The Hon. Greg Hunt, MP  
22/07/2020

Australian Government Minister for Health  
P.O. Box 6022  
Parliament House  
Canberra, ACT 2600  
By email Minister.Hunt@health.gov.au

Dear Minister,

Women’s Health Victoria and our partner organisations are deeply concerned about the rolling back of temporary MBS item numbers for telehealth on July 20, particularly the requirement that telehealth services can only be provided by GP’s to their regular patients who have accessed the service in the last 12 months. This action will have significant consequences for women’s access to essential sexual and reproductive health services including contraception and early medical abortion (EMA).

We urge you to reconsider this decision by removing the requirement that only regular patients can access MBS telehealth, for sexual and reproductive health services for women and other members of the community including contraception and medical abortion as outlined in submissions from Marie Stopes, SPHERE and Family Planning Victoria, to name a few.

Women’s Health Victoria operates 1800 My Options, a phone line and information service that provides pathways to contraception, pregnancy options including abortion and sexual health for Victorian women. We work with more than 350 SRH providers and have supported over 10,000 callers since 2018. As a critical part of the SRH service system, we know firsthand that women face many barriers in accessing SRH services particularly EMA including:

- limited or no access in rural or regional areas and inability to travel
- affordability
- privacy and confidentiality issues, particularly in small communities
- conscientious objection.

These barriers have been exacerbated during COVID-19 and other issues have made access even harder including:

- financial insecurity, often caused by job losses directly relating to the pandemic
- increased anxiety and stress about accessing health services, due to perceived and real risk of transmission
- increased family violence, and surveillance around help seeking
- greater pressure around caregiving, exacerbated by both reduced income and remote learning, leaving women with little time to attend to their own health care needs.
Women and providers of essential sexual and reproductive health care services are concerned that the restrictions on access to MBS rebated telehealth that commenced on Monday 20 July will reduce access to care for vital SRH services because:

- many GPs do not provide a variety of SRH services due to conscientious objection, alternative specialisation, or lack of support and training
- many women do not have a regular GP that they see, particularly with specialisation in sexual and reproductive health services, and thus will be ineligible from using MBS rebated telehealth services for SRH needs
- women will not be able to seek help with new health care providers, due to restrictions around MBS rebated telehealth services, or access low cost services easily and will be forced to find high cost private providers or continue an unplanned pregnancy.

Access to telehealth for EMA without restrictions through the MBS during the first wave of the COVID-19 pandemic has greatly improved access to vital SRH services for women in Victoria by overcoming many of the issues outlined above and enabling timely access for women to manage unplanned pregnancy. At 1800 My Options, we have been able to overcome many issues for women by providing pathways to trusted and known providers who have the expertise and experience and provide SRH services on a regular basis. Given that Victoria continues to experience stage three restrictions due to the pandemic, with travel between some areas very limited and women worried about accessing services in hot spot areas in person, the continuation of current service provision is essential.

We have also seen increased demand for non-directive pregnancy support counselling as many women find themselves in difficult and complex circumstances with concerns about potential risks to their pregnancies and significant social and economic issues to consider. Having access to MBS funded telehealth services for non-directive pregnancy support has been critical for assisting women who are making life changing decisions during a time of increased anxiety and stress.

The National Women’s Health Strategy 2020-2030, priority 1 is to increase access to sexual and reproductive health care information, diagnosis, treatment and services and includes actions to remove barriers to support equitable access to timely, appropriate and affordable care for all women and strengthen access pathways to sexual and reproductive health services across the country, particularly in rural and remote areas. Providing access to MBS telehealth services for women to access SRH without restriction would contribute significantly to this priority.

We strongly urge you to reinstate unrestricted MBS item numbers for GP’s to enable access to essential sexual and reproductive healthcare for women in Victoria and across Australia and maintain MBS telehealth for non-directive pregnancy support counselling.

Kind Regards,

Dianne Hill

Chief Executive Officer
Endorsed by:

Bellarine Community Health
Bendigo Community Health Services
Centre for Excellence in Rural Sexual Health, The University of Melbourne
Centre for Health Equity, The University of Melbourne
Children by Choice Association
Family Planning Victoria
Fertility Control Clinic
Gender Equity Victoria
Gippsland Women's Health
Lyttleton Street Medical Clinic, Castlemaine
Marie Stopes Australia
Multicultural Centre for Women's Health
Public Health Association of Australia

Utopia Refugee and Asylum Seeker Health
Women's Health East
Women's Health Goulburn North East
Women's Health Grampians
Women's Health in the North
Women's Health in the South East
Women's Health Loddon Mallee
Women's Health and Wellbeing Barwon South West
Women's Health West
Women's Information and Referral Exchange