

2024–25 FEDERAL BUDGET UPDATE





2024-25 FEDERAL BUDGET UPDATE

The Federal Treasurer, the Hon. Jim Chalmers MP, handed down the 2024-25 Federal Budget for 2024/25 on Tuesday night.

The Australian College of Nursing (ACN) has reviewed the Budget and congratulates the Government for many of the health measures that will be well received across the health sector and by healthcare consumers.

It aligns with many of ACN's Pre-Budget submissions.

Below is a snapshot summary of key announcements relating to <u>health</u>, <u>community and the nursing</u> profession.

<u>The Women's Budget Statement</u> accompanies the Budget. The statement details how the government plans to improve their lives and how particular measures will help 51 per cent of the country's population.

OVERALL KEY POINTS

Overall, the budget has:

- A cost-of-living focus, easing pressures on families
- provided funding towards building more homes
- the aim to strengthen Medicare and the care economy by
 - investment in contemporary models of care
 - investment in contemporary systems to deliver quality care in primary health, mental health, NDIS, and aged care.
 - access and equity to affordable healthcare supported by skilled multidisciplinary teams to all Australians.
 - investment in upskilling, retaining, and attracting people to the healthcare workforce.
- quality for women in every part of our economy and society
- Supports investment in a Future Made in Australia

The Budget increases health and aged care spending by **\$9.7 billion** compared with the May 2023-24 budget. It indicates that total health and aged care spending over the next four years will be **\$628 billion**, an increase of \$37 billion from the May 2023-24 budget allocation of \$590 billion.

HEADLINES FOR NURSES AND NURSING

Paid placements

Other female-dominated workforces will get support targeted at the trainee level through the introduction of paid placements in teaching, nursing, midwifery, and social work courses, each to the value of \$319.50 a week and benefiting an estimated 73,000 students. Providing pay for students on placement was an item listed on ACN's pre-budget submission.

Reduce indexation of HELP debts.

There are a range of general measures that will disproportionately benefit women, such as the decision to reduce indexation of HELP debts and other student loans, since 58.5 per cent of outstanding debt is held by women.

Scholarships

The Primary Care Nursing and Midwifery Scholarship Program will run for four years, costing the government **\$50 million**. This scholarship fund will support/ encourage nurses and midwives to get a higher qualification, so they have the power to prescribe, order pathology, and give their patients referrals.

Superannuation on the publicly-funded Paid Parental Leave

The government will pay superannuation on the publicly funded Paid Parental Leave (PPL) scheme starting in the 2025-26 financial year. This will help close the gender gap in retirement incomes since most of the 180,000 who receive the payment yearly are women.

Parents accessing the government-funded paid parental leave scheme will be paid superannuation in addition to their payments from next July.

Under the current program, a couple with a newborn or newly adopted child can access up to 20 weeks of paid parental leave at the national minimum wage. However, that figure will continue to rise until it reaches 26 weeks in July 2026.

The plan that Labor will take to the next election is to see superannuation paid at 12 per cent of the paid parental leave rate, which is based on the national minimum wage of \$882.75 per week.

Higher wages in aged care and childcare

The budget provides a "multi-billion-dollar" amount for higher wages in two female-dominated workforces, aged care, and childcare. In both cases, the Fair Work Commission (FWC) approved a pay raise for aged care workers in 2023 and is expected to do the same for childcare workers in June. The government supported both cases before the FWC.

Superannuation on the publicly-funded Paid Parental Leave

The government will pay superannuation on the publicly funded Paid Parental Leave (PPL) scheme starting in the 2025-26 financial year. This will help close the gender gap in retirement incomes since most of the 180,000 who receive the payment yearly are women.

Parents accessing the government-funded paid parental leave scheme will be paid superannuation in addition to their payments from next July.

Under the current program, a couple with a newborn or newly adopted child can access up to 20 weeks of paid parental leave at the national minimum wage. However, that figure will continue to rise until it reaches 26 weeks in July 2026.

The plan that Labor will take to the next election is to see superannuation paid at 12 per cent of the paid parental leave rate, which is based on the national minimum wage of \$882.75 per week.

Endometriosis funding

An estimated <u>one in seven</u> Australian women and girls are affected by endometriosis, a condition where tissue similar to the lining of the womb grows outside the uterus. It takes about to get a diagnosis, while those living in regional and remote parts of the country experience even more significant delays.

Endometriosis Australia, in partnership with the Australian College of Nurses, will launch a scholarship program to upskill nurses to help speed up diagnosis.

