Medicare Benefits Schedule – 1 November Changes

MBS changes effective on or after 1 November 2020

Australian Government
Department of Health

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Introduction

Presenter:
Mr Andrew Simpson
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Department of Health

Welcome

- ✓ The presentation today will be recorded and published online after the session.
- ✓ We welcome questions during and after the session and will provide a summary of these questions online at www.health.gov.au, including responses to any questions that time does not permit for today.
- ✓ If you experience any IT issues during the session, please contact Rachel Wells on 02 6289 7946 or 0413 360 926.

Today’s sessions

Medicare Benefits Schedule 1
November 2020

This session will be recorded as a webinar and will be published online. Today’s presentation can be accessed from the Department’s website at: www.health.gov.au and search for ‘stakeholder forums’.

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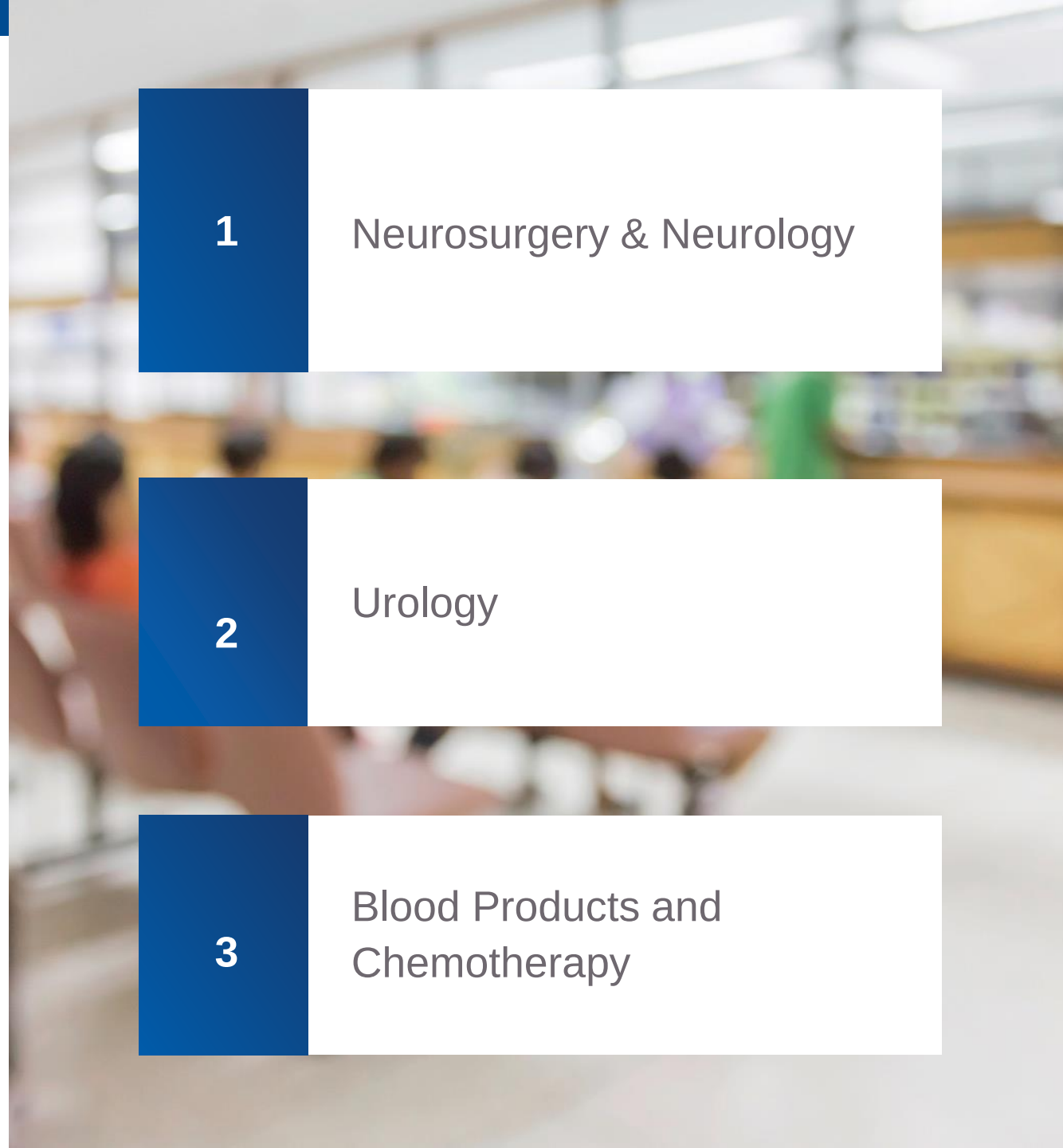

