



Health Insurance (General Medical Services Table) Amendment Regulations 2006 (No. 2)¹

Select Legislative Instrument 2006 No. 86

I, PROFESSOR MARIE BASHIR, AC, CVO, Administrator of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following Regulations under the *Health Insurance Act 1973*.

Dated 26 April 2006

MARIE BASHIR
Administrator

By Her Excellency's Command

TONY ABBOTT
Minister for Health and Ageing

1 Name of Regulations

These Regulations are the *Health Insurance (General Medical Services Table) Amendment Regulations 2006 (No. 2)*.

2 Commencement

These Regulations commence on 1 May 2006.

3 Amendment of *Health Insurance (General Medical Services Table) Regulations 2005*

Schedule 1 amends the *Health Insurance (General Medical Services Table) Regulations 2005*.

Schedule 1 Amendments

(regulation 3)

[1] Schedule 1, Part 2, subrule 6 (1)

omit

110, 116, 119, 122, 128, 131, 385, 386, 387 and 388,

insert

109, 110, 116, 119, 122, 128, 131, 385, 386, 387, 388, 2801, 2806, 2814, 2824, 2832, 2840, 3005, 3010, 3014, 3018, 3023 and 3028,

[2] Schedule 1, Part 2, subrule 7 (1)

after

2501 to 2727,

insert

2801 to 2840, 3005 to 3028,

[3] Schedule 1, Part 2, rule 8, heading

substitute

8 Interpretation of items 104 to 131, 291 to 388, 2801 to 2840 and 3005 to 3028

[4] Schedule 1, Part 2, subrule 8 (1)

omit

items 104 to 131 and 291 to 388,

insert

items 104 to 131, 291 to 388, 2801 to 2840 and 3005 to 3028,

[5] Schedule 1, Part 2, after subrule 9 (13)

insert

(13A) In item 716, ***amount under rule 9*** means an amount equal to the sum of:

(a) the fee for item 714; and

(b) either:

(i) if not more than 6 patients are attended at a single attendance — \$22.00 divided by the number of patients attended; or

(ii) if more than 6 patients are attended at a single attendance — \$1.60.

[6] Schedule 1, Part 2, after subrule 44 (2)

insert

(2A) Item 714 applies only to a service in relation to a patient who:

(a) has been a humanitarian visa holder for less than 12 months at the time of the service; or

(b) first entered Australia less than 12 months before the service.

(2B) Item 716 applies only to a service in relation to a patient who:

(a) is a person who:

(i) has been a humanitarian visa holder for less than 12 months at the time of the service; or

(ii) first entered Australia less than 12 months before the service; and

(b) is not an in-patient of a hospital or approved day hospital facility, or a care recipient in a residential aged care facility.

[7] Schedule 1, Part 2, subrule 44 (3)

omit

For this rule,

insert

For items 704, 706, 708 and 710,

[8] Schedule 1, Part 2, rule 46, heading

substitute

46 Meaning of *health assessment* in items 700, 702, 704 and 706

[9] Schedule 1, Part 2, after rule 46

insert

46A Meaning of *child health check* in item 708

(1) For item 708, a *child health check* means the assessment of:

(a) a patient's health and physical, psychological and social function; and

(b) whether preventative health care, education and other assistance should be offered to the patient, or the patient's parent or carer, to improve the patient's health and physical, psychological or social function.

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- (2) A child health check of a patient involves all of the following:
- (a) a personal attendance by a medical practitioner;
 - (b) taking the patient's medical history, including the following:
 - (i) mother's pregnancy history;
 - (ii) birth and neo-natal history;
 - (iii) breastfeeding history;
 - (iv) weaning, food access and dietary history;
 - (v) physical activity;
 - (vi) previous presentations, hospital admissions and medication usage;
 - (vii) relevant family medical history;
 - (viii) immunisation status;
 - (ix) vision and hearing (including neonatal hearing screening);
 - (x) development (including achievement of age appropriate milestones);
 - (xi) family relationships, social circumstances and whether the person is cared for by another person;
 - (xii) exposure to environmental factors (including tobacco smoke);
 - (xiii) environmental and living conditions;
 - (xiv) educational progress;
 - (xv) stressful life events;
 - (xvi) mood (including incidence of depression and risk of self-harm);
 - (xvii) substance use;
 - (xviii) sexual and reproductive health;
 - (xix) dental hygiene (including access to dental services);
 - (c) examination of the patient, including the following:
 - (i) measurement of height and weight to calculate body mass index and position on the growth curve;
 - (ii) newborn baby check (if not previously completed);
 - (iii) vision (including red reflex in a newborn);
 - (iv) ear examination (including otoscopy);

