the PBS which will be extended (\$1.3b).

For the first time, pharmacists will be funded to provide free flu and other National Immunisation Program vaccines at aged care and disability homes (\$0.9m).

Progress towards a National One Stop Shop will help remove red tape, increase the number of national clinical trials and help patients to get early access to promising treatments (\$18.8m).

Ground-breaking new health and medical research through the Medical Research Future Fund (\$1.4b over 13 years).

Total cheaper medicines investment \$4.3 billion.



Ensuring all Australians get the health care they need

The 2024-25 Budget continues the Australian Government's generational reforms to strengthen Medicare for all Australians, ensuring equity in health care.

People will find it easier to see a doctor, nurse or midwife, and patients will save time and money on medicines regardless of their background, bank balance or where they live.

For too many Australians entrenched geographic, social, cultural and economic barriers prevent them from accessing the health care they need. This Budget helps break down those barriers.

Support for people with or at risk of human immunodeficiency virus (HIV) will be more equitable and available more widely with measures that respond to the recommendations of the HIV Taskforce.

Groups with poorer access to health care and people not eligible for Medicare will specifically benefit.

Eliminating HIV transmission in Australia by 2030 is ambitious, but it's an ambition to which the Government is absolutely committed.

First Nations people, who experience poorer health and wellbeing than other Australians in too many areas, will be better supported to access the health care they need.

This Budget builds on previous investments and reforms to close the gap in health outcomes and life expectancy, and ensure First Nations people enjoy long and healthy lives.

Women have relayed countless stories about the barriers and bias that exist in the health system. It is something reported time and time again through the National Women's Health Advisory Council and #EndGenderBias survey, which found that two thirds of women surveyed experienced gender bias or discrimination in the health system.

This Budget takes the next steps to boost services, address bias and support choice for women and girls. It will help address healthcare inequity and improve health outcomes at all stages of their lives.

Australians living in regional and rural areas have found it harder over the past decade to see a doctor or nurse and to get specialist medical treatment when they need it.

This Budget takes further steps to bridge the divide between city and country and ensure all Australians can get the care they need closer to home.

People with HIV or at risk of HIV

People with or at risk of HIV will receive unprecedented support (\$43.9 million) through better prevention, testing, workforce training and information, with the Government committed to eliminating HIV transmission by 2030. The Budget responds to recommendations of the HIV Taskforce.

Australia's response to the HIV epidemic in the 1980s and 90s was comprehensive and that remains a key feature of the HIV Taskforce Report.

The HIV Taskforce continued the traditions of political bipartisanship and of partnership between Government and community that has characterised Australia's successful HIV response. Chaired by the Minister for Health and Aged Care, Mark Butler, and Deputy Chaired by the Assistant Minister for Health and Aged Care, Ged Kearney, the HIV Taskforce brought together experts, researchers, community representatives and Liberal and Labor senators to provide recommendations for how Australia can work towards its goal of eliminating HIV transmission by 2030.

Groups with poorer access to health care and people not eligible for Medicare will find support that is more equitable and available more widely.

To ensure no one is left behind, people who are not eligible for Medicare will be able to access subsidised pre-exposure prophylaxis (PrEP). PrEP reduces the risk of acquiring HIV through sexual activity by 99%.

People such as temporary residents on work or education visas have been given greater access to HIV treatment in recent years, with more than 1,500 people benefiting in 2022–23.

More people in at-risk groups will get free HIV self-test kits through the expanded national HIV self-test mail-out program.

High-risk groups will get help from people with lived experience through a national multicultural peer navigation pilot program which will have a focus on prevention and testing.

Men who have sex with men will receive the latest HIV information through continued funding for the Emen8 website – a critical information hub.

To ensure people receive the latest clinically and culturally appropriate care, the HIV workforce will get up-to-date training and education through continued funding for the HIV Online Learning Australia program and the HIV Prevention Workforce Development pilot.

People around Australia will get wider access to HIV testing by extending the South Australia-based HIV testing vending machine pilot to every state and territory.

Continued funding will support the critical work of peak HIV organisations Health Equity Matters and the National Association of People with HIV Australia. Groups like these are leading the way and working side by side with the Government to reach the ambitious goal of eliminating HIV transmission by 2030.

The Government will continue to work with the community to implement other recommendations of the HIV Taskforce.

First Nations people

First Nations people will have better access to health and aged care services, and cheaper medicines, with a \$137.3 million package of measures. This Budget forms part of the Government's continued efforts to close the gap in health and wellbeing outcomes between First Nations people and non-Indigenous Australians.

We know when First Nations communities have control of the services that they use First Nations health outcomes improve. That's why Aboriginal Community Controlled Health Services (ACCHS) are at the centre of this Budget's policy design and delivery.

People in First Nations communities face a higher risk of communicable diseases, including respiratory illnesses, hepatitis and sexually transmissible infections (STIs). Untreated diseases can cause long term health issues like infertility, hearing and vision loss, and cancer.

More First Nations people will have access to testing for transmissible illnesses and culturally safe sexual health services. This will better protect First Nations people and reduce the spread of avoidable infections.

In some First Nations communities, vaccination is well below the 95% target needed to achieve herd immunity. We will boost vaccination rates and protect people – especially children – from the effects of diseases like measles, diphtheria and Hepatitis A with funding for the National Immunisation Program and the ACCHS sector.

Case study

Marius's partner is in Australia on a temporary work visa. Like other temporary residents he doesn't have a Medicare card.

At a club one night, Marius sees a couple of posters about a free online HIV testing program and one about pre-exposure prophylaxis (PrEP).

He takes a photo of the testing poster and checks out the website the next day. He orders 2 tests which arrive a few days later. It's a simple finger prick test and he and his partner both test negative.

Relieved at the test results, Marius mentions the PrEP poster to his partner. He learned that he can reduce his risk of contracting HIV from unprotected sex by 99% simply by taking PrEP. He and his partner visit the local sexual health service to discuss whether PrEP is a good option for them and how they can access it.





Case study

Janine 45 and Keira 14 live in a remote region of Western Australia. Janine takes bosentan tablets to treat pulmonary arterial hypertension.

Thanks to the expanded Closing the Gap PBS Co-payment Program, the medicine Janine needs for her medical condition will now be cheaper. Because Janine is registered on the Closing the Gap (CTG) database and has a concession card she will receive every one of her PBS medicines for free without having to pay a co-payment.

Keira at times worries about her mum's health but is relieved now she knows her mum can get the medicines she needs. Keira is invested in her family's health and aspires to be a nurse and work in her local community controlled health service when she finishes school. With the expansion of the Lowitja O'Donoghue Foundation scholarships, Keira has spoken to her school career counsellor and now understands the pathway she can take in the near future to train as an enrolled nurse and be able to give back to her community and family.

More First Nations people will get the support they need in times of distress when their mental health is at risk. To address increased rates of psychological distress being experienced by First Nations people, the National Aboriginal Community Controlled Health Organisation (NACCHO) will continue to deliver targeted and culturally appropriate mental health support.

