



FACT SHEET

Higher utilisation costs for MBS and PBS

What the Australian Government is doing

The Government is providing funds to meet the expected increased costs to the Medicare Benefits Schedule (MBS) and the Pharmaceutical Benefits Scheme (PBS) as a result of Indigenous Australians making greater use of mainstream medical services.

How this will work

- The Government will fund the increased PBS and MBS costs associated with parts of the Indigenous Chronic Disease Package, such as:
 - providing incentives through the Practice Incentives Program for general practices to register Indigenous patients and provide target levels of care;
 - encouraging Indigenous Australians to access health services and increasing access to, and affordability of, mainstream healthcare;
 - providing coordinated care and flexible funding for follow-up care through the new Care Coordination and Supplementary Services Program (CCSS); and
 - changing the MBS to allow 10, rather than five, follow-up services by a practice nurse or Aboriginal Health Worker per patient per calendar year, to an Indigenous patient who has received a health assessment.

How this will help Indigenous Australians

- This measure funds the increased use of specific Medicare Aboriginal and Torres Strait Islander Health Assessment items with around 45% of the adult Indigenous population expected to receive a health check over the four years to 2012-13.
- Indigenous Australians will be provided with an estimated 400,000 additional chronic disease management services provided through the MBS over four years.
- They will also have their condition(s) managed better through significant additional referrals to specialist and other services.

Who will implement the new approach

- The Australian Government is providing additional funding to meet the expected increased costs to the MBS and PBS.