Country patients still face cost barrier to see specialists

"The revised Guidelines for rural patients travelling to see specialists in Melbourne, will still leave significant barriers to care that city people would regard as routine" Christine Walker of The Chronic Illness Alliance said today. New Victorian Patient Transport Assistance Scheme (VPTAS) Guidelines released by the Dept of Health and Human Services are greatly improved on past guidelines as they are better set out and provide examples of how the Scheme works in practice (http://www.go.vic.gov.au/1epXMN). But they don't offer much more. There are small increases to the rates of subsidy for petrol costs and accommodation in Melbourne. Patients or their carers using their own vehicle will now receive 20 cents per kilometre, while accommodation will be subsidised at the rate of 45.10 per night (inc. GST). However, those patients who do not hold a Pensioner Concession Card or Health Care Card are expected to pay \$100 up front.

Christine Walker said today: "The revised Guidelines do not remove barriers for rural patients travelling to specialist centres in Melbourne. These barriers relate to the actual costs and consequent distress. This is recognised by Minister for Health Hennessy who in November 2015 ordered that Melbourne's hospitals reduce their parking fees."

People in rural areas are also poorer: having lower incomes, reduced access to services (health, education and transport) and fewer opportunities for employment. http://ruralhealth.org.au/documents/publicseminars/2013 Sep/Joint-report.pdf

Additionally petrol costs more in rural areas. For example, for the week ending 24/1/16 petrol in Melbourne averaged 109 cents per litre while in Bendigo it was 119 cents per litre and in Horsham it was 124.4 cents per litre (http://www.aip.com.au/pricing/retail/ulp/vic.htm)

An example from the guidelines:

A patient drives by car from their home in Creswick to the Royal Melbourne Hospital for an appointment, a distance of 123 km. They return home the same day. Total travel: 246 km \times VPTAS travel assistance: 246 km \times \$0.20 = \$49.20.

Missing from this example is that the petrol is likely to cost 120 cents per litre. Parking, lunches, and wear and tear on the car are all expensive. It does not take into account the level of poverty those patients may already be enduring. The ATO rate for car use for business purposes is at 65 cents.

VPTAS will contribute to improving rural health outcomes when:

- Petrol and accommodation subsidies are at realistic levels
- Rural people who are employed give up a day's work to attend a specialist centre are nit charged a 100.00 upfront; many employed in rural areas qualify as the 'working poor'.
- Parking costs are subsidised
- There is mechanism to ensure that rural and regional patients are actually informed of the VPTAS scheme at the time of their referral.

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