Medicare Urgent Care Clinics in Darwin and Mparntwe (Alice Springs) are giving First Nations people better access to bulk billed urgent care for conditions that are urgent but not life-threatening. People are getting treatment sooner and aren't waiting for hours in busy hospital emergency departments.

First Nations people living in remote Northern Territory communities will benefit from access to Medicare Urgent Care Clinics, which will be

funded through this Budget. The locations will be determined in partnership with ACCHS.

The Budget will deliver even cheaper medicines for First Nations Australians. All medicines on the Pharmaceutical Benefits Scheme (PBS) dispensed by a community pharmacy, public or private hospital, or approved medical practitioner will now be covered by the Closing the Gap PBS co-payment. This means eligible First Nations people who are registered on the Closing the Gap database will either get their PBS medicines for free, if they have a Commonwealth concession card, or pay the discounted co-payment rate of \$7.70, if they don't.

The Government is keeping medicines cheaper by holding PBS co-payments at their current low rates for up to 5 years for concession cardholders and one year for everyone else with a Medicare card.

This means the cost of PBS medicines will stay the same and won't go up with inflation.

The Budget includes measures to grow and support the First Nations health workforce.

More First Nations medical specialists means more culturally safe care for First Nations people. The Australian Indigenous Doctors' Association will be supported to continue to improve cultural safety, increase engagement and support First Nations doctors to become medical specialists.

First Nations people in the Northern Territory will also benefit from more Aboriginal and Torres Strait Islander medical practitioners who have a deep understanding of culture and community.

First Nations people will be supported to choose a career in nursing and deliver high-quality care to patients. Lowitja O'Donoghue Foundation scholarships in enrolled nursing and for postgraduate and undergraduate nursing students will build the Aboriginal and Torres Strait Islander health workforce.

First Nations people can find it difficult to access health care that meets all their needs. More appropriate, safe and welcoming health services will help us tackle the challenges that reduce health and life expectancy in Australia. The new Medical Research Future Fund Reducing Health Inequities Mission will investigate ways to improve health services for First Nations people and diverse communities.

First Nations people, who experience harm from alcohol and other drugs, will be supported by grant extensions for the Aboriginal Drug and Alcohol Council (SA), the Aboriginal Health Council of SA, and the Alcohol and Drug Foundation – Good Sports.

More First Nations mothers will have access to culturally safe, continuity of maternal health care. Changes to professional indemnity insurance for midwives will give women greater choice on their preferred midwife and birthing approach. This will safeguard Birthing on Country services for First Nations mothers facilitated by Aboriginal Community Controlled Health Organisations.

Women and girls in rural and remote First Nations communities will get free menstrual products like pads and tampons. These items can often be double the cost in remote areas than in metropolitan areas, so providing them for free will support girls and women to go on with their daily lives, engage with their community and stop them missing school.

Women

The health and care needs of women will be better met, with over \$160 million to tailor services, tackle bias and improve access.

More than 400,000 services are expected to be claimed by women accessing 2 new Medicare rebates allowing for extended gynaecology consultations of 45 minutes or longer. Women often don't receive timely and appropriate assessments, and are left waiting longer for the diagnosis and treatment for debilitating and painful conditions like endometriosis or polycystic ovary syndrome. These longer consultations will help.

Currently, the MBS fee for an initial gynaecologist consultation is \$95.60, and a subsequent consultation is \$48.05. These new items will have an MBS fee of \$168.60 for an initial consultation of at least 45 minutes, and \$84.35 for a subsequent consultation of at least 45 minutes. This aligns with the fee that other specialists, like gastroenterologists, can claim.

Women should not face higher out-of-pocket costs for health services simply due to their gender. A review of MBS items, including items for long-acting reversible contraception (LARC) and diagnostic imaging, will identify any bias in Medicare and help us better balance the health system to meet the needs of all women.

Women going through menopause will get better treatment as more healthcare professionals receive training on menopause through Jean Hailes for Women's Health.

To give more women access to the care of their choice during pregnancy, we are updating the services that can be provided by participating midwives under Medicare. This includes longer antenatal and postnatal consultations which means more flexible, high-quality and tailored maternity care.

Funding to continue strategies to prevent preterm and early-term birth in participating maternity services and First Nations communities will reduce the number of babies born too early.

Miscarriage has a devastating effect on women and their families. The experience can lead to anxiety and depression, and there can be ongoing social and financial impacts. Women, their families, and health professionals will receive education support and have increased awareness about miscarriage. Families who need bereavement support or access

Case study

Mia is 23 years old and has started having stomach pain before and during her period. She has visited a few local GPs, but during the short appointments none have been able to help with her pain. One doctor suggested it was her diet, and one thought it could be linked to anxiety.

Thanks to changes to the Medicare Benefits Schedule (MBS), Mia can have a longer, Medicare-subsidised 45-minute appointment with a gynaecologist who is able to properly diagnose her condition as endometriosis. Mia is prescribed a 30-day supply of medroxyprogesterone acetate to treat her symptoms, which is also available as a 60-day prescription.

Following a subsequent check-up, her doctor considers Mia's ongoing health condition as stable and provides her with a 60-day prescription. This means Mia can get twice the amount of her medication on a single prescription, saving her money and time.



to miscarriage information will also benefit from additional funding to service providers.

To give us a better understanding of miscarriage, improve the support offered to women and their families, and increase access to sexual and reproductive health care, the Australian Institute of Health and Welfare (AIHW) will conduct a scoping study on national miscarriage data and develop a dataset on sexual and reproductive health.

A virtual contraception decision-making tool for women and their health practitioners will help individuals make more informed decisions about what contraception is right for them and their bodies.

Training for health professionals will also ensure more women, no matter where they live, can access long-acting reversible contraception (LARC) if that is their preferred option. Scholarships will allow health professionals to undertake training on delivering LARC services.

More women will have support when accessing affordable termination services, especially in regional and rural areas, with the extension of sexual and reproductive telehealth items. Nurse practitioners will also be able to request further ultrasound services under Medicare to assist with the before and after care requirements of the MS-2 Step medical abortion program.

Women and children in emergency housing because of family, domestic and sexual violence are highly vulnerable. A trial of outreach health care in women's crisis accommodation and services will help these women and their children rebuild their lives.

Gender bias in research means medical treatments and devices designed for men are often retrofitted for women. Better targeted research will give women access to more suitable treatments and improve outcomes. The Medical Research Future Fund will invest in research on women's health including menopause, pregnancy loss and infertility, novel treatments for chronic pain and treatment for alcohol and other drugs.

Additionally, thousands of women each year will benefit from further investment to expand the listing of abemaciclib (Verzenio®) on the PBS. The medicine treats a certain type of early breast cancer called hormone-receptor-positive HER2-negative breast cancer.