- (v) oral examination (including gums and dentition);
 - (vi) trachoma check, if indicated;
 - (vii) skin examination, if indicated;
 - (viii) respiratory examination, if indicated;
 - (ix) cardiac auscultation, if indicated;
 - (x) development assessment, if indicated, to determine whether age appropriate milestones have been achieved;
 - (xi) assessment of parent and child interaction, if indicated;
 - (xii) other examinations:
 - (A) in accordance with national or regional guidelines or specific regional needs; or
 - (B) as indicated by a previous child health assessment;
 - (d) undertaking or arranging any required investigation, considering the need for the following tests, in particular:
 - (i) haemoglobin testing for those at a high risk of anaemia;
 - (ii) audiometry, if required, especially for those of school age;
 - (e) assessing the patient using the information gained in the child health check;
 - (f) making or arranging any necessary interventions and referrals, and documenting a simple strategy for the good health of the patient.
- (3) A child health check also includes:
- (a) keeping a record of the child health check; and
 - (b) offering the patient, or the patient's parent or carer, a written report about the health check, with recommendations about matters covered by the health check (including a simple strategy for the good health of the patient).

[10] Schedule 1, Part 2, after rule 48

insert

48A Meaning of *health assessment* in items 714 and 716

- (1) In items 714 and 716, ***health assessment*** means the assessment of:
 - (a) a patient's health and physical, psychological and social function; and
 - (b) whether preventative health care and education should be offered to the patient, to improve the patient's health and physical, psychological or social function.
- (2) A health assessment involves all of the following:
 - (a) a personal attendance by a medical practitioner;
 - (b) taking the patient's medical history;
 - (c) examination of the patient;
 - (d) undertaking or arranging any required investigations;
 - (e) assessing the patient using the information gained in paragraphs (b) to (d);
 - (f) developing a management plan addressing the patient's health care needs, health problems and relevant conditions;
 - (g) making or arranging any necessary interventions and referrals.
- (3) A health assessment also includes:
 - (a) keeping a record of the health assessment; and
 - (b) offering the patient a written report about the health assessment.

48B Meaning of *humanitarian visa holder* in items 714 and 716

In items 714 and 716:

humanitarian visa holder means a person who is the holder of a visa of any of the following subclasses granted under the *Migration Act 1958*:

- (a) Subclass 200 (Refugee) visa;
- (b) Subclass 201 (In-country Special Humanitarian) visa;
- (c) Subclass 202 (Global Special Humanitarian) visa;
- (d) Subclass 203 (Emergency Rescue) visa;
- (e) Subclass 204 (Woman at Risk) visa;
- (f) Subclass 447 (Secondary Movement Offshore Entry (Temporary)) visa;
- (g) Subclass 451 (Secondary Movement Relocation (Temporary)) visa;
- (h) Subclass 785 (Temporary Protection) visa;
- (i) Subclass 786 (Temporary (Humanitarian Concern)) visa;
- (j) Subclass 866 (Protection) visa.

[11] Schedule 1, Part 2, after rule 58

insert

58A Meaning of *co-ordinate* in item 880

For item 880, ***co-ordinating*** a case conference means undertaking all of the following activities in relation to a case conference:

- (a) co-ordinating and facilitating the case conference;
- (b) resolving any disagreement or conflict to enable the members of the case conference team giving care and service to the patient to agree on the outcomes to be achieved;
- (c) identifying tasks that need to be undertaken to achieve these outcomes, and allocating those tasks to members of the case conference team;

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- (d) recording the input of each member and the outcome of the conference.

58B Meaning of *case conference team* in item 880

- (1) For item 880, a *case conference team*:
- (a) includes a specialist, or consultant physician, in the practice of his or her specialty of geriatric or rehabilitation medicine; and
 - (b) includes at least 2 other allied health professionals, each of whom provides a different kind of care or service to the patient and is not a medical practitioner or family carer of the patient; and
 - (c) may include the patient, a family carer of the patient or a medical practitioner.

Example

Examples of persons who, for paragraph (b), may be included in a team are:

- dietitians
- mental health workers
- occupational therapists
- pharmacists
- physiotherapists
- podiatrists
- psychologists
- social workers
- speech pathologists.

