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Kate Sykes
Media, Marketing and Communications Branch
Health Insurance Commission
ACT

22 August, 2005

Dear Ms Sykes

Re Tag lines for fraud postcards and name for the fraud tip-off line

Thank you for the opportunity to comment on this campaign undertaken by the Health Insurance Commission and the Dept of Human Services. While I note that the tip-off line will cover Centrelink, Medicare and Child Support, the postcards are for both Medicare and PBS.

With regard to the postcards the introductory information states that every year HIC receives 3000 calls regarding suspected fraud. However you have not provided any details on how many of these calls are credible and how many of the credible ones turn out to accurately report fraud. Were one to extrapolate from these figures, it might be that 50% or less are credible and not merely nuisance calls or ones motivated by malevolence. If this were the case, then some 4 calls per day per year would be credible. It is then likely that upon investigation, less than 50% of these calls could be called fraudulent, that is, to have been conducted with intent to deceive. I imagine that on investigation many of the credible cases will demonstrate reasonable explanations for the individual's behaviour, including requiring more services and more medications because of complex, serious and long-term illness. On this basis there would be some 2 calls per day to be investigated for fraud. Without substantial figures, I think it is unfair to request

that consumers and the community assume that fraud is widespread or that you ask them to support your campaigns by providing you with tag lines.

As you may be aware I have opposed this campaign where the community and consumers are expected to police other people's behaviours. I consider that the campaigns are motivated by a crude understanding of the problems in the community. I suspect that the small number of community members who do defraud Medicare and PBS are either mentally unwell or substance abusers and that dobbing them in to a fraud line will not assist them. Neither will this approach deter this small number, since it does not address the problems they face. The campaign clearly relies for success on manipulating community self-interest through use of tag-lines such as "It is your money. Stop cheats". Tag-lines such as these are misleading, since the money is from taxation and its expenditure relies on government policy. They are emotive and offensive and ultimately divisive to the community.

Such an approach is going to have some very unsavoury outcomes in our community. The most vulnerable people are the most visible and include the indigenous populations, the mentally ill, substance abusers, and the homeless. Another group is people with chronic illnesses who already face a great deal of discrimination in the community, because they may not be well enough to work or because they require more services and more medications than others. Campaigns such as this will further marginalise them. One young person with cystic fibrosis responded this way to the postcard tags:

I found it to be another way for the government to pick on chronically ill Australians. (we are marginalised as it is!) Our costs with living with an illness are high as it is let alone the stress of wondering what the government are going to do next. I believe there are other people rorting the system in other ways more than anyone would be this way, it just makes you feel like a burden to society being targeted all the time.

Research conducted by the Chronic Illness Alliance in 2003 and published in our report **The Costs of Chronic Illnesses for Rural and Regional Victorians** demonstrates that people with chronic illnesses live in poverty and are highly dependent on welfare and concessions. With campaigns such as these, that promote self-interest rather than better understanding, they are likely to be targeted as 'over-users'. They cannot afford to have their Centrelink payments, Medicare or PBS concessions stopped while someone investigates them for fraud on the basis of a malicious or ill-informed phone call. Recent experiences suggest that reassurances from Centrelink that this is an unlikely outcome, will not provide much comfort.

I would suggest that the money would be far better spent on more constructive approaches to compliance where education and information and better community support is provided for people with mental illnesses and substance abuse. People who have an intent to defraud Medicare may be dealt with through the Criminal Code, as are others who conduct criminal activities.

I have attached replies from members of the Chronic Illness Alliance in support of these views and when others come in I will also send them to you.

Sincerely,

Dr Christine Walker
CEO

From: Iva Steinke [Iva@steinke.bpa.nu]
Sent: Wednesday, 17 August 2005 4:48 PM
To: Christine Walker
Subject: Tag Lines for postcards feedback
How you can submit your feedback:

- A) Provide your feedback at the Consumer Communication Group meeting on 15 June
- B) Email your responses back prior to 15 June to kate.sykes@hic.gov.au
- C) Fax your responses prior to 15 June to 6124 7000
- D) Call Kate Sykes (ph: 6124 7369) who will return your call and you can provide answers to the questions over the telephone prior to 15 June

Medicare and PBS Fraud Communication Messages — Consumer Communications Group feedback

Every year HIC receives about 3000 pieces of information from members of the public reporting instances of suspected fraud or non-compliance. HIC relies on the public to provide information and most of this is received through the Medicare offices and general enquiry lines.