Rural and regional communities

Australians living in regional, rural and remote areas will benefit from a \$213.6 million package that will deliver cheaper medicines, more access to scans and other tests, further Medicare Urgent Care Clinics, more free mental health services, and investments in the health workforce.

PBS co-payments will be frozen for one year for everyone with a Medicare card and up to 5 years for pensioners and other Commonwealth concession cardholders. The cost of PBS medicines will remain constant instead of rising with inflation.

Regional and rural Australia has benefitted most from the Government's tripling of the bulk billing incentive – the largest investment in Medicare's 40-year history. It has given GPs the confidence to build sustainable businesses, particularly in regional and rural Australia, where Medicare payments for a standard bulk billed GP visit have increased by up to 50%.

This greater confidence is also increasing the number of junior doctors choosing general practice as their specialty, particularly in rural and remote communities.

The mental health package in the Budget expands the range and reach of free mental health services around Australia, reducing barriers to access safe, high-quality care that meets a range of mental health needs.

Everyone experiences periods of distress at different points in their lives, like through the loss of a loved one, a job, or a relationship.

That distress can be profound, but it is usually temporary and people are often able to manage it, with time and the support of friends and family.

Some people will need some additional support to get through. For too long, that has been the gap in our system. It often means people end up seeking support from programs designed for diagnosed clinical mental illness.

People in rural and regional communities have felt the impact of that gap most acutely. The independent evaluation of the Better Access program, that provides Medicare-subsidised mental health sessions for diagnosed mental illness, showed that people in rural and regional Australia currently have the least access to psychological services.

A new national early intervention service will provide access to someone trained in evidence-based therapies, who can provide safe and high-quality care to get people through whatever is troubling them. Others will benefit from a bit of coaching or advice, and to be given the tools and resources they need to work through things, at their own pace and in their own time.

Approximately 150,000 Australians will use the service each year, getting free support early, without waiting for a referral or being worried about a gap fee. Providing free services to people at the earliest point of intervention, will make it less likely that their problem will go untreated and worsen into something more serious.

It will also relieve pressure off the Better Access program to be all things to all people, and support psychologists to work to their full scope of practice and spend more time treating people with moderate and high needs. Improving access to Better Access will benefit all Australians, but particularly those who currently face the highest barriers to access: older Australians, low-income households and people in rural and regional Australia.

At least 30 of the 61 Medicare Mental Health Centres will be in rural and regional Australia. These will offer free, walk-in access to healthcare professionals for adults with complex and high mental health needs. An upgrade to the clinical capability of the existing Head to Health network, upon which the Medicare Mental Health Centres will be established, will ensure that every centre can offer access to a psychologist and psychiatrist.

Primary Health Networks will be funded to work in partnership with general practice to provide mental health nurses and other allied health workers in general practice, for free wraparound care and support to patients with complex needs, in between GP and specialist appointments. Commissioning of services to upgrade the clinical capability of general practice to deliver mental health services will have particular benefit to smaller practices in rural and regional Australia.

More people in regional and remote Australia will get fully bulk billed, walk-in urgent medical care through more Medicare Urgent Care Clinics. Additional funding will be provided for existing clinics in regional, rural and remote Australia to improve access to urgent care. Ten of the 58 clinics already operating



Case study

Sarah lives on a remote property in Queensland with her partner and 4 children. The nearest town has a small pharmacy, but only one GP and no dentist.

More funding for the Royal Flying Doctor Service means Sarah and her children can get dental check-ups at a fully-equipped mobile dental surgery when it is in town.

Thanks to 60-day prescriptions Sarah gets 2 months of her regular medication in one trip to the pharmacy, saving her money and an extra trip into town.

And as a concessional card holder, the freeze on PBS co-payments means the amount Sarah pays for her medications won't rise for up to five years, easing pressure on the family's already stretched household budget.

around the country are in regional, rural and remote areas, improving primary care outcomes in these areas. So far, these 10 clinics have had around 40,000 presentations.

A one-off boost to Medicare rebates for nuclear medicine imaging, and further rises each year, will support the viability of practices in rural and regional Australia and prevent people from needing to travel further to get the tests they need.

A stronger and well supported health workforce will make it easier for people in regional, rural and remote Australia to get care locally. This includes funding to improve access to primary care in areas of shortage, known as thin markets, which are typically in rural and remote areas. It also supports extending existing Single Employer Model trials to continue testing new employment models that will help attract and retain GPs in areas where they are most needed – especially in regional and rural Australia.

Over time, people in the Northern Territory will find it easier to see a locally-trained doctor, with funding for Charles Darwin University to establish and operate a medical school from 2026.

Medical graduates who come from a regional background or study in the regions are much more likely to stay and practice in these areas.

Which is also why rural and regional communities will particularly benefit from the Government's new Commonwealth Prac Payment, which provides cost-of-living relief for students studying to be nurses, midwives or social workers. Supporting students to complete their studies and get the qualifications they need will particularly benefit students from these areas, who often face greater financial barriers to study. More health workers from rural and regional Australia will increase the likelihood those students return to work in those communities after they graduate.

People in the bush can be assured world-class health care is not far away, even when emergency strikes, through more Government support for the iconic Royal Flying Doctor Service (RFDS). For almost 100 years, people across rural and remote parts of the country have been receiving medical and primary health care services from the RFDS. Additional funding will mean more Australians in more remote communities will get the primary health care and dental services they need.



Strengthening Medicare

\$2.8 billion
total package value

29 further
**Medicare Urgent
Care Clinics**

\$361 million
for mental health in a
stronger Medicare

\$900 million
indexation boost to
Medicare rebates

Summary

The 2024–25 Budget strengthens Medicare by boosting the number and capacity of Medicare Urgent Care Clinics, making health care more responsive and accessible for women, and ensuring mental health care meets the needs of every individual.

It builds on the \$6.1 billion investment to strengthen Medicare in the 2023–24 Budget.

This Budget will support more Australians to access care for urgent, but not life-threatening, conditions. The Government is growing the national network of Medicare Urgent Care Clinics to 87. This will help ease pressure on busy hospital emergency departments.

Older Australians will get the health care and support they need in a safe and comfortable environment when it isn't necessary for them to stay in hospital, freeing up beds for other patients.

Using hospital outreach services in the community and more virtual care services, older patients will avoid unnecessary hospital admissions and be safely discharged sooner when they are admitted.

Older people with complex care needs will be supported to move out of hospital into a residential aged care home and more short-term care will be available for older people to help them recover after a hospital stay.

These measures are on top of the historic increase to hospital funding agreed at National Cabinet, which will see the Australian Government contribute at least an additional \$13 billion to state public hospitals over the next 10 years. This will empower state and territory governments to invest in their public hospitals, ease the pressure on emergency departments and clear the elective surgery backlogs that built up during the COVID-19 pandemic.

A \$361 million package will put mental health at the heart of a stronger Medicare, by launching new free mental health services to support Australians to get the right level of care for their level of need.

It will begin a shift away from a one-size-fits-all approach in mental health and reduce the pressure on the Better Access initiative to be all things to all people.

