



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



HOUSE OF REPRESENTATIVES

Federation Chamber

PRIVATE MEMBERS' BUSINESS

Chemotherapy Drugs

SPEECH

Monday, 27 May 2013

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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Questioner
Speaker Dutton, Peter, MP

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Question No.

Mr DUTTON (Dickson) (19:22): The House calls on the government to negotiate with relevant bodies regarding the cost of dispensing chemotherapy drugs and to ensure that dispensing can continue to occur without disrupting patients. This has been another disastrously handled policy by this government. We are now six months on from when I gave notice of this motion. We have had a Senate inquiry which clearly identified there were problems, and stakeholders have provided compelling evidence, and I thank them very much for that. Indeed, the Clinical Oncology Society of Australia said:

If there is no longer an income stream to maintain the clinical pharmacy services associated with the supply of chemotherapy, this is likely to affect the cost of care and patient access. Centres will close or pass on the additional costs to patients in order to remain viable.

The Pharmacy Guild of Australia stated:

Ongoing care for all Australian cancer patients, regardless of their type of cancer, is being put at risk by the current arrangements.

Other evidence to the committee found:

The service of preparing chemotherapy medication is highly complex, expensive and labour-intensive, and demands an environment and investment does not compromise on quality.

The government gave an undertaking last November to examine the 'cost of delivering vital chemotherapy services'. Incredibly, there is still no long-term solution. Earlier this month, on the eve of the Senate inquiry's report, the government rushed out an announcement. The supposed funding 'boost' is to start in July, but will cease in December 2013, providing no long-term certainty for patients, clinicians or providers, and smacks more of politics than it does of pragmatic solution. The government knew a potential issue existed with the cost of dispensing well before I gave notice of this motion, but failed to act. The inability to resolve or make a decision on funding for chemotherapy services is typical of the chaos and dysfunction of the Gillard government.

As stated in the inquiry's report:

1.12 The latest review follows a previous commitment given six months prior to this latest announcement to examine the 'cost of delivering vital chemotherapy services'. 1.13 The latest announcement prolongs uncertainty and undermines the effective and efficient delivery of treatments for cancer patients and their families. It points to a lack of appreciation for the critical implications being felt by chemotherapy services ...

1.14 Despite the announcement, the Government is still unable to detail for providers of chemotherapy services and their patients any definitive long-term funding solution.

Vulnerable patients requiring these services do not need the stress of being caught in a disagreement over funding that continues to drag on. This should have been a priority for the government and it should have been resolved last year. Minister Plibersek needs to explain what the government has been doing in its negotiations and why patients and clinicians now have to wait for another review. I gave notice of this motion, as I say, last November. The government was not able to negotiate an outcome over the Christmas and New Year period, so the minister needs to explain how negotiations will be undertaken when the interim funding ceases at the end of this December.

I would like to make clear that the coalition does support price disclosure. The coalition's reforms were negotiated cooperatively with the sector in 2007 and are estimated to provide up to \$5.8 billion in savings over a 10-year period. This has helped to support the sustainability of the PBS. But where broader anomalies arise from time to time with dispensing pharmaceuticals, particularly where there is a risk to patient services, it should be properly and transparently reviewed by the government and responded to. The issue here is a government that

has deliberately dragged its feet on a very, very important issue. Only due to parliamentary pressure, including the Senate inquiry and this motion, did the government belatedly announce a review.

However, this is a government with a chequered history, to say the least, and it is certainly chequered when it comes to pharmaceutical policy. Labor signed a memorandum of understanding with Medicines Australia in May 2010 to provide 'policy certainty', in its own words, to the sector in return for additional savings of \$1.9 billion over five years. Yet, within months, Labor effectively broke its promise and changed the convention on how governments list medicines on the PBS. Indeed, in February 2011, the Gillard government refused to list a number of medicines on the PBS that had been recommended by the independent Pharmaceutical Benefits Advisory Committee, blaming its 'fiscal circumstances'. It was a case in point on the consequences of this Labor government's economic mismanagement and fiscal recklessness. The move denied patients timely access to new medicines that had been independently assessed by the PBAC.

Again, after substantial political pressure and a Senate inquiry initiated by the coalition, the government agreed to list the deferred medicines in September 2011. However, this matter still has not been resolved and there remains a great deal of policy uncertainty around the listing process. Similarly, the chemotherapy issue remains another unresolved issue for this government. Six months from the giving of notice of the motion we are considering today, the government has failed to provide a genuine, long-term solution.

In closing, it is obvious from all of the government's actions that they pushed this out to December 2013, trying again, in their expectation of not having the competence to win the next election, to create some difficulty for an incoming government. It is a cruel political hoax being perpetrated on those chemotherapy patients as well as the providers around the country. To play politics in this area is completely unacceptable. I call on the government to provide a more long-term resolution to this very important issue. That necessitated us taking the action we did in the Senate inquiry and also in this motion. Yet again, the government stand condemned.