1. Neurosurgery & Neurology
2. Urology
3. Blood Products and Chemotherapy

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https://www1.health.gov.au/internet/main/publishing.nsf/Content/MBSR-forums

Find updated information on the coronavirus (COVID-19) health alert

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Stakeholder forums - Medicare Benefits Schedule Review

The Medicare Benefits Schedule Review Taskforce has held a number of forums and webinars to engage with stakeholders throughout the Review.

Page last updated: 22 June 2020

For information on upcoming stakeholder events, please subscribe the MBS Review mailing list by emailing the MBS Review team.

- Forum dates and locations
- Forum presentations and summary memoranda

Forum dates and locations

2020

- Canberra, webinar (29 June 2020) – 1 August 2020 MBS changes
  Register before 29 June 2020.

2019

HEALTHIER MEDICARE

- Medicare Benefits Schedule Review
  - About the MBS Review
  - Clinical committees and working groups
  - Consultations
  - Recommendations to Government
  - Government responses to recommendations
  - Outcomes of Taskforce meetings
  - Newsletters
  - **Stakeholder forums**
- Primary Health Care Advisory Group

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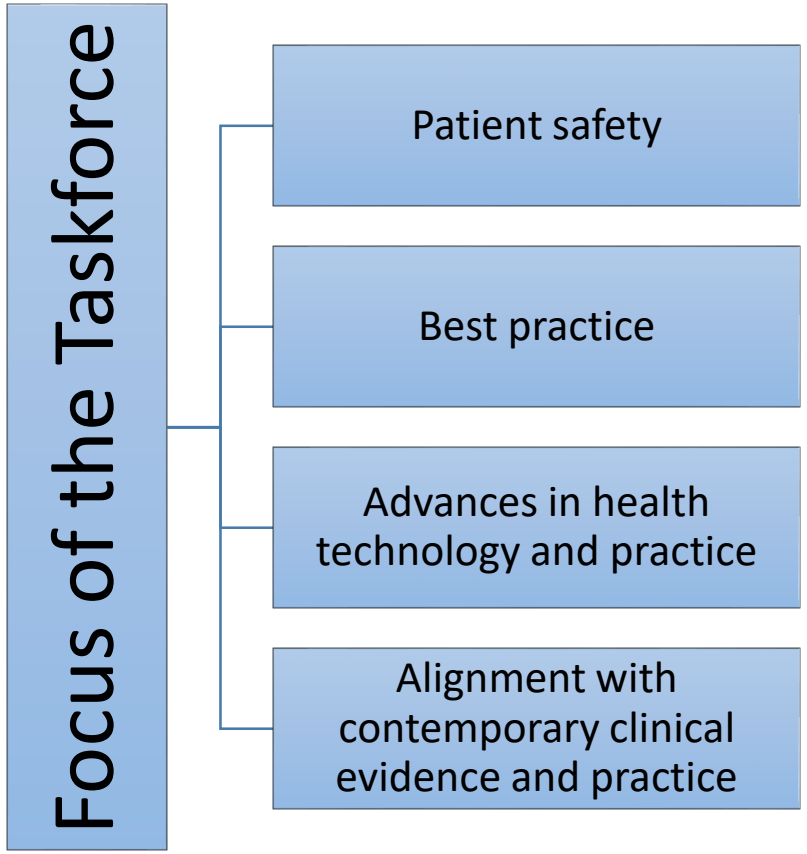
Achieving a modern and sustainable Medicare

- ✓ The MBS supports the delivery of over 400 million health services a year.
- ✓ Over the next 4 years the MBS will outlay over $100 billion.
- ✓ A modern and sustainable Medicare program must support access to high-quality and effective services.
- ✓ It must also support services that reflect current clinical evidence and contemporary best medical practice.