Whether in person, over the phone or on a device, at a free walk-in centre down the road or from the comfort of home, this Budget expands the ways Australians can get free mental health care.

The Budget takes important next steps to strengthen Medicare for women and address healthcare inequity. It funds higher Medicare rebates to see a gynaecologist for complex conditions like endometriosis. New Medicare services mean eligible midwives can provide longer consultations both before and after the birth of a child.

Every single medical practice and hospital radiology department with magnetic resonance imaging (MRI) equipment will be able to provide Medicare-funded services. This almost triples the number of fully Medicare-funded MRIs available. This will make MRI tests cheaper and more available, reduce waiting times and help to prevent people being referred for less appropriate tests.

Medicare rebates for nuclear medicine imaging and many medical tests will rise each year, ensuring these tests remain accessible and affordable for patients.

Indexation on Medicare Benefits Schedule (MBS) rebates is expected to deliver almost \$900 million in additional benefits in 2024–25. This is on top of around \$940 million in additional Medicare benefits already delivered in 2023–24. New MBS tests, including for suspected heart failure and rare cancers, will be added to reduce waiting times and catch health problems sooner.

This Budget will provide funding to strengthen Australia's digital health infrastructure, and improve the integrity and compliance of Medicare.

The Budget is improving access to essential health services, including the Royal Flying Doctor Service (RFDS), which will receive funding to continue providing services across outback Australia.

Who benefits

Medicare Urgent Care Clinics

More Australians in more locations will be able to walk in and get the urgent care they need, fully bulk billed, without waiting hours in a busy hospital emergency department, thanks to a further 29 Medicare Urgent Care Clinics (\$227 million).

This Budget will grow the national network of Medicare Urgent Care Clinics to 87 and expand support for clinics located in regional, rural and remote areas. Medicare Urgent Care Clinics are open with extended hours, seven days a week, and offer walk-in care that is fully bulk billed. They can treat a range of urgent, but not life-threatening conditions and injuries, from cuts, rashes, viral infections and foot and hand injuries.

The 58 existing clinics have already delivered almost 400,000 free services for Australians in every state and territory, while reducing the load on busy emergency departments.

Almost a third of visits have been for children under the age of 15, with parents and carers getting the urgent care their child needs, without waiting for hours in a busy hospital emergency department.

More than a third of visits have been outside normal working hours.

Case study

Emily, a teacher from Adelaide, accidentally cut her hand while making dinner one Saturday. It was a deep cut that couldn't wait for an appointment with her usual GP. But she knew there would be a long wait at her local hospital's emergency department, especially on a weekend.

Instead, Emily decided to visit the new Medicare Urgent Care Clinic nearby. She walked in, without an appointment, and was quickly seen by a GP who treated her hand.

The visit was fully bulk billed, sparing Emily the stress of out-of-pocket expenses. Emily was also relieved to find the urgent care she needed close to home, without having to add extra pressure on her local emergency department.



New Mental Health Services in a Stronger Medicare

Almost half of Australians will experience a mental health concern in their lifetime and everyone's experience is different. Gaps in the supports available have put pressure on other services, worsening access and affordability. The 2024–25 Budget begins to fill these gaps, with new free mental health services that are better matched to the needs of each person.

Everyone experiences periods of distress at different points in our lives, like when we lose a loved one, a job, or a relationship.

That distress can be profound, but it is usually temporary and people are often able to manage it, with time and the support of friends and family.

Some people will need some additional support to get through. And for too long that has been the gap in our system.

It often means people end up seeking support from programs designed for diagnosed clinical mental illness.

The 2024–25 Budget will fill that gap with a national early intervention service that anyone can access for free mental health support, whenever they need it (\$163.9 million).

This service will provide access to someone trained in evidence-based therapies, who can provide safe and high quality care to get you through whatever is troubling you.

Or maybe you'll just want a bit of coaching or advice, and to be given the tools and resources you need to work through things, at your own pace and in your own time.

This new low intensity service is based off a very successful UK model called "talking therapies".

Approximately 150,000 Australians will use the service each year, getting free support early, without waiting for a referral or being worried about a gap fee.

The new national early intervention service is part of a \$361 million mental health package that expands the range and reach of free mental health services to better cater to a range of needs, whether someone needs a low, moderate or high level of support.

Moving to a stepped model of care will help refocus our efforts towards prevention. Providing free services to people at the earliest point of intervention, will make it less likely that their problem will go untreated and worsen into something more serious.

It will also take pressure off the Better Access program to be all things to all people, and support psychologists to work to their full scope of practice and spend more time treating people with moderate and high needs.

Australians with more complex mental health needs, at the higher end of the stepped model of care, will benefit from the establishment of a network of Medicare Mental Health Centres.

Medicare Mental Health Centres will be built on the established Head to Health network, which will have their clinical capability upgraded to ensure that every centre can provide free access to a psychologist and psychiatrist (\$29.8 million).

A network of 61 Medicare Mental Health Centres will be opened by the middle of 2026.

They will be free, they will be walk in, and they will need no referral.

Upgrading the clinical capability of the new Medicare Mental Health Centres and refocusing their efforts towards adults with complex needs will ensure that cost is not a barrier for Australians to get the ongoing care they need from a psychologist or psychiatrist, as part of a multidisciplinary team.

That ongoing care is critical, which is why this Budget also builds the clinical capability of general practice to provide mental health care.

Primary Health Networks, in partnership with GPs, will be funded to commission the services of mental health nurses, counsellors, social workers and peer workers, to provide that ongoing and wraparound care and care coordination for people with high needs – in between their GP and specialist appointments (\$71.7 million).

Sometimes the best support comes from someone who has lived through the same or a similar experience. A new national peer workforce association will help to mobilise, professionalise and unlock the potential of this all-important workforce (\$7.1 million). This Budget will diversify the psychology workforce, and explore the role that psychology assistants might play in the mental health workforce.



Case study

Ben, a concession cardholder from rural Victoria, sometimes struggles with his mental health, but is reluctant to seek help.

Ben's GP asked about his mental health at a recent check-up, and Ben said he was struggling and wasn't sleeping well. As an initial step, his GP suggested Ben contact the new early intervention service, which he can do in the comfort and privacy of his own home. Ben can now have regular evidence-based talking therapy sessions with a trained mental health worker at no cost, without needing to go into town to see someone in person. He can also use online tools and resources at any time he feels like his mental health isn't at its best. Ben's GP will check in with him again in 6 weeks to see if he needs additional support or treatment.

Ben's GP appointments are now bulk billed thanks to the Government's higher bulk billing incentives for GPs. Between his GP, the regular talking therapy sessions and the online resources, Ben is sleeping well and starting to do the things he enjoys again.

A Stronger Medicare to Improve Health Equity and Access

The 2024–25 Budget continues the Australian Government's generational reforms to strengthen Medicare for all Australians, ensuring equity in health care. It takes the next steps to build women's health into the foundations of a stronger Medicare, including through new rebates for midwifery and gynaecology consultations.

