How the 2022–23 Budget is investing in the Primary Health Care 10 Year Plan

This Budget delivers the *Primary Health Care 10 Year Plan* along with an investment in the 2022–23 Budget of $632.8 million over four years from 2022–23. Since work began on the *Primary Health Care 10 Year Plan* and our intent to provide $448 million towards it, the Australian Government has implemented $1.1 billion in primary care measures, placing the total value of investment in primary care reforms to date at $1.7 billion.

Throughout the COVID-19 pandemic, we have also committed nearly $4 billion to the COVID-19 primary care response, to keep Australians and our primary care providers safe during this unprecedented global pandemic.

Included in this commitment is total investment to date of $512 million to make access to telehealth a permanent part of the primary care landscape for all Australians. Since March 2020, around 17 million Australians have utilised over 100 million telehealth consultations.

Primary health care is the front line and first point of contact with the health care system for most Australians. In all geographic areas across Australia and through every stage of life, primary care is central to keeping Australians healthy and well.

The Australian Government’s *Primary Health Care 10 Year Plan* provides a strong foundation and framework for strategic reform and investment in patient-centred care, and long term commitment to holistic health care and a future-focused health system.

The Australian Government has an unwavering commitment to continuing to improve our primary health care system, whether care is provided through general practices, Aboriginal Community Controlled Health Services (ACCHS), community pharmacies, allied health services, mental health services, community health and nursing services, or dental and oral health services.

The 2022–23 Budget investment of $632.8 million includes primary care spending in the following areas:

* Quality improvement in general practice - $23.8 million
* Access to allied health services - $3.9 million
* Improved access to primary healthcare services, including After Hours services - $71 million
* Building on the 10 Year Stronger Rural Health Strategy - $291 million
* Improving health of women and families - $74.4 million
* Dental care for adult concession card holders - $107.8 million
* Supporting our ageing population through primary care - $28.7 million
* Medical research grants to support clinicians - $32 million

In addition, the 2022–23 Budget invests in:

* Affordable access to essential health care through Medicare - $170.6 million
* Prioritising improved care for people with dust-related diseases - $11 million
* Primary health investment in response to COVID-19 and natural disasters - $395.2 million

**Permanent Universal Access to Telehealth**

The COVID-19 pandemic prompted one of the most fundamental changes to Medicare in a generation, through the rapid rollout and phenomenal uptake of telehealth.

The Australian Government is supporting telehealth as a permanent part of Australia’s universal health system, through the pandemic and beyond.

More than 100 million telehealth services, worth more than $5 billion in Medicare rebates, have been delivered since the outbreak of the COVID-19 pandemic in 2020. These services include:

* 84 million general practitioner services
* 7.7 million mental health services, and
* more than 10.9 million specialist consultations and services.

Support is also being provided through emergency telehealth services for Australians in flood-impacted areas of the east coast.

# Quality improvement in general practice - $23.8 million

The Australian Government is committed to investing in quality improvement in general practice. In the 2022–23 Budget this investment includes:

* $15.4 million of additional funding in 2022–23 for the Practice and Workforce Incentive Programs (PIP and WIP) to include the COVID-19 MBS telehealth items in the Standardised Whole Patient Equivalent (SWPE) calculation from 1 January 2022. This recognises the ongoing commitment from general practice to provide primary care services to their communities during COVID‑19, and recognises that telehealth is now a permanent feature of primary care under Medicare.
* $4.9 million over 4 years from 2022–23 to support quality improvement through general practice accreditation.
* $3 million in 2022–23 for the Australian Digital Health Agency to build linkages between My Health Record and the myGP system currently being developed by Services Australia.
* $500,000 over 4 years from 2022–23 to establish and maintain a governance and advisory group for the implementation of the Primary Health Care 10 Year Plan.

