

New MBS telehealth items for the remote programming of auditory implants and/or sound processors

Last updated: 18 February 2022

- From 1 March 2022, new Medicare Benefits Schedule (MBS) items will be created for the remote programming, by video or phone, of auditory implants (i.e. cochlear implants) and/or sound processors.
- These changes are relevant for audiologists and otolaryngologists.
- Medicare benefits will apply to programming services delivered both face-to-face and via telehealth, expanding
 patient access and choice.

What are the changes?

From 1 March 2022, four new MBS items will commence for the remote programming of auditory implants (i.e. cochlear implants) and/or sound processors. These items will enable eligible patients to access Medicare benefits for telehealth (video) and phone services for the programming of auditory implant items; equivalent face-to-face services will continue. The new item descriptors are on page 3 of this factsheet.

- Item 11342 is for remote programming of auditory implants where the service is rendered by, or on behalf of, a
 medical practitioner, by telehealth (video).
- Item 11345 is for remote programming of auditory implants where the service is rendered by, or on behalf of, a
 medical practitioner, by phone.
- Item 82302 is for remote programming of auditory implants where the service is rendered by an audiologist, by telehealth (video).
- Item 82304 is for remote programming of auditory implants where the service is rendered by an audiologist, by phone.

This is an expansion of service options for auditory implant programming improving access and choice, particularly for rural and remote patients.

Why are the changes being made?

These changes are a result of a review by the MBS Review Taskforce informed by the Otolaryngology Head and Neck Surgery Clinical Committee. These items have been implemented ahead of other Taskforce recommendations to address an immediate unmet patient access need, heightened by the COVID-19 pandemic.



A full copy of the Final Report on the Review of Otolaryngology Head and Neck Surgery can be found <u>here</u>. More information about the Taskforce and associated Committees is available in <u>Medicare Benefits Schedule Review</u> in the consumer section of the Department of Health website (www.health.gov.au).

What does this mean for providers?

Providers will benefit from access to four new MBS items for patients requiring remote programming of auditory implants, in addition to the existing face-to-face programming of auditory implants items which remain unchanged.

Medical practitioners, or those performing the service on behalf of a medical practitioner, can claim items 11300 (face-to-face), 11342 (video) and 11345 (phone). A maximum of four services from this group of items can be claimed per patient, per day.

Audiologists can claim items 82300 (face-to-face), 82302 (video) and 82304 (phone). A maximum of four services from this group of items can be claimed per patient, per day.

The new telehealth (video) and phone items do not require a request from a medical practitioner.

How will these changes affect patients?

The changes will provide greater access for patients, especially rural and remote patients and others who have difficulty accessing face-to-face services, leading to improved health outcomes. There are no changes to existing face-to-face services, which patients can continue to access.

The new telehealth (video) and phone audiologist items do not require a request from a medical practitioner. Patients will benefit from more direct access to a clinically relevant service.

Who was consulted on the changes?

The Otolaryngology Head and Neck Surgery Clinical Committee was established in 2018 by the MBS Review Taskforce, to provide broad clinician and consumer expertise on otolaryngology, head and neck surgery MBS items. As part of the MBS Review Taskforce process, and via a subsequent Implementation Liaison Group established by the Department of Health, consultation was undertaken with key stakeholders, including clinical experts and providers, and consumer health representatives. Additional targeted consultation on the four new MBS items was undertaken with audiologist and otolaryngology, head and neck surgery specialist groups.

How will the changes be monitored and reviewed?

MBS items 11342, 11345, 82302, and 82304 will be subject to MBS compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed. These items will be monitored for utilisation following implementation.



Item Descriptors

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11342	Programming by telehealth of an auditory implant, or the sound processor of an auditory implant, unilateral, performed by or on behalf of a medical practitioner, if a service to which item 82300, 82302 or 82304 applies has not been performed on the patient on the same day. Applicable up to a total of 4 services to which this item or item 11300 or 11345 apply on the same day Fee: \$160.20 Benefit: 85% = \$136.20
11345	Programming by phone of an auditory implant, or the sound processor of an auditory implant, unilateral, performed by or on behalf of a medical practitioner, if a service to which item 82300, 82302 or 82304 applies has not been performed on the patient on the same day. Applicable up to a total of 4 services to which this item or item 11300 or 11342 apply on the same day Fee: \$160.20 Benefit: 85% = \$136.20
82302	Audiology health service by telehealth for programming of an auditory implant, or the sound processor of an auditory implant, unilateral, performed on a patient by an eligible audiologist if: (a) the service is not performed for the purpose of a hearing screening; and (b) a service to which item 11300, 11342 or 11345 applies has not been performed on the person on the same day. Applicable up to a total of 4 services to which this item or item 82300 or 82304 apply on the same day Fee: \$160.20 Benefit: 85% = \$136.20
82304	Audiology health service by phone for programming of an auditory implant, or the sound processor of an auditory implant, unilateral, performed on a patient by an eligible audiologist if: (a) the service is not performed for the purpose of a hearing screening; and (b) a service to which item 11300, 11342 or 11345 applies has not been performed on the person on the same day. Applicable up to a total of 4 services to which this item or item 82300 or 82302 apply on the same day Fee: \$160.20 Benefit: 85% = \$136.20

Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website at www.mbsonline.gov.au. You can also subscribe to future MBS updates by visiting MBS Online and clicking 'Subscribe'.

The Department of Health provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the Health Insurance Act and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email askMBS@health.gov.au.

Subscribe to 'News for Health Professionals' on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact Services Australia on the Provider Enquiry Line – 13 21 50.



The data file for software vendors was made available on 11 February 2022 and can be accessed via the MBS Online website under the <u>Downloads</u> page.

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This sheet is current as of the Last updated date shown above, and does not account for MBS changes since that date.