Women and girls have unique health needs, but socioeconomic factors and gender bias in the health system often put them at a disadvantage, resulting in misdiagnosis and lack of access to quality health services. This was reported again and again through the National Women's Health Advisory Council's #EndGenderBias report, which found that two thirds of women surveyed experienced gender bias or discrimination in the health system.

While these are complex systemic issues that will take time to fix, this Budget takes important next steps to make quality health care more affordable and available for women.

Women with complex gynaecological conditions, including endometriosis, will benefit from 2 new Medicare rebates allowing for extended gynaecologist consultations of 45 minutes or longer (\$49.1 million). This will reduce the cost for women seeking help and ensure they receive timely and expert assessments and are no longer left waiting for critical diagnoses and treatments.

New Medicare services for endorsed midwives will be introduced, unlocking their potential to provide longer consultations under Medicare, in the important weeks before and after the birth of a child (\$56.5 million).

Women should not face higher out-of-pocket costs for health services simply due to their gender. A review of MBS items will focus on contraception and diagnostic imaging in the first instance and will help identify any gender bias in the rates of Medicare rebates and payments. This will help us better balance the health system to meet the needs of all women.

Funding to continue strategies to prevent preterm and early-term birth in participating maternity services and First Nations communities will reduce the number of babies born too early (\$5.8 million).

The availability of professional indemnity insurance will also improve Birthing on Country services for First Nations mothers facilitated by Aboriginal Community Controlled Health Organisations (\$3.5 million).

Miscarriage has devastating effects on women and their families. Many women experience ongoing anxiety and depression and can face social and financial impacts. Support services for women and families who experience miscarriage will be strengthened, as families and health professionals receive education support and have increased awareness about miscarriage (\$7 million).

The Australian Institute of Health and Welfare (AIHW) will conduct a scoping study on national miscarriage data (\$1 million) and develop a dataset on sexual and reproductive health (\$5.5 million), further informing policy and improving access to health care.

Funding of \$53.6 million from the Medical Research Future Fund will be invested in research priorities including to improve women's health outcomes. Women going through menopause will benefit from improved treatment with enhanced, knowledgeable and understanding care with funding for health professional training through Jean Hailes for Women's Health (\$1.2 million).

Women and girls in rural and remote First Nations communities will receive free menstrual products, like pads and tampons. This will help them to go about their normal lives, engage with the community and not miss school (\$12.5 million).

Outreach health care in women's crisis accommodation and services will be trialled in up to 6 Primary Health Network regions to support women and children fleeing family, domestic and sexual violence (\$6 million).

This Budget will help women make informed decisions about contraception. A virtual contraception decision-making tool will support women and health practitioners providing contraceptive counselling (\$1.1 million).

This will be complemented by scholarship funding for health practitioners to undertake training to deliver long-acting reversible contraception (LARC) services (\$5.2 million). More trained health practitioners will ensure more women can access LARCs as their contraceptive of choice, no matter where they live.

An extension of the MBS item for telehealth for sexual and reproductive health will better support women, particularly in regional and remote areas to get the care they need.



Patients who need an MRI will benefit from shorter waiting times and won't need to be referred for less-appropriate scans with changes to MRI licencing agreements. This Budget expands access so that every comprehensive practice with MRI equipment will be eligible to provide Medicare-funded services (\$69.8 million), almost tripling the number of fully Medicare-eligible MRIs.

Medicare rebates for nuclear medicine imaging will rise each year, particularly supporting people in rural and regional Australia to get the scans they need close to home (\$92.8 million).

Rebates for many common medical tests, including for infertility/pregnancy and tissue pathology, will also rise each year for the first time in 25 years (\$174.1 million). This will ensure these tests remain accessible and affordable by maintaining the very high rates of bulk billing in pathology. Less than 1% of tests provided outside of hospitals are not bulk billed.

Improvements to the MBS, including services for suspected heart failure and rare cancers, will help to reduce waiting times and catch health problems sooner (\$22.3 million).

COVID-19 pathology testing will be permanently added to the MBS, recognising the significant impacts COVID-19 continues to have, particularly for vulnerable people (\$335.7 million).

To boost the supply of health care in areas of shortage, the Budget provides \$17.4 million to support health services at risk of closing. Primary Health Networks and Rural Workforce Agencies will work with local communities to support people to get the care they need, close to home.

Charles Darwin University will be funded to establish a new medical school in the Northern Territory from 2026 (\$24.6 million), and will be invited to apply for an ongoing allocation of 40 commencing medical Commonwealth Supported Places a year.

The Northern Territory Medical Program will also grow by 6 places with a total of 36 students a year to start from 2024 (\$4.7 million). These investments will help develop and retain a locally trained medical workforce equipped to deal with the NT's unique health challenges.

Students in nursing, midwifery and social work will benefit from the establishment of a Commonwealth Prac Payment. This will support them while they undertake mandatory placements required for higher education and vocational education and training qualifications. Eligible students will be able to access \$319.50 per week during their clinical and professional placement periods.

The iconic RFDS will be supported to ensure that, even when emergency strikes in the bush, world-class health care is not far away. For almost 100 years, the RFDS has provided emergency medical and primary health care services to anyone in rural and remote Australia. Funding will continue to allow the RFDS to provide its primary care and dental services to more Australians across more remote communities (\$74.8 million).





Cheaper medicines

\$4.3 billion
total package value

\$3.4 billion
new medicines added
to the PBS

\$318 million
freezing PBS
co-payments

\$151.1 million
more access to dose
administration aids

Summary

The 2024-25 Budget includes a \$4.3 billion investment to continue the Australian Government's efforts to make medicines cheaper for all Australians. This Budget supports the pharmacy sector to provide critical services, increases access to affordable and life-changing medicines, and funds our best and brightest health and medical researchers.

The Government is investing up to \$3 billion to strengthen the pharmacy sector and keep medicines cheaper. The cost of Pharmaceutical Benefits Scheme (PBS) medicines will remain constant instead of rising with inflation. There will be a one-year freeze on the maximum cost of a PBS prescription for everyone with a Medicare card and up to a 5-year freeze for pensioners and other Commonwealth concession cardholders, so medicines stay cheaper, even as cost of living rises (\$318 million).

This years-long hold on the cost of PBS medicines comes on top of the largest cut to the maximum co-payment in the 75-year history of the PBS, as well as the introduction of 60-day prescriptions, 2 measures which have already saved Australians a total of more than \$370 million.

The 2024-25 Budget includes further initiatives to save people time and money when accessing the medicines they need, helping to ease pressure on the household budgets of millions of Australians.

More life-changing high-cost medicines will be either added to the PBS or expanded, including medicines to treat a specific type of early breast cancer and 2 different types of heart disease.