# Improving access to allied health - $3.9 million

The Australian Government is investing $3.9 million over 4 years from 2022–23 to improve access to allied health services in the next tranche of allied health reform activities under the *Primary Health Care 10 Year Plan*.

This includes:

* $2 million to ensure that privately employed allied health care providers can access the Australian Government’s Free Interpreting Services (FIS) to support services to patients with low English proficiency.
* $0.6 million to fund a scoping study into the supply and demand for Auslan and spoken language interpreter services for people who are deaf.
* $0.5 million to ensure the future allied health workforce can meet the needs of the community by understanding the barriers to greater adoption of digital health tools, such as My Health Record (MHR) and Secure Messaging.

We know that access to allied health care supports better health and economic outcomes. For allied health care professionals, access to interpreting services, whether into languages other than English or Auslan, can improve the quality of care provided to people from a CALD background or who have a hearing difficulty.

# Improved access to primary healthcare services, including After Hours services - $71 million

The Australian Government is strengthening its commitment to ensure all Australians can access the primary healthcare services they need, when they need them.

This includes:

* $56 million in 2022–23 to continue support for PHNs to plan, coordinate, support and commission population-based after hours health care services. After hours services provide an important alternative to access care without presenting to a hospital emergency department. The PHNs’ role is to commission after hours primary care services where there are gaps, and improve service integration in communities.
* $12 million additional funding over 2 years from 2023-24 to Healthdirect Australia for its 24-hour phone service, providing accurate, trusted and quality health information and advice. Healthdirect has experienced increased demand during the pandemic and with Victoria joining the service. By 2025–26 the number of calls handled by Healthdirect is expected to increase to 1.5 million calls annually.
* $3 million in 2022–23 to assist Street Side Medics to continue to provide primary care services to disadvantaged populations and to expand their services to new regions.

# Building on the 10 Year Stronger Rural Health Strategy - $296.5 million

The Australian Government is delivering the 10 Year Stronger Rural Health Strategy and supporting primary health care in regional, rural and remote Australia.

* $66 million over 4 years to deregulate and expand access to Medicare funded magnetic resonance imaging (MRI) services in regional, rural and remote areas (Modified Monash Model (MMM) 2–7 areas) from 1 November 2022, providing greater access to critical diagnostic imaging services for more regional and rural Australians
* $99.3 million investment in rural medical education and training, including 80 additional Commonwealth supported places, to allow medical training schools to offer more students, especially those in regional and rural Australia the opportunity to take up medical school education and training
* $36.2 million investment in two new University Departments of Rural Health, in the South West (Edith Cowan University) and Goldfields (Curtin University) regions of Western Australia. This will deliver 3,000 additional placement weeks per year for up to 500 more health students
* $14.8 million under the Rural Health Multidisciplinary Training (RHMT) program to Charles Sturt University (CSU) to deliver a Rural Clinical School
* $2.1 million for National Rural Health Students Network of Rural Health Clubs in universities with a RHMT program
* $55.5 million for aeromedical services which ensure people in rural and remote Australia can access health services, including primary care and dental clinics, regardless of their distance from other medical services, including:
	+ $33.3 million over 4 years from 2022–23, for the Royal Flying Doctor Service (RFDS) in addition to their current funding of $84 million per year, to establish a new 10 Year Strategic Agreement and address immediate cost pressures
	+ $18 million over 5 years from 2022–23, to guarantee rescue services and emergency aeromedical services in the Northern Territory through CareFlight, and
	+ $4.1 million for Little Wings to provide aeromedical transport services to sick children and their families.
* $17.2 million for Heart of Australia to provide 5 mobile clinics travelling across 34 communities in regional, rural and remote Queensland. These services will deliver diagnostic, treatment and follow-up care, including cardiology, endocrinology, sleep medicine, psychiatry, geriatric medicine, immunology, general medicine, neurology, gastroenterology and gynaecology, and in 2022 will commence providing CT and x-ray services.

