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### **AMA SUBMISSION – TERMS OF REFERENCE, POST-MARKET REVIEW OF AUTHORITY REQUIRED PBS LISTINGS**

The AMA supports the proposed terms of reference of the review of Authority required PBS listings.

However, we recommend that an additional term of reference is included – the need for the cost of administering the Authority system to be assessed and considered when decisions are made about whether a medicine should require an Authority.

Specifically, the impact on the Department of Human Services (DHS) Authority phone line of each individual PBS medicine requiring an Authority should be assessed and costed.

The DHS phone line has been under-resourced for some time. Based on recent statistics provided to the AMA by DHS on the time doctors wait for their phone call to be answered, only around 70 per cent of calls are answered within 2 minutes. This means that in the period from October 2013 to February 2014, due to the time spent waiting for calls to be answered, doctors undertook an average of 34,174 consultations less per month.

The down-stream impact of decisions made by PBAC should not be ignored. The review should establish the acceptable standard for phone calls to be answered given the impact on efficient patient care and assess to care.

If medicines continue to require an Authority (rather than move to streamlined arrangements, to restricted benefits or no restriction), it is essential that the mechanism for doctors to obtain an Authority number is adequately resourced to achieve this standard.

Please contact Georgia Morris, Senior Policy Advisor, on 02 6270 5466 or gmorris@ama.com.au in the first instance with any queries.

Yours sincerely



Associate Professor Brian Owler  
President

12 June 2014

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