

A large, abstract, low-poly geometric shape in shades of red and white, resembling a stylized map of Australia, is positioned on the right side of the page. It is composed of many triangular facets of varying sizes and colors, creating a complex, crystalline structure.

Where next for healthcare?

How the healthcare
industry can help
reboot Australia

June 2020



COVID-19 has redefined the healthcare sector

Australia's healthcare sector needed to rapidly ramp up to test, trace and treat COVID-19 related cases, whilst simultaneously managing an equally rapid slow-down in other sub-sectors, with deferrals in areas like elective surgery and preventative health.

Along with containment measures, the sector has responded by building additional capacity - including tripling ICU bed surge capacity - through increases in workforce and equipment. The National Cabinet has enabled federal-state collaboration, and public-private agreements have helped refocus capacity for response. Meanwhile, the immediate shift towards embedding telehealth into health service delivery has helped ensure continuity of essential services.

The government and broader health sector response has been admirable, with much better outcomes in Australia than in many other countries. We all owe a debt of gratitude to the front-line health and aged care workers, as well as leaders across the sector supporting the response.





Looking forward, there is likely to be a continued period of uncertainty. This necessitates the operation of a mixed model with 'one foot on the accelerator and one on the brake' - **resuming 'business as usual' treatments (although likely with a different delivery model) while preparing for future outbreaks** as restrictions are loosened. Simultaneously, there is the need to address a significant backlog in demand for elective surgery and preventative health - and a growing mental health curve. However, now is the time to also take the opportunity to 'reimagine healthcare 2.0', embedding the transformative legacy of actions taken during the initial response to the COVID-19 crisis.

This report provides medium to longer-term perspectives on the healthcare industry as Australia reboots, and the importance of a broad set of public and private ecosystem players for the health of all Australians. Through forces of change, and areas of focus for leaders, PwC suggests a range of opportunities for the healthcare sector to deliver both better health outcomes and better economic outcomes, including productivity, jobs and exports.

Forces of change – key challenges and implications

Through discussions with industry leaders and government experts, PwC identified nine forces of change that will shape the post COVID-19 recovery of the Australian economy. These factors, their implications and challenges for the health sector are explored below.

Australia has a complex funding model for health, with **68% public** (41% federal, 27% states/territories), **15% insurance/other private** and **17% individual spend**.¹

Forces	Key implications	Core challenges
 <p>Government involvement</p>	Public health interventions and additional expenditure has seen government play the role of 'orchestrator', focusing on containment and capacity, seeking expert advice and managing supply and demand for services during the crisis to date. This has seen more public-private agreements, pivoting capacity from the private sector (under significant pressure due to the cuts in elective surgery) to support potential demand.	<ul style="list-style-type: none"> Fine balance between health, economic and social outcomes: means organisations need agile decision making Collaboration required to maintain essential services and supplies Sustainability for both public and private sectors, supported by smart regulation
 <p>Debt and capital</p>	Federal, state and territory governments have stepped in and committed significant additional health spending to respond to the COVID-19 crisis (\$2.4 billion federal spending, matched in the states). In the private sector, we have seen significant pressure on profitability/liquidity in sectors like hospitals, aged care and primary care, compounding existing challenges and causing players to seek additional capital.	<ul style="list-style-type: none"> Funding sustainability - government, insurance and consumer out-of-pockets Appetite for foreign investment Consolidation and restructuring
 <p>Consumption behaviour</p>	'New ways of living' have reduced availability of, and access to, services which may adversely impact longer-term health (e.g. deferred diagnostics, elective surgery and group disability care) and impacted mental health. Changes in consumption patterns due to social distancing measures have accelerated the shift to new channels (e.g. telehealth, virtual/home exercise). There are positives from people adopting healthy behaviours which impact 30% of health outcomes (e.g. handwashing, flu jabs).	<ul style="list-style-type: none"> Reinstating services and addressing consequences of deferrals Sustain healthy behaviours Embed new channels for consumption
 <p>Accelerated digitisation</p>	There has been a significant acceleration in demand for virtual care and e-commerce, which will continue. Government immediately funded telehealth, accelerating its widespread adoption, with more than 10 million consultations in two months. The COVIDSafe app has had good uptake, evidencing shifting mindsets in Australia and globally on openness to technology and willingness to share personal data .	<ul style="list-style-type: none"> Service delivery models - telehealth, direct to home medicines delivery Cybersecurity, privacy, fraud Misdiagnosis Availability of basic infrastructure in rural and remote Australia

