



Australian Health Care Reform Alliance

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MEDIA RELEASE

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NEW AIHW RESEARCH SHOWS UNIVERSAL HEALTH CARE UNDER THREAT

The Australian Health Care Reform Alliance (AHCRA) today called on the Government to investigate new figures from the Australian Institute of Health and Welfare (AIHW) showing that public patients waited more than twice as long as private patients in public hospitals for elective surgery than public patients.

AHCRA is a coalition of peak health organisations working together to create a better and fairer health system for Australia's future.

"AHCRA is concerned to see the AIHW report showing this large variation in median waiting times for elective surgery between public patients and those funded via private health insurance," Jennifer Doggett, AHCRA Chair, said today.

AHCRA was responding to the finding of the AIHW's report *Admitted patient care 2015-16: Australian hospital statistics*, that elective surgery waiting times to public hospitals vary by source of funding.

The report found that the median waiting time for admission to a public hospital for elective surgery was 38 days, with significant variation recorded depending on the funding source as well as the type of surgery performed. Public patients had a median waiting time of 42 days for elective surgery in a public hospital, while it was 20 days for patients who used private health insurance to fund all or part of their admission.

"This research is conducted by AIHW every year and this was the first time it has found a variation in elective surgery waiting times in public hospitals for public and private patients," Ms Doggett said.

"AHCRA is concerned that this reveals a new trend which will undermine the universality of our health care system.

"It is an essential cornerstone of our health system that our public health system treats people in the basis on need and not on their ability to pay.

"While we appreciate that there are valid reasons for public hospitals to treat private patients, we do not believe that this should occur at the expense of public patients.

"If public hospitals do not have enough funding to provide timely care to all public patients then the Federal and State/Territory Governments should work together to ensure they are adequately funded. They should not have to rely on revenue from private patients to subsidise the care of public patients.

"AHCRA calls on the Federal Government to investigate this finding further and to commit to working with the States and Territories to properly fund our public hospital system," Ms Doggett said.

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