# Improving health for women and families - $74.4 million

* $48.7 million over 4 years from 2022–23 to support victims and survivors of family, domestic and sexual violence and child sex abuse to connect to the right care in the health system. This funding will expand the existing Family and Domestic Violence Primary Health Network pilot and establish a pilot in each state and territory to prevent and respond to child sex abuse. The pilots will provide increased support to primary care providers to assist in the early identification and intervention of family, domestic and sexual violence and child sex abuse, and coordinated referrals to support services.
* $16.4 million over 4 years from 2022–23 to establish 16 endometriosis and pelvic pain GP clinics in primary care settings, improving access to diagnostic, treatment and other support services for women with endometriosis and other conditions resulting in pelvic pain.
* $5.1 million over 3 years from 2022–23 to develop an Endometriosis Management Plan to support patients in primary care.
* $4.2 million over 4 years from 2022–23 to continue the Hospital to Home program to provide women and their families who experience stillbirth with intensive individualised support commencing in the hospital and continuing as they transition into the community.

# Access to dental care for adult concession card holders - $107.8 million

* $107.8 million in 2022–23 to continue support for adult concession card holders to access public dental services. This extension of the *Federation Funding Agreement on Public Dental Services for Adults* ensures that the states and territories provide additional dental services to public patients. It’s estimated this investment will provide services to an additional 180,000 adult dental patients a year.

# Supporting our ageing population through primary care - $29.6 million

Australia has an ageing population and the Australian Government is investing in measures to help us age well and to protect the health of senior Australians, particularly those living in Residential Aged Care Facilities (RACFs).

The 2022–23 Budget includes funding of $22.1 million for Multidisciplinary Outreach Service trials in RACFs to provide more comprehensive health care with hospital-led access to specialists, allied health professionals, geriatricians and palliative care specialists. This will involve cost share arrangements between the Commonwealth and the states and territories.

The 2022–23 Budget also includes funding of $7.5 million over 3 years to implement a palliative care patient navigator and care coordinator pilot to strengthen access to palliative care and end-of-life care service pathways and improve understanding of the palliative health care system and the services that are available to patients.

# Medical research grants to support clinicians - $32 million

The Australian Government is providing $32 million across 14 new grants to assist clinician researchers around the country to tackle health problems identified by clinicians at the coalface of primary care.

The grant funding, awarded through the *2020 Clinician Researchers: Applied Research in Health Grant Opportunity*, comes from the Medical Research Future Fund. Funding includes:

* $3 million to the University of Melbourne for a project to strengthen the care available for rural children, who currently have limited access to specialist paediatric care. In this project paediatricians and GPs will work together to assess and manage young patients.
* Other funded projects support research on a range of topics including cultural safety in GP consultations for Indigenous Australians, new treatment development for gonorrhoea, intensive physiotherapy following hip fracture to improve patient outcomes, and improving outcomes for preterm infants.

# Ensuring affordable access to essential health care through Medicare - $170.6 million

$170.6 million is being invested to include new services and amendments to the MBS for a range of new genetic screening, treatments and services for a variety of conditions, including:

* genetic testing to determine carrier status for cystic fibrosis, spinal muscular atrophy and fragile X syndrome (FXS) in people who are planning pregnancy and their reproductive partners, making Mackenzie’s Mission for genetic carrier screening universal and permanent.
* new MBS item for pelvic MRI for investigation of infertility, including patients with endometriosis
* reprogramming of neurostimulators for chronic pain
* initial positron emission tomography staging for patients diagnosed with rare and uncommon cancers
* expanded MBS item for MRI of the liver to include all cancer types that have potentially spread to the liver
* abdominoplasty for surgical repair of postpartum rectus diastasis (separation of the large abdominal muscles) following pregnancy
* expanding the MRI age limit to 60-years for patients at high risk of developing breast cancer, and
* obstetrics and gynaecology - including 6 new ultrasound items.

For further information, refer to the relevant fact sheets.

