



Comparison of International Healthcare Systems: Australia

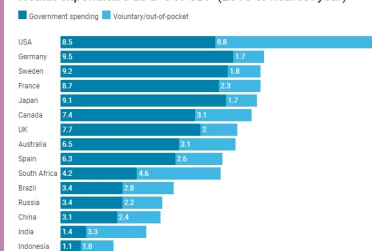
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Overview

- WHO Ranking: 32
- Hybrid Healthcare System
Public & Private Options
- 2019 Gross Domestic Product (GDP)
healthcare spending: 9.3% (OECD, 2021)

Health expenditure as a % of GDP (2016 or nearest year)



Payer System

Public (Medicare)

- Medicare option funds all citizens, refugees, and residents

Private

- Private insurance available for purchase
- Accessibility to both private and public institutions (Dixit & Sambasivan, 2018)

Financing/Supply

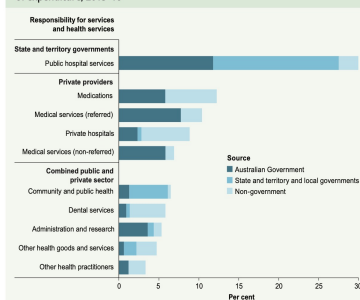
Medicare

- Covered by federal, state, and territory governments
- Mandatory 1.5% tax levy of all incomes
- 2.5% taxation of individuals without private insurance and for families earning above the income threshold
- Direct payments made to public hospitals and providers

Private

- Insured responsible for all unsubsidized costs when utilizing private facilities (Dixit & Sambasivan, 2018)

Figure 2.1.1: Health services—responsibility, funding sources and proportion of expenditure, 2015–16



Reimbursement

- Reimbursement is activity-based for public hospitals (Dixit & Sambasivan, 2018)
- Drug reimbursement is via the Pharmaceutical Benefit Scheme
- Physician's bulk bill the patient and Medicare reimburses 85% or 100% based on the type of service provided
- If services are greater than the Medicare schedule fee, the patient covers the "gap fee" (Fox et al., 2019)



(www.thoughtco.com/geography-of-australia-1434351)

Provider Choice/Production

- 3.36 physicians practicing for every 1000 residents
- Everyone is eligible for public services with variable wait times for specialty services
- Private providers available at the expense of the patient (Dixit & Sambasivan, 2018)

Challenges

- Long waiting lists to see public specialists. Patients must seek care from private hospitals to lessen wait
- Rising costs of healthcare spending with decreased availability of funding towards healthcare (Dixit & Sambasivan, 2018)
- Complex mix of federal and state government funding responsibilities provides challenges to patients with long-term chronic conditions due to the need for organized access to services (OECD, 2021)

References

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- Fox, H., Topp, S. M., Callander, E., & Lindsay, D. (2019). A review of the impact of financing mechanisms on maternal health care in Australia. *Bmc Public Health*, 19(1), 1–14.
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- Organisation for Economic Co-operation and Development. (2021). *Australia*.
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“Be strong and take heart, all you who hope in the Lord” (Psalm 31:24, New International Version)