

**ATTACHMENT: QUESTIONS TAKEN ON NOTICE AND FURTHER
INFORMATION AGREED TO BE SUPPLIED AT THE
HEARINGS**

HEALTH PORTFOLIO

1. In relation to the \$1.45 billion over four years of 'funding from reprioritisation of existing resources' (BP2 p.58)
 - a. how much in each year relates to the health portfolio
 - b. please provide a list of the programs and amounts reprioritised.

(Pages 16-17 and 36 of the Health portfolio transcript)

Departments are funded on a global basis in the annual appropriation acts and ministers have the ability to reprioritise funding within their portfolio department.

In its response to the 2015-16 Budget Estimates Questionnaire, the Department of Health & Human Services provided details of all initiatives with a value of \$2.0 million or more funded by reprioritised funds. In the case of the Health portfolio, there is only one program of \$2.0 million or more funded through reprioritisation; the Proton beam therapy centre, funded \$2.0 million in 2015-16.

2. With respect to the \$28.7 million provided for Super Pharmacies, when the data becomes available, please provide a break-down of this funding (for example, into nursing, security and other areas).

(Pages 22 and 36 of the Health portfolio transcript)

It is not possible to provide a detailed breakdown of funding at this early stage in the process as the service delivery model, budget parameters and program guidelines for Super Pharmacies are still under development in consultation with key stakeholders.

Within these parameters, it is intended that suppliers will be asked to outline their approach (including staffing and arrangements for security of the pharmacy premises) through a competitive Expression of Interest process. Models may vary according to local service demand, existing infrastructure, and workforce capacity.

3. Please indicate whether the full cost of the lease of the 13th floor of the VCCC will be recouped, and specify the annual cost of the lease.

(Pages 28-29 and 36 of the Health portfolio transcript)

Approximately 50 per cent of level 13 of the *Victorian Comprehensive Cancer Centre* facility in Parkville is defined as 'Designated Expansion Space' and available for long-term lease from Plenary Health (CCC) Pty Ltd under the *Victorian Comprehensive Cancer Centre* Project Agreement.

The 25-year lease of the Designated Expansion Space was secured at a 17.5 per cent discount to market valuation with a commencing rent of \$723,790 per annum, starting in June 2016 and indexed annually at three per cent. This leasing commitment

represents a contingent liability of approximately \$10 million in Net Present Value terms over the 25-year lease period.

The Government is currently considering the best strategic use of this space, consistent with the VCCC key objective to deliver research-led improvements in cancer patient care outcomes.

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4. Please indicate the proportion of the \$560 million capital investments for health (indicated on p. 7 of the *Budget Overview* document) that will be allocated to rural and regional hospitals.

(Pages 32 and 36 of the Health portfolio transcript)

Key initiatives funded as part of the 2015-16 Budget to support the health of rural and regional communities include:

- \$10 million to expand cardiovascular services at the Ballarat Base Hospital, so that locals don't have to travel to Melbourne for urgent heart assessment and treatment.
- \$1 million to begin planning for redevelopment of Goulburn Valley Health's Shepparton campus to address population demand.
- \$40 million to upgrade ambulance stations, vehicles and equipment across the state. This funding will enable a new ambulance station to be built at Wendouree in Ballarat, as well as upgrades and critical maintenance at several stations at other rural and regional communities (still to be finalised).

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5. Please indicate whether planning for real-time prescription monitoring will be restricted to prescription pharmaceuticals or whether it will be broader (such as including non-schedule 8 drugs like codeine)

(Page 36 of the Health portfolio transcript)

The scope of a Victorian real-time prescription monitoring is currently being considered.

While the matter of which drugs will be included in monitoring is yet to be determined, it should be noted that the classification system for medicines that exists across all states and territories (known as medicines scheduling) puts all medicines which are at greatest risk of misuse or abuse into Schedule 8.

It should also be noted that the real-time system that exists in Tasmania and the reporting requirements that exist in other states are limited to Schedule 8 medicines.

The scheduling status of over-the-counter codeine combination analgesics is currently under consideration by the Commonwealth and should the Commonwealth make a decision to remove codeine from the over-the-counter schedule (Schedule 3), the question of whether over-the-counter codeine be included in a real-time prescription monitoring system becomes redundant.
