

Health Live Budget Q&A

Response to COVID-19 Pandemic

How much of the Budget went towards COVID-19 rehabilitation?

The Australian Government has invested in a \$16.5 billion emergency health response to COVID-19. This funding includes support to temporary access to Medicare- subsidised Telehealth.

Since March 2020, the Government has invested more than \$500 million for direct supports to respond to the mental health impacts of COVID-19, including telehealth.

More information, including COVID-19 response measures, is on the [Response to the COVID-19 pandemic](#) fact sheet.

Guaranteeing Medicare and Access to Medicines

Can you give any more information about telehealth beyond COVID-19? Will it include allied health professionals?

The Australian Government is working with stakeholders, including those in allied health, to develop options for the permanent adoption of telehealth beyond the COVID-19 pandemic.

When will we be able to view the outcomes of the Medicare Benefits Schedule (MBS) Review and additional funding?

The MBS Review Taskforce completed its review of all the items on the MBS earlier this year. In this Budget, the Australian Government committed to two more years of funding. This extra funding will transition the work involved in reviewing the MBS to a more business-as-usual approach.

Will the increased Medicare funding have improved access for allied health?

The COVID-19 pandemic has fast-tracked the delivery of telehealth in Australia. Video and phone consultations are now available for allied health and mental health services.

The Australian Government is developing options for the permanent adoption of telehealth beyond the COVID-19 pandemic. This Budget has delivered \$18.6 million to fund work to begin system changes to support future reform. The Government has accepted the recommendation by the Aged Care Royal Commission report on COVID-19. This supports further allied health in aged care facilities.

Will the expansion of the Rural Health Multidisciplinary Training Program guarantee the support of health workers? Does the expansion minimise the barriers related with workforce supply?

A strong rural health workforce is central to Australia's health care system. Addressing the barriers to accessing health care services and distributing doctors and health experts continue to be the core focus for regional health.

New funding of \$550 million to Stronger Rural Health Strategy will continue to support people living in rural and remote areas. This funding will give doctors more chances to train and practise in rural and remote regions. Nurses and allied health professionals will also have a greater role in the delivery of multidisciplinary, team-based primary care.

This expansion includes the 16 University Departments of Rural Health (UDRH). This expansion is under the RHMT program across a range of disciplines. The expansion includes nursing and allied health, and will offer four main elements:

- funding a new UDRH
- increasing training in five remote areas through existing UDRHs
- funding five projects to improve aged care training, and
- a study to pinpoint the best approaches to increase dental training in regional locations.

The Government is providing new funding to test new primary care models across western and southern New South Wales.

Each model will reflect local needs while creating networks of GPs, nurses and other health providers. The models will show how new and flexible approaches fix workforce shortages and build viable health care services in rural areas.

GPs have said while funding is available for psychology services, there is a lack of psychology professionals in rural areas affected by bushfires. How is the Government addressing this?

The Australian Government is providing support to improve the mental health and wellbeing of all Australians. Telehealth has been a landmark reform and has underpinned mental health support as part of the \$2.4 billion total investment.

There is funding to expand digital support services to offer access free or low-cost services. The Australian Psychological Society (APS) has also received extra funding to expand its 'Find a Psychologist' function.

Telehealth and digital supports offer greater mental health support for regional and remote Australians. These supports give workforce relief in high demand areas by distributing the mental health workload across Australia's workforce.

Through the National Medical Workforce Strategy, the Government will seek to improve the supply of medical professionals in rural and remote areas. Improved data and governance will support undersupplied specialties such as psychiatry will receive a growth in the number of professionals.

Why does the Budget fund service provision trials in rural New South Wales?

The five trials in rural New South Wales (NSW) are the first of their kind to receive Commonwealth funding. The trials are pilots that are ready to roll-out into operation models.

The new primary care models will complement work by the Office of the National Rural Health Commissioner, and will work with regions outside of NSW. This work will help develop 'trial ready' localised innovative models of care. The trials also build on the rollout of the Murrumbidgee Model. The model enables Rural Generalist trainees to work in both private practice and the local hospital.

The new models will inform options for broader primary care reforms in rural and remote Australia.