# Prioritising improved care for people with dust-related diseases - $11 million

The Australian Government is investing $11 million over 4 years, to improve the awareness, diagnosis, and treatment of dust diseases, such as silicosis.

The Australian Government has responded to the *Final Report from the National Dust Disease Taskforce* with the following measures:

* targeted education and communication activities to raise awareness of the risks of working in dust generating industries
* a silicosis care management plan for health professionals and a single centralised hub to provide affected workers and their families with information, support and expert advice
* training for medical professionals to effectively diagnose and manage the treatment of individuals affected by dust diseases, and
* support for the National Occupational Respiratory Disease Registry providing a strategic approach to research into prevention, diagnosis and treatment of dust diseases, and for national monitoring processes.

# Primary Health investment in response to COVID-19 and natural disasters - $395.2 million

The COVID-19 pandemic has been the most significant challenge to Australia’s health system in living memory, and primary health care has been central to the response and keeping Australians safe.

The Australian Government has invested nearly $4 billion in COVID-19 related primary care measures since the pandemic outbreak in March 2020. The 2022–23 Budget includes $384.4 million for a range of COVID-19 related primary care measures, including:

* $55 million for the purchase and continued provision of essential Personal Protective Equipment for GPs and pharmacists
* $23.5 million to extend the National Triage, Assessment and Referral Service provided through Healthdirect
* $248.1 million to extend the operational timeframe of GP-led respiratory clinics throughout winter and to allow for consideration of longer term arrangements for pandemic response capabilities and management of respiratory diseases in primary care.
* $7.9 million for Primary Health Networks (PHNs) to deploy medical deputising services, nurse practitioners and practice nurses to conduct home visits to COVID-19 positive patients in RACFs
* $590,000 to support GPs to continue to provide health care for COVID-19 patients in the community, where additional personal protective equipment (PPE) may be required
* $6 million to extend the support for Primary Health Networks (PHNs) to coordinate the care for COVID-19 patients in the community
* $43.3 million to support the remote and indigenous response to
COVID-19 and the transition to living with COVID, which includes:
	+ $22.3 million for the Royal Flying Doctor Service’s Remote Community Preparedness and Retrieval measure in response to outbreaks and vaccination delivery
	+ $10.9 million for critical support for access to COVID-19 services including testing and vaccination supported by Aboriginal Community Controlled Health Services
	+ $9.3 million for the Remote Point of Care Testing Program which operates in 150 rural and remote communities.

The Australian Government is also continuing to provide safe and effective COVID-19 vaccines through the Whole of Government COVID Vaccine Administration Partners Program (VAPP) channel and Primary Care Vaccination channels. This includes additional investment of $6.1 million in 2022–23 to extend two COVID-19 practice incentives.

In addition to these COVID-19 response measures, the Australian Government has provided $4.7 million to Primary Health Networks to coordinate the primary healthcare response to the recent flood disaster in New South Wales and Queensland.

# Why is this important?

Informed by the *Primary Health Care 10 Year Plan*, the Australian Government’s investments continue to enhance primary care to deliver the highest quality, best practice health care to all Australians.

The COVID-19 pandemic has tested the capacity and effectiveness of Australia’s health systems and despite the challenges, primary care remains a world-class performer for trust, reliability, quality, and affordability. Our 10 year plan is helping to deliver better services, improved access, and treatments and medicines to protect Australians lives, to keep them healthier for longer and to ensure our health care workforce is equipped to meet the challenges of the pandemic head on.

Telehealth continues to deliver some of the most significant improvements in access to and affordability of primary health care. Our Government’s investment in digital technology is enabling access to services, particularly in regional and rural areas, where it would previously no be available.

The PHN after hours program is important in filling the gap in delivering primary care outside of regular business hours. This provides care to people when they need it, and reduces the pressure on hospital emergency departments.