One hundred endometriosis nurses will be specially trained and stationed in regional, rural, and remote parts of the country to help improve the outcomes for the hundreds of thousands of Australians with the chronic disease.

Key measures include:

- Longer specialist consultations for women with endometriosis and other complex gynaecological conditions, such as chronic pelvic pain and polycystic ovary syndrome (PCOS), will now be covered under Medicare from July next year.
- Including this new funding, the federal government has committed **\$107 million** in endometriosis support for women since coming to government, including establishing endometriosis and pelvic pain clinics nationwide and funding research and awareness.
- Two new rebates will be added to the Medicare Benefits Schedule, enabling extended consultation times and increased rebates for specialist care.
- The \$49.1 million investment is expected to provide about 430,000 more services to women nationwide. **\$49.1 million** to enable longer medical consultations (45 mins plus) for a range of conditions such as endometriosis sufferer, chronic pelvic pain, and polycystic ovary syndrome.
- \$56.1 million over four years to support women's sexual and reproductive health initiatives.
- Changes have also been made to reduce the challenges women have in accessing abortion, contraception, pregnancy, and birth care. This includes enabling midwives to further Medicare rebates for longer consultations before and after childbirth.

In support of women's health, ACN welcomes additional training opportunities for nurse practitioners in relation to IUD and LARC insertions and the management of menopause. Following the announcements last year enabling better access to MS 2 Step, we will now also see it become more affordable, with pelvic ultrasounds now being funded under MBS for this purpose when requested by nurse practitioners.

FAMILY, DOMESTIC, AND SEXUAL VIOLENCE

The government has promised additional measures to support women's safety, building on the already-announced \$915 million over five years to make permanent a trial program which has seen women fleeing violence paid up to \$5,000 in financial support.

A total of **\$925.2 million** over five years will be used to permanently establish the Leaving Violence Program so that those escaping violence can receive financial support, safety assessments, and referrals to support pathways.

- Up to \$5,000 in financial support for intimate partners in need (The program will provide eligible victim-survivors with an individualised support package of up to \$1,500 in cash and up to \$3,500 in goods and services, plus safety planning, risk assessment and referrals to other essential services for up to 12 weeks.)
- Help 82,000 more single parents to remain on higher payment rates until their youngest child turns
 14.
- Legislated ten days of paid family and domestic violence leave.
- Increased rent assistance, promising the most significant increase in 30 years.
- Investment in crisis accommodation and affordable housing for women and children escaping violence.

The federal government has pledged almost \$1 billion to combat violence against women, including permanent funding to help victim-survivors leave violent relationships and a suite of online measures to combat online misogyny and prevent children from viewing pornography.

BROADER HEALTH REFORM

The government has committed to **\$8.5 billion** of new investments in the health system.

Workforce

\$90 million to address health workforce shortages by making it simpler and quicker for international health practitioners to work in Australia.

Prac payments for nursing students are long overdue, and we need support to ensure our workforce expands into the future.

Medicare

The government's longer-term aim has been to strengthen Medicare. The measures are being implemented, and \$2.8 billion will be allocated to strengthen Medicare.

- \$882.2 million to support older Australians in avoiding hospital admission.
- \$69.8 million to increase the number of Medicare-eligible MRI machines.

- **\$266.9 million**, so Medicare rebates rise each year for nuclear medicine imaging and many standard medical tests.
- **\$91.1 million** to boost the supply of healthcare in areas of shortage

Further, new rebates will be added to the Medicare Benefits Schedule allocated to nurses, a decision ACN supports wholeheartedly. This includes five new rebates added to the Medicare Benefits Schedule for endorsed midwife consultations, allowing midwives to provide longer consultations before and after childbirth. In addition, to further enable care provided by midwives, the changes include indemnity insurance for midwives to cover low-risk homebirths and birthing on country.

Two rebates in the Medicare Benefits Schedule for nurse practitioner consultations, including Level E consultation of 60 minutes.

Nurse practitioners will also be able to request further ultrasound services under Medicare to assist with the before and after care requirements of the MS-2 Step medical abortion program.

Urgent Care Clinics

58 Urgent Care Clinics were delivered in 2023, providing bulk billed care for many Australians.

• \$227 million is committed to fund an additional 29 Medicare Urgent Care Clinics

Urgent care clinics have provided 400,000 bulk-billed visits.

Public hospitals

The commonwealth has reportedly offered to lift funding by an extra \$4 billion in 2025-26 and \$13 billion over five years starting mid-2025.

