

THE TURNBULL COALITION TEAM

CCHQ 2016



28 June 2016

Ms Julie Heraghty
Chief Executive Officer
Macular Disease Foundation Australia
Via email: mark@mdfoundation.com.au

Dear Ms Heraghty

Thank you for the opportunity to provide the views of the Coalition on important issues facing your members. On behalf of the Coalition Members of Parliament and candidates I am pleased to respond to your questionnaire.

Australia's future depends on how well we can continue to grow and shape our economy.

Only the Liberal and National Parties have an **economic plan** to do that and ensure Australia's future.

We have a clear plan to transition the economy from the mining and investment boom to a stronger and more diverse economy.

The key elements of our national economic plan for jobs and growth are:

- An Innovation and Science programme bringing Australian ideas to market. This means greater investment and more jobs and opportunities for our young people;
- A New Defence Industry plan that will secure an advanced defence manufacturing industry in Australia. This will create thousands of new hi-tech, higher paying jobs;
- Export Trade Deals that will generate more than 19,000 new export opportunities. These will create many more jobs for our urban and regional families;
- New Tax Incentives, which will include tax cuts for more small businesses. More than two million businesses can benefit, to deliver more growth and jobs; and
- A Strong New Economy with more than 200,000 jobs expected to be created.

Our national economic plan and management is already paying dividends. Last year our economy continued to grow creating almost 300,000 new jobs, many of them in small business.

We cannot put economic growth and the jobs that come with it at risk with a return to Labor and their debt and deficits, high taxing, big spending ideas.

Only a Liberal and National Party Government can protect Australia's future.

Once announced, our policies will be available at www.liberal.org.au and www.nationals.org.au.

Thank you for communicating the Coalition's commitments to your members.

Yours sincerely

A handwritten signature in blue ink, consisting of several connected strokes that form the name 'Tony Nutt'. The signature is written in a cursive style and is positioned above the printed name.

Tony Nutt
National Campaign Director

COALITION RESPONSE TO MACULAR DISEASE FOUNDATION AUSTRALIA

The Turnbull Coalition team appreciates the significance of Macular Disease in Australia and supports appropriate preventative health measures to decrease the rate of avoidable vision impairment and blindness.

The Turnbull Government values the contribution of the Macular Disease Foundation Australia in supporting Australians who live with chronic, degenerative low vision.

The Coalition's support is demonstrated by the more than \$540 million commitment to making treatment of diabetic macular oedema and retinal vein occlusion more affordable. By listing Lucentis on the Pharmaceutical Benefits Scheme patients now pay \$6.10 concessional or \$37.70 general, instead of up to \$10,000 a year for this life-changing treatment. This listing increases the total taxpayer investment in medicines that treat eye conditions to \$1.5 billion over five years.

The Coalition recognises that vision loss has a powerful impact on independence, employment and quality of life. We have delivered on the National Disability Insurance Scheme (NDIS) that will significantly improve the lives of people with vision loss and their families. The Coalition will continue to work with States and Territories to finalise agreements and to ensure that services are ready. At the end of 2015, nearly 28,000 people were being assisted through NDIS trial and early transition sites. When fully implemented, this number is expected to rise to 460,000.

The NDIS will be able to support people with low vision disorders, like macular degeneration, with aids and equipment to support their daily living and engagement in the workforce.

The Turnbull Government has now reached agreement for the full roll out of the NDIS with seven States and Territories - NSW, Victoria, Queensland, South Australia, Tasmania, the Northern Territory and the ACT.

Together, these agreements provide certainty for around 90 per cent of the 460,000 Australians expected to be eligible for the NDIS.

In Western Australia, we have agreed to extend the National Disability Insurance Agency (NDIA) and NDIS trials for an additional year, and expand them into new locations. This will give certainty to nearly 11,000 current and future participants of the Western Australian trials that they can expect ongoing support. The Commonwealth and Western Australian Governments have agreed to finalise arrangements for the full rollout of the NDIS in Western Australia by the end of 2016 for commencement of full transition from 1 July 2017.

