

## Government Support for People With Chronic Conditions

*Are you searching for government pensions and benefits for Australians with chronic health conditions? We've listed the most common ones here.*

*This page was updated in February 2023.*

### Medicare Benefits Scheme

[Medicare](#) is Australia's universal health care system. It is operated by the Australian Government and is funded through the tax system. Citizens and most permanent Australian residents are eligible for Medicare.

If you have a chronic health issue, you'll likely be familiar with the Medicare Benefits Scheme. However, you might not be aware of all the payments and benefits available to you.

The Medicare system provides free or heavily subsidised benefits across the following key areas.

- ▶ Hospital services
- ▶ Health professional services
- ▶ Pharmaceutical services

#### Hospital services

All those with a Medicare Card can be treated for free as a public patient in a public hospital. You cannot choose your own doctor and, depending on your health needs, you may need to be on a waiting list before you are admitted. Emergency cases are treated urgently, whereas those requiring non-urgent or elective procedures (such as joint replacements) may be on a waiting list for many months.

#### Health professional services

Medicare offers benefits for health professional services provided outside a hospital. This includes General Practitioner (GP) or rheumatologist consultation fees, diagnostic tests and more. In some cases, the cost of the service is fully covered by Medicare (bulk-billed). At other times, you may pay the difference between the full cost of the service and the maximum rebate payable by Medicare. This is usually referred to as your "gap" or "out-of-pocket" expense. It is a good idea to check your Medicare benefit entitlements with your provider when you make your appointment.

Many health professionals offer concession rates to those who hold valid Centrelink Health Care Cards or Concession Cards. See below for more information about Centrelink.

### [Medicare Safety Net](#)

If you have a chronic health issue, your medical costs could be high. However, visiting a doctor or having tests may cost you less once you reach the relevant Medicare Safety Net threshold. At that point, you should receive a higher Medicare rebate for all eligible services for the rest of the calendar year.

If you are an individual with no dependents you don't need to register for this safety net. Medicare will do that for you automatically. Couples and families can register to combine their costs and reach the safety net sooner. You'll need to register online via the link above or by calling the Medicare general enquiries line on 132 011 (7 days a week 24 hours a day).

### [Chronic Disease Management Plans](#)

There are two types of plans that can be prepared by a GP for chronic disease management. If you have a chronic medical condition, your GP may suggest a GP Management Plan (GPMP). There is no age limit or list of eligible conditions. These plans are determined by you and your GP to identify your healthcare needs and decide on a suitable course of action.

If you need treatment from more than one allied health professional, your doctor may also put a Team Care Arrangement (TCA) in place for you. This lets your doctor work with, and refer you to, at least two other health professionals who will provide treatment or services to you.

Medicare rebate assistance is available for this plan for up to a maximum of five appointments per patient per calendar year.

### [GP Mental Health Treatment Plan](#)

If you are experiencing mental health issues such as anxiety or depression, talk to your GP as they can provide an impartial ear and, if appropriate, prescribe medication and recommend a Mental Health Treatment Plan for you.

This may involve referring you to a psychologist, psychiatrist, counsellor or another allied mental health professional. In most cases, Medicare benefits are available for up to 10 appointments per patient per calendar year.

### [Telehealth services](#)

Telehealth services (consultations that take place either via telephone or via suitable video apps) have become widely available across the country as a result of the coronavirus pandemic. The Australian Government currently subsidises many medical and allied health telehealth appointments through the Medicare Benefits Scheme.

Health providers currently authorised to supply some or all of these services include (but may not be limited to):

- General practitioners.
- Medical specialists (such as rheumatologists, endocrinologists, obstetricians and cardiologists).
- Consultant physicians.

- Nurse practitioners.
- Consultant psychiatrists.
- Psychologists and clinical psychologists.
- Dentists.
- Selected allied health professionals (such as dietitians, physiotherapists, occupational therapists and social workers).

The Australian Government has committed to ensuring telehealth services and infrastructure will continue to play a key role in healthcare provision from now on, however, the funding and policies to support this will continue to be updated.

### [Public dental care](#)

Most Australian children covered by Medicare can receive free general dental services through the Australian Government's Child Dental Benefits Schedule. Children under 18 are usually eligible if their family is covered by certain family tax benefits.