Healthdirect and its 24 hour public health information service is a vital part of primary health in Australia. The importance of clear, accurate and trusted health information has been highlighted during the COVID-19 pandemic.

The expansion of Healthdirect to Victorians ensures more people can access reliable, quality-assured health advice at any time of the day or night.

Primary care providers play a significant role in supporting the unique health and wellbeing needs of women, particularly during pregnancy, childbirth and the postnatal period. The Government’s continued investment in best practice clinical guidance for maternal health and to implement *the National Stillbirth Action and Implementation Plan* will ensure Australia remains a world leader for positive birthing outcomes.

Family, domestic and sexual violence (FDSV) is the greatest risk factor for the health of women in their reproductive years (18-44 years). It contributes more to the burden of disease (illness, disability and premature death) than any other risk factor including smoking, alcohol and obesity. GPs play an important part in addressing FDSV. They are often the first and preferred point of contact for victims and survivors of FDSV, and can provide a mechanism for early identification and intervention, and a gateway to other support services.

Australia’s lower income households have a higher incidence of poor oral health, which can have a significant impact on their overall health and wellbeing, and can contribute to more significant health problems. We know that the percentage of people who avoid or delay dental care due to the cost has increased over the last decade.

Continuing to invest in the Federation Funding Agreement on Public Dental Services for Adults will ensure that more low income families can access essential oral health care. Public dental service wait times have been reduced from an average of 20 months to 12 months over the span of the FFA.

Our Government has made significant investment in rural health and is building on the 10 Year *Stronger Rural Health Strategy*.

This will be strengthened by reforming the licencing requirements for MRI machines which will encourage diagnostic imaging providers in non-metropolitan areas to invest in new and additional equipment, improving the availability of MRI scans. This will reduce travel and waiting times for diagnostic scans for people in regional, rural and remote areas.

The Australian Government’s commitment to aeromedical services like the RFDS through a new 10 year strategic agreement, builds on its existing, ongoing annual investment of $84 million. It ensures the RFDS remains sustainable and continues to deliver essential health care to Australians in rural, regional and remote communities.

Funding for CareFlight will address the critical needs for rescue capability in the Northern Territory, critical care and trauma capabilities during crisis events, and increased delivery of culturally appropriate care for Aboriginal and Torres Strait Islander communities.

Dust diseases impact workers from a wide range of industries including tunnelling, mining and quarrying, and the engineered stone industry. It is estimated that around 25% of engineered stone workers who have been in the industry since before 2018 are suffering from silicosis or other silica dust related diseases.

Primary care is also vitally important in keeping senior Australians healthy, especially those in RACFs. The Australian Government is supporting access to primary care for those in RACFs with a COVID-19 outbreak, and trialing new ways to provide multidisciplinary care into the future.

Allied health care is an important part of Australia’s primary care system, ensuring that people can access supportive care to maintain their health or recover from ill-health.

Migrant and Refugee Health Partnership and Allied Health Professions Australia found that 25% of all interpreting services provided to patients were not by a qualified interpreter. Deferring or avoiding necessary allied health care because of language barriers leads to poorer health and economic outcomes, especially in areas of high migrant and/or CALD settlement.

Allied health professionals have also been found to have relatively low uptake of digital health tools, which are useful for sharing clinical health information.

Primary care has been central to Australia’s successful handling of the COVID-19 pandemic, including high rates of vaccination which are the envy of the world.

Australia’s GPs, ACCHOs, and community pharmacies have been on the frontline of responding to the pandemic. Continued support from the Australian Government including access to PPE ensure they can continue to do their job safely.

Providing ongoing access to MBS subsidies for COVID-19 vaccinations also means primary health care providers can continue to offer COVID-19 vaccines to everyone free of charge.

# Who will benefit?

Everyone benefits from access to best-practice, affordable and trusted primary health care. It is a fundamental part of our universal health system – Medicare. The Australian Government is delivering on the *Primary Health Care 10 Year Plan* to improve the health and wellbeing of all Australians.

