Committee Secretary Community Affairs Committee Department of the Senate Parliament House Canberra ACT 2600

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11 October 2005

Dear Madam / Sir

I make this submission to the Committee's *Inquiry into Health Legislation Amendment Bill* **2005** on behalf of the Tasmanian Medicare Action Group (TasMAG), a loose coalition of groups and individuals in Tasmania concerned with the maintenance of Medicare as a comprehensive and universal health insurance system for all Australians. I act as the group's convenor and make this submission after consultation with active TasMAG members. Please note that the very short timeframe allowed for submissions to this inquiry has limited our ability to fully explain our concerns about this Bill.

TasMAG is particularly concerned with Section 5 of the Bill which gives the Federal Health Minister the power to 'determine that medicare benefits are not payable in respect of professional services rendered in specified circumstances.' We are concerned that this increases the power of the Health Minister and by-passes current arrangements where changes to the Medicare Benefits Schedule are dealt with administratively by the Department of Health in consultation with relevant medical practitioner groups, through the Medicare Benefits Consultative Committee.

The Medicare Benefits Consultative Committee comprises representatives from the Department of Health, the Health Insurance Commission, the Australian Medical Association 'and the relevant craft or craft groups whose members have an interest in the items which are under review' (www.health.gov.au/internet/publishing.nsf/Content/health-medicarebbenefit).

We fear that the vesting of this power with the Federal Health Minister opens the Medicare Benefits Schedule, and all of the procedures specified therein, to the political process without the input of medical professionals and other stakeholders. Politicians do not have the necessary expertise or experience to alone determine which medical procedures should be publicly funded and which will not.

We are specifically concerned with the future, under these amendments, of payments relating to MBS items that cover abortion. Given the highly politicised nature of the abortion debate in Australia, we believe it is essential that decisions about the funding of abortions through

the Medicare Benefits Schedule be made through existing administrative structures and not be opened up to the political process where personal and political motivations could over-ride the health needs of Australian women.

Yours sincerely

Kath McLean On behalf of the Tasmanian Medicare Action Group