Those with eligible concession or health care cards can apply for free or low-cost public dental health care. These cards include:

- Health Care Cards or Pension Concession Cards issued by Centrelink.
- Commonwealth Seniors Health Cards.
- Pensioner Concession Cards issued by the Department of Veterans' Affairs.

The access criteria varies between the states and waiting lists can stretch to one to two years.

If you have dental damage and are also on immunosuppressants (for example, for autoimmune conditions) you may qualify for emergency care.

## **Pharmaceutical services**

### [Pharmaceutical Benefits Scheme](#)

The Pharmaceutical Benefits Schedule lists all of the medications available on prescription to patients at a government-subsidised price. These medications have been intensely reviewed by the Therapeutic Goods Association before being approved for use by patients.

The Schedule is part of the wider Pharmaceutical Benefits Scheme (PBS) managed by the Department of Health and administered by the Department of Human Services. The Scheme is available to all Australian residents who hold a current Medicare card.

The actual cost of PBS-listed medications can be substantial. For example, biologic medications for conditions such as rheumatoid arthritis or psoriasis can cost over \$1,000 per month. In contrast, you only have to pay a small co-payment for PBS-listed medications.

As of 1 January 2023, the maximum PBS co-payment for general patients is \$30.00 per script. For concession card holders, the maximum PBS co-payment is \$7.30 per script. These amounts will be indexed on the first day of every new year from 1 January 2024.

## **[PBS Safety Net](#)**

If you have chronic health issues, your co-payments can add up quickly. For many, this can mean taking medications less often even if it adversely affects their health. These costs can also have a major and negative impact on the household budget.

The PBS Safety Net reduces the cost of prescription medicines for individuals and families once the PBS Safety Net threshold has been reached. There are different thresholds for general patients and concession card holders. The threshold limits are based on your co-payment totals in each calendar year.

As of 1 January 2023, the threshold for general patients is \$1,563.50 while the threshold for concession card holders is \$262.80.

It is important to keep a record of your PBS medicines on a [Prescription Record Form](#), available online or from your pharmacist. Use this form to record your PBS medicines so you know when you have reached the PBS Safety Net threshold. You can combine the amounts for all eligible family members to help you reach the safety net sooner.

If the same pharmacist provides all your PBS medicines, ask them to keep a record for you. If you use different pharmacies, you'll need to track your medicine expenditure yourself.

Once you reach the threshold, you will need to apply for a PBS Safety Net Card through your pharmacist. You can show this whenever you purchase prescription medication at any pharmacy. General patients will then pay \$7.30 per script while concession card holders will receive their prescription medications for free for the rest of the calendar year.

If you spend more than the threshold amount in a calendar year (for example, if you use various pharmacies without showing a PBS Safety Net Card), you can apply for a refund for the difference. Refund forms can be submitted through your pharmacist or completed online on the PBS Safety Net website.

(Note: You can get detailed information on prescription medicines and other treatments in the [Medicine Finder](#) section of the [NPS MedicineWise](#) website.)

## **[Electronic prescriptions](#)**

Electronic prescriptions (ePrescriptions or eScripts) enable the prescribing, dispensing and claiming of medicines, without the need for a paper prescription.

Previously, the legal document for a prescription was the piece of paper that you take from your doctor to your pharmacy. With ePrescriptions, the legal document is the prescription data that gets uploaded to a secure and encrypted data exchange service (MediSecure).

If you choose to receive an ePrescription you can control which pharmacy can access it in one of two ways. You can opt to receive a token via SMS, email or paper printout for each item prescribed. The token provides a link to a unique code used by the dispensing pharmacy to access the legal document for dispensing.

Alternatively, you can elect for the new prescription to be added to your Active Script List ([MySL](#)). You can give your pharmacies, doctors and third-party intermediaries access to your list for an ongoing or specific period. Once granted access to this list, a pharmacy may dispense the items you need. Similarly, doctors and third-party intermediaries, with your consent, can view your active list of scripts.

The ePrescription services support digital health services (such as telehealth services), electronic medication charts in hospitals and residential care facilities and provide an opportunity to protect community members and healthcare providers from exposure to infectious diseases (for example, COVID-19).