Continuing programs

• \$15.4 billion to continue programs from the previous government for palliative care, cancer support, public health chronic conditions, and alcohol and other drug treatments.

AGED CARE:

Total aged care investment: \$2.2 billion.

The Government has put nurses back into nursing homes, given residents more time with their carers, lifted wages in the sector and improved transparency and accountability. Since the October 2022-23 Budget, total investment in aged care has increased by 30 per cent.

This includes an investment of \$11.3 billion to deliver the most significant one-off increase in aged care wages in history, with more increases in the future. The 2024-25 Budget investments continue to strengthen aged care services and create stronger links between aged care and the rest of the health system to deliver tangible benefits to older Australians. Older Australians in residential aged care now receive an additional 3.6 million minutes of care daily. There are more four and 5-star homes and fewer one and 2-star homes.

Quality Aged Care Strengthening: the quality of aged care services and connections underpin quality care. They are improving wait times for in-home care, bolstering the workforce, delivering an enhanced quality and safety regulator and better technology for the sector.

An extra 24,100 Home Care Packages (\$531.4m) in 2024–25 support more Australians to access in-home aged care than ever before.

To protect older Australians accessing aged care services and ensure a high standard of safe and quality care, the Budget will deliver a more robust regulatory framework and a well-resourced, capable Aged Care Quality and Safety Commission (\$111m).

Technology systems and digital infrastructure will be upgraded across the aged care sector **(\$1.4b)** in preparation for the new Act.

Measures will improve **staffing solutions** to create better conditions for the aged care workforce. Support will grow the number of home care workers in regional, rural, and remote areas where workforce shortages are the most acute. Support for better career pathways for nurses in aged care will be extended (\$88.4m). States and territories will be supported in upskilling residential aged care workers and delivering outreach services, virtual care, and complex care to older Australians outside hospital settings.

The Specialist Dementia Care Program will support people with dementia in successfully transitioning from hospital to aged care services and fund clinical in-reach services. It will also enable Australian Dementia Network researchers to ready the health system for promising new dementia diagnostic and treatment options (\$32.1m).

Preparatory work will continue for the new rights-based Aged Care Act (\$27.8m).

The new Aged Care Act will put older people at the centre of aged care. It will also support the Government's response to the Aged Care Taskforce. These reforms are crucial to create a sustainable sector that delivers high-quality care. The Government continues to consult with older Australians and stakeholders to ensure broader support for reforms to improve the standard of aged care.

With more Australians expected to rely on aged care services in the coming years, the Government's ongoing commitment to increase funding will help support critical efforts to recruit and retain people working in the sector.

Another positive step is funding to help address long-stay challenges for older people transitioning from extended hospital stays into more appropriate aged-care settings.

FIRST NATIONS HEALTH

First Nations people will have better access to health and aged care services and cheaper medicines with a \$137.3 million package of measures.

This Budget forms part of the Government's continued efforts to close the gap in health and wellbeing outcomes between First Nations people and non-Indigenous Australians.

People in First Nations communities face a higher risk of communicable diseases, including respiratory illnesses, hepatitis, and sexually transmissible infections (STIs). Untreated diseases can cause long-term health issues like infertility, hearing and vision loss, and cancer. More First Nations people will have access to testing for transmissible illnesses and culturally safe sexual health services. This will better protect First Nations people and reduce the spread of avoidable infections.

Vaccination is well below the 95% target, and some First Nations communities need to achieve herd immunity. The Government will boost vaccination rates and protect people – especially children – from the effects of diseases like measles, diphtheria, and Hepatitis A with funding for the National Immunisation Program and the ACCHS sector.

More First Nations people will get the support they need in times of distress when their mental health is at risk. To address increased rates of psychological distress being experienced by First Nations people, the National Aboriginal Community Controlled Health Organisation (NACCHO) will continue to deliver targeted and culturally appropriate mental health support.

Medicare Urgent Care Clinics in Darwin and Mparntwe (Alice Springs) are giving First Nations people better access to bulk-billed urgent care for urgent but not life-threatening conditions.

The Budget will deliver even cheaper medicines for First Nations Australians. All medicines on the Pharmaceutical Benefits Scheme (PBS) dispensed by a community pharmacy, public or private hospital, or approved medical practitioner will now be covered by the Closing the Gap PBS co-payment.

This means eligible First Nations people registered on the Closing the Gap database will either get their PBS medicines for free if they have a Commonwealth concession card or pay the discounted co-payment rate of \$7.70 if they don't. The Government is keeping medicines cheaper by holding PBS co-payments at their current low rates for up to 5 years for concession cardholders and one year for everyone with a Medicare card. This means the cost of PBS medicines will stay the same and won't go up with inflation.