The MBS Review

- The MBS Review Taskforce was established in 2015.

  - ✓ Chaired by Professor Bruce Robinson
  - ✓ Includes over 70 Clinical Committees
  - ✓ Informed by over 700 independent clinicians, consumers and health system experts
  - ✓ Has reviewed more than 5,700 MBS items
  - ✓ Made over 1300 recommendations, that will change the majority of items on the Schedule
  - ✓ Amended, deleted, consolidated and added services



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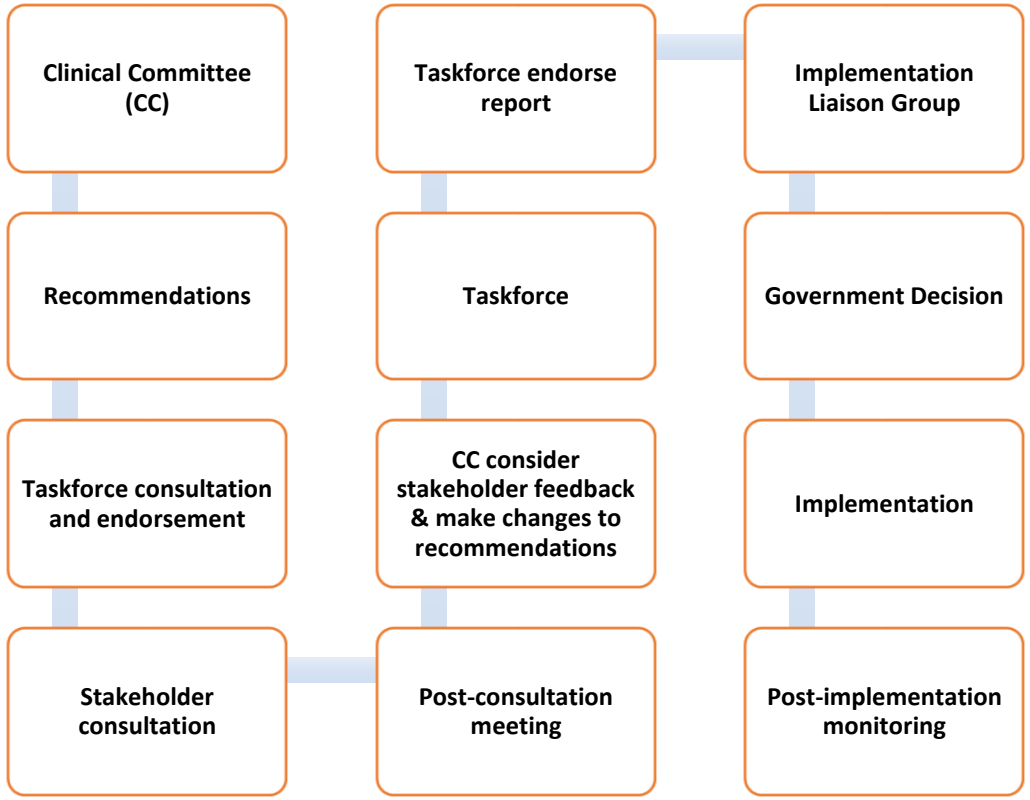
The MBS Review Process

- Reviewing and implementing changes to different MBS specialties, can take up to 3 years

  - ✓ To date, the Government has accepted and implemented approximately 350 recommendations changing over 1200 items

- 5 phases of activity
  - ✓ Initial Review
  - ✓ Consultation
  - ✓ Consideration by Government
  - ✓ **Implementation**
  - ✓ Evaluation



Finding materials on MBS Online

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MBS Online
Medicare Benefits Schedule