¹ Australian Institute of Health and Welfare, *Health expenditure 2017-18*, released 25 September 2019

Forces	Key implications	Core challenges
 Disrupted working environment	<p>Focusing on physical safety and mental wellbeing of the health and aged care workforce has been critical, including engaging constructively with the relevant unions to ensure the best outcomes. Sector supply has expanded, such as recruiting/training more ICU nurses. Whilst many front-line services still require face-to-face delivery, others have shifted to telehealth or working from home. Increasing technological competency is required to support remote delivery. Management of mental health resilience and outcomes is also critical.</p>	<ul style="list-style-type: none"> • Sustainable workforce and new skills • Mental health, both for the broader population and health workforce • Insurance impacts e.g. workers compensation
 Resilient supply chains	<p>Significant disruption affected nearly all layers of the supply chain, highlighting vulnerabilities in global and local supply chains. In particular, access to personal protection equipment (PPE) was strained and may lead to larger future stockpiles to prevent similar issues. There was a need to build supply, with many manufacturing suppliers pivoting capacity (such as an order placed for 1,000 ResMed ventilators). There has also been a strong focus on R&D and innovation, in particular in the search for a vaccine and better treatments for COVID-19, with collaboration across universities, medical research institutes, life sciences, health services and tech players.</p>	<ul style="list-style-type: none"> • Surety over supply (e.g. PPE, ventilators, pharmaceuticals, consumables) short and long-term • Agility and responsiveness, buying collectives, localisation of supply • R&D, innovation and clinical trials
 Industry consolidation	<p>COVID-19 has exacerbated issues in some sectors already under pressure (e.g. 56% of aged care players made operating losses in the six months to Dec 19²). Other sectors have faced significant impacts in short-term demand (e.g. private hospitals and medtech players with elective surgery devices). In addition, the longer-term shift to 'new normal' models of care, like telehealth and care at home, will impact capabilities needed by players to win in the future. With such large changes to business models likely, industry restructuring will follow.</p>	<ul style="list-style-type: none"> • Exacerbate and accelerate impacts on sectors under pressure (e.g. aged care) • M&A and industry restructuring
 Tax reform	<p>There will be significant funding pressures on all payers: government, insurance and individual out-of-pocket spend. For example, health spending is 24.4% of government budgets today. The federal government announced it would pay 50% of new health costs related to COVID-19, up from 45% of public hospital costs. There will likely be continued pressures on private health insurance next year (affordability, value) and on individual contributions. While there has been a short-term drop-off in demand for some services, spending will revert and increase over time - this will require a sustainable funding model with the right balance across payers and more focus on outcomes. There could be opportunities for tax reform to enable this, such as greater incentives for insurance (e.g. corporate tax benefits; young people). In addition, there is an opportunity to review funding models including a shift to outcomes-based or pooled funding models, with a different balance of contributions between federal and state governments, as well as how much consumers should pay.</p>	<ul style="list-style-type: none"> • Public funding pressure: budgets, structure (e.g. pooled funding, tax incentives/rebates for private health insurance) • Viability of the private sector • Longer-term impacts on the ability to personally fund healthcare needs
 Migration	<p>Migration has helped support the required workforce levels for healthcare sectors. Reduced levels of migration will compound existing labour supply issues. This could be short lived if net overseas migration recovers in the medium term. However, any long-term restrictions on migration would have negative repercussions for skills and talent in the sector. More broadly, higher migration would enable growth across the sector.</p>	<ul style="list-style-type: none"> • Reliance on migration for supply of medical experts (GPs, specialist nurses), 40% of aged and disability care workers

