Senate Standing Committee on Community Affairs

BUDGET ESTIMATES – 2 JUNE 2011
ANSWER TO QUESTION ON NOTICE

Human Services Portfolio

Topic: Medical Benefits Scheme - Medicare Items

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Senator: Fierravanti-Wells
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Question:

Senator FIERRAVANTI-WELLS: So, therefore, any reductions to GP services and the number of claims that you may process in relation to the reduction of GP claims is contained in that calculation?

Ms Golightly: As part of the calculation, yes. There are a lot of ons and offs in their simplest form. It is not just relating to that measure.

Senator FIERRAVANTI-WELLS: I appreciate that. Could you take on notice the ons and offs in relation to GP related Better Access items?

Ms Golightly: Certainly.

…

Senator FIERRAVANTI-WELLS: That is fine, I am almost finished. You have all the items. Can you list the items and the item description for me which correlates with this table?

Ms Golightly: Yes.

Answer:

In relation to general practitioner related Better Access items, the two existing general practitioner (GP) 'Preparation of a Mental Health Treatment Plan' items 2702 and 2710 will close on 31 October 2011. These will be replaced by four new items.

Details of the items to close

Item 2702

- Preparation by a medical practitioner who has not undertaken mental health skills training (including a general practitioner, but not including a specialist or consultant physician) of a GP Mental Health Treatment Plan for a patient (not being a service associated with a service to which items 2713 or 734 to 779 apply).
- A rebate will not be paid within twelve months of a previous claim for the same item or item 2710 or within three months following a claim for item 2712, except where there has been a significant change in the patient's clinical condition or care circumstances that requires the preparation of a new GP Mental Health Treatment Plan.
- Fee: $128.20 Benefit: 75% = $96.15 100% = $128.20

Item 2710

- Preparation by a medical practitioner who has undertaken mental health skills training (including a general practitioner, but not including a specialist or consultant physician) of a GP Mental Health Treatment Plan for a patient (not being a service associated with a service to which items 2713 or 734 to 779 apply).
- A rebate will not be paid within twelve months of a previous claim for the same item or item 2702 or within three months following a claim for item 2712, except where there has been a significant change in the patient's clinical condition or care circumstances that requires the preparation of a new GP Mental Health Treatment Plan.
- Fee: $163.35 Benefit: 75% = $122.55 100% = $163.35

To replace the items above, four new 'Preparation of a Mental Health Treatment Plan' items will be introduced from 1 November 2011 - two items for general practitioners who have not undertaken mental health skills training, and two items for those general practitioners who have undertaken mental health skills training. Higher benefit will be paid for the GPs who have undertaken mental health skills training, and where the consultation lasts 40 minutes or more. Specific details in relation to the new items are still being finalised.

To clarify, the Medicare Benefits Schedule (MBS) changes under the Better Access initiative are covered under the 'National Mental Health Reform – Better Access Initiative – rationalisation of allied health treatment sessions' measure.

The 'Medicare Benefits Schedule – new and revised listings' measure in Table 1.2 (p25) relates to a total of 24 changes to the MBS, however it does not include those relating to the Better Access initiative.

The 'Medicare Benefits Schedule – new and revised listings' measure includes 18 new items, amendments to 22 existing items, and the removal of 25 items from the Medicare Benefits Schedule.

New items to be introduced

Sculptra injection for HIV patients

- Two new items will be introduced from 1 July 2011 for injections of Poly-L-Lactic acid (Sculptra) for the treatment of sever facial lipoatrophy caused by antiretroviral therapy in HIV positive patients.
- The first item (14201) is for one or more injections of Poly-L-Lactic acid, for the initial session only, for the treatment of severe facial lipoatrophy caused by antiretroviral therapy, when prescribed in accordance with the *National Health Act 1953* – once per patient.
- Fee: $227.90 Benefit: 75% = $170.95 85% = $193.75
- Extended Medicare Safety Net Cap: $34.75.
- The second item (14202) is for subsequent injection treatments, up to a maximum of four adjustment treatments, followed by one maintenance injection session every two years, when prescribed in accordance with the *National Health Act 1953*.
- Fee: $115.35 Benefit: 75% = $86.55 85% = $98.05
- Extended Medicare Safety Net Cap: $17.30.

- The introduction of these new items follows the listing of Poly-L-Lactic acid within the standard arrangements on the Pharmaceutical Benefits Scheme (PBS) as an Authority Required listing for initial and maintenance treatments, for facial administration only, of severe facial lipoatrophy caused by therapy for HIV infection.