- (2) In subrule (1):

family carer includes a person who:

- (a) is a relative or friend of the patient; and
- (b) is providing care to the patient other than as a paid service.

58C Application of item 880

- (1) Item 880 applies only if:
 - (a) the attendance is by a specialist, or consultant physician, in relation to whom the Medicare Australia CEO has received a written notice from the Royal Australasian College of Physicians stating that the person meets the skills requirements for providing services to which the item applies; and
 - (b) the attendance is on a patient who:
 - (i) is an admitted patient of a hospital (other than an approved day hospital facility or residential aged care facility); and
 - (ii) is being provided with 1 of the following types of specialist care:
 - (A) geriatric evaluation and management;
 - (B) rehabilitation care.

- (2) In this rule:

geriatric evaluation and management means care provided to a patient with a disability or psychosocial problem for the purpose of maximising the patient's health status or optimising the patient's living arrangements.

rehabilitation care means care provided to a patient with an impairment or disability for the purpose of improving the patient's functional status.

[12] Schedule 1, Part 2, after rule 63

insert

63A Application of Group A24

- (1) Subgroups 1 and 2 of Group A24 apply only if the attendance is by a medical practitioner who:
 - (a) is a recognised Fellow of the Faculty of Pain Medicine at the Australian and New Zealand College of Anaesthetists; and

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- (b) is recognised as a specialist, or consultant physician, in the specialty of pain medicine for the purposes of the Act.
 - (2) Subgroups 3 and 4 of Group A24 apply only if the attendance is by a medical practitioner who:
 - (a) is a recognised Fellow of the Australasian Chapter of Palliative Medicine at the Royal Australasian College of Physicians; and
 - (b) is recognised as a specialist, or consultant physician, in the specialty of palliative medicine for the purposes of the Act.

63B Application of items 14227, 14230, 14233, 14236, 14239 and 14242

Items 14227, 14230, 14233, 14236, 14239 and 14242 apply to a service in relation to a patient only if:

- (a) the patient has:
 - (i) chronic spasticity of cerebral origin; or
 - (ii) chronic spasticity caused by multiple sclerosis, spinal cord injury or spinal cord disease; and
- (b) oral antispastic agents have failed or have caused the patient to experience unacceptable side effects; and
- (c) an authority has been given by Medicare Australia to provide the service to the patient.

[13] Schedule 1, Part 2, after rule 82

insert

82A Application of item 10988

- (1) In this rule and item 10988:

general practice has the meaning given by subrule 84 (1).

immunisation has the meaning given by subrule 84 (1).

registered Aboriginal health worker means a person registered as an Aboriginal health worker under the *Health Practitioners Act* (NT) who is employed by, or whose services are otherwise retained by, a general practice or health service in the Northern Territory in relation to which the Minister has made a direction under subsection 19 (2) of the Act.

- (2) Item 10988 applies to an immunisation provided to a person by a registered Aboriginal health worker only if:
 - (a) the registered Aboriginal health worker is appropriately qualified and trained to provide immunisations to persons; and
 - (b) the medical practitioner under whose supervision the immunisation is provided retains responsibility for the health, safety and clinical outcomes of the person.
- (3) If the cost of the vaccine supplied in connection with a service described in item 10988 is not subsidised by the Commonwealth or a State, the service is taken not to include the supply of that vaccine.

82B Application of item 10989

- (1) In this rule and item 10989:
registered Aboriginal health worker has the meaning given by subrule 82A (1).
- (2) Item 10989 applies to the treatment of a person's wound (other than normal aftercare) provided by a registered Aboriginal health worker only if:
 - (a) the registered Aboriginal health worker is appropriately qualified and trained to treat wounds; and
 - (b) the medical practitioner under whose supervision the treatment is provided has conducted an initial assessment of the person; and
 - (c) the registered Aboriginal health worker has been instructed by the medical practitioner in relation to the treatment of the wound; and
 - (d) the medical practitioner retains responsibility for the health, safety and clinical outcomes of the person.

[14] Schedule 1, Part 2, after rule 87*insert***87A Application of items 35404, 35406 and 35408**

- (1) Items 35404, 35406 and 35408 do not apply to selective internal radiation therapy provided in combination with systemic chemotherapy using any drugs other than 5 fluorouracil (5FU) and leucovorin.
- (2) Item 35404 applies only to a service provided by a medical practitioner recognised as a specialist, or consultant physician, in the specialty of nuclear medicine or radiation oncology for the purposes of the Act.