² StewartBrown, *Aged Care Financial Performance Survey*, released December 2019

Scenarios – potential implications

The forces of change could play out in a variety of ways. The future of Australia's economy will ultimately depend on government, business, and community actions. This uncertainty makes life difficult for executives who face serious choices now with potentially far-reaching consequences. To help inform these decisions, PwC's **Australia Rebooted** has modelled two scenarios that could be envisioned for the Australian economy as we emerge from the propagation phase of COVID-19:

- **Fortress Australia**, characterised by nation-first decisions and higher levels of federal and/or state intervention in industry.
- **Enterprise Australia**, where smarter regulation and digitisation enables private industry to lead Australia out of the crisis.

Total, cross-sector and healthcare sector gross value added (GVA) by scenario

Under any scenario, COVID-19 will have a negative impact on the economy, varying from \$680 billion for Fortress Australia to \$342 billion under Enterprise Australia by 2030 (surpassing Australia's previous trajectory by 2025). The lower-growth outcome reflects the economic inefficiencies associated with onshoring high-cost economic activity and investing in consumptive (i.e. not productive) defence activities.

When we look at different sectors in the economy, some are impacted more than others - for example retail & consumer and education are worst hit, while banking & capital markets will also face challenges.

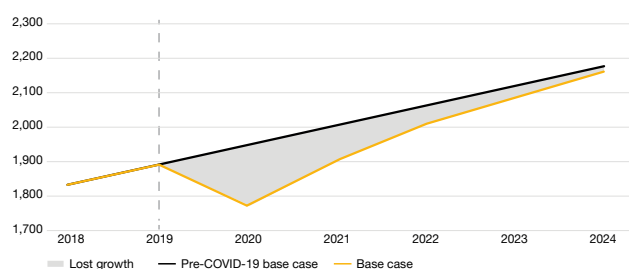
The good news for health is that it is resilient under any scenario and will see a 30% increase in GVA by 2030 compared to 2020.

FIGURE 1

Gross value added (GVA) by scenario, 2020-2023, \$ billion

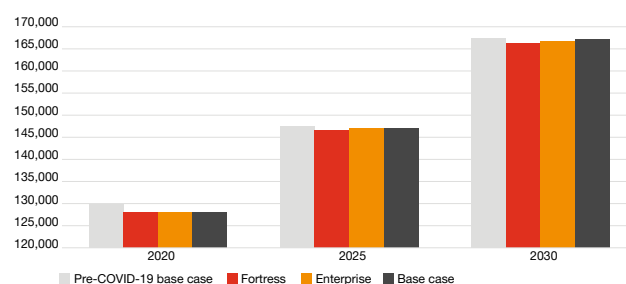
Australia

Gross domestic product by scenario, 2019-2030 (\$2019-20 billion)



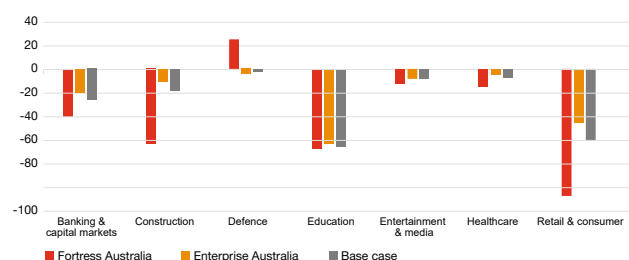
Health

Health sector real GVA, \$19-20 million



Cross-sector

Impact on real GVA by scenario, 2020-2030 (\$2019-20 billion)