The MBS | About the MBS | Help

Home / About the MBS / Fact Sheets /

Current Factsheets

Page last updated: 12 September 2020

September 2020

Safe and Best Practice Cardiac Imaging Services

Changes to item 73343

August 2020

Factsheet - Additional 10 individual psychological therapy sessions

Change to Botulinum Toxin Injection Item 18365 Factsheet

Safe and Best Practice Cardiac Imaging Services

Changes to item 73295

Changes to item 73344

Factsheet on MBS item 69501

➢ www.mbsonline.gov.au

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1 November 2020 MBS Changes

Changes referred to in this presentation are subject to finalisation of regulatory amendments and parliamentary scrutiny.

Blood Products and Chemotherapy - clinical session

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Presenter:

Dr John Primrose, MBBS (Hons 1), FRANZCR

Dr Primrose graduated with First Class Honours from the University of Sydney in 1978 and underwent postgraduate training in radiation oncology at Royal Prince Alfred and Westmead Hospitals. He was admitted as a Fellow of the Royal Australasian College of Radiologists in 1983.

Dr Primrose joined the (then) Commonwealth Department of Health in 1990 as a Senior Medical Advisor. Between 1990 and 2010, he worked in pharmaceutical benefits, rational use of medicines, Medicare benefits and health technology assessment. He formerly chaired the Management Advisory Committee of the World Health Organization's Action Programme on Essential Drugs and Vaccines.

Dr Primrose is currently Medical Advisor to the Medical Benefits Branch.

Blood Products

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Blood Products Implementation

- The Taskforce established the Pathology Clinical Committee in 2016
- The Pathology Clinical Committee formed several subgroups, including the Blood Products Working Group.
- the Blood Products Working Group reviewed 8 items and recommended changes for 3 items;
    - ✓ 1 item for deletion
    - ✓ 2 items identified for amendment
    - ✓ 1 new explanatory note

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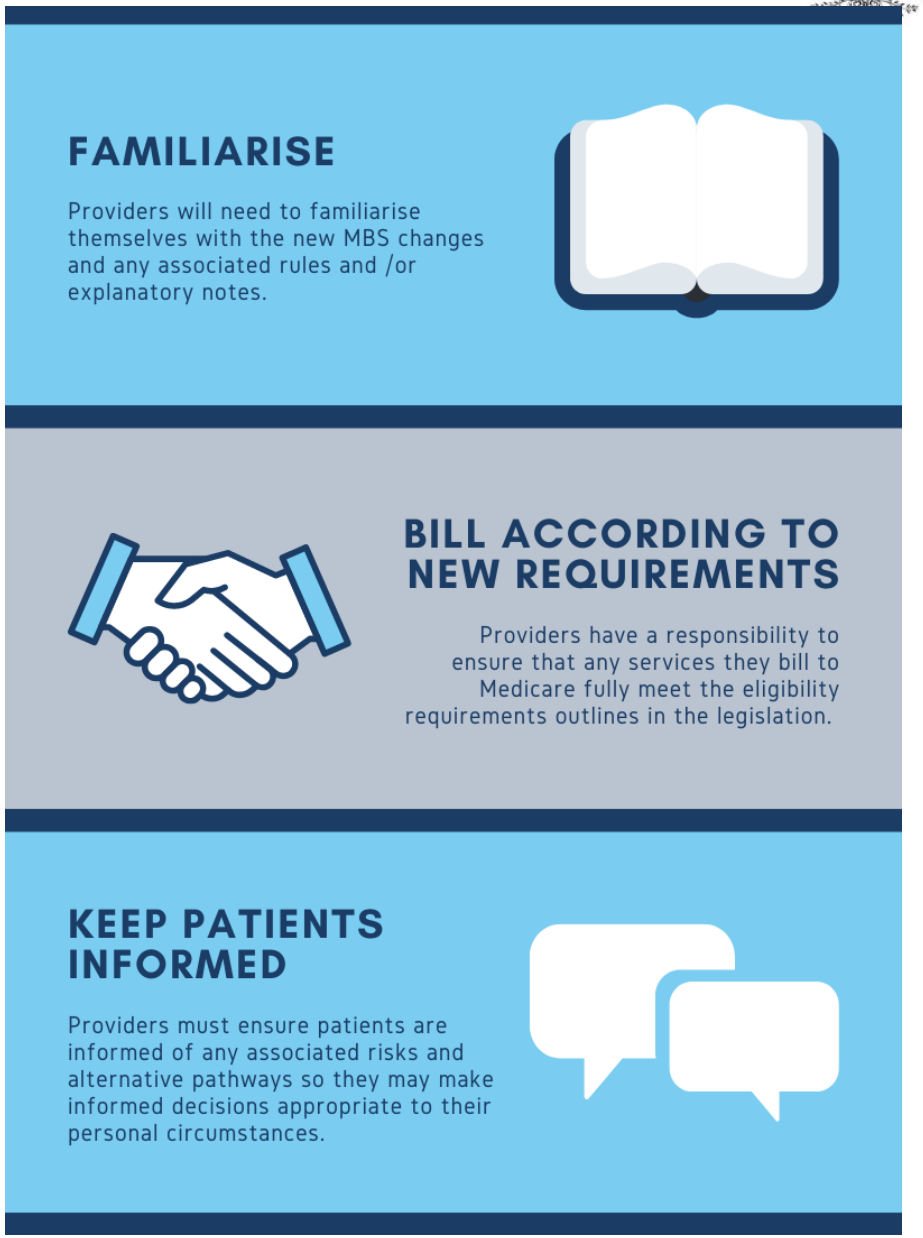
What does this mean for patients?

