



# Health Ministers Meeting (HMM): *Communique* **13 February 2026 – Canberra**

Health and Mental Health Ministers met in Canberra today to reaffirm their collective commitment to national reform supporting mental health and suicide prevention priorities. Health Ministers also met to discuss several health system reform priorities including implementation of the National Health Reform Agreement, disability reform, and improving prescribing practices in key growth areas such as medicinal cannabis.

## **Mental Health**

The Joint Health and Mental Health Ministers' Communique [found here](#).

## **National Health and Disability Reform**

Health Ministers acknowledged the agreement made by National Cabinet on 30 January 2026, reaffirming a shared commitment to delivering safe, high-quality health and disability services for all Australians.

National Cabinet agreed the Commonwealth will provide an additional \$25 billion for public hospitals. Commonwealth funding through the National Health Reform Agreement (NHRA) for state-run public hospitals will reach \$219.6 billion from 2026–27 to 2030–31.

### *Aboriginal and Torres Strait Islander health schedule of the NHRA*

The inclusion of a dedicated *Aboriginal and Torres Strait Islander health* schedule in the NHRA is a foundational step in embedding the National Agreement on Closing the Gap into the mainstream health system. Health Ministers acknowledged the leadership of the Aboriginal and Torres Strait Islander health sector in shaping the NHRA Addendum, ensuring the schedule reflects key reform priorities and strengthens accountability for equitable, culturally safe and responsive care.

All governments have committed a joint \$450 million to fund priorities aligned to the schedule and developed in partnership with the sector through a new Aboriginal and Torres Strait Islander Reform Fund. Priorities are likely to include better discharge pathways, anti-racism strategies, cultural safety teams in hospitals, Aboriginal Community Controlled Health Sector navigation models, and stronger First Nations data governance. Investment in these priorities can drive real system improvements.

### *First Nations Health Care in Prisons*

Ministers agreed to task officials to develop, with the National Aboriginal Community Controlled Health Organisation (NACCHO) and in partnership with the broader Aboriginal and Torres Strait Islander health sector, a proposal to trial new or expanded Aboriginal Community Controlled Health Sector-led healthcare in prisons and youth detention facilities in each jurisdiction. State and territory Ministers to lead engagement with their corrections portfolio, with Ministers to report back on proposals at the joint First Nations and Health Ministers Meeting on 30 April 2026.

## *Disability Reform*

Ministers acknowledged the need for continuing reforms to secure the long-term sustainability of the NDIS. This includes strengthening supports outside the scheme through Thriving Kids for children aged zero to 8 with developmental delay and/or autism who have low to moderate support needs. Ministers acknowledged the work underway between the Commonwealth and states and territories to finalise bilateral agreements for Thriving Kids.

### **Delayed Discharge of Older People**

Health Ministers received an update from states and territories on data of older people in hospital who are clinically ready for discharge but are unable to transition to community services.

Health Ministers agreed to continue to work together to address the delayed hospital discharge of older people. This work will enhance system-wide action to address discharge barriers and identify solutions for continuous improvement.

### **Medicinal Cannabis**

Health Ministers discussed the rise in medicinal cannabis prescribing and use within the current regulatory settings. Ministers received a briefing from Professor Lawler, Therapeutics Goods Administration (TGA), on a suite of reforms the TGA is pursuing to address inappropriate prescribing of medicinal cannabis products. TGA will strengthen governance, oversight and regulatory frameworks.

### **Expedited pathways for Specialist International Medical Graduates**

Health Ministers continue to progress implementation of expedited pathways for priority Specialist International Medical Graduates to address immediate health workforce shortages in Australia. Health Ministers supported otolaryngology – head and neck surgery, general surgery, dermatology and emergency medicine as the next priority specialties for an expedited specialist registration pathway.

### **Australian Digital Health Agency and unlocking the value of digital health reforms**

Health Ministers received a briefing from the Australian Digital Health Agency highlighting the significant growth in use of national digital health infrastructure. Ministers agreed to continue expanding information shared to national digital systems, including My Health Record, to strengthen care coordination and improve health outcomes for Australians. This includes expanding use of the 1800MEDICARE app, progressing My Health Record share by default reforms, and advancing a National Medicines Record to support patient safety and prescribing scope of practice reforms.