LEGISLATIVE ASSEMBLY OF THE NORTHERN TERRITORY

WRITTEN QUESTION

Mrs Finocchiaro to the Minister for Health:

Grants and Funding

1. How have you made up for the shortfall in Commonwealth grants? (BP3, p129)

There is no shortfall. The apparent change in Commonwealth funding from the 2017-18 estimate to the 2018-19 budget as shown on page 129 of BP3 is due to timing issues.

The NT Budget only includes Commonwealth funding where signed agreements are in place. Throughout the course of the financial year new agreements are signed and existing ones are renewed. At the end of the financial year the revised estimate for 2018-19 Commonwealth funding will be higher than the original budget.

2. Is the \$38-million extra listed through the Disability Care Australia Fund essentially NDIS funding? (BP3, p129)

Yes.

3. How many Commonwealth partnership agreements ceased in the reporting year?

Three Commonwealth agreements ceased on 30 June 2018 which provided short term project funding to build the activities into ongoing normal activities.

4. What reason did the Commonwealth give you for reducing its grants?

As explained in the response to Question 1 above, there is no general reduction in Commonwealth funding.

5. How many are up for renegotiation and what is the time frame for each?

Eleven other Commonwealth agreements were due to cease and all have been renewed or are awaiting final versions from the Commonwealth for signing.

6. There is a one off payment of \$3.6M for "interim budget pressure support" – what do you attribute to this budget blow-out in the agency? (BP3, p122)

Mostly additional IT costs.

7. There is a one off payment of \$42.3m for "interim budget pressure support" for the Top End Health Service – what is the reason for this budget blow-out? (BP3, p133)

During the 2017-18 financial year, Top End Health Service experienced significant additional demand pressures with increased Emergency Department presentations and subsequent increases in demand for other services.

8. There is a one off payment of \$13.9M for "interim budget pressure support" for the Central Australia Health Service – what caused this budget blow-out and has it been addressed? (BP3, p143)

During 2017-18 financial year, Central Australia Health Service experienced significant additional demand pressures due to the meningococcal outbreak and an increase in Emergency Department presentations. Significant increased cost pressures also arose due to the asbestos contamination of the pathology area.

9. The Budget-to-Budget figures for Remote Primary Health Care in the TEHS show a decrease of almost \$25M. If this is a variation "due to relevant Commonwealth and external funding agreements", please itemize which agreements and whether they will be renegotiated.

The following agreements are currently not contained in the budget papers due to the reasons explained in response to Question 1 above, but are expected to be renewed in 2018-19:

- \$25.6 million Commonwealth Indigenous Australians' Health Program
- \$0.3 million Externally Funded NT Primary Health Network
- \$0.5 million Externally Funded NT General Practice Education