

Telehealth Position Statement



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Statement

Emerge Australia welcomes the Federal Government's announcement that Medicare rebates will be made permanent for some online and over-the-phone telehealth services provided by GPs, specialists and allied health practitioners. Rebates for complex specialist consultations and longer telehealth consults will be available until June 2022.

Many people with ME/CFS and Long-COVID are housebound and/or bedbound. Telehealth Medicare rebates, introduced at the beginning of the COVID-19 pandemic, have radically improved access to vital services for people living with chronic illness.

This decision will support continuity of care for patients who are unable to attend face-to-face appointments and improve health and wellbeing outcomes for many ME/CFS and Long-COVID patients.

We recommend that complex and long telehealth consults are made available on a permanent basis, beyond June 2022, for people living with chronic illnesses. We also urge the Government to remove the requirement for an annual, face-to-face GP appointment. This requirement excludes patients who are entirely bedbound – those who are most unwell – from accessing services they need. Alternatively, if an annual face-to-face appointment is required, funding should be made available for home visits to ensure patients receive the care they need.

Background

In March 2020, in response to COVID-19, the federal government temporarily expanded the range of Medicare rebated telehealth medical services. This allowed all Australians to access a range of Medicare-subsidised services via phone or video call. After many years campaigning for telehealth to help people with ME/CFS, Emerge Australia and our community warmly welcomed this decision. In December 2021, the Federal Government announced that telehealth services would be made available through Medicare on a permanent basis.

Evidence

In June 2020, we conducted a survey to find the effect of telehealth services on people living with ME/CFS. We found telehealth:

- improved access to health services for 82 per cent of respondents
- was a positive experience for 90 per cent of respondents
- is preferred by 82 per cent of people with ME/CFS, with occasional face-to-face appointments.
- is the preferred option for 9 per cent of respondents – those who are most unwell – who would prefer to use telehealth all of the time.

Telehealth enabled some people with ME/CFS to access essential health services for the first time in years. Previously, these people did not attend in-clinic because of the severe effect on their health. For many people living with ME/CFS, travelling and attending a medical appointment in person triggers post-exertional malaise (PEM). PEM is the worsening of a range of symptoms including fatigue and pain following physical or mental effort. Attending appointments in-person can cause people living with ME/CFS to experience PEM for hours, days or weeks afterwards.

Further, for people living with ME/CFS, our survey found telehealth:

- Significantly reduced the risk of experiencing the disabling effects of PEM
- Reduced the number of appointments cancelled at the last minute, unfortunately common for people with an unpredictable and highly disabling illness
- Reduced burden on carers to accompany patients to-and-from appointments
- Increased access to healthcare when people are most unwell and otherwise unable to leave the house)
- Increased patient independence.

You can read the full report at: [**emerge.org.au/telehealth-campaign**](https://emerge.org.au/telehealth-campaign)