

# TRANSCRIPT

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## Transcript: AMA Queensland President, Dr Nick Yim, ABC Southern Queensland, *Drive with Annie Gaffney*, Wednesday 29 October 2025

### Subjects: Changes to bulk billing

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**ANNIE GAFFNEY:** How much does it cost you to go and see your GP? Are you one of the lucky few who still get bulk billed? Well, that might be about to change. This weekend, the government's \$8.5 billion Medicare overhaul is coming into effect. So what will it mean for you? Dr Nick Yim is the President of the Australian Medical Association Queensland and a GP based in Hervey Bay. Dr Nick, great to have you with us. Can you take us through what's changing with this bulk billing incentive, please?

**DR NICK YIM:** Good afternoon, Annie. Basically, the federal government last year announced plans to increase bulk billing for the general population. They wanted as many people to access GP with no out-of-pocket expenses by showing their Medicare card. But unfortunately, what we're hearing across the country from GPs in their practices that not everyone will be taking on bulk billing because it just doesn't meet the cost of operating a general practice. So for those practises that are currently bulk billing, they'll likely continue bulk billing. Some practises may take up bulk billing for all patients, but what we're hearing across the board that not everyone will be bulk billing for all patients.

**ANNIE GAFFNEY:** Now, I did see a report in News Limited today saying that about 900 GP practices registered to take up bulk billing, essentially. Is that a sign of things to come, do you think? What would be encouraging for those practices to move across to bulk billing if they haven't been previously able to offer that to all patients?

**DR NICK YIM:** Some of those practices would have crunched the numbers and they would have thought that they would break even or they might be slightly better off to offer bulk billing with these new government incentives. But when we go around to our members, unfortunately, that's probably not going to be the case. Many practices, if they do take up 100% bulk billing for patients, will actually be losing money, which is concerning because we have seen many practices over the past couple of years close down. And that leads to a gap in those communities. We've always suggested that we wanted to see an increase in the base rate of that Medicare rebate. So that means all patients, when they are seeing their doctor, will get that benefit of an increased Medicare rebate.

**ANNIE GAFFNEY:** Realistically, you've said that in Queensland, there won't be a stack of GPs now offering bulk billing to their patients. But in terms of payments to doctors themselves, the government's saying that GPs will be about \$125,000 better off per GP per year than they were previously before this kicks in this weekend on November 1, this extra money. What do you make of that? Is that a correct analysis in your view?

**DR NICK YIM:** I don't know how the federal government has come to that number. Obviously, we're not hearing those benefits. If all GPs were benefiting from that amount of money, I would agree that we probably would be all 100% bulk billing. But those aren't the numbers that we're seeing. In our practices across the state, most GPs would love to bulk bill their individual patients and would take up any offer if possible. But if the numbers don't rack up to pay the staff wages of nursing, consumables such as dressings, syringes, syringes, needles - obviously they won't be doing it.

**ANNIE GAFFNEY:** The government reckons that by 2030, because of this money, nine out of 10 Australians should be able to access bulk billing. Given what you're saying, how likely is that to happen?

**DR NICK YIM:** It's very, very unlikely. It's something where, as we've spoken before in previous episodes, the Medicare rebate over the past 10 or 20 years unfortunately just has not kept up with inflation. We all know across the country expenses are increasing. That includes mortgages, electricity, staff wages, insurances. And obviously, when we see these rebates, if they're not keeping in touch with the cost of living expenses, it just means that we cannot bulk bill everyone.

**ANNIE GAFFNEY:** Given that this is \$8.5 billion being invested into Medicare under this bulk billing practise incentive program - because the government's essentially saying they'll give this money to practices to split it between the GP and the practice that signs up for the program - would it be better off simply being spent and increasing that base rebate, as you're saying?

**DR NICK YIM:** That's something that we've advocated for. But at the same time, we also know that our population is getting older, diseases are increasing, becoming more complex, and we do want to incentivise those longer consultations for those increased complexity as well. We want to incentivise taking the time, seeing the patients and for those long consultations.

**ANNIE GAFFNEY:** Nick Yim, thank you so much for joining us. It sounds like there was a little bit of a silver lining there, but it doesn't necessarily look like it's going to flow through to us, unfortunately.

**DR NICK YIM:** Thank you for your time, Annie.

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