

# MEDIA STATEMENT

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## What this budget must do for Australians: make healthcare work for everyone, everywhere

Australians are doing it tough. The cost-of-living crisis is not just squeezing household budgets; it's cutting people off from the healthcare they need. Families are postponing GP visits, putting off chronic disease management, and turning to emergency healthcare as a last resort, not a first choice. In rural and remote communities, the pressures are even more acute: fewer services, longer distances, and less capacity to absorb the financial and physical toll of accessing care.

At the same time, the pipeline of healthcare workers Australia desperately needs is under strain as paramedic students are facing high costs to complete placements. These are not separate problems — they are two sides of the same crisis. And there is a workforce that can help solve both: paramedics. Highly trained, widely trusted, and already present in every community across the country, paramedics are uniquely placed to meet Australians where they are. Yet funding, legislative and regulatory barriers continue to prevent them from doing so.

The Australasian College of Paramedicine (the College) calls on the Federal Government to respond to this moment with targeted investment that recognises paramedics as an essential part of Australia's health solution, meets Australians where they are, and builds the health system they deserve.

John Bruning, College CEO said: "Australians are navigating one of the most difficult cost-of-living environments in a generation. The last thing they should face is a health system that keeps its best resources locked away. Paramedics are trained, trusted, and ready. This budget must remove the barriers and support them do the job communities need them to do."

Three priorities must be addressed in this budget.

### Priority 1

#### End placement poverty for paramedic students

For many aspiring paramedics, the cost-of-living crisis has made an already difficult journey close to impossible. Clinical placements — a mandatory part of training — come with no pay and significant out-of-pocket costs: travel, accommodation, lost income from reduced shifts, and the daily expenses that don't stop accumulating just because a student is on placement. For students in regional areas, or those from lower-income households, these costs are prohibitive.

Nursing and some allied health students can access the Commonwealth Prac Payment scheme to offset these costs.

Paramedic students cannot. This inequity is not just unfair — it is actively narrowing the profession's talent pipeline at a time when Australia can least afford it. Students from disadvantaged backgrounds, regional communities, and Aboriginal and Torres Strait Islander communities are disproportionately affected, deepening the workforce gaps in the communities that need paramedics most.

Extending the Commonwealth Prac Payment scheme to paramedic students is a direct, targeted investment in workforce equity.

## Priority 2

### **Bring paramedics into primary care — for every community**

When the cost-of-living rises, people make hard choices and one of the most common is to delay or forgo healthcare. GP out-of-pocket costs, long wait times, and the sheer difficulty of accessing care in under-served communities mean that for many Australians, the health system feels like it wasn't built for them. For people in regional, rural and remote areas, it clearly wasn't.

Paramedics are already there. They are registered health professionals who assess, diagnose and treat patients every day across every corner of the country. Yet they remain locked out of the Medicare Benefits Schedule (MBS), unable to prescribe, and excluded from national immunisation frameworks. These barriers prevent paramedics from delivering the full scope of care they are regulated and trusted to provide.

This budget must recognise paramedics under the MBS for defined primary and urgent care services. It must fund and support national prescribing pathways and extend immunisation authority to the profession in order to support the proposed endorsement of the regulated profession. It must also appoint a national Chief Paramedic Officer to ensure paramedic expertise is embedded in health policy from the top down. These reforms will ease the pressure on overwhelmed emergency departments and GP practices, and bring high-quality, trusted care closer to the communities that need it, regardless of postcode or income.

## Priority 3

### **Innovate for a connected, efficient, and equitable health system**

A health system under pressure cannot afford to waste what it already has. Yet right now, paramedics, some of the most trusted clinicians in the country, are excluded from core digital health infrastructure. Every time a paramedic attends a patient without access to their health history, there is risk: duplicated tests, missed medications, avoidable readmissions, and delayed care. In a cost-of-living crisis, these inefficiencies are not just a clinical concern — they are a financial one.

Integrating paramedics into Australia's digital health ecosystem, with appropriate access to interoperable data systems, and digital clinical tools, will reduce duplication, improve continuity of care, and make every healthcare interaction more effective. This matters most for people with chronic conditions, complex needs, or limited health literacy, who are also among those hit hardest by the cost-of-living crisis and least able to navigate a fragmented system.

Innovation does not require reinventing the health system. It requires removing the barriers that prevent an existing, capable, and trusted workforce from delivering what Australians need — smarter, faster, and more connected care.

Read the College Pre-budget submission [here](#).

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