Regardless of which method you choose, you will always be in control of who can access your ePrescriptions. **Paper prescriptions will continue to be available as an alternative option.**

## National Immunisation Program

The [National Immunisation Program \(NIP\)](#) is managed by the Australian Government Department of Health and Aged Care. It aims to increase national immunisation coverage to reduce the number of cases of diseases that are preventable by vaccination in Australia. The NIP provides free vaccines for babies, young children, teenagers and older Australians. Eligibility for free vaccines under the NIP is linked to eligibility for Medicare benefits.

The program also targets people of all ages who are at greater risk of serious harm from certain diseases, including:

- Pneumococcal disease.
- Meningococcal disease.
- Influenza (flu).
- Haemophilus influenzae type b disease.

Not all medical risk conditions are covered for free. For information on medical conditions recommended and/or funded, refer to the [ATAGI clinical advice on vaccination recommendations for people with risk conditions from 1 July 2020](#).

### Influenza vaccines

Influenza is a serious and highly contagious disease affecting the airways. The [influenza vaccine](#) is free to people six months and over who are classified as medically at risk (however, your healthcare provider may charge for the service). This may include those with chronic health conditions or reduced immunity due to disease or treatment.

If you fit into this category, it is recommended that you have a flu shot at the start of each flu season. In Australia, this is normally around April. In some cases, you may need a booster shot near the end of the season. It is best to plan all your vaccinations with your treating doctor.

## COVID-19 vaccines

All Australians aged five years and over can now book an appointment for a [COVID-19 vaccine](#). COVID-19 vaccinations are free for everyone in Australia. Getting vaccinated is the best way to keep you, your family, friends, and the community safe. COVID-19 will be with us for many years. Getting vaccinated has many benefits including:

- Protecting yourself against severe illness and death from COVID-19.
- Preventing complications such as long COVID.
- Protecting people who can't be vaccinated due to medical conditions.
- Slowing the spread of the virus.
- Keeping hospitalisation rates at a level our health system can cope with.

Some illnesses, conditions or treatments can increase your [risk of severe illness](#) from COVID-19. For example, these may include autoimmune conditions, some types of cancers or chronic organ diseases. Other factors may include (but are not limited to):

- Your age (especially if you are over 70 years old).
- Being an Aboriginal or Torres Strait Islander.
- Being pregnant.
- Having a severe disability.

**People who are severely immunocompromised may be eligible for a [third primary dose of a COVID-19 vaccine](#).** The third dose is intended to maximise the level of immune response to as close as possible to the general population.

The [Australian Rheumatology Association](#) regularly updates its [Patient Information on the COVID-19 vaccination in autoimmune inflammatory rheumatic diseases \(AIRD\)](#) in line with ATAGI recommendations. This information includes advice on eligibility for third primary COVID-19 vaccinations and boosters, the timing of medications around vaccination doses and much more.

## My Health Record

The [My Health Record](#) platform is operated by the Australian Digital Health Agency. MHR is a free online resource where you can securely store your health information and share it with others.

The My Health Record (MHR) platform has existed for some years as an “opt-in” option. All Australians will have a My Health Record created for them (unless they opted out of the system before 31 January 2019). You can access and manage your own record online.

You can permanently delete your record if you choose to. If you have previously opted out before 31 January 2019 or cancelled your My Health Record, you can register for a record at any time.

## How is My Health Record used?

Your record can be used to store information such as your medications, allergies or conditions, emergency contacts or pathology results. At your medical appointments, your doctor can see all your information at a glance, including information added by other providers. This is especially useful for those with chronic health issues or in emergencies.

## Who can access my personal health records?

You decide who can input information, who can see your records (including doctors, hospitals and other health service providers), and what information you want to include. You can have a record and simply leave it there for your approved providers to use as required. Or, you can decide to opt out of certain selections, restrict who can access your records and set up unique passwords.

Healthcare providers must also register to use the My Health Record platform. Only the healthcare provider organisations involved in your care and who are registered as MHR System Operators are legally allowed to access your record.

Not all healthcare providers are registered to use the platform. If you want to ensure your provider uploads clinical documents to your record, ask if they are a registered operator before your appointment. If they are not registered, you may want to change providers.

## My Aged Care

[My Aged Care](#) is an Australian Government run service that provides information and support to help people to understand, access and navigate the aged care system. It can be accessed via the My Aged Care website, via phone on 1800 200 422 or in person at selected locations throughout the country.