Our communication strategy to address this issue to date has focused on establishing a dedicated national telephone line, fax service and mailing address to report suspected fraud. In addition, a website address has been established to provide this contact information and a downloadable form to report suspected fraud – www.hic.gov.au/reportfraud

As part of the Reporting Suspected Fraud communication strategy, postcards and posters targeting consumers will be distributed to our Medicare offices nationally.

We seek your feedback on tag lines for the postcards and posters. Enclosed are examples of the posters and postcards so you can assess the tag lines (directly below) in the context of what consumers will view.

Please note that the creative used in the poster and postcards deviates from the usual background shots of 'happy families'. We believe that the issue of Medicare fraud is not applicable to the usual creative style used. If you have any concerns, please contact us.

1. **Do you know anyone cheating?**
2. **It's your money. Stop cheats.**
3. **Suspect it? Report it! It's everyone's responsibility.**
4. **Suspect it? Report it!**
5. **Who pays? You pay. Report Medicare and PBS cheats.**
6. **It's your money. Stop Medicare and PBS cheats.**

Please write your answers in the spaces below:

<p>Do these tag lines in general grab your attention and why?</p> <p>Nos. 3,4,5 are the more eye-catching phrases to me.</p>
<p>Do the tag lines make you interested in reading more information on suspected fraud or abuse of Medicare and PBS programs?</p> <p>No. I am not interested in fraud on these issues. I don't object to people receiving treatment and medication however they get it..</p>

Do these messages make you want to be more vigilant as a taxpayer? Why?

No. I believe Medicare/PBS fraud are a drop in the ocean compared to the amount of taxpayer's money wasted by governments. I wouldn't waste time and money on trying to punish the poor and/or the sick.

Do you think that suspected fraud or abuse has been explained clearly enough?

On the internet it is explained, but many people do not have access to the internet. Also I suspect that I have my idea of what fraud is but it probably does not coincide with the official position. For example, I thought that deliberately providing misleading information was fraud but I know instances where accusations of fraud were levelled at obviously innocent people, one such case actually went as far as litigation, another took months of investigation causing a lot of unnecessary stress for the families involved.

Out of all the tag lines provided, which two do you prefer the most and why?

I would possibly stop to look at 4 and maybe 5 because I would want to see what 'it' is and what I'm paying for..

How do you feel about this initiative of reporting suspected fraud of Medicare and PBS in general?

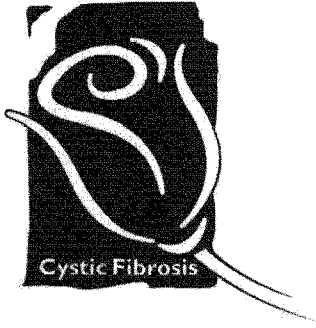
I think its pathetic that we would spend so much time, money and effort for what seems to me would be little return in the scheme of things. Why not put this effort where there is a hope of recouping some money – large tax cheats with their creative accounting, for example. The only person I personally know of convicted for fraud ended up in jail – costing the taxpayer even more money supporting her and her family, not to mention the long-term problems caused by the family separation.

The proposed method of communication is via posters in Medicare offices and a postcard that consumers can pick up and take with them. What is your opinion on this? Do you have any suggestions on how to more effectively communicate this message via Medicare offices?

Via Medicare offices, no. Postcards may be a good idea, Video programs on screens may be another. I don't know the size of your target – personally I have not been to a Medicare office in many years.

Do you have any other comments?

To reach a greater number of people you need a series of radio adv., explaining what may look like fraud to the outsider. Also explain the action that would be taken and penalties that apply. It is practically impossible to know whether someone else is or is not entitled to services or payments.



Cystic Fibrosis Victoria Inc.

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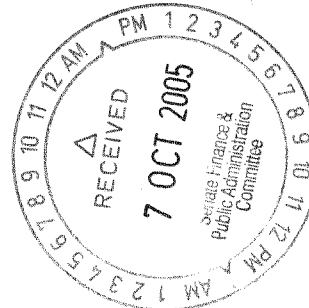
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Patron-in-Chief John Landy, AC, MBE, Governor of Victoria

18 August 2005

Dr Christine Walker
Chief Executive Officer
Chronic Illness Alliance
818 Burke Road
CAMBERWELL VIC 3124



Dear Christine

Thank you for the opportunity to comment on a serious issue affecting people with a chronic illness.

I offer the following comments in relation to your request for feedback in relation to the Medicare and PBS fraud issue and the proposal from the Health Insurance Commission.

CFV is seriously concerned to learn of the approach being considered.

CFV deals very closely with chronically ill people including their families. CF is a particularly complex health issue that impacts across the full spectrum on all life issues. These include first and foremost health and the related costs, not to mention grief and loss, anger management, and social issues such as living in poverty.