The health and social care sector is Australia's largest and fastest growing industry for jobs, employing 1.7 million people, and expected to add jobs at a rate of 15% p.a.³ Health spend has grown 50% in real terms over the past decade to \$185 billion today, with significant growth expected in markets like telehealth (\$1.9 billion market today), mental health (\$9.9 billion spend today), independent living (\$4.6 billion market today) and vaccines/therapeutics (\$3.9 billion today + related clinical trials and pharma/medtech markets).⁴

This overall view of health is more nuanced though when you look at health sub-sectors, and whether Australia takes a more protectionist approach or embraces the opportunity for reform and reimagines healthcare. One of Australia's strengths has been its balanced public-private health system, which provides a basic universal access safety net, while also providing choice, innovation and flexible capacity.

Adopting an Enterprise Australia mindset can help our healthcare system continue to deliver better health outcomes to all with more sustainable, affordable costs. This will foster the view of 'health as an opportunity', supporting both resilience in health outcomes and the economic benefits from sub-sector growth, job creation and exports.



Fortress Australia

- Here we see an 'Australia first' focus across major decisions. This would include driving greater public sector provision of bed capacity and supply chain to provide surety to meet public needs (e.g. PPE, pivoting private sector capacity under direction of the states).
- Reliance on local workforce and investment given lower migration and foreign direct investment (FDI).
- Government maintains focus on contingency and reserving surge capacity for future outbreaks.
- M&A constrained by economic uncertainty, access to debt lowered Foreign Investment Review Board thresholds.



Enterprise Australia

- The Enterprise Australia scenario models the implications of enabling private sector growth, to complement the public sector in supporting those most in need.
- Innovation (particularly virtual care and the use of data and analytics enabling new models of care) is at the forefront, with higher investment across the sector.
- Faster industry consolidation through M&A drives efficiencies across the sector and frees capacity to invest (e.g. aged care, diagnostics, clinics, dental, IVF, hospitals).
- Commercial drive in pharma to develop and manufacture a COVID-19 vaccine and better treatments to mitigate health risks.

³ Australian Government, *Australian Jobs: Health Care and Social Assistance*, viewed 25 May 2020

⁴ Australian Institute of Health and Wellbeing (AIHW), *Australia's health 2018: in brief*, 20 June 2018; PwC Strategy& analysis

Sub-sector impacts will vary under each scenario

We also see a more nuanced view when you look at different sub-sectors - and indeed winners and losers within the same sector:

	When restrictions are lifted	Sectors	Fortress Australia	Enterprise Australia
Sub-sector impacts in each scenario	I. Return to a heightened new normal ▲ ▲	<ul style="list-style-type: none"> • Telehealth • Mental health • At home care • Biotech 	Moderate growth due to necessity, however, hampered by investment capacity and priorities	Profitable growth through new models of care, investment in innovation and consolidation
	II. Short-term growth spike ▲	<ul style="list-style-type: none"> • PPE • Over the counter (OTC) 	Pivot in supply chain to 'localise' - focus on 'Australia first' demand and growth, but potential profit impact	Potential to grow domestic manufacturing to meet local demand and for export growth
	III. Rebound post COVID-19 shutdown ▼ ▲	<ul style="list-style-type: none"> • Primary/ancillary care • Diagnostics • Fertility services • Disability care 	Core preventative health restarts, but constraints remain on more discretionary services and group services limited by social distancing	Catch-up and acceleration in preventative health, enabled by digital and new models of care
	IV. COVID-19 hit with gradual recovery ▼	<ul style="list-style-type: none"> • Elective surgery • Aesthetics • Residential aged care 	More cautious restart of elective treatments, with priority placed on excess capacity to meet public need	Faster easing of elective surgery restrictions, accelerated distressed assets consolidation



How to respond

There's no single, easy solution to the situation Australia finds itself in. Whichever approach Australia takes is likely to incorporate elements from each of the forces of change and scenarios. As well as the macro Fortress Australia and Enterprise Australia scenarios and different impacts by sub-sector, we should recognise that there remains continued uncertainty in the transmission and impact of the virus. Whilst we have succeeded in flattening the first peak, we are unfortunately likely to see more COVID-19 cases as we loosen social distancing measures and reboot the economy. We will also need to prepare for second order health impacts from the delays in elective surgery and preventative health, and are already seeing a growing mental health curve. Decision-makers will need to remain agile for different scenarios and look at both 'no regrets bets' and future optionality for their businesses, products and communities in a post COVID-19 economy.

