



Consumers Health
Forum OF Australia

SUBMISSION

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Key Recommendations

The Consumers Health Forum of Australia calls on the Commonwealth Government to invest in and reform the health sector by including the following programs and initiatives in the 2025/26 Budget:

1. Reform and refocus the Health Peak Advisory Body program
2. Reform the primary care system with improved bulk billing options and safety nets
3. Reform the oral healthcare system
4. Reform the specialist referral process
5. Invest in the CHF Consumer Assembly
6. Invest in CHF as the coordinator of national health peak sector development
7. Invest in CHF to address Safety & Quality and Workforce matters
8. Invest in CHF as a coordinator of consumer health research
9. Invest in CHF and consumer education
10. Invest in CHF and the Coalition for Preventative Health Funding.

About CHF

The Consumers Health Forum of Australia (CHF) is the national peak body representing the interests of Australian healthcare consumers. CHF works to achieve safe, quality, timely, affordable healthcare for all Australians, supported by accessible health information and systems.

CHF member organisations reach thousands of Australian health consumers across a wide range of health interests and health system experiences. CHF positions and policy are developed through consultation with members, ensuring that CHF maintains a broad, representative, health consumer perspective.

CHF is committed to being an active advocate in the ongoing development of Australian health policy and practice. We believe that healthcare in Australia must be accessible, affordable and safe.

The themes of reform and investment are the core principles of CHF's budget submission for 2025/26. We are calling for changes that will help empower consumers to advocate for their needs in the health system, help consumers understand their health and help consumers afford their healthcare.

Reforming the Health sector

We call on the Commonwealth to reform four key areas of the health system to improve the care received by consumers and improve the value of the overall health care system.

1. Reform and refocus the Health Peak Advisory Body program

The Health Peak Advisory Body (HPAB) program has served an invaluable function in supporting consumers and community groups to input into the healthcare system for a decade. However, the value of HPAB grants has not been increased or indexed since the second round commenced in 2019/20 and as such the real value of the funding has reduced. Concurrently, explicit linkage of HPAB funding to specific project areas such the National Preventive Health Strategy has undercut the ability of the recipients to both act for the self-determined interests of the group they represent and meet the costs required to run an effective organisation (e.g. office leases, overheads etc). Finally, the single three-year cycle of grants is both too short to allow successful applicants to make long term plans and too infrequent to allow for eligible groups to apply to ensure viability.

As such, the Commonwealth should reform the HPAB program by:

- Restoring the real value of the program amount by doubling the current grants and then automatically applying indexation on funding for future years.
- Altering the scope of permitted funding uses to enable organisations to use funds for community driven priorities and operational costs.
- Moving to rolling or annual applications while allowing for successfully funded organisation to have funding agreements of up to 5 years.

2. Reform the primary care system with improved bulk billing options and safety nets

The up-front costs associated with seeing a GP or specialist significantly impact on consumers' access to care. Consumers continue to tell us that they struggle to find providers that will bulk bill them and care is increasingly unaffordable. Reducing out-of-pocket costs when consumers see a GP, specialist or allied health provider should be a priority.

To achieve this the Commonwealth should:

- Increase and index both bulk billing and blended payments rates to ensure they completely cover the costs of delivering healthcare,
- Establish more bulk-billing incentives to specifically target areas with low bulk-billing rates or low SEIFA ranking.
- Expanding the scope of what care and which providers can receive these payments to fully encompass general practice, specialists and allied health.

Concurrently the Commonwealth should take a three step approach to the system's Safety Nets:

- Reform the Medicare Safety net by simplifying it from three nets into one net.
- Reform the Pharmaceutical Benefits scheme safety net to be automatically applied when a consumer reaches the threshold.
- Reform *both* of those safety nets to be based on individual rolling 12-month periods for thresholds rather than a universal set January-December.

3. Reform the oral healthcare system

Oral health should be treated the same way as any other form of healthcare rather than as a separate silo. The Commonwealth should reform the system to fully integrate oral health into our universal access and affordability systems. The first steps of these reforms should include:

- Establishing a Senior Dental Scheme and low-income dental scheme
- Increasing funding for general public dental services
- Ensuring all oral health providers are funded to practice to their full scope
- Appointing a Chief Oral Health and Dental Officer to coordinate commonwealth activity in the area.
- Creating a Sugar Sweetened Beverages levy to fully fund these reforms and produce budget surplus.

4. Reform the specialist referral process

Consumers consistently express frustration around costly and inflexible referral processes. Reforms that encourage a move towards longer and more flexible specialist referrals would save the system time and money while being particularly beneficial for consumers with ongoing and chronic conditions.

