



SENATE COMMITTEE TO ASK MINISTER FOR HEALTH ABOUT STATUS OF OPIATE DEPENDENCE TREATMENT PROGRAM

Following concerns raised by Better Access Australia, the Senate Standing Committee for the Scrutiny of Delegated Legislation has advised it will write to the Minister for Health seeking advice on the technical status of Opiate Dependence Treatment (ODT) Program.

Better Access Australia wrote to the Senate Committee on 9 March requesting it address the circumvention of the Australian Parliament and on-going discrimination that the Australian Government imposes on patients on the ODT Program.

The Committee was established in 1932 and is currently Chaired by Government Senator The Hon. Ferravanti-Wells with former Industry Minister Senator The Hon. Kim Carr as Deputy Chair. The Committee assesses delegated legislation against a set of scrutiny principles that focus on compliance with statutory requirements, the protection of individual rights and liberties, and principles of parliamentary oversight.

Their most recent report on the [exemption of delegated legislation from parliamentary oversight](#) included reflections on the Government's use of the *Biosecurity Act 2015* powers during the COVID-19 pandemic. The Committee's work continues to highlight the importance of the role of the Parliament in protecting the rights of individuals and ensuring the considerable legislative powers bestowed upon ministers are exercised fairly and with due caution.

"Better Access Australia is seeking to end the gap in equality of access for ODT Program patients once and for all.

"After months of inaction on this issue by the Minister of Health, The Hon. Greg Hunt MP, Better Access Australia has called upon the Parliament to urgently review the legal basis for this continuing discrimination and end the gap in access for some of the most vulnerable in our community.

"Why are these the only medicines on the PBS where a consumer can be denied their co-payment and safety net protections and be charged unlimited out of pocket expenses on a daily basis at the recommendation of the Government? And on what basis is this program denying these consumers their legal protections under the *National Health Act 1953*?

"The Government and its Pharmaceutical Benefits Advisory Committee (PBAC) acknowledge that over 75% of people accessing these medicines are facing these out-of-pocket costs, and further acknowledge those costs are a barrier to people accessing treatment for their chronic disease.

“Instead of taking immediate steps to address the discrimination, Minister Hunt is sidelining the issue through a lengthy post market review (PMR) by the PBAC. These delaying tactics are unacceptable, while patients remain untreated and are dying as a result.

“If these medicines were listed under s85 of the National Health Act, this issue of discrimination would not exist. But until such time as the PBAC addresses the need for dual listing of these medicines on both s100 and s85, this issue of the Government discriminating against people with a recognised disability will remain.

“Harm Reduction Australia (HRA)’s [letter to Minister Hunt](#) of 7 April must not be ignored.

“Given... the urgency of resolving this issue due to the harms and even loss of life that can be associated with barriers to ODT, we were somewhat disappointed by the unexpected announcement of the PMR. In particular, we are very concerned about the length of time typically associated with such reviews and the material impacts this will have on the lives of over 40,000 people currently on the ODT Program at community pharmacy and those wishing to access treatment.”

“The time has come to end the arguments about cost-shifting with the states and territories and put the patient at the centre of the system.

“As the [CEO of Pain Management Australia recently noted](#), 150 people are admitted to hospital each day as a result of opioid addiction and three people each day are dying.

“Many of these deaths are a direct result of medically prescribed opiates on the PBS. The Government should not be making it harder for these patients to recover from this dependency.

“The time has come for the Government and the Parliament to stop and consider whether what they are doing is legal under the *National Health Act 1953*, legal under the *Legislation Act 2003* and legal under the *Antidiscrimination Act*.

#MindTheGap in equality of access to the PBS.

BETTER HEALTH, DISABILITY AND SOCIAL SERVICES

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For media inquiries please contact, tdavies@betteraccessaustralia.org.au

For more information on our current projects, visit www.betteraccessaustralia.org.au

A copy of the correspondence from the Committee can be found here.