Responses to COVID-19 scenarios

There will be a delicate balance across health, economic and social factors for an extended period of time until there is a vaccine and/or better treatments - with infection rates linked to easing and tightening of restrictions such as social distancing and travel bans. There will likely be several 'waves' of tightening and easing restrictions, each more nuanced given a more advanced understanding about transmission and behavioural patterns. Australia's healthcare system already has more capacity to manage higher peaks and, over time, will likely become better at managing future peaks through more extensive testing, tracing and local containment measures. However, social fatigue with restrictions could present a counterbalance to this as the duration of restrictions grows. The number of new cases is very sensitive to small changes in the transmission rate (R_0), so organisations will need to be prepared for several different scenarios over the next 12-18 months.

Balancing... health, economic and social impacts of COVID-19



Health

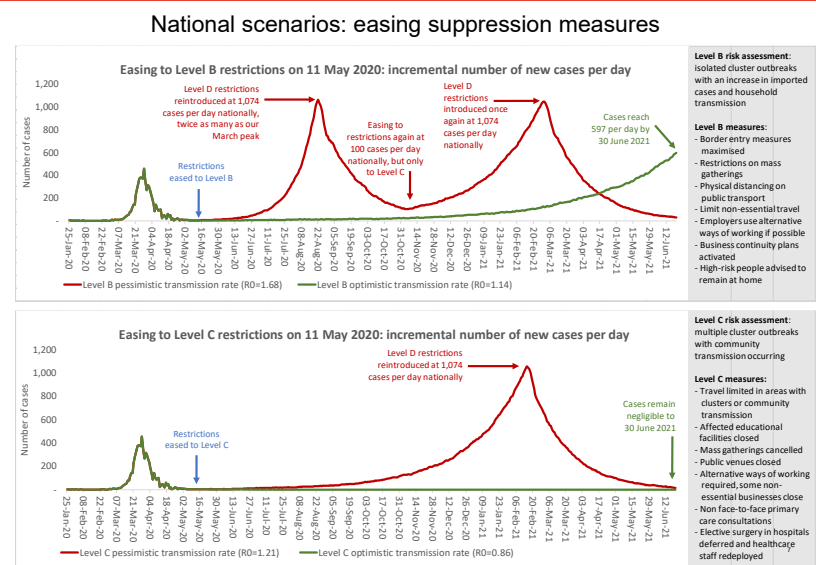


Economic



Social

Example health input PwC s COVID 19: Australia - scenario modelling (as at 1 May 2020)



Government and business are likely to take a more conservative stance this year. The focus will rightly be on protecting the health of Australians at a time of continued uncertainty, matched by taking steps towards a smart 'reboot' of the economy. This will be a complex period, balancing health and economic outcomes, and inter-relationships between these (for example, better health outcomes lead to improved productivity. However, sustained economic hardship causes physical and mental health issues).

Given the success to date on managing the crisis, Australia does now have opportunities to restart (e.g. catching up on elective treatments and preventative health). As Australia moves post-peak(s) and post-pandemic, we may see a greater willingness to seize opportunities to reimagine health and increasingly adopt an Enterprise Australia approach, with a greater role for the private sector and less reliance on constrained government funding. The availability of a COVID-19 vaccine and/or effective treatments would add further momentum to the Enterprise Australia approach.