- ✓Patients will receive Medicare rebates for services that are clinically appropriate and reflect modern clinical practice.
- ✓The changes will provide greater access for patients to internationally recognised best practice, leading to improved health outcomes.
- ✓Patients should receive care by experienced multidisciplinary teams.
- ✓The changes will help doctors understand the correct usage of an item by clarifying what is required to bill the rebate.
- ✓The changes will align with the National Blood Authority guidelines for the use of blood products.

What does this mean for providers?



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1 November 2020 Changes

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Blood Products changes from 1 November 2020

***DRAFT** until subject to passage of legislation*

Prior to 1 November 2020 → **From 1 November 2020**

Collection and transfusion of blood product items

13703
Transfusion of blood, including collection from donor

13703
Transfusion of blood, including collection from donor, **when used for intra-operative normovolaemic haemodilution**

Collection and transfusion of blood product items

13709
Collection of blood for autologous transfusion or when homologous blood is required for immediate transfusion in emergency situation

Stem cell transplantation

13760
IN VITRO PROCESSING (and cryopreservation) of bone marrow or peripheral blood for autologous stem cell transplantation as an adjunct to high dose chemotherapy for:
-chemosensitive intermediate or high grade non-Hodgkin's lymphoma at high risk of relapse following first line chemotherapy; or
-Hodgkin's disease which has relapsed following, or is refractory to, chemotherapy; or
-acute myelogenous leukaemia in first remission, where suitable genotypically matched sibling donor is not available for allogeneic bone marrow transplant; or
-multiple myeloma in remission (complete or partial) following standard dose chemotherapy; or
-small round cell sarcomas; or
-primitive neuroectodermal tumour; or
-germ cell tumours which have relapsed following, or are refractory to, chemotherapy;
-germ cell tumours which have had an incomplete response to first line therapy.

13760
In vitro processing **with cryopreservation of bone marrow or peripheral blood, for autologous stem cell transplantation for a patient receiving high-dose chemotherapy for management of:**
(a) aggressive malignancy; or
(b) malignancy that has proven refractory to prior treatment

Legend Delete New **Amend**

Explanatory note – Item 13760

MBS rebates for autologous stem cell transplantation are only available for patients with aggressive malignancy or one which has proven refractory to prior treatment, who meet the criteria for treatment according to:
Indications for Autologous and Allogeneic Hematopoietic Cell Transplantation: Guidelines from the American Society for Blood and Marrow Transplantation (2015)
European Society for Blood and Marrow Transplantation: Indications for allo- and auto-SCT for haematological diseases, solid tumours and immune disorders. Current practice in Europe (2015).
In addition, the treatment must be overseen by a multidisciplinary cancer team.