[15] Schedule 1, Part 2, after subrule 88 (2)*insert*

- (2A) For any particular patient, each of items 2946 to 3000 and 3032 to 3093 is applicable not more than 5 times in a 12 month period.

[16] Schedule 1, Part 2, after rule 93*insert***94 Application of items 15556, 15559 and 15562**

A service described in item 15556, 15559 or 15562 applies only if:

- (a) each gross tumour target, clinical target, planning target and organ at risk specified in the prescription is rendered as a volume; and
- (b) each organ at risk is nominated as a planning dose goal or constraint; and
- (c) each organ at risk is specified in the prescription as a dose goal or constraint; and
- (d) dose volume histograms are generated, approved and recorded with the plan; and

- (e) a CT image volume dataset is required for the relevant region to be planned and treated; and
- (f) the CT image is required to be suitable for the generation of quality digitally reconstructed radiographic images.

95 Application of items 38365, 38368 and 38654

A service described in item 38365, 38368 or 38654 applies to any particular patient only if:

- (a) the patient:
 - (i) has moderate to severe chronic heart failure (New York Heart Association (NYHA) class III or IV) despite optimised medical therapy; and
 - (ii) has sinus rhythm; and
 - (iii) has a left ventricular ejection fraction of 35% or less; and
 - (iv) has a QRS duration of 120 milliseconds or more; or
- (b) the patient satisfied the requirements mentioned in paragraph (a) immediately before the insertion of a cardiac resynchronisation therapy device and transvenous left ventricular electrode.

[17] Schedule 1, Part 3, item 104, column 2

omit

item 106 applies

insert

item 106 or 109 applies

[18] Schedule 1, Part 3, item 106, column 2

after

his or her specialty

insert

of ophthalmology

[19] Schedule 1, Part 3, item 106, column 2*omit*

items 104

insert

items 104, 109

[20] Schedule 1, Part 3, after item 108*insert in Group A3*

- 109 Professional attendance by a specialist in the practice of 111.20
his or her specialty of ophthalmology following referral
of the patient to him or her — an attendance (other than
a second or subsequent attendance in a single course of
treatment) at which a comprehensive eye examination is
performed on:
- (a) a patient younger than 9 years; or
 - (b) a patient younger than 15 years with
developmental delay
- (not being a service to which any of items 104, 106 and
10801 to 10816 applies)

[21] Schedule 1, Part 3, after item 706*insert*

- 708 Attendance by a medical practitioner (other than a 164.00
specialist or consultant physician) at consulting rooms or
another place (other than a hospital, approved day
hospital facility or residential aged care facility) for a
child health check of a patient who is younger than 15
and of Aboriginal or Torres Strait Islander descent —
not being a child health check of a patient in respect of
whom, in the preceding 9 months, a payment has been
made under this item

[22] Schedule 1, Part 3, after item 712*insert in Group A14*

- | | | |
|-----|--|---------------------|
| 714 | Attendance by a medical practitioner (including a general practitioner, but not including a specialist or consultant physician) at consulting rooms for a health assessment of a patient who is a humanitarian visa holder — not being a health assessment of a patient in respect of whom a payment has been made under this item or item 700, 702, 712 or 716 | 195.50 |
| | (Item is subject to rule 44) | |
| 716 | Attendance by a medical practitioner (including a general practitioner, but not including a specialist or consultant physician) not being an attendance at consulting rooms, a hospital or a residential aged care facility, for a health assessment of a patient who is a humanitarian visa holder — not being a health assessment of a patient in respect of whom a payment has been made under this item or item 700, 702, 712 or 714 | Amount under rule 9 |
| | (Item is subject to rule 44) | |

[23] Schedule 1, Part 3, after item 866*insert in Subgroup 2*

- | | | |
|-----|---|-------|
| 880 | Attendance by a specialist, or consultant physician, in the practice of his or her specialty of geriatric or rehabilitation medicine, as a member of a case conference team, to co-ordinate a case conference of at least 10 minutes but less than 30 minutes — for any particular patient, 1 attendance only in a 7 day period (not being an attendance on the same day as an attendance in respect of which a payment has been made under item 832, 834, 835, 837 or 838 in respect of the patient) (H) | 42.05 |
| | (Item is subject to rule 58C) | |

