Senate Community Affairs References Committee

Report of the inquiry into out-of-pocket costs in Australian healthcare

Corrigendum

Page 59, paragraph 5.17

• Delete entire paragraph

Page 61, paragraph 5.28

• Insert new paragraph after existing paragraph 5.28 and before existing paragraph 5.29

The new paragraph will read—

The committee notes evidence from the Macular Disease Foundation Australia (the Foundation) that many elderly people struggle to maintain their private health insurance but feel compelled to do so to maintain choice and access to treatment. Maintaining access to treatment is becoming increasingly important due to the limited availability of public outpatient treatment for wet macular degeneration. The Foundation explained the frustration experienced when individuals incur out-of-pocket costs for wet macular degeneration treatment provided by an ophthalmologist in the doctor's rooms as they are unable to access their private health insurance to cover this gap. In contrast, if the same treatment was received in a private hospital or day clinic, individual cost is reduced as they are able to access assistance through private health insurance.¹

¹ Macular Disease Foundation Australia, Submission 96, p. 7.



25 August 2014

Ms Jeanette Radcliffe Committee Secretary Senate Standing Committees on Community Affairs PO Box 6100 Parliament House Canberra ACT 2600

Dear Jeanette

Macular Disease Foundation Australia is concerned with the incorrect statement, attributed to the Foundation, in the Senate Community Affairs References Committee *Out-of-pocket costs in Australian healthcare* report released on 22 August 2014.

Page 59 of the Committee's report states the following:

5.17 Macular Disease Foundation Australia explained the frustration experienced when individuals incur out-of-pocket costs for treatment provided by a **GP** as they are unable to access their private health insurance to cover this gap. In contrast, if the same treatment was received in a private hospital or day clinic, individual cost is reduced as they are able to access assistance through private health insurance.

This statement is an inaccurate representation of the content in the Foundation's submission. The Foundation was not referring to the out-of-pocket costs incurred for GP treatments; the Foundation was referring to out-of-pocket costs incurred for ongoing wet macular degeneration treatments conducted by ophthalmologists, which is clear and consistent throughout our submission. The following statement is from page 7 of the Foundation's submission, which is referenced in the Committee's report:

Many elderly people struggle to maintain their private health cover but do so to maintain choice and quick access to care if needed. It is therefore very frustrating for these people to incur significant out-of-pocket costs for treatment provided in the doctor's rooms yet be unable to access their private insurance to cover this gap.

The above statement refers to treatment for wet macular degeneration, which can only be performed by ophthalmologists. The context of this information was clear and consistent throughout the entire submission. In addition, the Foundation's submission did not discuss the subject of private health insurance providers funding GP practices.

Could you please advise the Macular Disease Foundation Australia of any action that can be taken to correct the statement in the report?

Yours sincerely

Julie Heraghty
Chief Executive Officer

Helpline: 1800 111 709 Phone: 02 9261 8900 Fax: 02 9261 8912 www.mdfoundation.com.au