



PBS Submission:
Authority required listings review

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Introduction

Icon Cancer Care is pleased to have the opportunity to make this submission regarding the review of Authority Required PBS Listings to improve patient safety and care by reducing red tape and administrative burden for health professionals.

Icon's mission is to provide exceptional, personalised care to cancer patients and their families and would like to ensure, through this submission, we can advocate on their behalf to ensure all processes that impact treatment are as streamlined and efficient as possible.

Over the past six months, Icon Cancer Care estimates its medical oncologists and haematologists have spent a combined 450 hours on the phone obtaining approval for authority prescriptions.

We currently manage more than 73,000 patient separations (visits) each year in six day hospitals across Queensland and South Australia, with the support of more than 75 visiting medical officers (VMOs). In addition to supporting the VMOs who refer to our day hospitals and other smaller private hospitals in regional Queensland, Icon Cancer Care directly employs more than 380 staff.

Table 1 provides a snapshot of our day hospital operations and chair capacity, including for our new day hospital in Townsville, north Queensland, which opened on 2 December 2013.

Icon Cancer Care facility	Chairs	Special patient services
Adelaide	27	Clinical trials (through ACCR)
Chermside	25	Clinical trials Apheresis Lymphoedema Clinic
Southport	28	Clinical trials
South Brisbane	27	Clinical trials Apheresis
Townsville	15	Telehealth
Wesley	29	Clinical trials Apheresis

Icon Cancer Care is happy to share its view on the current remaining authority listings used throughout our centres and the current processes involved in obtaining these. Icon Cancer Care thanks the PBS for its consideration of the following information.

Current situation

Appendix 1 shows a six month analysis of authority prescriptions (original dispensing) for the four South-East Queensland Icon day hospitals: Chermside; South Brisbane; Southport; and Wesley.

Extrapolating the results from the analysis we found our medical oncologists and haematologists across Icon have spent, over six months, up to **460 hours** authorising prescriptions over the phone, with no net patient benefit. This is equivalent to the time needed for a medical oncologist or clinical haematologist in full-time practice to see an average of 1500 patients over a three-month period.

Appendix 2 demonstrates, via a time-in-motion study, the positive impact should the patient treatment chart become the prescription basis for reimbursement, including the time saved by key clinical staff (nurses and oncology pharmacists) in expediting treatment for patients without the need to wait on the doctor to complete the protracted phone approval process.

The administrative burden can be reduced significantly for doctors, pharmacists and Medicare by implementing the patient treatment chart as the prescription basis for reimbursement. With this we can ensure some of our most valuable resources in cancer care are not weighed down by clerical duties, while the Commonwealth can reduce administrative costs. Most importantly, our patients will benefit from more time being spent on medical consultation and care rather than waiting on a phone.

Recommendation

Icon Cancer Care recommends Authority Required Prescriptions be moved to Streamlined Authority Prescriptions, in line with Public Hospital Authority prescription requirements, while the Complex Authority process be reviewed in line with these changes and transitioned to an online system for quicker turnaround time and improved tracking to reduce treatment wait time for patients.

Appendix 3 is a summary of a list of drugs recommended by Icon Cancer Care to move to Streamlined Authority listing for Private Hospital Authorities, indicating which of these drugs are already streamlined authorities for Public Hospitals.

Conclusion

Icon Cancer Care recommends private hospital Authority Required medications be moved to Streamlined Authority approvals and further consideration be given to gains in better administrative processes, freeing up valuable hours for medical specialists and clinical staff to provide personalised care to our cancer patients.