



Speech by

Shane Knuth

MEMBER FOR CHARTERS TOWERS

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PATIENT TRAVEL SUBSIDY SCHEME

Mr KNUTH (Charters Towers—NPA) (11.08 p.m.): I would like to speak to the petition tabled in parliament this morning which was signed by people within the Charters Towers electorate regarding the need for a review of the Patient Travel Subsidy Scheme. The rules and regulations surrounding the Patient Travel Subsidy Scheme are outdated and require serious reconsideration. For example, the rebate amount of 10c a kilometre has not increased over the last decade, yet the public has faced substantial increases in fuel costs.

The majority of constituents in my electorate live in rural and remote areas of the state, and in some cases are faced with a round trip of 800 kilometres to receive specialist medical attention. This weighs heavily on constituents' pockets. There is little to no public transport available—as is available to our city cousins—and they are forced to find their own transport and extra money to get themselves or their family the treatment which is needed.

Given that fuel is now in excess of \$1 per litre and the cost of running an average vehicle is 50c to 60c a kilometre, the current rebate of 10c a kilometre is totally unrealistic. The travel subsidy rebate needs to be doubled to a maximum of 20c a kilometre, and this amount should be linked to the CPI so that it keeps pace with rising costs.

The scheme needs urgent attention. It has caused considerable heartache amongst the elderly. There is a need to revise the paper trail surrounding the application process to receive this subsidy. For example, constituents must visit their GP for referral to a specialist, make an appointment with the appropriate specialist, get the forms necessary to claim the subsidy from the nearest public hospital, return to their GP for a signature, have their specialist verify the appointment and return the form to the nearest hospital—all of which they do without any guarantee of actually receiving a rebate. Take a minute to imagine the inconvenience and discomfort this might cause elderly and infirm patients who suffer from debilitating and ongoing conditions. It is ridiculous.

Medical practitioners should be able to keep patient travel subsidy forms on hand and issue and verify them as required. Surely a Queensland Health employee could phone, fax or email the relevant specialist to confirm an appointment. How is this viable for patients when the amount of time and money wasted in the initial toing-and-froing far outweighs the advantage of possibly receiving a Patient Travel Subsidy Scheme rebate? Given that the Patient Travel Subsidy Scheme has not been reviewed in 10 years, it would be in the department's best interests to urgently review this scheme.