All PBS medicines dispensed by a community pharmacy, public or private hospital, or approved medical practitioner will now be covered by the Closing the Gap PBS co-payment. Eligible First Nations people who are registered on the Closing the Gap database will either get their PBS medicines for free, if they have a Commonwealth concession card, or pay the discounted co-payment of \$7.70 if they don't.

Access to COVID-19 oral antiviral treatments through the PBS will be extended, helping to protect vulnerable Australians.

As part of the Health Research for a Future Made in Australia package, a National One Stop Shop will harmonise and streamline the administration and regulation of health and medical research. An easy-to-use website will help people, researchers and industry find, conduct and participate in clinical trials and research.



In addition, the Government's National Health and Medical Research Strategy will build on Australia's national strengths and fill any gaps, while attracting researchers and investors. It will cover the entire sector and include all levels of government, industry, philanthropy, academia and consumers.

Two new Medical Research Future Fund (MRFF) Missions will be established to address factors that reduce life expectancy and cause poorer health among Australians.

For the first time, pharmacists will be funded to provide free flu and other National Immunisation Program (NIP) vaccines at aged care and disability homes, ensuring more Australians have convenient and affordable access to life-saving vaccines with no out-of-pocket expenses.

Who benefits

Australians will benefit from a stronger pharmacy sector and a temporary freeze on the annual indexation of PBS co-payments as part of an up to \$3 billion commitment to stronger pharmacies and cheaper medicines through the Eighth Community Pharmacy Agreement.

The maximum co-payment for a PBS medicine will be held at its current rate of \$7.70 for up to 5 years for pensioners and other Commonwealth concession cardholders, instead of rising annually in line with inflation. Everyone else with a Medicare card will benefit from a one-year freeze on indexation, continuing to pay a maximum co-payment of \$31.60 for all of 2025 (\$318 million). Costs won't rise with inflation, keeping medicines cheaper and easing pressure on household budgets.

This freeze is in addition to last year's reduction to the maximum cost of a PBS prescription – the largest cut in the history of the PBS – and the Government's historic 60-day prescription reforms. Together, these measures have already saved Australians more than \$370 million since January 2023.

Patients who have difficulty managing their medicines will benefit from an increase in Government funding for Dose Administration Aids (DAA) – often known as Webster Packs – improving medicine safety and compliance. A pharmacy will now be able to provide 90 Government-subsidised services each week, instead of 60 (\$151.1 million).

Eligible First Nations people will benefit from expanded access to the Closing the Gap PBS co-payment (\$11.1 million). All PBS medicines dispensed by a community pharmacy, public or private hospital, or approved medical practitioner will now be covered by the co-payment. Eligible First Nations people who are registered on the Closing the Gap database will either get their PBS medicines for free, if they have a Commonwealth concession card, or pay the discounted co-payment of \$7.70 if they don't.

Around 2,400 women each year will benefit from the expanded listing of the potentially life-changing medicine, abemaciclib (Verzenio®), on the PBS. Abemaciclib can treat a type of early breast cancer known as HR+ HER2- by blocking the action of



specific overactive proteins that signal cancer cells to grow. This helps to slow or stop the growth of cancer cells.

From 1 May 2024, women will pay just \$31.60 per script or \$7.70 if they are concession cardholders, instead of \$97,000 per course of treatment without the subsidy.

Australians with a form of heart disease known as symptomatic obstructive hypertrophic cardiomyopathy will be able to save nearly \$30,000 a year with the PBS listing of mavacamten (Camzyos®) from 1 May 2024. Listing mavacamten on the PBS could benefit up to 3,600 Australians each year who will pay no more than \$31.60 per script, or just \$7.70 if they hold a concession card.

From 1 May 2024, around 1,200 Australians with another kind of heart disease known as transthyretin amyloid cardiomyopathy will benefit from the PBS listing of tafamidis (Vyndamax®) from 1 May 2024.

A year of treatment would normally cost around \$122,000, but through the PBS, eligible people will pay no more than \$31.60 per script, or \$7.70 for pensioners and other concession cardholders.

Access to COVID-19 oral antiviral treatments through the PBS will be extended (\$1.3 billion), reducing the risk of hospitalisation and death in vulnerable people.

Vulnerable Australians will have more convenient and affordable access to life-saving vaccines with no

out-of-pocket expenses, with pharmacists funded to provide free flu and other National Immunisation Program (NIP) vaccines at aged care and disability homes, for the first time (\$0.9 million).

The new support for pharmacists will ensure vulnerable Australians are given free vaccines to protect them from COVID-19 and flu ahead of winter.

This Budget includes measures that will contribute to a once-in-a-generation transformation of health and medical research in Australia.

Research is the foundation upon which new health treatments and technologies can be discovered, trialled, translated and commercialised, helping to create new products and jobs.

A National One Stop Shop will remove red tape, increase the number of Australian clinical trials and help patients to get early access to promising treatments (\$18.8 million).

An easy-to-use website will help patients, researchers and industry find, conduct and participate in clinical trials and research.

A National One Stop Shop will help cement Australia's status as a world-class destination for health and medical research. Emeritus Professor Ian Chubb AC will continue to lead key reforms to progress the business case for the National One Stop Shop.

New research via the MRFF will include a focus on reducing health inequality. Two new 10-year MRFF Missions will focus on better outcomes for Australians with low survival cancers and improve health services for groups who experience inequitable access (\$1.4 billion over 13 years).

MRFF Research Missions bring together key researchers, health professionals, stakeholders, industry partners and patients to tackle big health challenges.

The Low Survival Cancers Mission will investigate ways to improve outcomes for Australians with cancers where less than 50% of people survive more than 5 years after diagnosis. It will give people with pancreatic, lung and liver cancer, among others, greater hope for a longer future with their family and friends.

The Reducing Health Inequities Mission will improve access to quality health services and ensure they are safe, appropriate and welcoming. The mission will address the poorer health outcomes experienced by groups including First Nations people, LGBTIQ+ people, people with a disability and people from diverse backgrounds.

Australian researchers will benefit from a new National Health and Medical Research Strategy that will help Australia build a sustainable research pipeline – from discovery and innovation to translation and commercialisation. It will cover the entire sector including all levels of government, industry, philanthropy, academia and consumers.



Case study

Anya is 69 and lives in regional New South Wales. She was recently diagnosed with obstructive hypertrophic cardiomyopathy, after suffering chest pains on her morning walk.

As a retiree, Anya has struggled with the increasing cost of living, and the thought of having to now pay for additional medication has caused her a lot of anxiety.

Thanks to the recent listing of mavacamten on the PBS, and her concession card, Anya can now access this potentially life-changing medication for just \$7.70 per script. Without the PBS subsidy the medication would cost \$30,000 per course of treatment.

Anya has already been saving money on the other PBS medications that she takes, thanks to the Government's 60-day prescription reforms.



Quality aged care

\$2.2 billion
total package value

\$531.4 million
extra in-home care

\$32.1 million
for dementia care

\$111 million
strengthened quality
and safety

Summary

The 2024-25 Budget includes \$2.2 billion to strengthen the quality of aged care services and connections that underpin quality aged care. It will improve wait times for older Australians seeking in-home care, bolster the aged care workforce, deliver an enhanced quality and safety regulator, and better technologies for the aged care sector.

