# Roadmap Implementation Governance Group (RIGG)

## Discussion about primary care measures from the 2023‑24 Budget – 6 October 2023

### Introduction

The Department of Health and Aged Care (the Department) provided a brief overview of primary care measures in the 2023-23 Budget at the RIGG meeting on 21 August 2023. This meeting was scheduled to provide RIGG members with more information on these measures.

### Overview of primary care measures from the 2023-24 Budget

The Chair gave an overview of the budget measures. These measures aim to improve access to multidisciplinary care, modernise digital health, and increase engagement with health care consumers. The Chair outlined how these measures could help to address many of the barriers that people with intellectual disability experience in accessing care.

RIGG members recognised the potential for these measures to improve the health of people with intellectual disability. However, members raised concerns about the level of consultation on these measures to date. Members emphasised that without appropriate consultation, product testing and advertisement, people with intellectual disability would be unable to access the benefits of these measures.

### MyMedicare

The Department spoke to the MyMedicare program. MyMedicare is a voluntary, opt-in system that seeks to improve existing and ongoing relationships between patients and GPs, and support better continuity and quality of care.

RIGG members suggested that consideration be given to developing a MyMedicare smartphone app, to help people with intellectual disability to access and manage their MyMedicare appointments and information with privacy. For example, it was noted that people with intellectual disability who live in group homes may not want to share their information with a support worker to register or speak to a doctor, but may be able to navigate an app independently.

RIGG members also requested consideration be given to:

* incentivising GP visits to disability residential homes
* addressing the level and complexity of paperwork associated with increased bulk-billing incentives, and
* understanding the limits of telehealth, noting that while it has improved access to medical care for many patients, sometimes face-to-face appointments are necessary. Members noted the risk of primary care providers becoming overly reliant on the convenience of telehealth appointments in preference to providing face-to-face appointments for people with intellectual disability.

### Digital Health

The Department and the Australian Digital Health Agency (ADHA) outlined the budget measures that are designed to improve the functionality and accessibility of digital health infrastructure. These measures aim to:

* enable sharing of health information in real time, to improve quality of care
* improve the availability of data, which can inform further investment in health programs
* modernise the My Health Record to allow better data sharing and use by a range of health professionals, including via the My Health Record smartphone app.

RIGG members noted their concern that previous consultation with the intellectual disability community had not resulted in accessible technology. The ADHA emphasised their intention to create technology that could be used by, and on behalf of, a wide range of health care consumers for a range of purposes. The ADHA advised that they would welcome further consultation with RIGG members on implementation of these measures, to ensure that they meet the needs of people with intellectual disability.

### Meeting close

The next meeting will be on Monday 27 November 2023.

### Next steps

* The next RIGG meeting will include an agenda item on making sure that people with intellectual disability are considered in all health policies.
* Secretariat to circulate:
	+ the MyMedicare presentation slides, and
	+ information about:
		- MyMedicare
		- paperwork required to claim increased bulk-billing incentive
		- functionality of the My Health Record app to store videos of people to showcase usual health baseline.
* The Department to communicate with the Medicare Benefits Schedule Review Advisory Committee about the need to consider intellectual disability in policy settings