The Coalition has announced the establishment of the NDIS Savings Fund Special Account to ensure the ongoing funding of the NDIS. Savings from across Government will be credited to the fund to meet the \$4.4 billion annual NDIS funding gap from 2019-20 that Labor left behind. This funding gap is expected to grow to over \$6 billion over the next decade. The Coalition has already committed over \$2 billion in savings to the fund in the 2016-17 Budget.

MEDICARE

The Coalition is committed to maintaining and improving Australia's world class health system, underpinned by a strong public hospital, Medicare and private health system.

Under the Coalition, health expenditure continues to grow every year. Total Commonwealth Government spending is projected to increase from \$69.2 billion in 2015-16 to \$71.4 billion in 2016-17 and \$79.3 billion in 2019-20.

The \$71.4 billion health expenditure contained in the 2016-17 Budget marks an increase of 3.2 per cent on 2015-16. This expenditure includes an additional \$2.9 billion for public hospitals arising from the new three-year Heads of Agreement between the Commonwealth and the States and Territories. Total Commonwealth investment in public hospitals is more than \$95 billion over the period 2015-16 to 2019-20.

The Coalition believes Australians deserve a world class health system with affordable access to high value services provided by highly skilled doctors, nurses and allied health professionals.

We are committed to Medicare and need to ensure this system is there for our children and their children. That is why we are working to build a *Healthier Medicare* and maintain high quality care and treatment for all Australians.

The Turnbull Government is not privatising Medicare

Medicare will never be privatised. Medicare will never be sold. Every element of Medicare services that is being delivered by government today will be delivered by government in the future.

In 2015-16, the Coalition is expected to spend \$21 billion in medical benefits supporting Australians with their healthcare, with 390 million services expected to be billed.

Bulk billing rates have reached historic levels under the Coalition. The latest quarterly Medicare data shows bulk billing rates increased to 78.1 per cent year to date in 2015-16 (July to March), compared with 77.5 per cent over the same period last year. This is the same trend for GPs, with bulk billing increased to 84.8 per cent, compared with 84.0 per cent. Under Labor, general and GP bulk billing rates averaged between three and five percentage points lower than the Coalition at 75 per cent and 79 per cent respectively.

PRIVATE HEALTH INSURANCE

A strong private health insurance system is a fundamental element of our health system that offers consumers greater choice over their care whilst taking pressure off Medicare and public hospitals so that their universality remains sustainable.

The Coalition introduced the private health insurance rebate and only the Coalition can be trusted to protect it.

A re-elected Turnbull Government will improve the value for money Australians receive from their private health insurance and ensure they can easily shop around for a more-affordable deal. We will do this by ensuring Australians can access standard levels of cover that is explained in plain English and protects patients against junk policies and fine print.

Our reforms will include:

- developing easily understood categories of private health insurance policies (e.g. labelled gold, silver, bronze);
- weeding out junk policies (policies that only cover patients in a public hospital) by ensuring consumers have access to a product with a mandated minimum level of cover;
- developing standard definitions for medical procedures across all insurers so that consumers can compare policies more easily;
- simplifying billing so that consumers can receive a single bill covering all costs of a medical procedure – such as the surgeon and anaesthetist – to avoid unplanned bill shock;
 - making fine print and commissions more transparent;
 - ensuring the current gateway www.privatehealth.gov.au reflects these improvements and allows consumers to more easily compare policies and access information; and
 - developing products to meet the specific needs of Australians living in rural and remote Australia.

Community rating will be maintained. This means that consumers will not pay different premiums based on their age, health or lifestyle factors (eg. smoking).

The Coalition will also ensure that private health insurance is affordable and gives people value for money, by allowing people to shop around for a better deal and addressing the regulatory issues that are adding to the cost of premiums and discouraging innovation.

There are currently over 40,000 private health insurance products on the market and consumers are rightly frustrated. Making it easier for consumers to shop around will increase competition in the private health sector and, in turn, improve value for money and affordability for consumers.