Reimagining health: 7 focus areas for leaders

For Australia's health sector, proactively leaning into the COVID-19 recovery represents a unique opportunity for reimagining health and reform - to modernise our system, supported by ongoing collaboration between federal and state governments and the public and private sectors.

Australia can shift focus to **social determinants of health, which influence 80% of health outcomes** (40% socio-economic, 30% healthy behaviours and 10% environment). This includes encouraging healthy behaviours and supporting communities to implement localised solutions to address **social determinants of health for First Nations people** and vulnerable Australians (such as housing and **early childhood education**). Australia's society (not just its healthcare system) will need a strong focus on 'flattening the growing mental health curve'. We can accelerate reform in aged care and disability, learning from the findings of the Royal Commissions into both sectors, and tackle ongoing **challenges of sustainability of private health insurance**.

Across the system, retaining and accelerating **new models of care such as telehealth**, enabled by the right talent and skills for the future and leveraging data analytics insights, will increase quality, convenience, efficiency and access for Australians, including in remote and rural communities.

Australia's healthcare system needs to raise the bar on **consistent quality of outcomes** and customer experience, likely supported by industry consolidation for better efficiency. It can also leverage strengths in translating medical research to drive innovation and growth, with a resilient supply chain. **Funding models can be realigned** to support these changes. We can embrace 'health as an opportunity' to grow sectors such as telehealth, mental health, supply chain and biotech to support resilience, jobs and exports.

7 focus areas for leaders



Consumer empowerment



Keeping people healthy



Right care, place and time



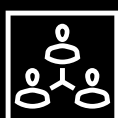
Digital and analytics



Workforce of the future












Outcomes – based funding



Collaboration

Responses to scenarios

There are a set of responses Australia's governments and healthcare sector can take to address the challenges and meet the opportunities presented by COVID-19.

Trend	Potential responses
 Government involvement	Collaboration: There is opportunity for increased collaboration of public-private, federal and state governments, and other ecosystem players at all levels across leaders, clinicians, support staff and beyond. This requires relationships, ways of working and decision-making processes that have been established to be maintained and developed, and the relative strengths of different parties to be recognised. Leveraging current collaborative momentum can accelerate policy reform on long-term issues.
 Debt and capital	Funding: More sustainable funding models must be considered. There are opportunities to tap into new sources such as social impact bonds, long-tail health/life insurance and financial services products (e.g. reverse equity mortgages). The introduction of more seamless pooled funding across care settings (e.g. for aged care at home, residential, hospital and palliative care) could shift the balance between prevention and treatment. There will likely need to be more consumer pay-for-choice and better customer experience, whilst retaining a 'universal access' safety net.
 Consumption behaviour	Consumer behaviour and prevention: Assess success of new consumption patterns and embed positive change, such as encouraging ongoing adoption of healthy behaviours (e.g. hygiene, flu jabs, treating underlying chronic diseases) which influence 30% of health outcomes. Invest 'upstream' on social determinants of health such as housing and education, with a particular focus on engaging with First Nations communities on localised solutions that also support local jobs and economic development.
 Accelerated digitisation	<p>Virtual care: Build local virtual/telehealth sector for pandemic resilience, new models of care (including for remote and rural Australia, and care at home) and as an export sector. Address the need for improved IT infrastructure, data sharing, tools and cyber security to support these models of care. Advance the telehealth proposition beyond the use of a phone line in a secure and acceptable way.</p> <p>Data and digitisation: COVID-19 has irrefutably demonstrated the value of effective information exchange of healthcare data. Strategy& UK research found 29% of people are more inclined to share their health data with the government than before COVID-19. Reinvigoration of the My Health Record and data and digitisation strategies are required, building off the high adoption of COVIDSafe app.</p>
 Disrupted working environment	<p>Workforce: Invest in skills development to retrain people to fill gaps (such as future needs and backfill for retirements in sub-specialities like nursing, general practice, psychiatry, anaesthetics and aged care), promote digital fitness and ensure wages trust. Embed the lessons learned for a new workforce shape and size to manage ongoing and new pandemic 'waves' and meet underlying future demand.</p> <p>Mental health: Build mental health solutions from prevention through treatment to 'flatten the mental health curve' which has escalated during COVID-19 due to stresses on lives and livelihoods, as well as impacts of working from home and social isolation.</p>
 Resilient supply chains	Life sciences: Build local medtech/pharma/biotech supply chain both for pandemic resilience and economic growth, creating jobs and exports (e.g. PPE, ventilators, treatments/vaccines).
 Industry consolidation	M&A: Accelerate roll-ups and restructuring in fragmented sectors such as aged care, disability, primary and ancillary care (including medical clinics, dental, radiology and IVF) and private hospitals. Where there has been forced change to the cost base, deeper analysis into what costs stay out of the system is required.
 Tax reform	Policy reform: Consider alternative approaches to community rating, membership incentives and assess employer sponsored schemes in private health insurance. With Medicare, assessment of rebates and co-payments models is required to manage sustainability. The superannuation and life insurance sectors could consider incentives/top-ups linked to preventative healthcare activities.
 Migration	Workforce supply: Prioritise migration of skilled workers (including healthcare nurses, GPs, aged care workers) where we typically already have strong demand and interest, promoting Australia as a favourable country in which to live. Encourage people to base themselves in locations with bigger skills gaps.