Significant improvements in aged care have been made in line with the Royal Commission into Aged Care Quality and Safety recommendations. Aged care residents now have 24/7 nursing and more care time, aged care workers are taking home better pay and aged care providers are more transparent and accountable.

The Budget will promote stronger links between aged care and health systems to ensure older Australians get the medical support they need in a safe, comfortable environment.

An extra 24,100 Home Care Packages in 2024-25 will reduce wait times to an average of 6 months and support more Australians to access in-home aged care than ever before.

The Aged Care Quality and Safety Commission's strengthened capability will ensure protections for older people in response to the Independent Capability Review recommendations.

The new rights-based Act will put older people at the centre of aged care to ensure people accessing Government-funded aged care services get the respect and quality of care they deserve. In preparation for the new Act, technology systems and digital infrastructure will be upgraded across the aged care sector. This Budget will invest in attracting and retaining aged care workers.

This includes funding to support an increase in the number of home care workers in regional, rural and remote areas where workforce shortages are the most acute, and the extension of programs to support better career pathways for nurses in aged care.

As part of the Strengthening Medicare package, states and territories will be supported to upskill residential aged care workers, and deliver outreach services, virtual care and complex care outside of hospital settings. The Transition Care Programme will be extended and reviewed to continue short-term care for older people recovering from a hospital stay.

Better dementia care will be delivered through investment in services and support for people with complex care needs, as well as readying the health system for new diagnosis and treatment advances.

The new Aged Care Act will put older people at the centre of aged care. It will also support the Government's response to the Aged Care Taskforce. These reforms are crucial to create a sustainable sector that delivers high quality care. The Government is continuing to consult with older Australians and stakeholders to ensure there is broad support for reforms to improve the standard of aged care.

Who benefits

Older Australians will benefit from a quality aged care system, with faster access to in-home care, a strong workforce and better links between aged care and health systems.

Extra Home Care Packages will address Australia's increasing demand for in-home aged care. An extra 24,100 packages will help older people to remain independent in their home and community for longer (\$531.4 million). These new packages will complement the roll-out of the Single Assessment System from 1 July 2024, which will provide older people with a single entry point and needs assessment for aged care.

The Budget will deliver a stronger regulatory framework and a well-resourced, capable regulator to protect older Australians accessing aged care services, and ensure a high standard of safe, quality care (\$111 million).

The Government is committed to growing the workforce to meet the demands of Australia's ageing population.

Improved staffing solutions will create better conditions for the aged care workforce (\$88.4 million), including funding to:

- grow the home care workforce in regional, rural and remote areas, where workforce shortages are the most acute
- support better career pathways for nurses in aged care.

The new Act will mean older people, their families and carers will know their rights, know what to expect from aged care providers, and know they will be protected if they complain.

Under the new Act, aged care providers will operate in a better regulated, transparent and accountable system. Aged care workers will work in an environment that recognises their important role and prioritises safe, high quality care.

Underpinning the aged care reforms, including those dependent on the new Act, significant technology and platform maintenance and enhancements will be funded to ensure critical aged care digital systems will remain contemporary and comply with legislation (\$1.4 billion).

Improved systems will help older people, their families and carers, access aged care services and reduce administrative burden for aged care providers by better integrating aged care and health systems.

Older people will get the health care and support they need to remain independent in their home or an aged care facility when they no longer need to stay in hospital. They will experience better connected services between aged care and health systems, reducing hospital stays and medical costs.

As part of the \$1.2 billion Strengthening Medicare package, states and territories will be funded (\$882.2 million) to deliver:

- programs that help older patients avoid unnecessary hospital admissions and to be discharged into a more appropriate care situation sooner if they are admitted
- hospital outreach services in the community and virtual care services
- training to upskill residential aged care workers to care for older people with cognitive decline and complex care.

To further support older people to move out of hospital settings, the Transition Care Programme will be extended to help people recover from a hospital stay with short-term care. The successful dementia program, Acute to Residential Care Transition Service, will expand to every state and territory.

Dementia continues to be the leading cause of disease burden in Australia for those aged over 65.

People living with dementia will be supported to successfully transition from hospital to aged care services and fund clinical in-reach services for people through the Specialist Dementia Care Program (\$32.1 million). It will also enable Australian Dementia Network researchers to continue to ready the health system for promising new dementia diagnostic and treatment options.

Pensioners and Commonwealth Seniors Health Cardholders, will enjoy cheaper medicines thanks to a freeze on PBS co-payments for up to 5 years. It means that while their pension rises each year with inflation, the cost of the medicines they rely on won't.

This is on top of the introduction of 60-day prescriptions, which have already halved the cost of many common PBS medicines for older people with an ongoing health condition.

Aged care residents will also have convenient and affordable access to lifesaving vaccines with no out-of-pocket expenses through the National Immunisation Program Vaccinations in Pharmacy Program (\$0.9 million). For the first time, pharmacists will be funded to provide free flu and other National Immunisation Program vaccines at residential homes.

Funding for residential aged care homes to engage an on-site pharmacist will help to ensure residents get the safest and most appropriate medication.



Case study

Eleni is 86 and loves living in her town where she can visit the local library, meet friends for coffee or pop down to the shops. Due to issues with her blood pressure, Eleni recently had a fall, and she is now finding it harder to walk and to care for herself.

Thanks to additional Home Care Packages, Eleni has been able to more quickly access the care she needs in her own home. Eleni's personal care worker recently moved to the area and is getting training in mobility care. She helps Eleni to get a walker, making it easier for Eleni to continue her community social activities.

Eleni also gets assistance from her doctor through virtual care services to manage her blood pressure. She logs on through her phone while sitting at her kitchen table. Her doctor agrees that Eleni is now stable on her treatment and to continue her medication she gets a 60-day prescription, which is cheaper on the PBS with her concession card. The co-payment she pays for her medication won't rise for up to 5 years thanks to the freeze announced in the 2024–25 Budget.



A fit and healthy Australia

\$1.3 billion
total package value

\$71 million
for cancer prevention,
screening and
treatment

\$43.9 million
towards eliminating
HIV transmission

\$494.2 million
for elite and
community sport

Summary

The Australian Government has a vision for a fitter, healthier Australia. The 2024-25 Budget invests \$1.3 billion to prevent illness, detect disease earlier, treat chronic conditions and reaffirm the importance of community and elite sport in encouraging an active, healthy life.

The Government is rebalancing the health system towards prevention to deliver better health for Australians and benefit our economy – now and for the future.

Almost 40% of disease could be prevented by reducing risky lifestyle factors. Every dollar invested in preventative health saves around \$14.30 in health care and other costs.

The Budget delivers more funding for cancer prevention, screening and support, including for bowel cancer, skin cancer and young people with cancer. A new roadmap will identify opportunities to improve outcomes for people with skin cancer.

