



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



HOUSE OF REPRESENTATIVES

**HEALTH CARE
(APPROPRIATION) BILL 1998**

Second Reading

SPEECH

Wednesday, 3 June 1998

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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Questioner
Speaker Macklin, Jenny, MP

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Ms MACKLIN (Jagajaga) (6.07 pm)—We now know the truth about this government's commitment to Medicare. It does not exist. As the previous speaker, the member for Macquarie (Mr Bartlett), has quite clearly indicated to the House, he wants to go back to the system we had pre-Medicare—pre-1983—when two million Australians were without any health insurance coverage whatsoever. The member for Macquarie has made it quite plain to the House that the government wants to go back to a system where we had to rely on private health insurance, and public care was available only for the needy. I think that is how he put it at the end of his statement: public hospital care should be available only for the needy. We on this side of the House do not think that is the sort of health system we should have in this country. That is the system they have in the United States, and what is the situation there? They have 40 million people without any health insurance coverage, and it costs that country twice as much for health care as it does here in Australia. Labor is committed to Medicare and we want to see it strengthened; we do not want to see it whittled away.

We do not share this government's obsession—and I would have to say that there is no other word for it—with private health insurance. The job of the health minister should be to make sure that Medicare works and that people can get hospital care when they need it—not have an obsession with private health insurance. That is not the main game. The main game is making sure that there is sufficient funding for patient care, not wasting taxpayers' money on private health insurance subsidies, which their very own Jeff Kennett has called 'money down the drain'.

This is the question the member for Macquarie should be able to answer: why is it that every previous Medicare agreement has been signed but this time the Premiers know that the amount of money being put forward is just not enough to make public hospitals pay? With all previous Medicare agreements, the states signed up, but not this time. It is not by any means the case that all the state Premiers are Labor. It is the Victorian Premier who has been very outspoken, along with his Liberal colleagues.

I do not want to let the state governments off the hook, because the states do carry a significant responsibility to fund their public hospitals properly. The Kennett government did significantly cut public hospital funding in Victoria when it first came into office, but that does not mean that we should have a situation which leads us to debating this bill tonight. We are debating this bill because this government is incapable of getting the states to sign Medicare agreements. For hospitals like the Austin and Repatriation Medical Centre, which was technically bankrupt earlier this year because of the cuts of the Howard and Kennett governments, in my electorate, it will mean that they have no security about their future funding.

There are two things I would say to the Minister for Health and Family Services (Dr Wooldridge) in the context of this legislation. If it is the case that we are not going to have Medicare agreements but just have hospital funding paid directly to the states without the states signing agreements, what is this government going to do to stop the massive privatisation of public hospitals that is going on around the country? Let us have a look at the real impacts of the privatisation of these hospitals. In Western Australia we saw the privatisation of a public hospital, the Joondalup Hospital. Less than two weeks after it was officially opened, it was decided to cancel elective surgery for public patients. What did this government, which says it is so committed to public patients, do to the Western Australian government to make sure that this closure did not affect public patients? Absolutely nothing. As the memo from this hospital shows, the closure of wards was to affect only public patients. The government did absolutely nothing to make sure that public patients would retain their access to this hospital. This is the first indication of the development of a two-tiered health system in this country.

This move is going ahead in leaps and bounds in my own state of Victoria. An article in the *Age* on 7 May this year reported that doctors from Sale, Maffra and Heyfield hospitals were writing to the state minister saying that they are very concerned about those hospitals having to reduce medical services so that the privatised Latrobe Regional Hospital could make enough money. The state government has given the private owner of the Latrobe hospital—Australian Hospital Care Pty Ltd—a 20-year monopoly on public health services in this area. The

doctors in Sale, Maffra and Heyfield are very concerned that public hospital access to essential services in those towns is going to be reduced.

In my own electorate, the biggest privatisation of all is taking place. The Victorian government recently advertised for a registration of capability for the privatisation of the Austin and Repatriation Hospital—the proposed basis of private sector involvement to build, own and operate that hospital. We in the north-eastern suburbs of Melbourne are very concerned at that change. What I would like to know from the minister is how he intends to stop the privatisation of the Austin and Repatriation Medical Centre so that the people of the north-eastern suburbs—

Ms Worth—Mr Deputy Speaker, I move that the question be now put.

Mr Lee—You can't do it in the middle of a speech. It is customary to let someone finish their speech first.

Ms MACKLIN—I will put two questions to the minister. What is the minister going to do to stop the privatisation of the Austin and Repatriation Medical Centre so that the people of the north-eastern suburbs of Melbourne can continue to get public hospital care when they need it? I would like to call on the minister to make a decent offer to the states so that the Medicare agreements can in fact be signed, so that public patients in all of our hospitals, particularly those public hospitals that are being privatised in Western Australia and in Victoria, will know that they will not be charged for essential health care. Without Medicare agreements no public patient can be guaranteed that they will not face charges. This government seems as if it is just going to sit on its hands and watch major teaching hospitals being privatised around this country to the absolute detriment of essential health care.