My Aged Care provides:

- Information on the different types of aged care services available.
- An assessment of needs to identify eligibility and the right type of care.
- Referrals and support to find service providers that can meet your needs.
- Information on what you might need to pay towards the cost of your care.

## Who is eligible for My Aged Care?

You **may** be eligible for My Aged Care supports if you have:

- Noticed a change in what you can do or remember.
- Been diagnosed with a medical condition or reduced mobility.
- Experienced a change in family care arrangements.
- Experienced a recent fall or hospital admission.

To find out if you are eligible for services, you will need to have an assessment. These are conducted in person and usually at your home. To qualify for assessment, you must meet some needs and age requirements. These check:

- ▶ How much assistance you need with some everyday tasks.
- ▶ That you are 65 years or older (50 years or older for Aboriginal or Torres Strait Islander people).

**Note:** If you are not eligible OR if you are on a low income, homeless or at risk of being homeless, **and** aged 50 years or older (45 years or older for Aboriginal and Torres Strait Islander people), please call the My Aged Care contact centre on 1800 200 422 to discuss your situation.

If you are under 65 and need help with daily living, you may be eligible for the National Disability Insurance Scheme (NDIS). See below for more information about the NDIS.

After your assessment, you will receive an assessment result and, if eligible for services, a support plan. Your support plan will explain what services you are eligible for.

### What types of care can I receive?

The type of My Aged Care support you receive will be based on your needs. For example, if you can do many things yourself but need a bit of help with daily activities such as cooking, cleaning or gardening you could be eligible for subsidised support services through the [Commonwealth Home Support Programme \(CHSP\)](#).

These supports enable you to continue living independently in your own home for as long as possible. In many cases, having someone to do these daily tasks with you or for you can help you save your energy for the fun things in your life.

Other supports and services you might need include having:

- ▶ Modifications such as handrails or ramps installed around the house.
- ▶ Someone to take you shopping or to events.
- ▶ A nurse or physiotherapist come to your home to assist you with healthcare matters.

If you can still live at home but your needs are more complex or intensive, you may be eligible for a [Home Care Package \(HCP\)](#).

If living at home is becoming a bit too hard or if you need somewhere to stay for a short period, you may need a few weeks of respite care in an aged care facility. You can also get help to select and move to an aged care facility permanently if that is the best option for you.

### How much does My Aged Care cost?

Initial My Aged Care assessments are free. **The cost of aged care services varies from person to person.** It depends on the care you are eligible for, the aged care provider you choose, and your financial situation.



While the Australian Government may contribute to the cost of your care, you will also be asked to contribute if you can afford to. Some of the [fees and costs](#) depend on your financial situation. The Australian Government uses income assessments or means (income + assets) assessments to work this out.

## National Disability Insurance Scheme

The [National Disability Insurance Scheme](#) (NDIS) is a government scheme that provides extensive support for Australians with a disability, their families and carers. It is operated by the National Disability Insurance Agency (NDIA).

The NDIS is designed to help people get the help they need so their skills and independence improve over time. It provides funding for, and assistance with, accessing a range of community and employment services. **The NDIS is not a welfare scheme** and it operates independently of both Centrelink and Medicare.

Services and funds are accessed through a vast network of Early Childhood Early Intervention (ECEI) partners and Local Area Coordination partners. The services are carried out by approved NDIS government and private providers, such as physiotherapists and transport service providers.

**The NDIS is not income tested** so it won't affect Centrelink income support payments such as the Disability Support Pension. However, it will eventually replace many other local, state and national disability benefit schemes and services.

### Who can access the NDIS?

Children under seven can receive ECEI support through local Early Childhood Partners across Australia.

Other Australian citizens or permanent residents under 65 may be eligible for support through the NDIS via their Local Area Coordinator (LOC). Currently, people aged 65 or over cannot access the NDIS but may be eligible for My Aged Care. See above for more information about My Aged Care.

If you turn 65 after being approved for NDIS support, you may choose to continue to receive support for the remainder of your life subject to the same periodic reviews as other recipients. Alternatively, once you turn 65, you may choose to apply for support services through My Aged Care. **You cannot receive support from both the NDIS and My Aged Care at the same time.**

To be eligible for the NDIS, you must have a permanent condition that significantly affects how you take part in everyday activities. You must also meet at least one of the following requirements.