With national consistency in newborn bloodspot screening now achieved for the first time, ending the screening lottery for parents and families, the Budget invests further funding to support more conditions being added to national screening programs in a safe and timely manner.

Investments in the Budget will further Australia's goal of eliminating HIV (human immunodeficiency virus) transmission by 2030 and begin to respond to the recommendations of the HIV Taskforce Report. There is more funding for pre-exposure prophylaxis (PrEP) and an expansion of the national HIV self-test program.

There are investments in important alcohol treatment and prevention services, better nutrition programs and in organisations supporting people with chronic conditions.

The Australian Institute of Sport (AIS) will remain a destination for Australia's elite and emerging athletes with \$249.7 million to ensure its facilities are modern and fit-for-purpose at the national base in Canberra. It will help Australia remain a world leading sporting nation in the lead up to the Brisbane 2032 Olympic and Paralympic Games.

The Budget also includes \$132.7 million for grassroots community and school sport to encourage participation and help Australians stay fit and healthy.

Who benefits

A healthy Australia

All Australians will benefit from the Government's focus on a fit and healthy Australia. The Budget will help prevent illness, detect health issues sooner, treat chronic conditions and support a healthy active lifestyle through sport participation. Investing in good health now will reduce illness, disability and costly care in the future.

Our love of the sun is still leading to skin cancer for too many. A national skin cancer prevention campaign (\$15 million) will reach groups most at risk, including men over 40 and young adults.

A targeted skin cancer screening program is one step closer, with funding included to develop a national skin cancer screening roadmap (\$10.3 million) and improve the collection of skin cancer data. The Melanoma Institute Australia will work with the sector to develop the roadmap, led by Australians of the Year Professor Georgina Long AO and Professor Richard Scolyer AO.

From 1 July 2024, Australians aged 45–49 will be able to join already eligible 50–74 year olds and screen for bowel cancer by requesting a free test kit. The risk of bowel cancer increases with age, but it can occur in younger people – often without symptoms. If found early, more than 90% of cases can be successfully treated. People who receive a positive screening result will be contacted to encourage appropriate follow-up care.

The Budget continues to further Australia's goal of eliminating HIV transmission by 2030, and supports the implementation of the HIV Taskforce's recommendations (\$40.3 million), including by expanding access to pre-exposure prophylaxis (PrEP).

More people in at-risk groups will get free HIV self-test kits through the expanded national HIV self-test mail-out program (\$2.5 million).

High-risk groups will get help from people with lived experience through a national multicultural peer navigation pilot program which will have a focus on prevention and testing (\$1 million).

Communicable disease transmission, particularly blood borne viruses, STIs and vaccine preventable diseases, will be reduced by expanding testing, treatment and prevention, including extending access to point-of-care testing for First Nations people and rural and remote communities (\$126.5 million).

Newborns and their families will benefit from continuing reforms to deliver world-class newborn bloodspot screening programs (\$25 million). Newborn bloodspot screening not only saves lives but delivers better outcomes through early intervention.

It builds on previous reforms that have ensured – for the first time in 60 years – there is an agreed national list of current screening conditions, specific funding to achieve consistency across Australia, and a streamlined pathway to consider more conditions for screening.



To meet the growing need for services for young people with cancer, the Government is providing additional funding for Canteen's Youth Cancer Service Program (\$6.9 million).

The Budget continues support for men's health, with funding for the highly successful Men's Sheds movement (\$6.1 million) and education and training for health professionals (\$2.1 million). This increased funding to train health professionals to better engage and treat men, will support men's mental and physical health. Funding to provide information, and increase awareness and support available to men and boys on key health issues, will continue through the Male Health Initiative (\$3.4 million).

Those struggling with, or at risk from, harmful alcohol and illicit drug use will benefit from extended funding for 20 treatment and prevention services. This includes the Alcohol and Drug Foundation's Good Sports program which is helping 3 million participants across 11,500 clubs and 120 sporting codes.

Good nutrition is vital to maintaining health and wellbeing. Australians will be supported to eat better and food supply will be improved through funding for the Healthy Food Partnership and the Branded Food Database (\$1.4 million).

Funding for research at the Australian Prevention Partnership Centre will help deliver a solid evidence base for policymakers in preventative health (\$1.1 million).

The National COVID-19 Vaccine Program will continue to enable vaccinations to prevent severe COVID-19 disease (\$598.9 million).



Case study

Jai is a 46-year-old father, working 2 jobs to cope with the financial strain of rent and the growing cost of living. He recently stopped smoking, but still drinks more than he should, finds it hard to eat well and doesn't have much time for exercise.

Jai's doctor has talked to him about his lifestyle and the increased risk he has of cancer.

Jai wants to be around for his son, Bailey, so he starts to make some changes.

He gets advice on reducing his alcohol intake through a Government-supported prevention and treatment services, starts to eat better and joins Bailey on runs as he trains for a cross country race at school.

Jai's doctor tells him that at 46 years of age he is eligible to take part in the free bowel cancer screening program. Jai registers, receives a test kit in the mail, collects a sample and sends it back.

If Jai receives a positive test result and doesn't follow-up with his doctor, he will be contacted to encourage him to seek appropriate follow-up care. If Jai does have bowel cancer, he's increased the chance of finding and successfully treating it early.

Bailey also gets \$500 to attend the national cross country championships through the Local Sporting Champions program, which is receiving \$17 million through the 2024-25 Budget.



A fit Australia

The 2024–25 Budget reaffirms how important an active lifestyle is to the health and wellbeing of Australians. It includes a \$494.2 million funding boost for sport. More than 2 million Australians each year will continue to have access to the Government's free sports programs.

Programs that deliver health and social benefits to individuals and communities and help families with the cost of living include:

- Sporting Schools (\$62.9 million)
- Local Sporting Champions (\$17 million)
- Participation Grants Program (\$17.3 million)
- Water and Snow Safety (\$34.2 million)

The Budget delivers \$34.2 million to support the continuation of the Water and Snow Safety Program, which will reduce water and snow related injuries and deaths. This funding includes vital safety equipment and training for surf clubs affiliated with Surf Life Saving Australia.

Elite and emerging athletes will be supported to be as successful as possible when representing Australia on the world stage through new facilities at the AIS in Canberra (\$249.7 million).

The funding, to be provisioned while a detailed business plan is finalised, will help deliver:

- an accessible multi-storey accommodation facility
- a multi-sports dome to provide an all-weather, multi-sport indoor training facility with integrated facilities for testing and analysis
- a new high-performance training and testing centre.

This will help ensure our high-performance athletes have access to world-class facilities that strengthen Australia's position as a world-leading sporting nation in the lead up to the Brisbane 2032 Olympic and Paralympic Games.

The Government will continue to deliver anti-doping and integrity functions and enhance the reputation and standing of sporting contests and of sport overall through further investment in Sport Integrity Australia (\$57.4 million).