Ageing and Aged Care

Aged Care Royal Commission made a point of the need to improve allied health access in regards to COVID-19. Why is allied health not more central to aged care policy?

The Australian Government has accepted all six recommendations of the Royal Commission Report on COVID-19, which includes increasing allied health services into aged care. The Government is working on the delivery of this commitment.

How much of the Budget to residential aged care has already been announced?

The 2020–21 Budget Papers published \$2 billion worth of new, non-COVID-19 related funding for aged care. This included \$168.4 million for measures to do with residential aged care.

The \$168.4 million investment for non-COVID aged care includes funding for:

- \$29.8 million for the Serious Incident Response Scheme
- \$91.6 million for the Australian National Aged Care Classification
- \$35.6 million for Business Investment Fund, and
- \$11.4 million for a cost recovery levy.

The Budget papers published details of the \$746 million COVID-19 investment since the July 2020 Economic and Fiscal Update. Residential aged care received \$655 million of this investment.

In the \$1.6 billion for 23,000 home care packages, what is the approximate split between Levels 1,2,3 or 4?

The Australian Government supports older Australians to live in their own homes, have reduced wait times for packages and have access to essential care sooner. This Budget gives funding of \$1.6 billion for an extra 23,000 packages. This takes the total packages for 2020 to 30,000.

The split between the Home Care Packages levels is 5,000 for level 1, 8,000 each for level 2 and 3 and 2,000 for level 4. These 23,000 packages will be out in 2020–21 with roll-out to start in November 2020. The effect of the investment will continue beyond 2020–21 to ensure there is no reduction in the number of people in a Home Care Package.

Does this Budget improve access to palliative care for older Australians including in residential aged care facilities?

Palliative care services across health, aged care and primary care will benefit from the extension of the Greater Choice for At Home Palliative Care program. This will support access to end-of-life care for Australians, regardless of where they live, including in residential aged care facilities.

Through 11 Primary Health Networks, the program in rural, regional and metropolitan trial sites across QLD, NSW, VIC, TAS, SA and WA has been extended. This will lead to greater access for older people.

Where is the funding for the aged care workforce and more aged care nurses to address issues raised by RC?

The 2020–21 Budget includes \$10.8 million to the aged care workforce to increase their skills and capabilities.

The aged care transition to practice program supports graduated nurses on the job for 12 months to gain practice skills to work in aged care settings. This funding will support 200 nurses.

The expansion of the aged care scholarship supports nurses to pursue formal qualifications. There are 115 scholarships that are to benefit from this program, bringing the total to around 310.

Skills development for nurses and personal care workers is available through online training across a several areas relevant to aged care service delivery. It is expected that 20,000 nurses and personal care workers will complete the training.

The 2020–21 Budget includes funding of \$10.3 million to support the carry out of the aged care workforce strategy. The funding will help the Aged Care Workforce Industry Council to support its operations and infrastructure. Nine projects to carry out the strategic actions will also be funded.

The strategy will support the aged care workforce by improving leadership, workforce planning, improved skills training and career pathways for the aged care workforce.

In October 2020, the Government invested \$245 million to support the added costs of preparing for and responding to COVID-19. This funding supported infection prevention and control, staffing costs, managing visitation arrangements.

There are a large number of NGOs that work with, support and advocate for older people, including those with diversity needs. There is no funding allocated to these services. Will there be?

The Government funds services that work with, support and advocate for older people, including those from diverse demographics through several programs. These programs include:

- \$4 million from 2019–20 to 2020–21 to fund seven Partners in Culturally Appropriate Care organisations. This funding supports aged care providers to give appropriate care to older people from Culturally and Linguistically Diverse (CALD) backgrounds
- nearly \$4.5 million to support Aged Care Peak Body functions for diverse groups, including:
 - National Lesbian Gay Bi-Sexual Trans Intersex (LGBTI)
 - Federation of Ethnic Communities' Councils of Australia
 - Victorian Aboriginal Community Controlled Health Organisation and the National Advisory Group for Aboriginal and Torres Strait Islander Aged Care.
- \$47.6 million from 2018–19 to 2020–21 to fund the Community Visitors Scheme (CVS). The scheme works with organisations to run volunteers to visit recipients of Australian Government-subsidised aged care services who are isolated. CVS has providers across states and territories who support the needs of CALD groups, Aboriginal and Torres Strait elders, veterans and the LGBTI community
- \$30 million until 2022–23 for the Older Persons Advocacy Network to support the National Aged Care Advocacy Program. The program gives free, independent and confidential support to consumers and their families. Representatives receiving or seeking Commonwealth-funded aged care services are supported in this program.
- \$12.1 million from 2018–19 to 2020–21 to support a consortium led by the Council of Ageing Australia (COTA). This funding is to test different models of aged care system navigators. Those who need extra support will be able to be involved with and navigate the aged care system, taking into account diverse needs and locations.

