

APPENDIX C – PRO-FORMA REQUEST FOR COSTING AN ELECTION COMMITMENT¹

Name of policy	The Coalition’s Policy to Develop Australia’s Medical Research Capabilities – Investing \$20 million to Boost Childhood Cancer Research
Person requesting costing (Prime Minister/Leader of the Opposition/Leader of a minority party):	Prime Minister
Date of public release of policy:	31/05/2016
Date of request to cost the policy:	17/06/2016
Summary of policy (please attach copies of relevant policy documents):	The policy provides \$20 million to the Children’s Cancer Institute and the Sydney Children’s Hospitals Network to build a collaboration of research and clinical centres around Australia to help eradicate childhood cancer through the Zero Childhood Cancer program.
Intention of policy:	The intent of the policy is to help eradicate childhood cancer through a Zero Childhood Cancer national program. The program targets increased survival through personalised medicine programs for infants, children and adolescents with high-risk cancers.
Certification that this, or a substantially similar costing request, has not been submitted to the Parliamentary Budget Office	This policy has not previously been submitted to the PBO.
Description of policy (please note that, where the request to cost a proposal differs from the announced policy, the costing will be on the basis of information provided in the costing request)	
What are the key assumptions that have been made in the policy including:	
Is the policy part of a package? If yes, list and outline components and interactions with proposed or existing policies.	No.
Where relevant, is funding for the policy to be demand driven or a capped amount?	Funding will be capped.

¹ An electronic version of this pro-forma can be found at www.electioncostings.gov.au/templates.

<p>Will third parties (for instance the States/Territories) have a role in funding or delivering the policy?</p> <p>If yes, is the Australian Government contribution capped, with additional costs to be met by third parties, or is another funding formula envisaged?</p>	<p>No.</p>
<p>Are there associated savings, offsets or expenses?</p> <p>If yes, please provide details.</p>	<p>No.</p>
<p>Description of policy (please note that, where the request to cost a proposal differs from the announced policy, the costing will be on the basis of information provided in the costing request)</p> <p>What are the key assumptions that have been made in the policy including: (continued)</p>	
<p>Does the policy relate to a previous budget measure?</p> <p>If yes, which measure?</p>	<p>No.</p>
<p>If the proposal would change an existing measure, are savings expected from the departmental costs of implementing the programme? Will funding/cost require indexation?</p> <p>If yes, list factors used.</p>	<p>n/a</p>
<p>What are the estimated costs each year? Are these provided on a cash or fiscal basis?</p>	<p>The policy will have a negative impact on UCB of \$20 million in 2016-17.</p>
<p>What assumptions have been made in deriving the expected financial impact in the party costing (please provide information on the data sources used to develop the policy)?</p>	<p>Funding of \$20 million will be provided.</p>
<p>Has the policy been costed by a third party?</p> <p>If yes, can you provide a copy of this costing and its assumptions?</p>	<p>No.</p>
<p>What is the expected community impact of the policy?</p> <p>How many people will be affected by the policy?</p> <p>What is the likely take up?</p> <p>What is the basis for these impact assessments/assumptions?</p>	<p>The impact on the community is to target increased survival for childhood cancers through personalised medicine programs for infants, children and adolescents with high risk cancers.</p>
<p>NOTE: it will be up to the professional judgment of the relevant Secretary as to whether these assumptions are adopted in a Treasury or Finance costing of the policy.</p>	

Administration of policy	
Who will administer the policy (for example, Australian Government entity, the States, non-government organisation, etc)?	The policy will be administered by the Department of Health.
Should departmental expenses associated with this policy be included in this costing? If no, will the Department be expected to absorb expenses associated with this policy? If yes, please specify the key assumptions, including whether departmental costs are expected with respect to programme management (by policy agencies) and additional transactions/processing (by service delivery agencies).	Any departmental costs associated with administering this policy will be met from existing resources of the Department of Health.
Intended date of implementation.	As soon as practicable in the 2016-17 fiscal year.
Intended duration of policy.	Funding for this project will be provided in 2016-17.
Are there transitional arrangements associated with policy implementation?	No.
List major data sources utilised to develop policy (for example, ABS cat. no. 3201.0).	n/a
Are there any other assumptions that need to be considered?	n/a