Endovenous Laser Therapy (ELT)

- This measure will introduce two new items for Endovenous Laser Therapy (ELT) for the treatment of varicose veins to reflect appropriate clinical practice.
- ELT is a minimally invasive treatment for more severe varicose veins, primarily performed in outpatient settings to people of all ages, and is an alternative to more complex in-hospital vein stripping.

Computerised Tomography (CT) of the Coronary Arteries

- A new item will be introduced for the provision of CT scanning of the Coronary Arteries to reflect appropriate clinical practice.
- The provision of this service will be restricted to specialists with appropriate training.

GART for HAART

- A new item will be listed on the MBS for antiretroviral resistance testing (GART) for HIV infected patients with a plasma HIV-RNA level > 1000 copies/ml.
- The inclusion of this test will improve access to antiretroviral resistance for HIV infected private patients.
- Inclusion onto the MBS will provide access for a high, at-risk patient group.

Molecular Testing for Myeloproliferative disorders

- This measure will improve access to genetic testing by introducing two new items relating for myeloproliferative disorders. These items will test a group of conditions which cause blood cells to grow abnormally.
- The first item will support molecular testing for polythaemia vera (PV) and essential thrombocythaemia (ET). This testing for PV and ET will provide alternatives to patients who would otherwise receive bone marrow biopsies and abdominal ultrasounds.
- The second item for molecular testing will be introduced to assist with the diagnosis and management of systemic mast cell disease (SMCD), hyereosinophilic syndrome (HES) and chronic eosinophilic leukaemia (CEL).

Vitamin Testing (Referred test item for 66607)

- Introduction of a new item to allow the test for quantitation of vitamins A and E in blood, urine or other body fluids (item 66607) to be referred on to another Approved Pathology Provider (APP).
- The new item would align item 66607 with other similar vitamin testing items in the chemical group.
- A requesting practitioner may refer a patient to, or a patient may choose to attend, an APP that cannot perform all the tests required on the request form due to the lack of facilities or staff expertise. This means that the test will need to be referred by the initial APP onto another APP.

Changes to Anatomical Fine Needle aspiration

- The measure introduces two new items onto the MBS to allow for fine needle aspiration (FNA) of two or more sites in situations where: an aspiration is performed by a recognised pathologist (existing single site item 73051); or an employee of the APP attends the aspiration for confirmation of sample adequacy (existing single site item 73063).

- In some instances, it is required to take a sample from more than one site on a patient. The two new items will allow the pathologist to claim appropriately for more than one site in the one procedure. These changes will correct inconsistencies and ensure appropriate claiming of the items.

Genetic Testing (thiopurine S-methyltransferase)

- A new item will be introduced onto the genetics part of the Pathology Services Table, to enable identification of those patients who cannot produce the thiopurine S-methyltransferase (TPMT) enzyme either adequately or at all, and thereby guide clinicians prescribing of thiopurine medication.
- Thiopurine medication is widely used in the treatment of leukaemia and autoimmune disorders. TPMT testing identifies individuals at risk of developing severe side effects from this medication.

Cone Beam Computerised Tomography (CBCT)

- This measure will introduce a new item for Cone Beam Computed Tomography (CTCB) to ensure that services currently billed using a variety of item numbers are billed consistently and that accurate data is available for future assessment.

Botulinum Toxin (Botox): Upper limb spasticity

- A new item will be introduced for the administration of Botulinum toxin (Botox) as a treatment for upper limb spasticity in juvenile cerebral palsy patients (2-17 years). Injections of Botox will help to relax these muscles to improve function and comfort.
- This is a follow on result to the PBS listing to extend the supply of Botox for the treatment of focal spasticity in juvenile cerebral palsy patients aged two years and over in 2008.

Gold Fiducial Seeds

- An interim MBS item will be introduced for the insertion of gold fiducial seeds into the prostate as markers for Image Guided Radiotherapy (IGRT) for patients with carcinoma of the prostate.
- Gold fiducial seeds enable the accurate targeting of radiation during the provision of radiotherapy. This procedure is currently being claimed under another item. The new item will ensure that accurate data on usage will be available to help inform a future assessment.