[24] Schedule 1, Part 3, after item 2727

insert

Group A24 — Palliative and pain medicine

Subgroup 1 — Pain medicine attendances

- | | | |
|------|---|--------|
| 2801 | Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine following referral of the patient to him or her by a medical practitioner — initial attendance in a single course of treatment | 130.60 |
| | (Item is subject to rule 63A) | |
| 2806 | Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine following referral of the patient to him or her by a medical practitioner — each attendance (not being a service to which item 2814 applies) subsequent to the first in a single course of treatment | 65.40 |
| | (Item is subject to rule 63A) | |
| 2814 | Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine following referral of the patient to him or her by a medical practitioner — each minor attendance subsequent to the first attendance in a single course of treatment | 37.15 |
| | (Item is subject to rule 63A) | |
| 2824 | Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine following referral of the patient to him or her by a medical practitioner — initial attendance in a single course of treatment | 158.50 |
| | (Item is subject to rule 63A) | |

2832	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine following referral of the patient to him or her by a medical practitioner — each attendance (not being a service to which item 2840 applies) subsequent to the first in a single course of treatment (Item is subject to rule 63A)	95.85
2840	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine following referral of the patient to him or her by a medical practitioner — each minor attendance subsequent to the first attendance in a single course of treatment (Item is subject to rule 63A)	69.00
<i>Subgroup 2 — Pain medicine case conferences</i>		
2946	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to organise and co-ordinate a community case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	120.35
2949	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to organise and co-ordinate a community case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	180.60
2954	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to organise and co-ordinate a community case conference of at least 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	240.70

2958	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to participate in a community case conference (other than to organise and co-ordinate the conference) of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	86.50
2972	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to participate in a community case conference (other than to organise and co-ordinate the conference) of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	137.90
2974	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to participate in a community case conference (other than to organise and co-ordinate the conference) of at least 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	189.30
2978	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to organise and co-ordinate a discharge case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	120.35
2984	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to organise and co-ordinate a discharge case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	180.60
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2988	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to organise and co-ordinate a discharge case conference of at least 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	240.70
2992	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and co-ordinate the conference) of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	86.50
2996	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and co-ordinate the conference) of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	137.90
3000	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of pain medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and co-ordinate the conference) of at least 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	189.30
<i>Subgroup 3 — Palliative medicine attendances</i>		
3005	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine following referral of the patient to him or her by a medical practitioner — initial attendance in a single course of treatment (Item is subject to rule 63A)	130.60

3010	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine following referral of the patient to him or her by a medical practitioner — each attendance (not being a service to which item 3014 applies) subsequent to the first in a single course of treatment (Item is subject to rule 63A)	65.40
3014	Professional attendance at consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine following referral of the patient to him or her by a medical practitioner — each minor attendance subsequent to the first attendance in a single course of treatment (Item is subject to rule 63A)	37.15
3018	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine following referral of the patient to him or her by a medical practitioner — initial attendance in a single course of treatment (Item is subject to rule 63A)	158.50
3023	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine following referral of the patient to him or her by a medical practitioner — each attendance (not being a service to which item 3028 applies) subsequent to the first in a single course of treatment (Item is subject to rule 63A)	95.85
3028	Professional attendance at a place other than consulting rooms or hospital by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine following referral of the patient to him or her by a medical practitioner — each minor attendance subsequent to the first attendance in a single course of treatment (Item is subject to rule 63A)	69.00

Subgroup 4 — Palliative medicine case conferences

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|------|--|--------|
| 3032 | Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to organise and co-ordinate a community case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines
(Item is subject to rules 63A and 88) | 120.35 |
| 3040 | Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to organise and co-ordinate a community case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines
(Item is subject to rules 63A and 88) | 180.60 |
| 3044 | Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to organise and co-ordinate a community case conference of at least 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines
(Item is subject to rules 63A and 88) | 240.70 |
| 3051 | Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to participate in a community case conference (other than to organise and co-ordinate the conference) of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines
(Item is subject to rules 63A and 88) | 86.50 |

3055	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to participate in a community case conference (other than to organise and co-ordinate the conference) of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	137.90
3062	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to participate in a community case conference (other than to organise and co-ordinate the conference) of at least 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	189.30
3069	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to organise and co-ordinate a discharge case conference of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	120.35
3074	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to organise and co-ordinate a discharge case conference of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	180.60
3078	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to organise and co-ordinate a discharge case conference of at least 45 minutes, with a multidisciplinary team of at least 3 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	240.70

