

## **Government closes loophole, safeguards access to life-saving heart surgery**

Heart experts and advocates are applauding the Federal Health Minister's announcement that thousands of Australians with a debilitating heart condition will now bypass public hospital waiting lists to receive a life-changing and potentially life-saving procedure.

Today's announcement follows Minister Hunt's intervention to close a loophole that enabled private health insurers to dodge the cost of surgery that corrects electrical short-circuits responsible for an irregular heartbeat, thereby reducing the risk of stroke, heart failure and death.

The procedure, known as catheter ablation, will be included on the Government's Prosthesis List from 1 March. This will require health insurers to cover the full cost of the required medical technology for policy holders, expediting the treatment of up to 18,500 patients each year.

"Minister Hunt has delivered on his promise to resolve this long-standing impasse in the interest of Australians with atrial fibrillation," said hearts4heart CEO, Tanya Hall.

"We applaud the Health Minister for closing the funding loophole and ensuring privately insured Australians receive access to this important procedure when and where they need it," she said.

"We supported the arbitration process requested by Minister Hunt and are thrilled that the Department of Health, private insurers and medical device companies have worked together to make catheter ablation readily available for privately insured patients," said Ms Hall.

Until now, the refusal of many health funds to cover the full expense of catheter ablation – a procedure to remedy abnormal electrical impulses and restore normal heart function – saw thousands of patients join blown-out public waiting lists, a delay which often precluded them from treatment during the narrow window of time associated with highest rates of success.

The funding loophole existed because private health insurers are only required to cover the costs of medical technology listed on the Prosthesis List. Decades-old regulations require that the technology or device is surgically implanted in the body (e.g. a pacemaker or hip replacement) in order to be included on the List, but catheters are removed from the body after an ablation procedure.

"Catheter ablation is the best treatment for a large number of atrial fibrillation patients who would otherwise suffer debilitating chest pounding, struggle to perform day-to-day activities, and face heightened risk of stroke, heart failure, and death," said Associate Professor Saurabh Kumar, Chair of the Electrophysiology and Pacing Council of the Cardiac Society of Australia and New Zealand.

“There is a window of opportunity after symptoms begin in which ablation is most successful. Today’s announcement will allow eligible patients to receive treatment at the earliest opportunity. This is a great result for many Australians and their doctors,” said Dr Kumar.

### **About Atrial Fibrillation and Catheter Ablation**

Atrial fibrillation is a major public health issue that requires immediate attention and action.

As the most common form of heart arrhythmia (irregular heartbeat), atrial fibrillation affects around 460,000 Australians, with up to 30 per cent remaining undiagnosed. It is associated with a five to sevenfold increase in the risk of stroke and a threefold increase in the risk of heart failure.

Today, atrial fibrillation is a major cause of stroke (6,000 strokes annually), heart failure, hospitalisation (more than 60,000 hospitalisations annually) sudden death and cardiovascular disease, with direct annual healthcare costs of \$1.63 billion.

In contrast to other cardiovascular conditions which have seen declines in mortality in past years, mortality rates related to atrial fibrillation have almost doubled over the last two decades.

Catheter ablation can correct atrial fibrillation, reduce associated mortality and improve a patient’s quality of life. The minimally invasive procedure involves placing a long, thin tube (called a catheter) into a vein in the leg and pushing it up to the heart. When the tube reaches the heart, it scars a specific area in the heart chamber that causes the abnormal electrical impulses, thereby restoring normal heart function.

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**For further information or to arrange an interview, please contact Tanya Hall at hearts4heart on 0426 240 636.**