Prioritising Mental and Preventive Health

What funding will be available for any reforms resulting from the Productivity Commission's Final Report?

The Australian Government is considering the recommendations of the Productivity Commission's report to create a more united, person-oriented mental health system to benefit all Australians. The Government continues to make investments in resources to support mental health. This includes:

- \$5.7 billion invested in mental health and suicide prevention through the Health portfolio in 2020–21

- Since March 2020, more than \$500 million in funding for direct supports to respond to the mental health impacts of COVID-19, including telehealth and
- \$100.8 million to double Medicare-funded psychological services from 10 to 20 through the Better Access Initiative in 2020–21.

There is a large investment in drugs to treat disease yet there is no new investment in preventing the common chronic diseases. When will this investment happen?

This Budget announced \$7.2 million to the 2020–21 Alcohol and Drug Foundation. This funding will continue to deliver the Good Sports program across Australia. This is in addition to the Government's commitment of \$6 million to help reduce drug and alcohol usage and harms resulting from the COVID-19 pandemic.

The National Tobacco Campaign has received funding of \$20 million over three years from 2020–21. Mainstream smokers (men and women) aged between 18 and 55 are the main group for the campaign.

On 9 September 2020, the Government announced \$23.7 million for Fetal Alcohol Spectrum Disorder (FASD) Diagnostic and Support Services. This funding supports better access to diagnostic services, reduced wait times and helps people achieve a diagnosis. People that have been diagnosed with FASD, their families and their carers are supported through this funding.

In December 2019, the Government announced \$25 million for the Foundation for Alcohol Research and Education (FARE). This funding carried out a National Awareness Campaign for Pregnancy and Breastfeeding Women.

In the 2019-2020 Budget the Government announced funding of \$7.22 million for the National Drugs Campaign in 2020–21. Because of COVID-19, no dance/music festivals or schoolies weeks are organised for late 2020 to early 2021. As this is the main audience of the National Drug Code Directory (NDC), the campaign will not be on until 2021-22.

Governments in Australia have agreed to a National Obesity Strategy. The strategy is managed in a shared, cohesive approach across the country. It is anticipated to be complete in late 2020.

Gap payments (out of pockets) still leave care out of reach for those who need it most. What is the plan here?

The Government is committing to providing care to Australians to help with out-of-pocket health care costs and daily living costs.

Some psychologists may bulk bill for their professional services. The [Healthdirect website](#) is a Government-funded service and allows people to search for bulk-billing health workers, including psychologists.

The Government funds Primary Health Networks (PHN) to commission mental health and suicide prevention services at a regional level. PHNs commission services that respond to a range of mental health needs. PHNs take into account situations of clients and offer low or no cost services where suitable.

Can you please expand on the 20 Better Access sessions?

The expanded Better Access Pandemic Support measure, which makes available 20 Better Access sessions each calendar year, started on 9 October 2020. The existing temporary item numbers

created for the Better Access Pandemic Support measure are available until 30 June 2022. A list of item numbers for the extra 10 MBS Mental Health Sessions is in the [MBS Factsheet for Practitioners](#) at [MBS online](#).

Eligible patients are to have a Mental Health Treatment Plan. Following their 10th Better Access session, a reviewing GP, psychiatrist or paediatrician must recommend that it is clinically appropriate for the patient to access up to 10 extra sessions. New item numbers do not get created for a reviewing practitioner to review a person's mental health treatment plan. The reviewing practitioner does not need to claim a 'Review' Medicare item (Item 2712) to review and refer a patient for the extra 10 sessions. A review can occur using one of the consultation items if a patient has already had a review in the last three months.