3083	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and co-ordinate the conference) of at least 15 minutes but less than 30 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	86.50
3088	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and co-ordinate the conference) of at least 30 minutes but less than 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	137.90
3093	Attendance by a specialist, or consultant physician, in the practice of his or her specialty of palliative medicine, as a member of a case conference team, to participate in a discharge case conference (other than to organise and co-ordinate the conference) of at least 45 minutes, with a multidisciplinary team of at least 2 other formal care providers of different disciplines (Item is subject to rules 63A and 88)	189.30

[25] Schedule 1, Part 3, Miscellaneous Services, before Group 1

insert

Group 5 — Services provided by a registered Aboriginal health worker on behalf of a medical practitioner

10988	Immunisation provided to a person by a registered Aboriginal health worker if: <ul style="list-style-type: none"> (a) the immunisation is provided on behalf of, and under the supervision of, a medical practitioner; and (b) the person is not an admitted patient of a hospital or approved day hospital facility (Item is subject to rule 82A)	10.40
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10989	Treatment of a person's wound (other than normal aftercare) provided by a registered Aboriginal health worker if: (a) the treatment is provided on behalf of, and under the supervision of, a medical practitioner; and (b) the person is not an admitted patient of a hospital or approved day hospital facility (Item is subject to rule 82B)	10.40
[26]	Schedule 1, Part 3, item 10993, column 2, paragraph (b) <i>substitute</i> (b) the person is not an admitted patient of a hospital or approved day hospital facility	
[27]	Schedule 1, Part 3, item 13915, column 2 <i>omit</i> photodynamic therapy with verteporfin <i>insert</i> photodynamic therapy with verteporfin or a service to administer drugs used immediately before, or during, microwave (UHF radiowave) cancer therapy	
[28]	Schedule 1, Part 3, after item 14224 <i>insert in Subgroup 13</i>	
14227	Implanted infusion pump, refilling of reservoir with baclofen for infusion to the subarachnoid or epidural space, with or without re-programming a programmable pump, for the management of severe chronic spasticity (Item is subject to rule 63B)	84.70

14230	Intrathecal or epidural spinal catheter, insertion or replacement of, and connection to a subcutaneous implanted infusion pump, for the management of severe chronic spasticity with baclofen (H) (Anaes.) (Assist.) (Item is subject to rule 63B)	257.95
14233	All of the following: <ul style="list-style-type: none"> (a) infusion pump, subcutaneous implantation or replacement of; (b) connection of the pump to an intrathecal or epidural spinal catheter; (c) filling of reservoir with analgesic; with or without programming the pump, for the management of severe chronic spasticity (H) (Anaes.) (Assist.) (Item is subject to rule 63B)	313.20
14236	All of the following: <ul style="list-style-type: none"> (a) infusion pump, subcutaneous implantation of; (b) intrathecal or epidural spinal catheter, insertion of; (c) connection of pump to catheter; (d) filling of reservoir with baclofen; with or without programming the pump, for the management of severe chronic spasticity (H) (Anaes.) (Assist.) (Item is subject to rule 63B)	571.15
14239	Either: <ul style="list-style-type: none"> (a) subcutaneously implanted infusion pump, removal of; or (b) intrathecal or epidural spinal catheter, removal or repositioning of; for the management of severe chronic spasticity (H) (Anaes.) (Item is subject to rule 63B)	138.00

14242	Subcutaneous reservoir and spinal catheter, insertion of, for the management of severe chronic spasticity (H) (Anaes.) (Item is subject to rule 63B)	409.95
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[29] Schedule 1, Part 3, after item 15541

insert in Subgroup 5

15550	Simulation for 3 dimensional conformal radiotherapy without intravenous contrast medium if: <ul style="list-style-type: none"> (a) treatment set up and technique specifications are in preparation for 3 dimensional conformal radiotherapy dose planning; and (b) patient set up and immobilisation techniques are suitable for reliable CT image volume data acquisition and 3 dimensional conformal radiotherapy treatment; and (c) a high-quality CT image volume dataset is required for the relevant region of interest to be planned and treated; and (d) the image set up is required to be suitable for the generation of quality digitally reconstructed radiographic images 	570.00
15553	Simulation for 3 dimensional conformal radiotherapy, including pre and post intravenous contrast medium if: <ul style="list-style-type: none"> (a) treatment set up and technique specifications are in preparation for 3 dimensional conformal radiotherapy dose planning; and (b) patient set up and immobilisation techniques are suitable for reliable CT image volume data acquisition and 3 dimensional conformal radiotherapy treatment; and (c) a high-quality CT image volume dataset is required for the relevant region of interest to be planned and treated; and (d) the image set up is required to be suitable for the generation of quality digitally reconstructed radiographic images 	615.00