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Blood Products – Claiming Guide

New item	Claiming guide
13703	Not claimable for Platelet Rich Plasma injections or Iron Infusions. Claimable for an admitted patient undergoing surgery, in which blood loss of a volume great enough to induce anaemia requiring therapy, is anticipated Claimable by anaesthetists. Remove from Type B, Band 1 listing in private health insurance regulations (no clinical category change)
13709	Removed from MBS
13760	Not claimable unless treatment is overseen by a multidisciplinary cancer team. Claimable for a patient with aggressive malignancy; or a malignancy that has proven refractory to prior treatment Not claimable unless patient meets the guidelines from the American Society for Blood and Marrow Transplantation or European Society for Blood and Marrow Transplantation Remove from Type C procedures listing in private health insurance regulations (no clinical category change)

Comments and feedback on the private health insurance aspects can be directed to PHI@health.gov.au

Summary of Blood Products Changes

- **1 deleted item**
- **2 amended items**
- **1 additional explanatory note**
- Further amendments to:
  - ✓Relevant legislations
  - ✓Private health insurance classifications

Chemotherapy Services

Chemotherapy Services Implementation

- The Oncology Clinical Committee (OCC) was established in April 2016 to make recommendations to the Taskforce regarding MBS items in its area of responsibility, including chemotherapeutic procedures listed on the MBS.
- The Committee was assigned 105 MBS items to review, covering investigatory and therapeutic procedures related to medical oncology, radiation oncology and sentinel lymph node biopsy. In the 2018 Report, three recommendations were made for chemotherapeutic procedures listed on the MBS.
- Of the 12 Chemotherapy items:
    - ✓ Replace 11 administration items with one parenteral administration item
    - ✓ Remove the item associated with accessing long-term drug delivery devices
    - ✓ Seek MSAC consideration for a new oral chemotherapy item