Where a patient is not admitted to hospital, and has a procedure carried out in a day surgery, specialist's rooms or a diagnostic facility, Medicare benefits are paid at 85% of the Medicare Benefits Schedule (MBS) fee.

Insurers are prevented from paying benefits for fees charged by a doctor providing a Medicare service out-of-hospital by the *Health Insurance Act 1973*. This has been long-standing Government policy and ensures that people are not given preference in access to primary medical care because they can afford private health insurance. If out-of-hospital services, (such as visits to a GP, out-of-hospital procedures carried out by a specialist or diagnostic services) were covered by private health insurance, the argument has been that this would put the cost of insurance out of reach for many people.

However, if a treating medical practitioner considers it accepted medical practice that specific macular disease treatment should be done in hospital and admits the patient, private health insurance can cover the treatment.

Around 12 million Australians have private health insurance – that's half the population.

Labor's cut to the private health insurance rebate now total \$7 billion without any reform to match. This includes cutting support for families on incomes under \$100,000 – the very people who Labor claimed needed to be protected.

OPTICAL COHERENCE TOMOGRAPHY

Optical Coherence Tomography (OCT) is not currently listed on the MBS. Under current arrangements, for a new service to become available on the MBS, it needs to be considered by the Medical Services Advisory Committee (MSAC). The MSAC is an expert committee that advises the Government on whether a medical service should be publicly funded based on an assessment of its safety, effectiveness and cost-effectiveness.

A re-elected Turnbull Government will, in consideration with other funding commitments, take the advice of the expert MSAC committee into consideration when considering future funding for OCT as an MBS item.

PREVENTATIVE HEALTH AND CHRONIC DISEASE MANAGEMENT

A re-elected Turnbull Government will continue to invest in preventative health activities targeted at the specific needs of the population.

Under the Coalition, work is progressing on the National Strategic Framework for Chronic Conditions which will supersede the National Chronic Disease Strategy 2005. This national framework will recognise links between National and State-based chronic condition strategies and consider how best to deliver co-ordinated, integrated and multidisciplinary care.

Obesity and being overweight are risk factors for many chronic conditions. The Coalition recognises the importance of developing healthy habits early in life.

For this reason, we invested \$360 million directly into Australian national sporting organisations and athletes from 2013-14 to 2015-16 and provided \$100 million for the Sporting Schools Programme.

In the last three years, the National Health and Medical Research Council has committed over \$11 million to research into the benefits of physical activity.

The Coalition continued funding for the Good Sports Programme in the 2014-15 Budget, committing \$19 million over four years. The measure reaches around 1.7 million Australians and 7,000 community sporting clubs across 60 sports with its alcohol management programme.

The Coalition is making it easier for consumers to make more informed and healthier food choices. We continue to work with key stakeholders and States and Territories to promote healthy living through initiatives such as the voluntary 'Health Star Rating' (HSR) food labelling system. Over 1,800 products from at least 55 companies now carry the Health Star Rating label. Companies are choosing to reformulate their products in some instances to achieve a better star rating.

The Coalition recognises that smoking causes great harm to Australians and leads to deaths from cancer, lung and heart disease. The Coalition continues to build on measures it has introduced to address smoking rates. This has included graphic health warnings and the implementation of a four-

staged increase in excise and excise-equivalent customs duty on tobacco and tobacco-related products.

The Coalition continues to invest in national screening programmes for early diagnosis of cancer. Breast Screen Australia is receiving an additional \$55.7 million for 2013-14 to 2016-17 to expand its screening programme.

The National Cervical Screening Programme has been renewed and the National Cancer Screening Register is being established. The National Bowel Cancer Screening Programme is receiving \$354 million from 2014-15 to 2017-18.

The Coalition has also delivered a National Diabetes Strategy to inform how existing resources can be better co-ordinated and targeted across all levels of government and to prioritise the national response through an emphasis on prevention, early diagnosis and intervention, management and treatment.