15556	Dosimetry for 3 dimensional conformal radiotherapy of level 1 complexity if the dosimetry is for a single phase 3 dimensional conformal treatment plan using a CT image volume dataset, with 1 gross tumour volume or clinical target volume, 1 planning target volume and 1 organ at risk specified in the prescription (Item is subject to rule 94)	575.00
15559	Dosimetry for 3 dimensional conformal radiotherapy of level 2 complexity if: <ul style="list-style-type: none"> (a) the dosimetry is for a 2 phase 3 dimensional conformal treatment plan using 1 or more CT image volume datasets, with at least 1 gross tumour volume, 2 planning target volumes and 1 organ at risk specified in the prescription; or (b) the dosimetry is for a single phase 3 dimensional conformal treatment plan using 1 or more CT image volume datasets, with at least 1 gross tumour volume, 1 planning target volume and 2 organ at risk dose goals or constraints specified in the prescription; or (c) image fusion with a secondary CT, MRI or PET image volume dataset is used to define target volumes and organs at risk as specified in item 15556 (Item is subject to rule 94)	750.00
15562	Dosimetry for 3 dimensional conformal radiotherapy of level 3 complexity if: <ul style="list-style-type: none"> (a) the dosimetry is for a 3 phase 3 dimensional conformal treatment plan using 1 or more CT image volume datasets, with at least 1 gross tumour volume, 3 planning target volumes and 1 organ at risk specified in the prescription; or (b) the dosimetry is for a 2 phase 3 dimensional conformal treatment plan using 1 or more CT image volume datasets, with: <ul style="list-style-type: none"> (i) at least 1 gross tumour volume specified in the prescription; and (ii) 2 planning target volumes or 2 organ at risk dose goals or constraints specified in the prescription; or 	970.00

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- (c) the dosimetry is for a single phase 3 dimensional conformal treatment plan using 1 or more CT image volume datasets, with at least 1 gross tumour volume, 1 planning target volume and 3 organ at risk dose goals or constraints specified in the prescription; or
 - (d) image fusion with a secondary CT, MRI or PET image volume dataset is used to define target volume and organs at risk as specified in item 15559

(Item is subject to rule 94)

[30] Schedule 1, Part 3, item 16003, column 2

omit

not being a service associated with selective internal radiation therapy)

insert

not being a service to which item 35404, 35406 or 35408 applies or a service associated with selective internal radiation therapy)

[31] Schedule 1, Part 3, item 30214, column 2

omit

(H)

[32] Schedule 1, Part 3, item 31200, column 2*substitute*

Tumour (other than viral verrucae (common warts) and seborrheic keratoses), cyst, ulcer or scar (other than a scar removed during the surgical approach at an operation), removal by surgical excision (other than by shave excision) and suture from cutaneous or subcutaneous tissue or from mucous membrane, not being a service:

- (a) associated with a service to which item 45200, 45203 or 45206 applies; or
- (b) to which another item in this group applies

[33] Schedule 1, Part 3, after item 35363*insert in Subgroup 3*

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|-------|--|--------|
| 35400 | Vertebroplasty for the treatment of a painful osteoporotic vertebral compression fracture in a patient if: <ul style="list-style-type: none"> (a) conservative medical therapy has not controlled the pain; and (b) diagnostic imaging has confirmed that vertebroplasty is appropriate; when performed in association with a service to which item 57341, 57345 or 61109 applies (H) (Anaes.) | 571.90 |
| 35402 | Vertebroplasty for the treatment of a painful metastatic deposit or multiple myeloma in a vertebral body, when performed in association with a service to which item 57341, 57345 or 61109 applies (H) (Anaes.) | 571.90 |
| 35404 | Dosimetry, handling and injection of sir-spheres for selective internal radiation therapy of hepatic metastases that are secondary to colorectal cancer and not suitable for resection or ablation (not being a service to which item 35317, 35319, 35320 or 35321 applies) — for any particular patient, payable once only (H) (Anaes.) (Assist.)