Reforms should reduce demand on GPs and free up their time to see other patients reduce out of pocket costs and increase health agency for consumers, and save the Government on MBS rebates. To achieve these goals we are recommending that the Commonwealth:

- Support GPs to routinely provide 12-month referrals to specialists for new referrals and indefinite referrals for ongoing conditions, enabling follow up where needed.
- Encourage the use of unnamed referrals
- Implement new direct referral pathways as recommended by the Scope of Practice Review.

Invest in CHF and Consumers

We call on the Commonwealth to invest in six key areas of the consumer component of the health system to improve the capacity of CHF and consumers to effectively engage with improving the healthcare we all rely on.

5. Invest in the CHF Consumer Assembly

In the 2024/25 Budget, the Commonwealth provided CHF with \$500,000 of seed funding allowing us to undertake initial steps to establish a Consumer Assembly. The Assembly is envisioned to be a diverse group of approximately 50 consumers from all across Australia who can be drawn upon to provide in-depth consumer input and insights into primary health care projects and initiatives. The Assembly will have a particular focus on typically underrepresented groups such as younger consumers and rural consumers.

Now that we have recruited staff and laid the foundations for the Assembly, **we call on the Commonwealth to commit \$2 million over four years to fund engaging the 50 consumers and commencing the important work of the Assembly.**

6. Invest in CHF as the coordinator of national health peak sector development

In discussions with members and other consumer organisations it has become clear that there is a need in the health sector for general support for small organisations to effectively advocate and work for their community, similar to the role ACOSS plays in the community service sector. In the past there was an initiative designed to do this which was funded by pharmaceutical companies but the funding was not renewed after the initial 3 years. CHF has since tried to do this through our unfunded *Consumer Link* initiative to limited success.

We call on the Commonwealth to invest \$10 million over four years to enable CHF to provide national health peak sector development support. As the national health consumers peak body we are ideally placed to offer a set of services to other organisations operating in the sector. This will include general support for small health condition-specific organisations (or organisations working with specific communities), as well as targeted training and education support such as policy development, submission writing, engagement support and network development.

7. Invest in CHF to address Safety & Quality and Workforce matters

CHF has identified a need to develop its capacity to effectively and meaningfully engage in two ongoing major matters within the primary healthcare space: Safety & Quality and Workforce.

Addressing Safety & Quality matters requires staff who have robust knowledge of safety and quality issues, in particular a strong understanding of the regulatory framework. This skillset would enable CHF to more effectively participate in policy consultation, development and

implementation activities run by the Therapeutic Goods Administration (TGA), Australian Commission for Safety and Quality in Health Care (ACSQHC) and Office of Health Technology Assessment (OHTA); and to assist other consumers to do so.

Similarly, influencing Workforce matters requires staff with awareness of training, accreditation and regulation who can input into workforce strategy, shortage management and implementation of the Scope of Practice Review findings, e.g. socialising changes with consumers.

As such **we call on the Commonwealth to invest \$2 million over four years to allow CHF to hire additional staff with the necessary expertise to engage effectively in Safety & Quality and Workforce.**

8. Invest in CHF as a coordinator of consumer health research

CHF has long been a promoter of increasing consumer involvement in all stages of health research, as doing so will lead to more efficient and valuable research being conducted. However, this work is largely unfunded work for CHF and consequently piecemeal in approach.

As such, **we call on the Commonwealth to invest \$6 million over four years into CHF for the purposes of strengthening consumer engagement with health research.** This will allow CHF to conduct consumer-led research, develop Australia's Health Panel to become a representative body, aid researchers to engage consumers with their own research and collaborate with the National Health and Medical Research Council (NHMRC), Medical Research Future Fund (MRFF) and Australian Research Council (ARC). This funding would also be used recruit a Research Manager and Research Officer to deliver these activities.

9. Invest in CHF and consumer education

Supporting consumers to understand and navigate the health system is an important role undertaken by many CHF member organisations who have the specialist expertise and knowledge to assist consumers navigate their health issues. Broadly, however, many consumers are not fully aware of what they can access under Medicare. This impacts on how accessible and affordable healthcare is for them. Consumers also report finding the health system and its various services and processes complex and difficult to navigate, particularly when they are very unwell.

As such **we call on the Commonwealth to invest \$4 million over four years in CHF to lead the delivery of 'Understanding Medicare - understanding your health' community education sessions across Australia.**

10. Invest in CHF and the Coalition for Preventative Health Funding

Preventative health approaches help improve a community's overall health and help lower presentations for non-urgent medical care. *The Coalition for Preventative Health Funding* is a newly formed alliance of 19 consumer health organisations, working together to progress investment in community-based preventative health measures.

We call on the Commonwealth to invest \$0.8 million over four years in CHF to provide secretariat and operational support to the Coalition. We additionally call for the Commonwealth to work towards its previous commitment to allocate 5% of the overall health budget to preventative health measures by 2030 by directing funding to each of the Coalition Members to engage in preventative health activities.