

Cost of doctor visits putting off rural Australians

October 1 2015, by Sasha Petrova



Credit: AI-generated image ([disclaimer](#))

In some parts of Australia, two to three times more people are avoiding seeing their doctor because they can't afford it, according to figures released today.

A [report by the National Health Performance Authority](#) shows that in

2013-14, nearly 10% of people in Northern Victoria's Murray region missed out on GP visits because they were too expensive, compared with only 3% in Western and Northern Sydney.

In the Northern Territory, as well as North and South Brisbane, 6% of patients didn't see their GP due to affordability. In Eastern and South Eastern Melbourne it was 4% who faced cost barriers to primary [health](#) care.

The percentage of adults who said they delayed or avoided filling a prescription for the same reason was more than twice as high in some areas compared to others.

Rates ranged from 4-5% in places such as Northern, Central and Eastern Sydney and South Eastern Melbourne, to 13% in the rural Queensland regions of Darling Downs and West Moreton.

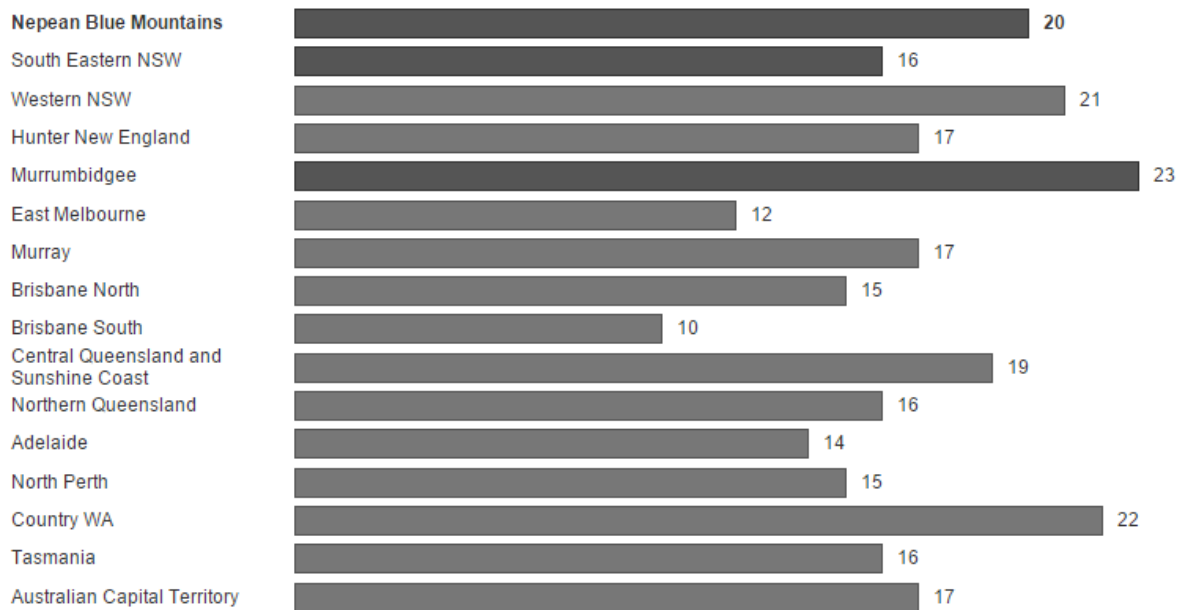
Emeritus Professor at The University of Sydney, Stephen Leeder, said the data showed connections between the lack of access to GPs and the number of people visiting emergency departments (EDs).

The Murray region, for instance, had a relatively high percent of patients visiting an emergency department in the reporting period (17%), with regions around central Sydney reporting the lowest (average of 10%).

"The fact that people use EDs when they can't get good general practitioner services is predictable and what would be expected," said Professor Leeder.

"That's especially the case in rural areas where there's less distinction drawn between going to see your general practitioner if you had an acute problem and going to the hospital, where you might be seen by a GP anyway."

Percentage of those visiting the ED



Source: National Health Performance Authority

The NHPA measured people's health experiences across 14 areas of the health care system including access, cost barriers to care, admissions to hospital, whether Australians had a preferred GP and how they rated their own health.

Although around 80-90% of those surveyed rated their health care positively, the number of Australians living with a long-term health issue ranged from 40% to 60%.

More people in Murrumbidgee in NSW, Western Victoria and Gippsland reported living with a long-term health condition (average of

60%). While the percentages of those with long-term health issues in areas around Sydney and Brisbane were in the low 40s.

Dr Lesley Russell from the Menzies Centre for Health Policy said it was interesting that in some cases (like the Nepean Blue Mountains' data) the figures showed barriers to care in areas where those barriers weren't necessarily expected.

She said this could be due to the 2013-14 data being collected when Australia was divided into 61 Medicare Locals. But because the NHPA used 31 Primary Health Network (PHN) areas to present the data, the figures would have been redistributed and extrapolated into the larger regions, hiding some of the local numbers.

The Australian government [replaced the Medicare Local areas](#) set up by the previous Labor government with Primary Health Network areas in July this year.

"Some of the PHNs are extraordinarily large and there's a lot of fine detail that's hidden in this data," Dr Russell said.

"It's clear there are areas where there are barriers to care. It's not always clear what those barriers are. At the moment, this data throws out more questions than it does answers."

"Clearly there are different issues about availability and affordability of healthcare in different places that need to be addressed even though we can't tell from this data what all those issues are.

Will each PHN have enough flexibility with its funding and the way it operates to address its own individual problems rather than a national, generic set of problems?"

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