



**Joint media release
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Boost to COVID-19 telehealth welcome, but there's scope to do more

Joint statement by:

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RDAA and ACRRM welcome the Government's expansion of bulk-billed telehealth consultations by additional health professionals, in response to the COVID-19 emergency.

We also welcome the distribution of more P2 masks to GPs and pathologists taking samples and conducting tests – **however, many more masks and other personal protective equipment (PPE), as well as test kits, are needed urgently in rural and remote communities.**

While telehealth consults are already available with specialists, the new bulk-billed items will provide more flexibility. Eligible patients* who may not have access to video-conferencing at home will now be able to have a phone consultation instead – thus avoiding the need to share waiting rooms with other patients.

Previous limitations of needing to live at least 15 kilometres away from your specialist to be eligible for a telehealth consult have also been lifted with the new bulk-billed items.

Bulk-billed telehealth consultations will now also be available with midwives for eligible patients.

There is significant value in expanding access to telehealth consultations even further at this time.

During the COVID-19 emergency, the wider general public should be able to access phone and video-consults, even if these consults are not necessarily bulk-billed and are subject to the usual fee charged by a practice.

These consults could cover a wide range of patient needs, including prescription repeats and advice on health concerns that can reasonably be provided via the phone or video-conferencing.

This will not be appropriate for all consults, but the more we can keep patients out of waiting rooms, with less exposure to coronavirus, the better. It will also help to keep our clinicians well by reducing their exposure to patients who may not realise they have coronavirus. We urge the Federal Government to consider this measure.

*** Patients currently eligible for bulk-billed telehealth consultations are:**

- those in home isolation or quarantine as a result of coronavirus
- **non-coronavirus related consultations** for people at higher risk - including people aged over 70, people with chronic disease, Aboriginal and Torres Strait Islander people aged over 50, people who are immunocompromised, those who are pregnant, and parents with a child under 12 months old
- those meeting the current national triage protocol criteria for suspected COVID-19 infection

There are also new bulk-billed telehealth items for GPs and other doctors working in general practice to continue to provide certain health services to their patients during the period of the doctor's isolation. Allied

health providers with appropriate mental health training who are in isolation for possible COVID-19 infection will also be able to continue to provide mental health services to their patients during the period of the allied health provider's isolation.

It is imperative that the needs of rural and remote communities during this emergency are not overshadowed by those of the cities. The impact of coronavirus in smaller populations has the potential to be just as pronounced as in urban centres, especially given the poorer health profile of those living in rural Australia.

Find more information on the new telehealth items here:

<http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/content/news-2020-03-01-latest-news-march>

A high resolution photo of Dr John Hall is available here:

<https://www.rdaa.com.au/documents/item/687>

A high resolution photo of Dr Ewen McPhee is available here:

<https://www.rdaa.com.au/documents/item/968>

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