



Australian Divisions of **General Practice** Ltd

12 October 2005

Elton Humphery  
Committee Secretary  
Community Affairs Legislation Committee  
Parliament House  
CANBERRA ACT 2600

Dear Committee Secretary

**National Health Amendment (Budget Measures – Pharmaceutical Benefits Safety Net) Bill 2005**

**Health legislation Amendment Bill 2005**

Thank you for your letter of 6 October 2005 inviting ADGP to provide a short submission on the proposed Bills and notification of relevant public hearings.

In relation to the latter, ADGP has advised that it will not be attending the public hearings although the invitation to attend is appreciated. With respect to a short submission, this is presented below.

**Background on Divisions of General Practice**

The Divisions of General Practice Program is an integral component of the Australian Government's general practice policy. The program has resulted in greater involvement of general practitioners (GPs) in the development of health policy, the planning and delivery of health services at the local and regional level and the management of a range of health services delivery projects.

ADGP is the peak body representing the Divisions network of 118 Divisions which link 95% of GPs across Australia. The Divisions network supports general practice and is the key to integrating general practice with other parts of the health system to deliver high quality care to the Australian community. The Divisions network is also a major provider of education and training to GPs and general practice staff. Flagship national programs implemented through the Divisions network include those relating to immunisation, mental health, practice nurses, information management, aged care and rural palliative care.

**National Health Amendment (Budget Measures – Pharmaceutical Benefits Safety Net) Bill 2005**

Changes to the 'immediate supply' provisions

Noting the rationale for introduction of this amendment, ADGP supports in-principle the changes proposed. However, an issue may relate to those patients where the prescriber has increased the dosage of the medication (eg proton pump inhibitor class of drugs) and the prescriber has not sought authority for the increased quantity. A patient under these circumstances may be unnecessarily 'penalised' by not having the copayment amount not count towards the safety net threshold.

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## **Health Legislation Amendment Bill 2005**

### Pharmacy location rules

ADGP notes the extension of operation until the end of 30 June 2006 of the Australian Community Pharmacy Authority and the pharmacy location rules, and the current joint review of the rules. ADGP supports this amendment.

Although unrelated to this particular amendment, but in terms of the future of general practice and the move towards multidisciplinary medical clinics, it is suggested that the pharmacy location rules be relaxed to enable community pharmacies to be set up in medical centres.

### Schedule 3 – Amendments to the *Health Insurance Act 1973*

Noting the rationale for introduction of the two amendments, ADGP supports in-principle the changes proposed. However, ADGP does wish to express some reservation in regard to the 2<sup>nd</sup> amendment, which will provide the Minister with the authority 'to make a legislative instrument determining that Medicare benefits are not payable in respect of professional services rendered in specified circumstances'. Although this relates primarily to Medicare claims on new medical technologies before 'safety' and 'value for money' have been satisfactorily considered by government, caution should be applied in its utilisation. A determination made without due consultation with the health profession, particularly where it relates to general practice, may impact significantly on the community.

Yours sincerely



**Kate Carnell**  
**Chief Executive Officer**