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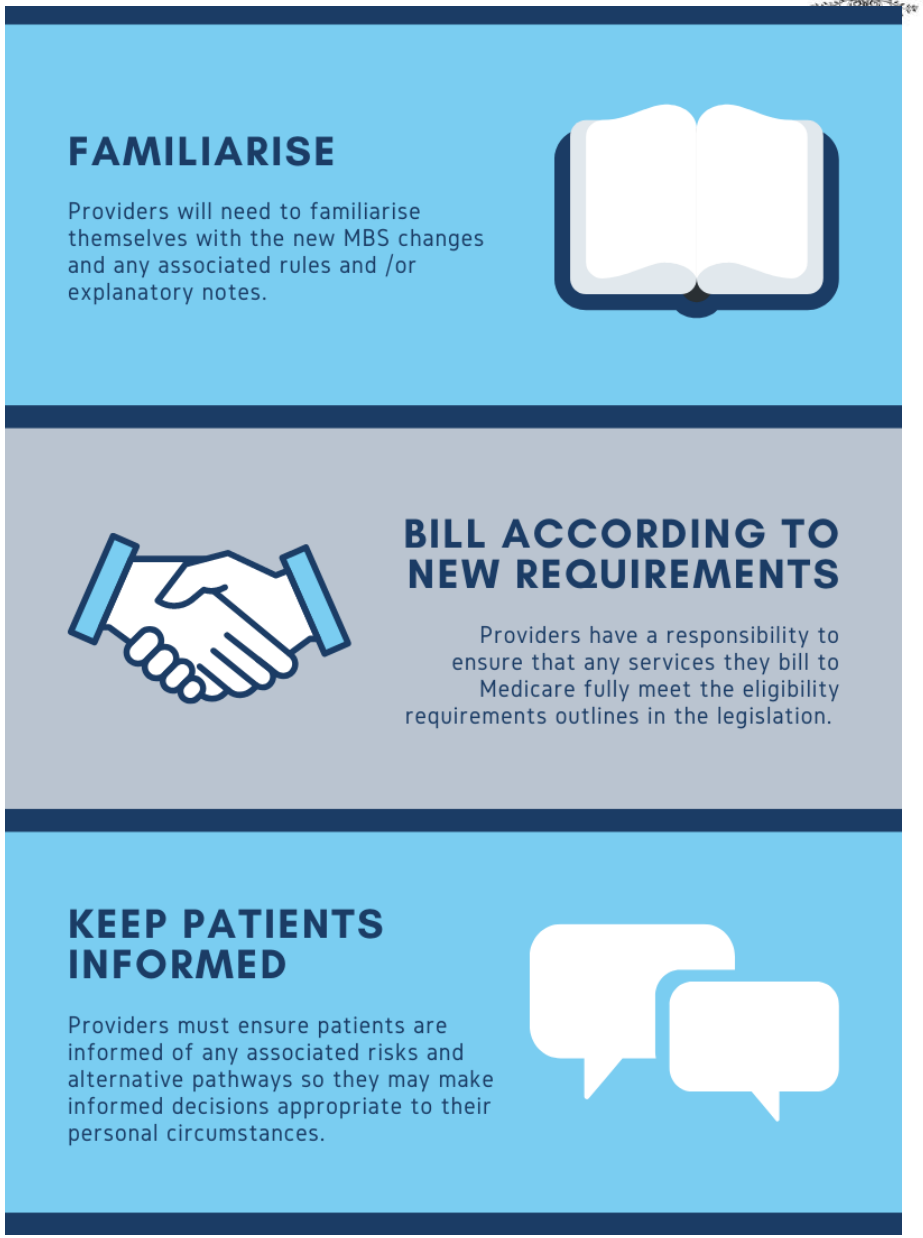
What does this mean for patients?

- ✓Patients will receive Medicare rebates for chemotherapy procedures that are clinically appropriate and reflect modern clinical practice.

- ✓Patients should no longer receive different Medicare rebates for the same interventions as there should be less variation in the items claimed by different providers.

What does this mean for providers?



Summary of 1 November 2020 Changes

1. Replace 11 administration items with one parenteral administration item
2. Remove the item associated with accessing long-term drug delivery devices
3. Seek MSAC consideration for a new oral chemotherapy item (not subject to 1 November 2020 implementation).

Amendments include changes to:

- Private health insurance classifications
- Existing explanatory notes
- Introduction of new explanatory notes
- Item fees

Restructure 11 administration items into 1 item

Item 13950
Parenteral administration of one or more antineoplastic agents, including agents used in cytotoxic chemotherapy or monoclonal antibody therapy but not agents used in anti-resorptive bone therapy or hormonal therapy, by or on behalf of a specialist or consultant physician—attendance for one or more episodes of administration

Fee: $111.40 **85%:** $94.70 **75%:** $83.55

Proposed private health insurance categorisation and classification [item 13950]:

- Procedure Type B, Band 1 (same day accommodation)
- Clinical category *Chemotherapy, radiotherapy and immunotherapy for cancer*

Removal of the reference to long-term implanted drug delivery device

Remove item 13945 from the MBS.

Remove the reference to item 13945 from the descriptor for item 14221 and replace with 13950, and prevent use of item 14221 if the long-term implanted drug delivery device is accessed in conjunction with the administration of antineoplastic therapy.

MBS Item Mapping with Effect 1 November 2020

Item	Change	MBS Fee
13915	Cease	$67.10
13918	Cease	$101.00
13921	Cease	$114.25
13924	Cease	$67.30
13927	Cease	$87.05
13930	Cease	$121.50
13933	Cease	$134.80
13936	Cease	$87.80
13939	Cease	$101.00
16942	Cease	$67.30
13945	Cease	$54.15
13948	Cease	$67.30
13950	**New**	**$111.40**
14221	Amend	N/A

Q&A