

HUMANIST SOCIETY OF VICTORIA Inc.

Affiliated with the Council of Australian Humanist Societies (CAHS) and the International Humanist and Ethical Union (IHEU) London, UK

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Mr Elton Humphery, Secretary Senate Select Committee on Medicare, Parliament House, Canberra ACT 2600

Re: PROPOSED CHANGES TO MEDICARE



SUBMISSION FROM THE HUMANIST SOCIETY OF VICTORIA. (HSV)

The HSV is a secular organisation fostering ethical, rational and responsible behaviour, human rights, the democratic processes and a just and inclusive governance.

It seeks to alleviate suffering, to promote wellbeing and the attainment of one's full potential. It engages in educational, community and charitable activities.

The views that follow have been formulated at specially convened group discussions to which all HSV members are invited. Further supportive information is obtained from print publications, the Internet, public lectures and from individuals with relevant expertise.

The Convenor of the HSV Submissions Committee is authorised to present these views.

- 1. Universal health insurance was introduced in 1975 as Medibank and again as Medicare in 1984, both times explicitly as a universal health cover system.

 This was done on the basis that health services along with schooling, academic investment and the justice system are a public good and fundamental to social equity.
- 2. The proposed changes to Medicare will destroy this equity and create a two— or three-tiered health system. A recent and alarming example of market forces at work in health care is a medical clinic in Fawkner, Victoria, offering their patients three options: for \$30 extra payment the doctor will see them immediately without prior appointment; for \$15 extra they will be treated as a private patient at the time of their prior appointment. These charges are not refundable. Those who cannot afford them will have to wait further down the queue regardless of the time of their appointment or the urgency of their health problem.

 This reprehensible approach to health care provision will be occuring on a wider scale with the proposed 'deregulation' of the Medicare system, as it does in the USA at present.
- 3. We believe that the massive subsidy of private health care destroys the integrity of an egalitarian and civil society.

 We accept that there are growing pressures on the health care system such as an aging population and increased cost of treatment. At the same time, hospital privatisation and the corporatisation of many general practices, opened the system to
- 4. We believe that access to good quality health services should be universal and not dependent on income.

market forces which are noted for creating social inequity.

We regard the the 30% rebate for private health insurance as very inefficient in terms of its objectives. Value for money from private health insurance continues to decline in spite of the rising premiums and a significant infusion of public funds namely the annual \$2.5 billion in premium subsidy. We believe that this money from general revenue should be put into the public system which covers everyone and to which many of the privately insured turn to in emergency.

- 5. Health economists (professor Stephen Duckett and Dr Terri Jackson) calculate that the premium subsidy used efficiently could solve the problem of the waiting lists, the crisis in the public hospitals, compensate doctors adequately to resume bulk billing and invest profitably in systems of early intervention and prevention of ill health.
- 6. We applaud the proposed funding of 234 additional medical school places, the increased GP trainee places and the assistance to employ nurses in GP practices.

7. We urge the Government to:

- a. Maintain the present universal health cover system respected for its quality and equity.
- b. Withdraw the current Private Health Insurance rebate and use the money to improve the primary care services.
- c. Legislate to <u>prevent</u> the emergence of a two- or three-tiered system such as the discredited USA health model.
- d. Invest in the very cost-effective measures of ill health prevention.

Yours sincerely,

Halina Strad

Halina Strnad,

Convenor, submissions committee

11.8.2003.