(Item is subject to rule 87A) | 300.00 |

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- | | | |
|-------|--|--------|
| 35406 | Trans-femoral catheterisation of the hepatic artery to administer sir-spheres, for selective internal radiation therapy, to embolise the microvasculature of hepatic metastases, that are secondary to colorectal cancer and not suitable for resection or ablation (not being a service to which item 35317, 35319, 35320 or 35321 applies) (H) (Anaes.) (Assist.)

(Item is subject to rule 87A) | 703.85 |
| 35408 | Catheterisation of the hepatic artery via a permanently implanted hepatic artery port to administer sir-spheres, for selective internal radiation therapy, to embolise the microvasculature of hepatic metastases, that are secondary to colorectal cancer and not suitable for resection or ablation (not being a service to which item 35317, 35319, 35320 or 35321 applies) (H) (Anaes.) (Assist.)

(Item is subject to rule 87A) | 528.00 |

[34] Schedule 1, Part 3, item 35616, column 2

omit

by microwave or thermal balloon,

insert

by microwave, thermal balloon or radiofrequency
electrosurgery,

[35] Schedule 1, Part 3, item 36836, column 2

omit

37206 or 37215

insert

37206, 37215, 37230 or 37233

[36] Schedule 1, Part 3, item 36842, column 2*omit*

37203 or 37206

insert

37203, 37206, 37230 or 37233

[37] Schedule 1, Part 3, item 37224, column 2*omit*

37208 or 37215

insert

37208, 37215, 37230 or 37233

[38] Schedule 1, Part 3, after item 37224*insert*

37230	Prostate, high-energy transurethral microwave thermotherapy of, with or without cystoscopy, and with or without urethroscopy, and including services to which item 36854, 37203, 37206, 37207, 37208, 37303, 37321 or 37324 applies (Anaes.)	901.90
37233	Prostate, high-energy transurethral microwave thermotherapy of, with or without cystoscopy, and with or without urethroscopy, and including services to which item 36854, 37303, 37321 or 37324 applies, continuation of, within 10 days of the procedure described by item 37201, 37203, 37207 or 37230 which had to be discontinued for medical reasons (Anaes.)	483.00

[39] Schedule 1, Part 3, item 38353, column 2*substitute*

Permanent cardiac pacemaker, insertion, removal or replacement of — not being a service for the purpose of cardiac resynchronisation therapy (H) (Anaes.)

[40] Schedule 1, Part 3, after item 38362*insert*

38365 Permanent cardiac synchronisation device (including a cardiac synchronisation device that is capable of defibrillation), insertion, removal or replacement of (H) (Anaes.) 221.10

(Item is subject to rule 95)

38368 Permanent transvenous left ventricular electrode, insertion, removal or replacement of through the coronary sinus, for the purpose of cardiac resynchronisation therapy, including right heart catheterisation and any associated venogram of left ventricular veins — not being a service associated with a service to which item 35200 or 38200 applies (H) (Anaes.) 1059.85

(Item is subject to rule 95)

[41] Schedule 1, Part 3, item 38393, column 2*omit*

Automatic defibrillator generator,

insert

Automatic defibrillator generator (other than a defibrillator capable of cardiac resynchronisation therapy),

[42] Schedule 1, Part 3, after item 38653*insert*

38654 Permanent left ventricular electrode, insertion, removal or replacement of via open thoracotomy, for the purpose of cardiac resynchronisation therapy (H) (Anaes.) (Assist.) 1059.85

(Item is subject to rule 95)

[43] Schedule 1, Part 3, item 47684, column 2*omit*

calipers

insert

calipers or halo

[44] Schedule 1, Part 3, items 47687 to 47693, column 2*omit*

callipers,

insert

calipers or halo,

[45] Schedule 1, Part 4, item 12*omit*

therapy, for hepatic metastases

insert

therapy for any condition other than hepatic metastases that are secondary to colorectal cancer

[46] Further amendments — Schedule 1, Part 3

<i>Item</i>	<i>omit</i>	<i>insert</i>
348	45.30	109.70
350	101.85	151.45
352	45.30	109.70
501	14.40	29.60
503	31.45	50.00
507	59.70	84.05
511	87.90	118.85
515	140.70	184.05
519	93.95	126.50

<i>Item</i>	<i>omit</i>	<i>insert</i>
520	187.95	243.05
530	313.20	398.35
532	438.40	553.60
534	563.80	709.10
536	626.50	786.85

Note

1. All legislative instruments and compilations are registered on the Federal Register of Legislative Instruments kept under the *Legislative Instruments Act 2003*. See www.frli.gov.au.