- ▶ You usually need support from a person because of a permanent and significant disability.
- ▶ You use special equipment because of a permanent and significant disability.
- ▶ You need some supports now to reduce your future needs.

Note that, while your condition must be permanent, it does not have to affect you every day. For example, if your condition is recurring or in remission, you may still receive some support.

## What conditions are recognised by the NDIS?

Disabilities may include physical and mental health conditions and intellectual disabilities. Your eligibility is determined, not only by the condition itself but how long it will last and how it impacts your life (your functional capacity). Therefore, someone with osteoarthritis may be eligible while someone else with the same condition may not, for example. Each person is assessed on their own capabilities and needs.

You will need to provide evidence of your disability as part of your NDIS application. The more supporting evidence you have from your treating health providers, the better.

The NDIS has categorised many of the reasons people may seek support into several categories:

- ▶ **List A:** Conditions that are likely to meet disability requirements, such as autism and blindness.
- ▶ **List B:** Permanent conditions for which functional capacity is variable and further assessment of functional capacity is generally required. Rheumatoid arthritis is on this list.
- ▶ **Other lists:** These cover existing clients of disability programs and more.

If your condition is not included on any of these lists, you may still be eligible for NDIS support. Each application is processed on a case-by-case basis, so your overall situation will be considered.

## How does the NDIS planning process work?

If you are approved for support through the NDIS, you will have an appointment with your ECEI Coordinator, LAC or NDIA planner. This person will help you map out your relevant short-term and long-term goals and create a plan for reaching them. For example, your goals might include getting ramps or rails in your house, returning to work or attending regular community events.

Once your plan is approved, funding will be allocated for the services needed to help you reach your goals. You can choose to manage your plan and funds yourself or have someone else manage them for you. Plans are reviewed every one to two years and can change over time.

There are many NDIS support groups and advocacy groups online that you can turn to for general tips and support from others in similar situations. You can find such groups via a Google search or by searching for “NDIS” on social media platforms.

## Centrelink Payments and Benefits

The following payments and benefits are available through [Centrelink](#). Each has specific requirements that affect your eligibility. These include (but are not limited to) your:

- ▶ Medical conditions and supporting evidence.
- ▶ Age.
- ▶ Income and assets.
- ▶ Australian residency status.

See the [Centrelink Payment and Services Finder](#) for more information. **Most Centrelink payments and benefits are income and asset tested.** The details of these tests vary depending on the benefit or service you are applying for.

Applications can be submitted online, by post or through a Centrelink service centre.

### **Disability Support Pension**

If you have a physical, intellectual or psychiatric condition and you meet the medical and non-medical access rules, you may be eligible for the Disability Support Pension (DSP).

As with many Centrelink payments for people with chronic illness, you will need medical evidence from your treating health professionals. It is important to take the time to gather enough solid evidence to help support your claim.

Examples of evidence you could provide include:

- ▶ Physical examination reports.
- ▶ Medical imaging reports.
- ▶ Medical history records.
- ▶ Psychological reports.
- ▶ Compensation or rehabilitation reports.

It is a good idea to contact Centrelink beforehand if you need help with the information you need to supply.

Applicants may need to undergo a Job Capacity Assessment to determine their medical needs and employment capacity.

You are allowed to have some casual or part-time work, but your pension amount may be affected.

### **Mobility Allowance**

The Mobility Allowance is a Centrelink payment that can help you with travel costs if you have an illness, disability or injury.

To be eligible for the Mobility Allowance, you must meet all of the following requirements. You:

- ▶ Are 16 years or over.
- ▶ Meet the appropriate Australian residency requirements.
- ▶ Have a disability that prevents you from using public transport without extra help. (There does not need to be public transport in your area for you to qualify.)
- ▶ Have a medical report from your doctor stating you can't use public transport without help.
- ▶ Need to travel to and from your home as part of your work, self-employment, training or job-seeking for at least 32 hours every four weeks.

You may also be eligible to receive the Mobility Allowance if you participate in regular volunteer work.

Note that even if you don't use public transport often, you may still be eligible for this allowance. However, your medical report needs to prove that, if you *did* have to use public transport regularly, you would find it difficult without help.