More than 100 million telehealth services have already been delivered since the Australian Government introduced extensive telehealth measures in response to the outbreak of the COVID-19 pandemic. Telehealth continues to benefit all Australians by providing an easy to access and affordable alternative to traditional in-person primary health care.

It is estimated that the PHN After Hours Program deploys around 430,000 after hours services a year, which includes a mix of patient consultations and support to GP clinics, after hours providers and other community service organisations.

After hours programs also support a range of clinicians in different circumstances who may be unable to work regular hours, such as those with education or caring responsibilities.

Healthdirect’s Health Information and Advisory Service continues to experience increasing demand. It is expected to handle over 1.2 million calls in 2021–22. The expansion to Victoria means that in the coming year, the number of calls may exceed 1.5 million. Without Healthdirect’s service, many of these people seeking assistance would either go to a hospital emergency department, or might not seek out care at all.

Alongside permanent access to telehealth, the Australian Government is committed to ensuring health services such as MRIs are available in regional, rural and remote Australia.

Nearly 300,000 women give birth each year in Australia with high rates of antenatal care. While Australia is considered a safe country to give birth, six babies are stillborn every day. The *National Stillbirth Action and Implementation Plan* includes a goal to reduce the stillbirth rate by 25% by 2025.

Expanding the existing Family and Domestic Violence Primary Health Network pilot and establishing a pilot in each state and territory to prevent and respond to child sex abuse will provide increased support to primary care providers to assist in the early identification of and intervention in family, domestic and sexual violence and child sex abuse, and coordinated referrals to support services.

Approximately 230 people develop lung disease each year in Australia due to past exposure to silica dust at work, and this number is rising. Measures to improve the awareness, diagnosis and treatment of dust diseases will improve their health and lead to better long term health outcomes.

Senior Australians, including people in RACFs rely on their primary care providers for many of the services needed to keep them healthy. The Australian Government is supporting new ways for primary care providers to engage with residents in aged care particularly as we continue to deal with the COVID-19 pandemic.

People from CALD backgrounds, with low English proficiency and people who are deaf or hearing impaired will benefit from increased access for allied health providers to the Government Free Interpreter Service and a better understanding of the demand for Auslan interpreter services within the sector.

Allied health professionals will benefit from work to enable them to use digital health tools at the same rates of other health care providers. This investment will help capitalise on the benefits of a fully connected health care system for health providers and patients.

# How much will this cost?

The Australian Government will invest $632.8 million in the Primary Health Care 10 Year Plan over 4 years, from 2022–23 to 2025-26.