The tag lines for the Medicare and PBS Fraud initiative are particularly concerning to the CFV Board and management and to the constituency we represent.

Ms Kate Sykes, in her brief, states that the broader campaign will be a 'softly softly' approach yet the concept being proposed couldn't be further from the truth.

Fraud is played out at all levels of the community – and there are different ways of dealing with fraud. Further, the word 'fraud' has a connotation that is both offensive and intentional. For persons holding key positions in government and other decision making organisations that affect welfare recipients, although they do not have to live with the issues of chronic illness and its implications, they should be in an informed position to have an understanding of and be sensitive to the immense difficulties that these people endure every day of their lives.

There is no appropriate name for a fraud tip off line (including the phone number) and CFV is completely opposed to any such notion and indeed any such communication approach of this nature within the community at large.

The real issue here is how all governments across Australia better support the needs of chronically ill people. To suggest that a person with a genuine chronic illness can live a decent quality of life, on a pension that is barely able to cover essential costs, is unrealistic and personally offensive to the individuals concerned.

Cystic fibrosis is one of the more demanding of chronic illnesses for the individual and the family or immediate carer such as their spouse.

CF demands enormous ongoing expenses for medications and other essential health related expenses eg physiotherapy equipment, pancreatic food enzyme replacements to name just two.

These people did not ask to be born with cystic fibrosis which is a chronic, degenerative and incurable genetic condition. They would have preferred a life where they, like others, could have had an education, a career, a family, their independence and their dignity – basic life opportunities others who are healthy take for granted. All have been denied them.

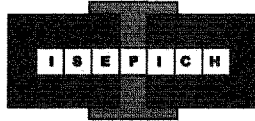
My recommendation to the Health Insurance Commission is that they report back to Minister Hockey and others in key government positions the community sector's very strong opposition to this proposed campaign that targets yet again the most disadvantaged in our community – those who are chronically ill.

I will complete and forward our answers to the questions the Australian Government Health Insurance Commission has sought responses to.

CFV would be pleased to work further with the Chronic Illness Alliance to run a campaign strongly voicing our opposition if you as Chief Executive Officer believe this is the next step we take on this matter.

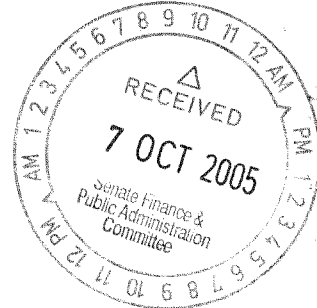
Yours sincerely

Jenny Reece
Chief Executive Officer



22 August 2005

Dr Christine Walker
Chronic Illness Alliance
818 Burke Rd Camberwell Victoria 3121



Dear Dr Walker

Health Insurance Commission - Medicare and PBS fraud.

I refer to the information you circulated on behalf of the HIC in relation to proposed strategies to combat fraud.

The Inner South East Partnership in Community and Health is an alliance of over forty organisations which provide a wide range of health and community services in the Cities of Port Phillip, Stonnington and Glen Eira. Our aim is to promote the health and well being of the population, with a particular emphasis on groups and individuals who face barriers to maintaining optimal health and well-being.

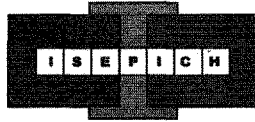
Many of our agencies provide services to people with mental illness, drug and/or alcohol issues and complex psychosocial problems. The vast majority of such people live in chronic poverty and many reside in insecure housing. While we appreciate that the HIC must take measures to ensure that fraudulent claims in relation to Medicare and the PBS are minimised, we do not believe the establishment of a telephone line for reporting suspected cases of fraud is an appropriate response.

Furthermore we strongly object to the suggested 'tag lines' for posters and postcards as we believe that language of this kind perpetuates a perception that the incidence of fraud is widespread. We believe that encouraging members of the public to report people through this method can lead to the stigmatizing of certain groups with disabilities and particular health conditions.

I would appreciate it if you would include ISEPICHs views on this issue in your deliberations as a member of the HICs Community Stakeholder Group.

Yours Sincerely

Inner South East Partnership In Community and Health
Private Bag 3, St Kilda Post Office 3182
Ph 9209 6455 www.isepich.org



Barry Hahn

Barry Hahn
Project Manager

Inner South East Partnership In Community and Health
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Ph 9209 6455 www.isepich.org

Hello Christine

I agree with you entirely.

The campaign should include supporting fellow members of our community for whom life is affected by a range of factors out of their control. Maybe the approach that's used for company and other related fraud could be promoted!

Thanks

Lisa Loughnan