**The Mobility Allowance is not income tested** and you can receive it whether or not you receive other Centrelink benefits. For example, you could be working full-time and still receive this allowance provided you meet the requirements.

**If you receive the Mobility Allowance but not the Disability Support Pension, you will also receive a Health Care Card.** This is one way people who do not meet the income and asset requirements for other Centrelink benefits can pay concession rates for things like prescription medicines and medical appointments.

Those currently receiving the Mobility Allowance who transition to the National Disability Insurance Scheme (NDIS) will no longer receive the Mobility Allowance or a Health Care Card, but they may be eligible for financial support for transport and a wide range of other NDIS supports.

### [Concession and Health Care Cards](#)

Many Centrelink pensions, allowances and benefits come with a [Pensioner Concession Card](#), [Health Care Card](#) or a similar type of card.

Most of these cards give you access to cheaper prescription medicines under the Pharmaceutical Benefits Scheme (PBS) and concessions on expenses such as public transport, household energy and internet bills and a range of health services.

### [Other Centrelink pensions and benefits](#)

Centrelink provides a range of other pensions, allowances and benefits including the [JobSeeker Payment](#), [Youth Allowance](#), [Carer payments](#) and the [Youth Disability Supplement](#).

They can also connect you to a wide selection of resources to help if you're ill, injured or have a disability.

You can view more information about Centrelink pensions and benefits in Services Australia publication [A guide to Australian Government payments](#). This publication is updated annually.

## State Government Concessions and Benefits

In Australia, the full range of government concessions and benefits for those with chronic health issues varies between each state and territory. These can include but are not limited to, concession rates or subsidies on utilities, private rentals and taxi services.

### Medical Cooling Concessions

**Those with a chronic illness that affects their ability to regulate body temperature, may be eligible for a summer electricity bill discount.** In Victoria, this is known as the Medical Cooling Concession. The name of the concession and the eligibility requirements differ from state to state.

In all states, **you must also have a relevant government concession card**, such as a Health Care Card.

Diagnosed medical conditions that *may* be recognised by your state include fibromyalgia, lymphoedema and multiple sclerosis. You must provide a report from your treating doctor with your application.

Contact your energy supplier or state department of health via the links below for more information.

### Assistance with accessing rural health services

The [National Rural Health Alliance Ltd](#) has collated a list of the [Patient Assisted Travel Schemes](#) designed to provide equitable access to essential health services for people in rural and remote Australia. The schemes are managed by the states and territories and provide travel and accommodation subsidies to and from medical services based on your eligibility.

### Other state government concessions

Each state or territory government may also offer their own payments and benefits for those holding current Centrelink Concession or Health Care Cards. You can learn more about these through your respective Australian state or territory government website.

- **Australian Capital Territory:** [Assistance](#)
- **New South Wales:** [Concessions, Rebates and Assistance](#)
- **Northern Territory:** [Community Support and Care](#)
- **Queensland:** [Cost of Living Support](#)
- **South Australia:** [Disability Concessions and Entitlements](#)
- **Tasmania:** [Discounts and Concessions](#)
- **Victoria:** [Concessions and Benefits](#)
- **Western Australia:** [ConcessionsWA](#)

## Other Resources

- [Australian Disability Parking Scheme](#): Find out how Disability Parking services vary across Australia.
- [JobAccess](#): This is the national hub for workplace and employment information for people with disability, employers and service providers.
- [Medical Costs Finder](#): A tool to find and understand costs for medical specialist services across Australia. Use the Medical Costs Finder to find typical fees and costs for common medical services, including the cost of seeing a private specialist and being treated in a private hospital.

Contact the relevant health or human services department in your state about other schemes that may benefit you.

You can access most of the above benefits and services through the Australian Government's [myGov](#) portal.

This page covers the main pensions and benefits provided by the Australian Government and state and territory governments. See our [Health and Community Services Information For People With Chronic Conditions](#) page for an extensive list of services you may be able to access through other providers.

## Keep Reading

- [Patient PrepRheum podcast](#)
- [Choosing Your Healthcare Team](#)
- [Employment With a Disability](#)
- [Arthritis Treatments](#)
- [Patient Guidelines](#)



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