

Senate Finance and Public Administration Legislation Committee

ANSWERS TO QUESTIONS ON NOTICE

Finance and Administration Portfolio

Department of Human Services and agencies

Budget Estimates 2006-2007, 25 May 2006

Question: HS47

Outcome #, Output #

Topic: Medicare Australia – Out of Hospital Surgical Treatments

Hansard Page/Written Question on Notice: Written

Senator McLUCAS asked on 31/10/2006:

What procedures are in place to ensure that:

- i. The right Medicare item is claimed?
- ii. If a claim is made for an out-of-hospital procedure, then this is appropriate?
- iii. Claims on the Medicare safety net are appropriate?

MR HOCKEY - The answer to the honourable member's question is as follows:

- i. In billing Medicare, it is the responsibility of the practitioner to choose the Medicare Benefit Schedule (MBS) item number that accurately describes the procedure carried out. Medicare Australia routinely monitors the Medicare data of all practitioners to identify possible inappropriate practice.
- ii. The types of procedures typically mentioned in discussions about cosmetic surgery include abdominoplasty and lipectomy (MBS item numbers 30165 to 30174 inclusive) For items 30165 to 30174, Medicare benefits are payable for these procedures performed in hospital or out-of-hospital. For item 30177, the patient must be admitted to a hospital in order to be eligible for a Medicare benefit. It is up to the treating practitioner to decide whether a patient's treatment requires hospitalisation.
- iii. The MBS specifies those procedures that attract benefits when performed out-of-hospital that allow patients to access the Medicare Safety Net. Once the Medicare Safety Net threshold is reached, the patient receives their Medicare benefit plus 80 per cent of their out-of-pocket costs.

To prepare this answer it has taken approximately 4 hours at an estimated cost of \$239.