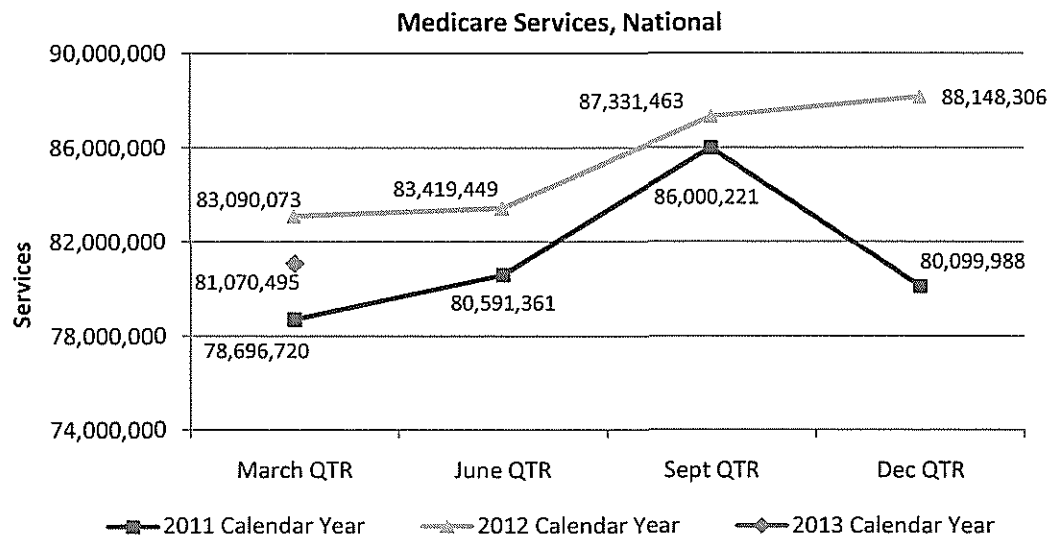
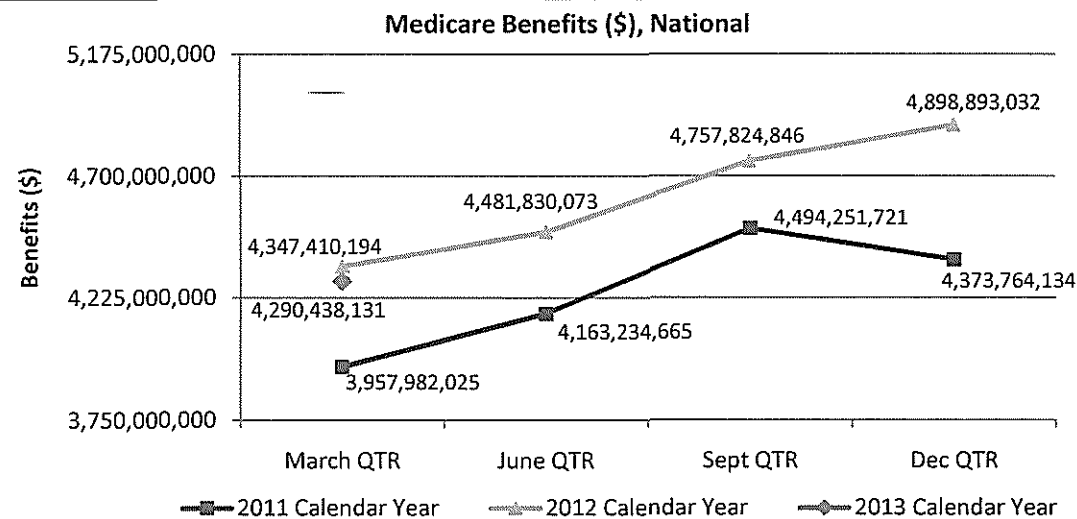


COMMENTARY



Some changes in the utilisation of services over time can result from adjustments to the Medicare Benefits Schedule (e.g. the introduction or closure of items) or changes to the coverage of Medicare as a result of Government policy. Growth is also driven by population growth.



The Medicare program is a demand driven program that meets the health needs of the Australian public. Factors that affect the total Medicare Benefits paid include population growth, changing demographics including ageing as well as changes in the pattern of use of medical services. Total outlays will generally increase in line with the indexation of Medicare benefits each year.

Please note there was a change to the MBS fee indexation in the 2013 Budget. Fees were previously indexed on 1 November each year however under the Budget change, MBS fees will now be indexed on 1 July 2014 (and then annually thereafter).

TOPIC: HEALTH PROGRAMS STATISTICS

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KEY POINTS:

Medicare

1 July 2012 – 31 March 2013:

- Total Medicare services are 256.6 million (2011-12 = 332.6 million)
- Total Medicare benefits paid \$13.9 billion (2011-12 = \$17.8 billion)

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BACKGROUND

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Medicare – Table 1	2011 - 12	01.07.2012 – 31.03.2013
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Services		
Medicare bulk billed services	252.7 million	196.3 million
Patient claimed services (includes Simplified Billing)	79.9 million	60.3 million
Total services processed	332.6 million	256.6 million
Benefits		
Average benefit per service	\$53.21	\$54.36
Average period service to lodgement	11.8 days	10.9 days
Average period lodgement to processing	2.6 days	2.8 days
Total benefits paid	\$17.8 billion	\$13.9 billion

Medicare – Table 2	2011 - 12	01.07.2012 – 31.03.2013
Bulk bill services	252.7 million	196.3 million
Services paid by cash (Medicare offices)	23.9 million	1.7 million
Services paid via simplified billing — in-hospital claims lodged electronically	23.3 million	19.0 million
Services paid by cheque to practitioner via claimant	7.5 million	4.9 million
Services via EFT	16.0 million	25.1 million
Services paid by cheque to claimant	2.6 million	2.6 million
Easyclaim account paid — patient claim paid by system (over EFTPOS network)	6.7 million	7.0 million
Total services	332.6 million	256.6 million

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Fact Sheet for Health Programs Benefits/Services

Program	Period	Benefits paid	Services/claims processed
Medicare Services/Benefits Total	2012-13 financial year (1 July 2012 to 31 March 2013)	\$13.9 billion	256.6 million
	2011-12 financial year	\$17.8 billion	332.6 million
	2010-11 financial year	\$16.3 billion	319.1 million