

MEDIA RELEASE



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Doctors 'very concerned' at looming after-hours arrangements

The Rural Doctors Association of Australia (RDAA) says rural doctors are becoming increasingly concerned that looming changes to funding arrangements for after-hours medical services could impact on their ability to continue providing after-hours care to their local communities.

From July 2013, three federal Practice Incentive Payments (PIPs) that have supported rural practices to provide after-hours care will be discontinued, with the funding transferred to Medicare Locals. This will leave Medicare Locals with the responsibility for planning after-hours services, and the power to determine whether existing arrangements will continue to be supported.

RDAA is concerned that this may lead to a reduction in after-hours funding support for small rural practices or a centralisation of services to larger regional centres, forcing rural patients to travel long distances to access after-hours care.

"While Federal Government guidelines state that existing after-hours arrangements that are working well should continue to be supported by Medicare Locals, these are only guidelines" RDAA President, Dr Paul Mara, said.

"Unfortunately, we do not have confidence that these new organisations, which cover a large geographic area and have been tasked with a large and demanding work program, will have the capacity to effectively plan and support after-hours services arrangements, particularly in smaller rural communities.

"Any reduction in after-hours funding would represent a serious financial threat to many rural practices that have been diligently providing after-hours care over many years, and in a substantial number of cases over 30 years. There is no guarantee that Medicare Locals will return these funds to practices that are already providing after-hours care...and providing it well.

"Rural doctors may see the loss of the PIP supports as a signal that their efforts in attending after-hours callouts late at night and on weekends are simply not being appreciated by policy-makers, and may consider pulling out of after-hours care entirely as a result.

"And in cases where practices may try to continue to provide after-hours care with less funding, this will increase stress levels for already overworked rural doctors, not help alleviate it.

"There is also the potential for massive cost-shifting under this new arrangement, and the clinical and financial viability of smaller rural hospitals will be seriously threatened as state governments take the opportunity to close down services and devolve responsibility to the Commonwealth through MBS bulk-billing and other strategies.

"Ultimately, we fear that after-hours services could collapse, and many rural patients will have to travel large distances to regional centres to access after-hours care, with the associated costs and risks.

"Australia now has a carbon tax, a mining tax and soon we will get an after-hours 'tax' on rural doctors providing a valuable service as millions of dollars are ripped out of PIP after-hours practice supports.

"This doesn't sound like an improvement in rural healthcare to us."

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