The Budget includes measures to grow and **support the First Nations health workforce.** More First Nations medical specialists means more culturally safe care for First Nations people. The Australian Indigenous Doctors' Association will be supported in continuing to improve cultural safety, increase engagement, and support First Nations doctors in becoming medical specialists.

First Nations people in the Northern Territory will also benefit from more Aboriginal and Torres Strait Islander medical practitioners who deeply understand culture and community.

First Nations people will be supported in choosing a career in nursing and delivering high-quality care to patients. Lowitja O'Donoghue Foundation scholarships for enrolled nursing and postgraduate and undergraduate nursing students will build the Aboriginal and Torres Strait Islander health workforce.

First Nations people who experience harm from alcohol and other drugs will be supported by grant extensions for the Aboriginal Drug and Alcohol Council (SA), the Aboriginal Health Council of SA, and the Alcohol and Drug Foundation – Good Sports.

More First Nations mothers will have access to **culturally safe, continuity of maternal health care**. Changes to **professional indemnity** insurance for midwives will give women greater choices regarding their preferred midwife and birthing approach. This will safeguard Birthing on Country services for First Nations mothers facilitated by Aboriginal Community Controlled Health Organisations.

Women and girls in rural and remote First Nations communities will get free menstrual products like pads and tampons. These items can often be double the cost in remote areas than in metropolitan areas, so providing them for free will support girls and women in going on with their daily lives, engaging with their community, and stopping them from missing school.

Communicable disease transmission, particularly blood-borne viruses, STIs and vaccine-preventable diseases, will be reduced by expanding testing, treatment, and prevention, including extending access to point-of-care testing for First Nations people and rural and remote communities (\$126.5 million).

Newborns and their families will benefit from continuing reforms to deliver world-class newborn bloodspot screening programs **(\$25 million)**. Newborn bloodspot screening saves lives and delivers better outcomes through early intervention. It builds on previous reforms that have ensured – for the first time in 60 years – there is an agreed national list of current screening conditions, specific funding to achieve consistency across Australia, and a streamlined pathway to consider more conditions for screening.

VETERANS

- \$48.4 million will be available for Veterans' Home Care and Community Nursing programs
- **\$10.2 million** to provide access to funded medical treatment for ill and injured veterans while their claims for liability are processed.

MENTAL HEALTH

There is an allocation of **\$888.1 million** over eight years to help people get the mental health care they need where they need it.

Over four years, \$361 million for Mental Health to expand mental health services.

- More mental health nurses and other allied health support will provide free care coordination and support to patients with complex needs through primary health networks to support healthcare consumers between GP and specialist appointments.
- A network of 61 walk-in Medicare Mental Health Centres (\$29.8 million) will build on the
 established Head to Health network, with their clinical capability upgraded to ensure every centre
 has psychiatrists, psychologists, and GPs on call.

A new national, free, low-intensity **digital service** will be established for people with mild mental health concerns. From 1 January 2026, every Australian can access this free service without a referral. When established, 150,000 people are expected to use this service each year.

DISABILITY

The government is attempting to rein in the ballooning costs of the NDIS (currently estimated at \$40bn annually) by placing an 8% target on the annual spending increase.

Participants will be at the centre of the scheme. In total, **\$468.7 million** was used to support people with disability, including:

- \$214 million over two years to fight fraud and to co-design NDIS reforms
- \$160.7 million to upgrade the NDIS Quality and Safeguards Commission's information technology.
- \$45.5 million to establish an NDIS Evidence Advisory Committee
- **\$20 million** to start consultation and design reforms to help NDIS participants and people with disability navigate services.

Improving employment for people with a disability

• \$227.6 million will be invested in a new specialised disability employment service

CHEAPER MEDICINES

- \$469.1 million to reduce patient costs and improve access to medicines
- \$3.4 billion for new and amended listings to the PBS, providing eligible patients significant savings on treatment costs.
- \$18.8 million to make Australia a destination for clinical trials
- \$0.9 million so aged care residents have more options to receive a free vaccination
- \$318 million over five years to strengthen pharmacy and keep medicines cheaper
- \$141.1 million provided to support and expand the National Immunisation Program

Up to an additional \$3 billion to deliver cheaper medicines, improve patient health outcomes and secure a strong community pharmacy sector through the new Eighth Community Pharmacy Agreement

One-year freeze on the maximum Pharmaceutical Benefits Scheme (PBS) patient co-payment for everyone with a Medicare card and a five-year freeze for pensioners and other concession cardholders

MEDICINES PHARMACEUTICAL BENEFITS SCHEME (PBS)

There is \$4.3 billion allocated to ensure medicines stay accessible to everyone.

