



Secretary

Department of Health

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Kate Sanderson
Coroner's Registrar
Coroners Court of Victoria

Via e-mail: cpuresponses@coronerscourt.vic.gov.au

Dear Ms Sanderson

**COR 2019 2055 – [REDACTED] – Finding into death without inquest
Response to recommendation directed to the Department of Health**

Thank you for providing the finding of State Coroner Judge Liberty Sanger dated 8 November 2025 in relation to the death of [REDACTED], who died on 24 April 2019. I offer my condolences to her family and loved ones.

Judge Sanger made five recommendations, one of which is directed to the Department of Health (the department):

The Victorian Department of Health, through the Council of Australian Governments, encourage the Commonwealth Government to consider a Medicare item number for family violence counselling and therapeutic services distinct from a general practitioner mental health treatment plan. In the longer term consideration should be given to establishing a Medicare item number or a similar mechanism that will allow medical practitioners to record a family violence-related consultation or procedure and so more accurately ascertain the public cost of family violence.

The department notes that these matters have recently been considered by the Commonwealth Government, which is responsible for the development and operation of Medicare rebates. Relevantly, a Medicare item number was considered in the Commonwealth's review *Unlocking the Prevention Potential: accelerating action to end domestic, family and sexual violence* to build on the *National Plan to End Violence against Women and Children 2022-2032*.

The department recognises the key role that general practitioners play in preventing family violence through identifying incidents of violence, providing acute and long-term healthcare, and making referrals to specialist services. This requires general practitioners to provide significant time and care to support people experiencing family violence.

In recent years, the Commonwealth has implemented a range of reforms to improve access to longer and more complex general practice consultations through increased rebates and incentives to support general practitioners' capacity to spend additional time with patients presenting with complex needs, including family violence. This includes the introduction of a new Medicare item for consultations of 60 minutes or more, increased rebates and incentives

for bulk billing to enable improved access to care for patients less able to pay for general practice consultations.

While these items are for general visits and not specific to family violence, the department supports these changes in the context of ongoing work to build the capacity and skill of general practitioners to respond to family violence. This approach is consistent with the broader Strengthening Medicare agenda, which prioritises person-centered, integrated primary care and strengthening of the capacity of general practitioners to manage complexity, rather than expanding disease or issue-specific Medicare items. A general item also avoids the potential risk of safety issues arising from inadvertently alerting a perpetrator to the disclosure of family violence (for example, through identifiable item numbers in family Medicare account records) as well as reducing billing complexity for practices, and is considered to offer an advantage over a specific Medicare item number that records family violence related consultations or procedures.

I trust this response is of assistance to the Court.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Jenny Atta', with a stylized flourish at the end.

Jenny Atta PSM

Secretary

08/02/2026