The Secretary Senate Community Affairs Committee PO Box 6100 Parliament House CANBERRA ACT 2600

Tuesday, April 24, 2007

INQUIRY INTO THE OPERATION AND EFFECTIVENESS OF PATIENT ASSISTED TRAVEL SCHEMES

I wish to make representations to your Committee under Terms of Reference (e) and (i) in respect to the unfairness of the existing procedures involving accommodation and transport requirements for heart-lung recipients in NSW. I had a heart transplant in September 2001. I incurred in patient pre-transplant attendances at St Vincents Hospital from 1997.

INEQUITIES IN TRAVEL EXPENSES

Until the introduction of GST on 2 December 1998, all that I was required to do for approved air travel to Sydney was book airline passage through the NSW Isolated Patients Transport and Accommodation Scheme (IPTAAS) by ringing IPTAAS who arranged such at their cost.

Since the introduction of GST, I and my escort when provided have to pay for all taxes and surcharges, plus GST. For example, I am scheduled with a carer to go to Sydney on 12 May for which the ticketing for one way is \$112.55 with Rex, including \$35.32 taxes and charges, and \$10.23 GST. Given the return airline tickets for me and escort, we will be out of pocket a total of \$186.20, including \$40.92 GST. And that was the cheap airfare available by advance booking of one month.

The NSW Health Minister (Hon John Hatzistergos) by letter of 12 January 2007, states: "As NSW Health is making a 'creditable acquisition' when paying the IPTAAS subsidy to the patient, NSW Health cannot claim GST from the Australian Taxation Office as an 'Input Tax Credit', if it is refunded to the patient."

By contrast, inter-state patients attending St Vincent's in Sydney are not charged a GST component or air surcharges and taxes!

I have been writing through the Federal Member for Riverina, Kay Hull, for the past eight years without success, a number of Federal Health Ministers, Assistant Treasurers or Parliamentary Secretaries responding that all GST takings are returned to the State Governments and therefore a refund is a matter for the States. I incurred a return flight for two persons on 13 November last year, which cost a total of \$980, which included non-refundable components of taxes and surcharges\$145.28, and GST of around \$98.

We need the refund of the GST component and funding for the taxes and surcharges to be borne by IPTAAS as occurred before GST was introduced.

<u>ACCOMMODATION PROVISION AND THE ROLE OF CHARITABLE/NON-PROFIT ORGANISATIONS</u>

Rural children have Ronald McDonald House; adult sufferers of cancer have the NSW Cancer Council back-up accommodation support. Heart and lung recipients in NSW have been denied both Federal and State funding support.

Perhaps it is because of the relative low numbers involved. For example, last year St Vincent's Hospital undertook 16 heart transplants, 23 lung transplants and one heart/lung transplant procedure.

Some years ago, ex-patients of St Vincent's formed the Australian Heart Lung Transport Association AHLTA). Since October 1 2005, our Association has leased a three-bedroom terrace adjacent to St Vincent's but it can only support three families at a time.

Under IPTAAS, the maximum refund for accommodation is \$46 per night (double) after we make an initial one-off contribution of \$40.00

You would appreciate many patients awaiting transplant or in post recovery are required to visit St Vincent's repeatedly and regularly for up to three months at a time. Accommodation at hospital accommodation is impossible to obtain on short notice, which involves motel accommodation at up to \$160 per night.

Much of the hospital accommodation is not adequate with unsuitable stairs or in the words of a fellow transplant recipient in the first edition this year of AHLTA's "Biopsy Bugle": "There was no hospital accommodation when my wife first arrived. She later stayed in hospital accommodation, but it was considered unsuitable for me. The stairs there were very steep, and the accommodation itself was very damp which is bad for my condition which would not have augured well for my recovery process."

The AHLTA offers our accommodation at \$26 per person nightly and unlike hospital accommodation, we provide Internet access for inmates to undertake banking, and to provide in formation on the effects of medication and discuss their recovery with other heart transplant recipients.

CONCLUSION

I estimate since 1997 I have had to undertake 40 return flights to Sydney involving pretreatment and post treatment, and the GST component plus air surcharges and taxes have been a considerable burden given myself and primary carer (spouse) are both on disability pensions.

Luckily, I have only had to resort to private accommodation on two occasions because of family support in Sydney when hospital accommodation was not available, but this is not the case for many other patients, especially from inter-state.

We need your Committee to eliminate the GST component, support refund of the air surcharges and taxes, and recommend suitable funding for the continuation, maintenance and expansion of accommodation for heart-lung recipients.

Yours faithfully

PAUL HUGHES