 The cost of Pharmaceutical Benefits Scheme (PBS) medicines will remain constant instead of rising with inflation.

Women with endometrial cancer and people with itching associated with chronic kidney disease (CKD) will benefit from new life-changing medicines added to the Pharmaceutical Benefits Scheme (PBS) from May 1.

Included earlier is a new drug for an invasive form of breast cancer called abemaciclib and two new drugs for heart disease, tafamidis and mavacamten.

HEALTHY LIVING

Ensuring the community is healthy, engaging with an active lifestyle, monitoring and maintaining their good health, and having access to vaccinations are the government's aims, along with the following commitments. Note that these commitments may be recorded in other parts of this report.

- \$100 million to build and upgrade cycle paths
- \$249.7 million for the Australian Institute of Sport
- \$25.3 million to prevent skin cancer, now and in the future
- \$38.8 million to continue funding for free bowel cancer screening
- \$43.9 million to work towards eliminating HIV transmission by 2030
- \$132.7 million to boost sports participation
- \$825.7 million to ensure Australians can continue to access testing for and vaccinations against COVID-19
- \$41.6 million over two years to continue funding for alcohol and other drug treatment and support services

Tackling online harms

Funding to conduct a pilot of age assurance technology to protect children from harmful content, like pornography and other age-restricted online services.

• \$6.5 million for a trial of online age verification technology

Housing & Homelessness

Over five years, **\$9.3 billion** has been allocated to states and territories to support homelessness, crisis support, and build and repair social housing.

- Additional \$1 billion to help states and territories build more homes
- New housing investment of \$6.2 billion
- \$1.9 billion for a 10 per cent increase in Commonwealth Rent Assistance
- Additional \$1.9 billion in concessional finance for social and affordable homes
- \$423 million for the National Agreement on Social Housing and Homelessness
- **\$1 billion** towards crisis accommodation for young people and those fleeing domestic and family violence.
- \$1 billion for the housing infrastructure costs associated with building a home.

EDUCATION

Reducing student debt

Relief for students designed to wipe out \$3 billion in student debt - easing pressure on workers and students across the country. This translates to an average of \$1200 saved per person but will cost the government \$3 million in lost revenue.

There is also a cap on the indexation rates for HELP and other student loan schemes.

The debt relief will also apply to apprentices who owe money through the VET Student Loan program or the Australian Apprenticeship Support Loan.

Payments will be available for 73,000 students, including student teachers, nurses and social workers, during their compulsory work placements to a maximum of \$319.00 a week, subject to means testing.

Similarly, apprentices willing to learn clean energy skills as part of their trade will be eligible to receive up to \$10,000 in payments. The scheme already exists, but the government has broadened the eligibility to include apprentices in the automotive, electrical, housing and construction sectors based on industry feedback.

Universities will also be required to stop a surge in the number of international students as part of the government's broader plans to cut annual migration levels back to 260,000 a year.

Another \$90 million will be put towards 15,000 fee-free TAFE and VET places to get more workers into the housing construction sector, with an extra 5,000 pre-apprenticeship places provided from 2025.

HEALTH & MEDICAL RESEARCH

The budget papers outline a slightly increased investment in the NHMRC for 2024-25 and the ongoing \$650 million in Medical Research Future Fund (MRFF) funding, including two new missions: Reducing Health Inequities and Low Survival Cancers.

The "Health Research for a Future Made in Australia" package has a total investment of \$1.89 billion and includes:

- \$1.4 billion for new research via the Medical Research Future Fund (MRFF):
 - A new 10-Year Low Survival Cancers Mission
 - A new 10-Year Reducing Health Inequities Mission
 - Continuing existing streams of life-changing MRFF funding
 - More research into three health priorities:

Women's health.

Chronic pain.

Alcohol and other drug treatment.

- \$411 million to support 229 researchers to tackle the nation's most significant health challenges through the NHMRC.
- \$62 million to support 26 clinical trials from around Australia through the MRFF.
- \$18.8 million to progress the National One Stop Shop for clinical trials and health research.

Millions of dollars are also being poured into medical research, including \$20 million for childhood brain cancer research and a \$50 million grant for Australian scientists developing the world's first longterm artificial heart.



acn.edu.au