Examples observed in the industry so far

Given the healthcare industry is at the heart of the response to COVID-19, we can point to numerous case studies of practices we must leverage as we emerge stronger and build 'healthcare 2.0'.

Collaboration	Flexible supply chains	Virtual care
<p>As well as the National Cabinet promoting the federal-state collaboration, the Australian Government guaranteed the viability of private hospitals. This led to state and territory governments developing partnership agreements with the private healthcare sector to give surge access to private capacity and capability, including covering the costs of the sector during the pandemic. Whilst use under this arrangement has been limited due to the success of 'flattening the curve', the agreement is of an unprecedented scale and remains in place allowing states to utilise the private sector workforce and capability where needed to assist with the COVID-19 response.</p>	<p>Supply chains could become increasingly adaptable and modular, to increase the resilience of supply in future crises.</p> <p>For example, there have been several instances of distilleries making alcohol-based hand sanitisers. Australian companies also responded to the government's request for assistance in the production of PPE in an attempt to double its supply of surgical masks.</p> <p>Organisations have and should continue to look beyond their typical channels to find the right balance of local and global supply chains, which can deliver more efficient buying outcomes, resulting in longer-term cost savings.</p>	<p>The Commonwealth Government has provided access to healthcare via an expansion of telehealth in Australia, supported by Medicare funding.</p> <p>The government now offers rebates on a much wider range of telehealth consultations, enabling remote service delivery for many service providers including GPs, specialists and allied health providers.</p> <p>Similarly, many private health and accident insurers are covering costs of virtual care for services like physiotherapy and mental health.</p>



Emerging stronger

Australia has the opportunity to reimagine health to emerge stronger, however it will take some time. There will also be a more nuanced impact across the health sector, with different implications on sub-sectors. For example, some sub-sectors have experienced demand at a new high which will be maintained longer-term (e.g. telehealth, mental health, vaccines), whilst other sectors will need more fundamental change or will take longer to recover (e.g. elective care, residential aged care, disability care). We do see some 'silver linings' with the opportunity to accelerate reform and change behaviours, which can be embedded for longer-term benefits. For example, in the short term, telehealth can help minimise infection risks while, in the long term it can increase efficiency and provide access to essential services for underserved populations such as rural and remote communities. System pressures on mental health will bring collaborators to the table to develop new approaches, reimagining how we integrate more services into the community, including better use of digital solutions. We are unlocking the potential from R&D and innovation in the search for a vaccine and more effective testing and treatments. Through all of this, we can emerge stronger with greater appreciation for our front-line health and aged care workers, and trust in our government and healthcare leaders to deliver the right care at the right time for all of us, leading to both better health and better economic outcomes.

