



The Hon Mark Butler MP
Minister for Health and Aged Care

Ref No: MC24-004298

Ms Susan Templeman MP
Chair
Standing Committee on Petitions
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Dear Chair

Thank you for your correspondence of 18 March 2024 regarding petition EN5889 on officially recognising lipoedema as a progressive, chronic, and debilitating disease and advocating for Medicare coverage for affected individuals.

The Australian Government acknowledges the significant burden that chronic conditions, such as lipoedema, have on individuals and their families and carers and is committed to supporting those impacted. The Government is committed to supporting a strong healthcare system that will deliver the best possible outcomes for patients and reduce the impact that chronic conditions have on Australians.

Supporting, protecting and promoting the health and wellbeing of all Australian women and girls is a key priority for the Government. The health of Australian women and girls is critical to their overall wellbeing and ability to participate in society. Women's health impacts not only individuals but also their families and communities.

In February 2023, the Government established the National Women's Health Advisory Council (Council) to provide strategic advice and recommendations directly to Government, to improve health outcomes for Australian women and girls. The Council is also providing advice on implementation of the National Women's Health Strategy 2020-2030 (Strategy) which outlines a national approach to reducing inequalities and improving health outcomes for all women and girls particularly those at greatest risk of poor health.

The Strategy identifies five priority areas to address to improve health outcomes for Australian women and girls, including:

- priority area three chronic conditions and preventive health, which aims to increase awareness and prevention of chronic conditions, symptoms and risk factors, invest in targeted prevention, early detection and intervention and tailor health services for women and girls
- priority area four mental health, which aims to lower incidents of mental health reporting, eating disorders, self-harm and suicide and focus on early intervention, diagnosis and access to mental health care for Australian women and girls.

The Council recently held the National Women's Health Summit (Summit), which brought together experts, policymakers, community advocates, and women with lived experience to discuss how Australia can fundamentally transform the health system to improve access to health care, services and outcomes for women. Participants at the Summit highlighted the issues experienced by women and girls and results from the Council's #EndGenderBias survey were presented at the Summit which highlighted concerns about women's pain being dismissed and disbelieved.

The Council's #EndGenderBias survey heard from many stakeholders to better understand the unique barriers and gender bias women face in Australia's healthcare system. The survey found two thirds of women surveyed reported they experienced health care related gender bias or discrimination, and gender bias was experienced most in relation to sexual and reproductive health and chronic pain. The Council will consider the findings from the Summit, results from the #EndGenderBias survey and the work of its subcommittees to develop its recommendations and advice to Government.

In terms of the Medicare Benefits Schedule (MBS), patients with lipoedema may be eligible for MBS Chronic Disease Management (CDM) items. To be eligible for CDM items a patient must have at least one medical condition that has been present or is likely to be present for at least six months or is terminal. There is no list of eligible conditions. Whether a patient meets the eligibility requirement of having a chronic condition is a clinical judgement for their GP.

The CDM items enable GPs to plan and coordinate the health care of patients with chronic medical conditions. GPs may refer patients to up to five MBS rebated allied health services per calendar year under a GP Management Plan and Team Care Arrangement. In addition, up to five services with a practice nurse or Aboriginal and Torres Strait Islander Health Practitioner that are provided on behalf of a medical practitioner can also be accessed each calendar year.

There are currently no items on the MBS that provide for the surgical or liposuction treatment of lipoedema. In order for a new medical service to be added to the MBS for the treatment of lipoedema, an application would need to be made to the Medical Services Advisory Committee (MSAC). MSAC appraises new medical services and provides advice to Government on whether they should be publicly funded based on an assessment of the best available evidence of its comparative safety, clinical effectiveness, and cost-effectiveness.

Anyone can submit an application to MSAC, however due to the level of evidence required, a medical professional group is generally best placed to provide the necessary research and trial data. Further information about the MSAC process is available at www.msac.gov.au.

Thank you for writing on this matter.

Yours sincerely, 

Mark Butler

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