

'Westfund Regional Health Gap Report'

Key findings

About the report:

The 'Westfund Regional Health Gap Report', launched by Australia's leading regional not-for-profit private health insurer, Westfund Health Insurance, was commissioned to shed light on the current state of disease prevalence and healthcare access in regional Australia.

The report, developed in partnership with Insight Actuaries, used claims data over a seven-year period from 66,000 patients across eight regional locations (Mudgee, Orange, Dubbo, Bathurst, Lithgow, Wollongong, Mackay, and Townsville). Its findings show that geographical factors significantly impact access to care, availability of services, and consequentially Australians' healthcare outcomes.

Access to healthcare system, outside of hospital

The report investigated access to ancillary service providers, who support the work of primary care providers in delivering services that are crucial for the overall health and wellbeing of a community and those living with chronic conditions, including dentists, optometrists, physiotherapists, podiatrists, and psychologists. The results are vastly different, from region to region:

- 1. Mudgee: 14 ancillary service providers per 1000 members.
- 2. Bathurst: 27 ancillary service providers per 1000 members.
- 3. Dubbo: 30 ancillary service providers per 1000 members.
- 4. Orange: 33 ancillary service providers per 1000 members.
- 5. Mackay: 50 ancillary service providers per 1000 members.
- 6. Lithgow: 63 ancillary service providers per 1000 members.
- 7. Wollongong: 212 ancillary service providers per 1000 members.
- 8. Townsville: 281 ancillary service providers per 1000 members.

Ratio of high-risk to low-risk members

High-risk members are those who are most at risk of adverse health events. This includes those who may be sick or infirm or have underlying health conditions.

- 1. Mackay: 111 high-risk members per 1000.
- 2. Townsville: 106 high-risk members per 1000.
- 3. Wollongong: 91 high-risk members per 1000.
- 4. Lithgow: 81 high-risk members per 1000.
- 5. Dubbo: 79 high-risk members per 1000.
- 6. Bathurst: 75 high-risk members per 1000.
- 7. Mudgee: 67 high-risk members per 1000.
- 8. Orange: 67 high-risk members per 1000.

Chronic disease treatment prevalence

Chronic conditions are lifelong conditions that often need to be actively managed through lifestyle interventions, clinical support, treatments, and medication, such as obesity and diabetes. Nationally,



research has put the current cost of avoidable hospital admissions for chronic conditions at \$320 million each year.ⁱ In Australia's regional and rural areas, the impacts of these conditions are even greater. People who live outside urban areas experience higher risk factors and more chronic conditions. The analysis found significant variations in the burden of disease for Westfund members between different geographical locations:

- 1. Townsville: 43% of the Townsville members who are at high and medium risk also have a known chronic condition. This includes a high prevalence of diabetes, with Townsville having the highest rate of members living with the condition in the analysis (45 per 1000). Members in Townsville exhibit relatively high treatment prevalence for arthritis, heart disease and some cancers.
- 1. Mackay: 33% of the Mackay members who are at high and medium risk also have a known chronic condition. This includes a high prevalence of diabetes, with Mackay having the second highest rate of members living with the condition (44 per 1000). Out of all seven regions, Mackay has some of the highest prevalence of skin cancer, shoulder disorders, and knee osteoarthritis (the most common type of arthritis). Besides Mudgee, Mackay also has the highest prevalence of prostate cancer and besides Townsville, it has the highest prevalence of cardiac failure.
- 2. Wollongong: 32% of the Wollongong members who are at high and medium risk also have a known chronic condition. This includes a high prevalence of diabetes (37 per 1000 members). There is an elevated prevalence of skin cancer in this region, with only members in Mackay and Lithgow exhibiting higher prevalence rates.
- 3. Dubbo: 31% of the Dubbo members who are at high and medium risk also have a known chronic condition. This includes diabetes, with a rate of 34 per 1000 members in Dubbo. Dubbo presents with high treatment ratio of heart disease, including ischaemic heart disease, valve disorders and heart attacks for members in this region.
- 4. Lithgow: 29% of the Lithgow members who are at high and medium risk also have a known chronic condition. This includes diabetes, with a rate of 32 per 1000 lives in Lithgow. There is an elevated prevalence of skin cancer in this region, with only members in Mackay exhibiting higher prevalence rates.
- **5. Mudgee:** 29% of the Mudgee members who are at high and medium risk also have a known chronic condition. This includes diabetes, with a rate of 24 per 1000 members in Mudgee. Alongside Mackay, Mudgee has the highest treatment prevalence of prostate cancer.
- **6. Orange:** 26% of the Orange members who are at high and medium risk also have a known chronic condition. This includes diabetes, with a rate of 28 per 1000 members in Orange.
- **7. Bathurst:** 27% of the Bathurst members who are at high and medium risk also have a known chronic condition. This includes diabetes, with a rate of 29 per 1000 lives in Bathurst.

Ends-

References:

ⁱ National Preventive Health Strategy 2021–2030. (2021). Department of Health. https://www.health.gov.au/resources/publications/national-preventive-health-strategy2021-2030