FIGURE 3

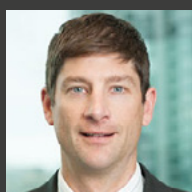
Prepare, respond and emerge stronger

	Horizon		
	Immediate Next 6 months	Medium-term 6 months to 2 years	Long-term Leverage momentum to accelerate long-term reform now
Action	Propagation (now)	Post peak	Post pandemic
			
Key challenges	<ul style="list-style-type: none"> • Crisis response • Supply chain and bed capacity • Workforce size and wellbeing • Telehealth • Agility for future waves • Collaboration 	<ul style="list-style-type: none"> • Recovery including catch up on elective surgery, preventative health and mental health • Ongoing COVID-19 wave management still in place • Financial challenges 	<ul style="list-style-type: none"> • Reimagine health (consumer, prevention, new models of care, digital and analytics, workforce, funding models, collaboration) • Reform • Lessons learnt
Focus areas	<ul style="list-style-type: none"> • Optimising patient flow with flex to manage future waves whilst restarting elective surgery and preventative health • Load balancing, including public-private sector agreements • Supply chain - PPE, ventilators, testing kits etc. • Workforce - reduce health risks, maintain wellbeing and numbers • Telehealth and hospital-in-the-home (HITH) models • Clear communications/protocols • Rural & remote - prevent spread • Advanced analytics to manage 'at risk' population subsets • Aged care pressures - residents, families and workforce; financial • Role of community pharmacy - home delivery, SMEs under pressure 	<ul style="list-style-type: none"> • Prepare hybrid model of return to BAU and future waves for extended period, balancing health, economic and social factors pre a vaccine • Elective surgery and preventative health ramp-up - demand modelling, prioritisation, flow from public vs. private payers • Viability of services - smaller private hospitals, community pharmacy, allied health, aged care and community health - opportunity for restructuring and M&A by strong players • Address fatigue and mental toll - proactive measures to understand needs and tailor support • Private health insurance challenges (drop-outs, price pressure, catch-up claims) 	<ul style="list-style-type: none"> • Virtual care - opportunity to embed technologies and new models for 'right place, right time' care • Supply chain - opportunity for localisation of med-tech • Mental health - impacts from regional bushfires and now COVID-19 • First Nations and vulnerable Australian health - opportunity to intervene on social determinants, remote/rural models of care • Health funding implications - rethink beyond activity-based models, role of consumer pay • Lessons learnt e.g. prevent transmission, diagnosis/contact tracing, protocols, treatment pathways, health equity, business continuity planning

An abstract graphic consisting of a network of white lines connecting various points, some of which are red. The network is more dense on the right side and tapers off towards the left.

Contact us to find out more

During these challenging times, PwC can access and share data and insights to stress test your scenario planning and inform your strategic decision-making. Our purpose is to build trust in society and solve important problems. Get in touch to find out more.



Damien Angus

Health Strategy & Leader
+61 418 985 644
damien.angus@pwc.com



Sarah Butler

Health Industries Leader
+61 412 474 706
sarah.m.butler@pwc.com



Nathan Schlesinger

Health Consulting Leader
+61 409 984 935
nathan.schlesinger@pwc.com

www.pwc.com.au/health

© 2020 PricewaterhouseCoopers Consulting (Australia) Pty Limited. All rights reserved.

PwC refers to PricewaterhouseCoopers Consulting (Australia) Pty Limited, and may sometimes refer to the PwC network. Each member firm is a separate legal entity. Please see www.pwc.com/structure for further details. This content is for general information purposes only, and should not be used as a substitute for consultation with professional advisors. Liability limited by a scheme approved under Professional Standards Legislation.

127077147