Amendments to existing items

Orthopaedics items

- Amendments to items for correction of hallux valgus clarify that the excision of exostoses is an integral part of these procedures and prevent this being claimed separately. Amendments to items 47915 and 47916 will expand the range of clinically relevant treatment approaches for excision of ingrown toe nails.

Amendments to Ear, Nose and Throat items

- The descriptors for two Ear, Nose and Throat items will be amended to align with current clinical practice.
- Item 41767 (naopharyngeal angiofibroma, transpalatal removal) currently provides for the removal of vascular tumours which grow in the back of the nasal cavity by surgically approaching through the palate. The amendment will provide for other approaches to the tumours, such as through the nose, which are less invasive and have better clinical outcomes.

- Item 41861 (microlaryngoscopy with removal of papillomata by laser surgery) currently provides for removal of papillomata, which is the most common type of benign lesion of the larynx. The amendment will allow for the removal of any benign lesion of the larynx, not just papillomato.

Home based sleep studies

- This amendment will restrict home-based sleep studies to adults 18 years of age and over, and require that an additional measurement is recorded as part of this service. This will ensure that sleep studies are better targeted.
- Item 12250 allows for home-based sleep studies for the diagnosis of obstructive sleep apnoea (OSA). The age restriction is due to concerns about poor diagnostic performance in paediatric patients, resulting in unnecessary and potentially harmful interventions.

PET Cervical Cancer

- Improve cancer management by creating a new item, and amending an item for procedures relating to PET for cervical cancer. The MBS will be changed to reflect the removal of funding for the use of PET for suspected local recurrence of cervical cancer, but to allow claiming for the further staging of diagnosed cervical cancer at stage IB2 or greater, and for further staging of patients with confirmed local recurrence of carcinoma of the uterine cervix.

PET Scans for Lymphoma

- Improve cancer management by amending three existing items and introducing two new items that provide PET scanning for patients in relation to lymphoma.

Prostate Specific Antigen

- Amendment of the schedule fee of items 66660 and 66659 to $37.55, to align with similar prostate specific antigen (PSA) items.

Amendment to descriptor for item 71059 and relative fee adjustment for items 71057 and 71059

- This measure will amend two immunology items to reflect appropriate clinical practice and simplify administration. The electrophoresis described in item 71059 is only intended to be that which is required for immunofixation.
- Currently, if other electrophoresis is performed, both items 71057 and 71059 can be claimed within a patient episode. The schedule fee for item 71059 is to be amended to $35.90 with a corresponding decrease in the schedule fee for item 71057, as item 71059 provides a similar and more complicated service compared to 71057.

Immunology item 71200

- Amendment of the schedule fee for the immunology related item 71200 to reflect appropriate remuneration for current clinical practice.
- In 2009, the descriptor for item 71200 was amended to specify that both kappa and lambda light chains had to be tested, rather than one or the other, for the item to be claimed. The schedule fee, however, was not increased accordingly to reflect the change.
- The schedule fee will be increased to $60 under this amendment.

Removal of existing items

IV Brachytherapy for Coronary Artery Restenoses

- The removal of seven MBS items for the procedure of Intravascular Brachytherapy for Coronary Artery Restenoses. This will remove an obsolete treatment for heart disease that is no longer clinically relevant, as recommended by the Medical Services Advisory Committee and supported by the Cardiac Society of Australia and New Zealand.

PET Scan Sarcoma

- Improve cancer management by amending items that provide positron emission tomography (PET) testing for patients in relation to sarcoma. Item 61634 will be removed from the MBS, item descriptors for 61643 and 61646 will be changed, and item 61646 will only be available once per patient.

PET Glioma

- Improve cancer management by amending several items that provide PET testing for patients in relation to Glioma.

Removal of PET catheterisation items

- This measure will remove all items which fund catheterisation of the bladder in conjunction with a PET service. Currently some indications for PET on the MBS have almost identical items. The only difference between the two items is that one specifically states that the service must be performed with catheterisation of the bladder. Apart from PET, there are no procedures in the MBS which have a separate identical item for catheterisation.

Removal of PET for certain indications

- Removal of items relating to PET to reflect appropriate clinical practice. The use of PET to evaluate ischaemic heart disease and in the follow-up of services provided at certain facilities in the past was found to have no advantages in diagnostic accuracy or safety, and that the unit cost was up to three times greater when compared to other modalities for assessing myocardial viability in patients with moderate to severe left ventricular systolic dysfunction.
- The measure effectively removes MBS funding for PET scan items 61562, 61589 and 61592.