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# Minutes from MSAC Executive Meeting, 29 June 2018

**Application 1482 – New item numbers and rebates for mobile radiology services**

## MSAC Executive advice to the Minister

The MSAC Executive supported the Medicare Benefit Schedule (MBS) listing of mobile provision of skeletal x-ray (following a fall), chest x-ray (for suspected pneumonia or heart failure) and abdominal x-ray (for suspected acute abdomen or bowel obstruction) to patients within residential aged care facilities (RACF). The proposed MBS item would provide an additional fee of $70 to the current MBS items for these x-ray services when a medical practitioner has assessed the patient in person and requested the imaging services.

## Summary of consideration and rationale for MSAC Executive’s advice

MSAC Executive meeting – 29 September 2017

The MSAC Executive noted that the proposal was for an additional fee of $240 to the current MBS items for x-ray and ultrasound imaging services, when these services are provided within RACFs.

The MSAC Executive advised that the application should be limited to the most common services for RACF residents who would otherwise be sent to an emergency department or radiology practice for imaging. The imaging services for consideration were:

* skeletal x-ray following a fall;
* chest x-ray for suspected pneumonia or heart failure;
* abdominal x-ray for suspected acute abdomen or bowel obstruction; and
* abdominal ultrasound for acute abdomen, intra-abdominal pathology.

The MSAC Executive noted that the application proposed financial changes only to services already listed on the MBS, and therefore did not require a health technology assessment. The MSAC Executive requested that an assessment of the financial impact of the services be undertaken through a utilisation and financial analysis.

MSAC Executive meeting – 29 June 2018

The MSAC Executive noted the financial assessment report for the mobile imaging service. The MSAC Executive noted that there may be potential savings to public funding if the service was listed.

The MSAC Executive advised that the service should be limited to plain x-rays (skeletal, chest and abdominal) as the proposed abdominal ultrasound service does not meet current legislative supervisory requirements.

The MSAC Executive considered that the proposed model of care with referral for imaging by a nurse after a telephone discussion with a GP was not appropriate. The MSAC Executive advised that the model of care should include GP attendance at the RACF to medically assess the patient and then request imaging if required.

The MSAC Executive noted that the requested fee of $240 was well above the current national call out fees from established providers of mobile imaging services. The MSAC Executive considered that a $70 derived fee was more appropriate.

Proposed MBS Item

The proposed MBS item descriptor is:

| A diagnostic radiology service conducted at a residential aged care facility, where the service has been requested by a medical practitioner who has attended the patient in person, for one or more of the following indications:   1. the patient has experienced a fall and one or more of the following items apply to the service 57509, 57515, 57521, 57527, 57530, 57533, 57539, 57703, 57705, 57709, 57711, 57712, 57714, 57715, 57717, 58521, 58523, 58524, 58526, 58527, 58529, 57536; or 2. pneumonia or heart failure is suspected and item 58503 or 58505 applies to the service; or 3. acute abdomen or bowel obstruction is suspected and item 58903 or 58905 applies to the service |
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The MSAC Executive noted that in line with its terms of reference, this advice will be reported to the next full MSAC meeting.