

MEDIA RELEASE

22 December 2021

Cancer specialists and cancer consumer groups urge deferral of changes to MBS telehealth arrangements which will hurt vulnerable patients

The Clinical Oncology Society of Australia (COSA) is extremely concerned about the impending changes to the MBS telehealth item numbers. The changes, intended to help people with cancer and other illnesses, will ultimately have a negative impact on some, especially those in vulnerable demographics.

In the lead up to the holidays on 16 December 2021, the Department of Health announced that temporary telehealth services introduced as part of COVID-19 measures will become permanent in the Australian health system. While this is welcome news, the fact that these changes will take effect on 1 January 2022 is of particular concern. Ten working days to implement such significant change is not sufficient, especially at a time when people with cancer are anxious about spending time safely in the company of their loved ones and when medical administration staff are already stretched.

One of the most concerning changes will restrict the use of phone consultations for some specialist items in favour of video conferencing. This is the wrong change, made at the wrong time with only two weeks' notice.

COSA President and Medical Oncologist, Professor Fran Boyle AM says "We acknowledge the strong support of Minister Hunt for rapid implementation of telehealth during the pandemic, but we know that many people with cancer are already vulnerable due to their disease and treatments. Video conferencing is not an option for many, notably older people and others with limited access to technology and reliable internet, especially those living in regional and rural parts of Australia. Some patients may be challenged following instructions in English, and for others discussing culturally sensitive matters presents additional stress."

Dr Rob Zielinski, Chair of COSA's Regional and Rural Group and a Medical Oncologist practising in Orange NSW said "My patients are already disadvantaged by distance, and some don't even have the internet at home, so requiring them to meet with me by video for their consults is just cruel. The alternative might be a six- hour round trip, or the risk of missing out on treatment or care."

We agree with the Government that since March 2020 telehealth has ensured continuity of care during the COVID-19 pandemic, protecting the health of both patients and health professionals. However, we do not agree that these latest changes have been made to align with evidence and expert advice.

A recent study to determine patient satisfaction with telehealth consultations has shown clearly that patients undergoing phone appointments were more willing to continue

telehealth than those using videoconferencing (Parsonson, et al., 2021). The researchers stated this may be due to technical difficulties with the videoconferencing technology with an impact on communication that can arise if sound or vision quality is poor due to internet connectivity and lack of bandwidth.

One of the study authors, Dr Andrew Parsonson said “Lack of infrastructure, information technology resources and organisational support were identified as key barriers to overcome going forward for scaled implementation of telehealth via video consultations. Unfortunately, some of these barriers have not been addressed in every scenario yet, so it’s disappointing to now see the Government mandating video consults.”

Consumer advocate groups are also concerned about loss of this high value care.

“Rare Cancers Australia is deeply concerned about the proposed restriction of telephone consults. Cancer disproportionately impacts older Australians who are not as technically proficient as younger patients. Denying them access to telephone consultation is heartless” said Richard Vines, Chief Executive of Rare Cancers Australia. “Additionally, I can report that the video conferencing facilities currently available at some of the major cancer centres are neither reliable nor intuitive. On each of the last four occasions when my wife has attempted remote consultation we have needed to revert to the telephone for effective communication.”

These changes are being forced upon us at what should be the best time of the year, not the worst. We do not believe these changes are in the best interest of our patients. We implore the Government to reconsider the haste at which these changes are being implemented, at the very least allowing the appropriate time for processes to be put in place for appointment rescheduling and planning.

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In addition to the organisations and individuals quoted, this media release is also supported by the Medical Oncology Group of Australia.

About COSA

The Clinical Oncology Society of Australia (COSA) is Australia’s peak multidisciplinary society for health professionals working in cancer research, treatment, rehabilitation and palliative care. COSA is recognised as an activist organisation whose views are valued in all aspects of cancer care. We are allied with and provide high-level clinical advice to Cancer Council Australia.

For more information about COSA, visit the website www.cosa.org.au

About Rare Cancers Australia

Rare Cancers Australia Ltd (RCA) is a charity whose purpose is to improve the lives and health outcomes of Australians living with rare and less common (RLC) cancers. RCA has a number of key areas of focus: Creating a Patient Community, Advocacy, Patient Support Programs, Fundraising, Treatment & Research along with Early Diagnosis.

For more information about RCA, visit the website www.rarecancers.org.au

About MOGA

The Medical Oncology Group of Australia Incorporated (MOGA) is the national, professional organisation for medical oncologists and the profession in Australia. As a Specialty Society of the Royal Australasian College of Physicians, MOGA maintains strong strategic alliances, working in close collaboration with many professional organisations and agencies in Australia and overseas.

For more information about MOGA, visit the website www.moga.org.au

Media inquiries

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Representatives from COSA, MOGA and Rare Cancers Australia are available for comment. Patients may also be available by arrangement.

References

Parsonson, A. O. et al., 2021. Patient satisfaction with telehealth consultations in medical oncology clinics: A cross-sectional study at a metropolitan centre during the COVID-19 pandemic. *Journal of Telemedicine and Telecare*.