



Budget 2018-19

Guaranteeing Medicare — Medicare Benefits Schedule Review — response to Taskforce recommendations

This measure makes the following changes to the Medicare Benefits Schedule (MBS) in response to taskforce recommendations.

From 1 July 2018:

- changes will be made to pelvic organ prolapse surgery items to ensure they are used correctly. In addition, new MBS items will be added for the surgical removal of transvaginal mesh implants.

From 1 November 2018:

- specific items will be available for knee X-rays and knee computed tomography. Current MBS knee imaging items for General Practitioner requested knee MRIs will also be changed to include age restrictions and requesting limits. Other knee MRI items that currently require a preceding x-ray will no longer need this
- new MBS items for breast tomosynthesis will be available for a temporary period while permanent listing is considered by the Medical Services Advisory Committee. Tomotherapy MBS items which are obsolete but are currently being used for 3D breast tomosynthesis will be removed from the MBS from 1 November 2018
- changes will be made to the MBS items for allergy testing, dermatological procedures and treatments. This aligns payments of MBS benefits with contemporary practice and improved patient care
- new MBS items for spinal surgery services will be added. The existing MBS spinal surgery schedule will be replaced with a new schedule that aligns with contemporary clinical practice and will help prevent inappropriate claiming of MBS items
- changes to existing items for spirometry (a type of lung function test), including improved quality requirements and a new higher-rebated item to encourage the use of well performed spirometry in general practice. A contemporary list of MBS funded complex lung function tests, including the introduction of two new items to reflect the level of the complexity of these tests
- a new structure of MBS items for sleep studies to help ensure patients with proven sleep disorders are better identified and more appropriately managed

- a new MBS item added to fund the provision of dialysis services in very remote regions to address concerns around the need for improved access to dialysis services in these communities. The changes will increase consistency across the MBS and reflect clinical best practice
- changes will be made to the electron microscopy items following a review of the costs associated with electron microscopy examinations
- changes will be made to multiple MBS items relating to the Medicare Claims Review Panel (MCRP), including those for ophthalmology and plastic and reconstructive surgery. This will better define clinical indications. The MCRP will be dissolved.
- changes to capsule endoscopy to better reflect the current cost of providing this service, and
- changes to parathyroid, thyroid and adrenal gland surgery and synacthen tests to promote current best practice.

Who is eligible for this measure?

This measure affects patients eligible for the above MBS items and health professionals who provide these services.

The date this will start and finish

Changes to pelvic organ prolapse surgical items and new items for mesh removal will start from 1 July 2018.

Changes to knee imaging, dermatology, allergy and immunology, spinal surgery, respiratory and sleep studies, renal dialysis medicine items, capsule endoscopy and MCRP start on 1 November 2018 and are ongoing.

The new MBS items for breast tomosynthesis will start from 1 November 2018 and will cease on 1 November 2019.