

TRANSCRIPT

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Transcript: AMA Queensland Immediate Past President, Dr Nick Yim, 4BC Radio, *Afternoons with Carla Bignasca*, Tuesday 14 July 2026

Subject: Grattan Institute report on pharmacy in Australia

CARLA BIGNASCA: Well, should Australia allow pharmacies inside supermarkets? It's an idea that could dramatically change the way we access prescription medicines. A new Grattan Institute report argues that there isn't enough competition in Australia's pharmacy sector. The report suggests allowing major supermarkets to operate pharmacies could make medicines more convenient and potentially more affordable. That's the carrot they're dangling. But the proposal has already sparked plenty of debate. Would supermarket pharmacies deliver greater competition, cheaper medicines and more convenience? Or do we risk turning that essential health service into just another part of the weekly shop? To discuss, we're joined by Queensland GP, former pharmacist and former AMA Queensland President, Dr. Nick Yim. Good afternoon to you, Dr Nick.

DR NICK YIM: Good afternoon, Carla. Long time no chat.

CARLA BIGNASCA: At the heart of this debate around whether or not we should allow pharmacies to operate inside supermarkets, there are obviously some people who say that there's not enough competition in the pharmacy sector. That would be the Grattan Institute. And then, you know, bringing major supermarkets could help drive down the prices. Do you accept that argument or is healthcare far too important to be treated like another retail market?

DR NICK YIM: So, this is one of the big discussions that's been occurring for many years now, probably even decades. So, even when I was a practising pharmacist over 15 years ago, this was the debate back then. I think one of the big challenges that we face in Australia is our healthcare landscape is changing and it's something that we do need to look at evidence of what works well. And this is one of the big debates is whether increasing access to medications by different state ownership laws, will that drive down pricing? It is something that's quite unusual in the pharmacy industry where ownership can occur only by pharmacists. Whereas if you look at medical centres, I guess the financial sector, mines, lawyers, anyone can own those type of businesses. And I guess the question must be posed is why not pharmacies?

CARLA BIGNASCA: It is one of those things that you yourself, working in regional Queensland and having been the AMAQ President for some time, you know how important pharmacies are. Especially, like you said, the health landscape is changing. You can get flu shots and other advice and things. It's a health service that's provided. When I think of regional remote areas where there may not be easy access to doctors or you've got to travel further afield to get to one. It's such an important place. I just wonder whether or not that sort of personalised sense of service would be lost if it was to get swallowed up and put into a big supermarket.

DR NICK YIM: I don't think that's what we're calling for and I don't think that's what the Grattan Institute is calling for. I think it's having that option available. And we have seen this in many countries around the world as well. Obviously supermarkets may have a pharmacy embedded, but I think the key thing is, pharmacy is like medicine, it is a professional healthcare practice. They do have their checks and balances, they do have the undergo the strict streamlines of Ahpra, their guidelines, that professional delivery of service to the patient's individual care.

CARLA BIGNASCA: And presumably they would have to do that regardless of whether they set up within Coles or Woollies or not. But for my mind, I just worry, the big supermarkets are already, I guess, under a fair amount of scrutiny just with the general pricing of dog meat and, you know, milk. I guess why would Australians, why should we trust them with the price of essential medicines? Is that a fair concern?

DR NICK YIM: I think that's definitely a fair concern. But I think what the key thing is, we do need to look at the evidence. What is the data that's occurring because I think at the end of the day is taxpayers, the community, they deserve a best bang for buck. And I think it's the same with the medical field itself when we collaborate with each other and also the pharmacy industry and also pharmacists and community. The key thing is we need to put the patient first and foremost based on evidence and also ensuring the safety for that individual patient in front of us.

CARLA BIGNASCA: I guess you know, as a former pharmacist and you're a GP as well, when someone collects a prescription, what happens behind the counter, I guess, that people may not see or fully appreciate.

DR NICK YIM: Yeah, and this is something that I always educate my patients and also my colleagues in the medical industry as well, is when a patient presents their scripts to the pharmacist, it's not just about hanging over a piece of paper and put a label on a box. There's many, many checks and balances that do take place. And similar to the same process in GP practice when we look at a prescription, it's not just hitting print on the computer, it's about checking allergies, what medication they've tried, are there any drug interactions as well. And that's the same thing that occurs in the pharmacy in the background as well. So, I think there's a few things that go on behind the scenes and I think that's where that dispensing fee is important. I think we do need to review those elements to ensure that the community and taxpayers are getting best bang for their buck.

CARLA BIGNASCA: Yeah, and that question as well around competition. There is absolutely competition. You know, I see when there's several types of chemists in one particular area, several types of pharmacies. I don't know if this would help competition. Surely, as we've seen as grocery providers in Coles and Woolworths, it drives away competition because they become big monopolies.

DR NICK YIM: I guess this is the reason why we have independent researchers such as the Grattan Institute, to look at what models do work, what models should be maybe implemented in Australia, and also looking at models that occur overseas as well. Because you're absolutely right, we don't want a monopoly. It's something where, if there is a monopoly, that could potentially drive up costs, which is not ideal. But at the same time, I think moving forward, currently there are some concerns that are expressed by the Grattan Institute.

CARLA BIGNASCA: Yes, Stuart has texted in. Dr Nick Yim is my guest right now on Afternoons, Stuart says pharmacies in supermarkets will only drive the prices down until local pharmacies close down, then they can charge whatever they want. This is this fear around the idea that it would be a monopoly, and then when they've driven away all of competition and that's dried up, that they can do whatever they want. I guess on the positive side, if I can see the positive side to this, you know, supermarkets have longer opening hours and they might be located in communities where access to healthcare could be limited. In that regard, could supermarkets with a big, bigger distribution network, could a pharmacy in there actually make it easier for people to access prescriptions?

DR NICK YIM: I think without a doubt. It's also at the same time we have seen distribution models for medications. Now, if you asked me 20 years ago, would that have been online distribution I'd say you were probably dreaming, but now we're seeing people are doing Australian Post, they're doing delivery models that way. So, it is a possibility. And I guess we always say access is so important in Queensland, particularly, we've got regional, rural Queenslanders, and obviously any mode of getting increased access, I think is going to be beneficial.

CARLA BIGNASCA: I guess, you know, if it is the case that that's what the Gratton Institute is saying, that the pharmacy system does need greater competition or some reform or whatever it might be, and supermarkets aren't the answer, what changes then would you make, given that you live and breathe this, Dr Nick Yim? What changes would you make to make sure that medicines become more affordable and accessible while also protecting patient health care?

DR NICK YIM: I think one of the key things here that there's multiple factors in place and I guess one of the challenges that we do face in Australia is that we do need to ensure that government and also our policymakers are making those decisions based on evidence and also from a strategic point of view that we are preparing for the future. We know that our population is growing, knowing that our population is getting older, needs medications in place. So, we do need to ensure that there's security in place and obviously if the costs are going to go up, that it's not going to be disadvantageous for everyone involved.

CARLA BIGNASCA: I really appreciate your insight on this. We've discussed it, I don't know whether this is going to happen. It's definitely a proposal that could possibly take place, but it is a bit of a debate that seems to be clearly far from over. Dr Nick Yim, I really appreciate your time on the Afternoons program.

DR NICK YIM: No worries. Always a pleasure. Thank you.

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