Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Additional Estimates 2010-11, 23 February 2011

Question: E11-002

OUTCOME 3: Access to Medical Services

Topic: DIAGNOSTIC IMAGING

Written Question on Notice

Senator Siewert asked:

- a) Is the Department aware that, according to a study done for the Australia Diagnostic Imaging Association by Access Economics, the bulk billing rebate was on average 21% below the cost of providing a service in 2010-11 and this is projected to increase to 25% in 2011-12?
- b) Is the Department aware that practices which rely on bulk billing are being forced to cut their costs, often by restricting the role of radiologists in their practices and reducing the number of cost-inefficient but necessary services which they offer?
- c) Is the Department aware that of the 30% of diagnostic imaging Medicare rebateable services referred by specialists, few are bulk billed and that this means that the very sick patients, who need these services most and who often have to have regular scans will be unable to take advantage of bulk billing?

Answer:

- a) The Department is aware of the claims made in the Access Economics study.
- b) The Department has been told that some diagnostic imaging practices are seeking to reduce their workforce costs. However, the Department has no evidence that this is related to practices' billing policies.
- c) The rates of patient bulk billing are different depending whether imaging services are requested by a GP or by a Specialist, with imaging requested by a GP more likely to be bulk billed. The bulk billing rate for imaging services requested by Specialists was 52.9% in 2009-10, compared to 75.7% for imaging services requested by a GP.

It should be noted that the bulk billing facility is available to all medical practitioners, including imaging providers. However, it is entirely a matter for the practitioner concerned as to whether they use this facility. Patients are encouraged to discuss their financial circumstances with their practitioners.

Where a provider chooses to charge a fee above the Medicare rebate the community relies on the goodwill and cooperation of individual medical practitioners or practices to ensure that patients receive adequate medical care without undue financial hardship. All medical practitioners are encouraged to consider the patient's personal circumstances when setting their billing practices.