| **Primary Care Measures** | **Investment$m** |
| --- | --- |
| 2020 July Economic and Fiscal Update | 119.0 |
| Guaranteeing Medicare and access to medicines - extend the National Partnership Agreement on Adult Public Dental Services for one year | 107.8 |
| Strengthening Primary Care - continuing the Office of the National Rural Health Commissioner | 11.2 |
| 2020-21 Budget | 21.9 |
| COVID-19 Response Package - guaranteeing Medicare and access to medicines - extension - to progress ICT systems to support quality assurance for MBS telehealth services | 18.6 |
| Strengthening Primary Care -extend proof-of-concept pilots into innovative primary care models in rural areas | 3.3 |
| 2020-21 MYEFO | 4.0 |
| Strengthening Primary Care - integrated primary care trials | 4.0 |
| 2021-22 Budget | 772.7 |
| Aged Care - Government response to the Royal Commission into Aged Care Quality and Safety - residential aged care quality and safety - Improve access to primary care for senior Australians, including those living in residential aged care  | 365.7 |
| Guaranteeing Medicare - strengthening the rural health workforce - community supported rural healthcare trials | 1.8 |
| Guaranteeing Medicare - strengthening the rural health workforce - continue development of the Bonded Return of Service System | 3.8 |
| Guaranteeing Medicare - strengthening the rural health workforce - expand the Allied Health Rural Generalist Pathway | 9.6 |
| Guaranteeing Medicare - strengthening the rural health workforce - increase bulk billing incentive for rural and remote medical practice | 65.8 |
| Primary Care - Allied health case conferencing | 14.2 |
| Primary Care - Extend the PHN After Hours Program | 71.9 |
| Primary Care - Improving health services for people with an intellectual disability | 12.7 |
| Primary Care - Indigenous Health PIP | 22.6 |
| Primary Care - MyGP System Build | 50.7 |
| Primary Care - Victoria to join Healthdirect | 5.5 |
| Guaranteeing Medicare - changes to the Medicare Benefits Schedule - Ambulatory Blood Pressure Monitoring | 40.5 |
| Guaranteeing Medicare - dental health services - National Partnership Agreement on Adult Public Dental services | 107.9 |
| 2021-22 MYEFO | 170.1 |
| Guaranteeing Medicare - Medicare Benefits Schedule new and amended listings - improve access to primary health care services delivered by allied health professionals for Aboriginal and Torres Strait Islander people and children and young adults accessing complex health services | 20.8 |
| Guaranteeing Medicare - strengthening primary care - investigate potential options for a wound consumables scheme | 2.1 |
| Guaranteeing Medicare - strengthening primary care - ongoing MBS Telehealth | 106.0 |
| Medical Workforce - expanding Distribution Priority Area classification and incentivising doctors and nurse practitioners into work in rural and regional Australia | 5.9 |
| Medical Workforce - to support GPs through streamlining training payments and to examine the viability of an employment entitlements portability scheme | 15.4 |
| Medical Workforce - waive HELP debts for eligible medical or nurse practitioners in rural and remote areas | 19.9 |
| 2022-23 Budget | 632.8 |
| Primary Care - Inclusion of temporary Telehealth items in SWPE calculation for WIP and PIP | 15.4 |
| Primary Care - Quality Improvement in GP Accreditation | 4.9 |
| Primary Care - Linking VPR system with MyHealth Record | 3.0 |
| Primary Care - 10 Year Plan governance | 0.5 |
| Primary Care - Improving access to allied health services | 3.9 |
| Primary Care - PHN After Hours Program extension | 56.0 |
| Primary Care - Increased funding for Healthdirect | 12.0 |
| Street Side Medics – primary care outreach for disadvantaged communities | 3.0 |
| MRI Deregulation in Rural and Remote areas | 66.0 |
| Build on the Government's Investment in Rural Medical Training | 99.3 |
| Rural Health Multidisciplinary Training program - New University Departments of Rural Health and Regional Training Hubs | 36.2 |
| Rural Health Multidisciplinary Training program - Charles Sturt University to deliver a Rural Clinical School | 14.8 |
| National Rural Health Students Network of Rural Health Club in universities with a RHMT program | 2.1 |
| Aeromedical support for rural and remote access  | 55.5 |
| Heart of Australia – primary care outreach in regional, rural and remote Queensland | 17.2 |
| Support Headspace centres in regional, rural and remote areas to attract and employ GPs | 4.2 |
| Federation Funding agreement on Public Dental Services for Adults | 107.8 |
| Aged Care - Multidisciplinary outreach service trials | 22.1 |
| Palliative Care Service Navigation Pilot | 7.5 |
| National Plan to End Violence Against Women and Children - Health System Navigation for Victims and Survivors of Sexual Violence | 48.7 |
| Strengthening Women's Health - Establishment of Endometriosis and Pelvic Pain GP Clinics | 16.4 |
| Strengthening Women's Health - Endometriosis Management Plan | 5.1 |
| Strengthening Women's Health - Hospital to Home | 4.2 |
| MRFF Clinician Grant outcomes | 32.0 |
| **Primary Care Measures Total** | **1,720.5** |