

EXPLANATORY STATEMENT

Issued by Authority of the Minister for Health

NATIONAL HEALTH ACT 1953

***NATIONAL HEALTH (REMOTE ABORIGINAL HEALTH SERVICES PROGRAM)
SPECIAL ARRANGEMENTS AMENDMENT INSTRUMENT 2012 (NO. 1)***

INSTRUMENT NUMBER PB 52 of 2012

Authority

Subsection 100(1) of the *National Health Act 1953* (the Act) enables the Minister to make special arrangements for the supply of pharmaceutical benefits. Subsection 100(2) of the Act provides that the Minister may vary or revoke a special arrangement made under subsection 100(1).

Subsection 100(3) of the Act provides that Part VII of the Act, and instruments made for the purposes of Part VII of the Act, have effect subject to a special arrangement made under subsection 100(1).

Purpose

The purpose of this legislative instrument, made under subsections 100(1) and 100(2) of the Act, is to amend the *National Health (Remote Aboriginal Health Services Program) Special Arrangements Instrument 2010* (PB 65 of 2010) (the Special Arrangement). This Special Arrangement provides for the supply to remote Aboriginal Health Services (AHS) of Pharmaceutical Benefits Scheme (PBS) medicines.

This instrument increases the handling fee that is payable to an approved pharmacist or an approved hospital authority in respect of the supply of a pharmaceutical benefit to an approved Aboriginal Health Service in accordance with the Special Arrangement.

On and from 1 July 2012, the handling fee is increasing from \$2.79 to \$2.82. The handling fee is indexed annually (WCI9) with the increase provided through the Fifth Community Pharmacy Agreement.

Consultations

The amendment is minor and machinery in nature. Consultation took place with the Department of Human Services.

The legislative instrument commences on 1 July 2012.

This Instrument is a legislative instrument for the purpose of the *Legislative Instruments Act 2003*.

Statement of Compatibility with Human Rights

Prepared in accordance with Part 3 of the Human Rights (Parliamentary Scrutiny) Act 2011

NATIONAL HEALTH (REMOTE ABORIGINAL HEALTH SERVICES PROGRAM) SPECIAL ARRANGEMENTS AMENDMENT INSTRUMENT 2012 (NO.1)

This Legislative Instrument is compatible with the human rights and freedoms recognised or declared in the international instruments listed in section 3 of the *Human Rights (Parliamentary Scrutiny) Act 2011*.

Overview of the Legislative Instrument

The purpose of this legislative instrument, made under subsections 100(1) and 100(2) of the Act, is to amend the *National Health (Remote Aboriginal Health Services Program) Special Arrangement Instrument 2010* (PB 65 of 2010) (the Special Arrangement), to make changes to the Special Arrangement to increase the handling fee that is payable to an approved pharmacist or an approved hospital authority in respect of the supply of a pharmaceutical benefit to an approved Aboriginal Health Service in accordance with the Special Arrangement.

On and from 1 July 2012, the handling fee is increasing from \$2.79 to \$2.82. The handling fee is indexed annually (WCI9) with the increase provided through the Fifth Community Pharmacy Agreement.

Human rights implications

This legislative instrument engages Article 2 and 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) by assisting with the progressive realisation by all appropriate means of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

The PBS is a benefit scheme which assists with advancement of this human right by providing for subsidised access by patients to medicines. This Special Arrangement ensures more ready and equitable access to PBS medicines for Indigenous Australians through the Section 100 Supply of PBS Medicines to Remote Area Aboriginal Health Services (RAAHS) Program. The RAAHS Program addresses three identified barriers that Aboriginal and Torres Strait Islander people living in remote communities experience in accessing essential medicines, being geographical, cultural and financial.

Conclusion

This Legislative Instrument is compatible with human rights because it advances the protection of human rights.

Kim Bessell
Assistant Secretary, Pharmaceutical Access Branch
Department of Health and Ageing