

EXPLANATORY STATEMENT

Select Legislative Instrument 2010 No. 66

Health Insurance Act 1973

Health Insurance (General Medical Services Table) Amendment Regulations 2010 (No. 3)

Subsection 133(1) of the *Health Insurance Act 1973* (the Act) provides that the Governor-General may make regulations, not inconsistent with the Act, prescribing all matters required or permitted by the Act to be prescribed, or necessary or convenient to be prescribed for carrying out or giving effect to the Act.

Part II of the Act provides for the payment of Medicare benefits for professional services rendered to eligible persons. Section 9 of the Act provides that Medicare benefits are calculated with reference to the fees for medical services set out in prescribed tables.

Subsection 4(1) of the Act provides that the regulations may prescribe a table of medical services (other than diagnostic imaging services and pathology services) which sets out items of medical services, the fees applicable for each item, and rules for interpreting the table. The *Health Insurance (General Medical Services Table) Regulations 2009* (the Principal Regulations) currently prescribe such a table.

The principal purpose of the Regulations is to put into effect recommendations from the *MBS Review of Primary Care Items* (the Review) undertaken in 2009. The remaining amendments strengthen Medicare by ensuring that the Medical Benefits Schedule (the MBS) continues to reflect up-to-date medical practice.

The Review recommended consolidating and simplifying primary care items for general attendance and after-hours consultation, health assessments and chronic disease management. The net effect of the changes would be to reduce the number of primary care items from 85 to 33.

Details of the Regulations are set out in the Attachment.

The Act specifies no conditions which need to be met before the power to make the Regulations is exercised.

Among the organisations consulted during the Review were the Australian College of Rural and Remote Medicine, the Australian Medical Association, The Royal Australian College of General Practitioners, the Rural Doctors Association Australia, the National Aboriginal Community Controlled Health Organisations, the Department of Veterans' Affairs, Medicare Australia and the Professional Services Review.

The Regulations are a legislative instrument for the purposes of the *Legislative Instruments Act 2003*.

The Regulations commence on 1 May 2010.

**DETAILS OF THE HEALTH INSURANCE (GENERAL MEDICAL SERVICES TABLE)
AMENDMENT REGULATIONS 2010 (No. 3)**

Regulation 1 – Name of Regulations

This regulation provides that the title of the Regulations is be the *Health Insurance (General Medical Services Table) Amendment Regulations 2010 (No. 3)*.

Regulation 2 - Commencement

This regulation provides for the Regulations to commence on 1 May 2010.

Regulation 3 – Amendment of the *Health Insurance (General Medical Services Table) Regulations 2009*

This regulation provides that Schedule 1 amends the *Health Insurance (General Medical Services Table) Regulations 2009*.

Schedule 1 – Amendments

Rules of interpretation

Items [1] to [3] – Schedule 1, Part 2, subrule 3(1)

These items amend this subrule by amending the definition of *after-hours* for general practice consultations to extend the *after-hours* period; by including a definition of *immunisation recommended for a 4 year old child*, a term used in the restructured health check items; and by omitting the term *transitional hours* in line with the proposed amendment to the definition of *after-hours*.

Items [4] and [5] – Schedule 1, Part 2, rule 5A heading and subrule 5A(2)

These items amend rule 5A to include reference to new items 598 and 600 (as inserted by item [70] below), the purpose of the amendment being to ensure that general practitioners who are the subject of an adverse determination under the Professional Services Review Scheme may not receive medicare benefit at the higher, general practitioner level.

Items [6] and [7] – Schedule 1, Part 2, subrules 6(1) and 6(3) and rule 7

These items amend the rules regulating urgent after-hours attendance items to reflect their proposed reduction from ten to four items.

Item [8] – Schedule 1, Part 2, subrule 9(1)

This item amends a list of general practice consultation items, in line with the consolidation and deletion of redundant items.

Item [9] – Schedule 1, Part 2, paragraph 9(1)(e)

This item amends the prescribed content of general practice consultations by including a preventive health care element.

Item [10] – Schedule 1, Part 2, rule 11, table

This item amends a list of general practice consultation items, in line with the consolidation and deletion of redundant items.

Items [11] and [12] – Schedule 1, Part 2, subrules 12(1) and 12(2)

These items amend the *single service rule* to create an exception for items applicable to the treatment of patients in imminent danger of death, and also amend the list of items subject to the *single service rule* in line with the consolidation and reduction in the number of primary care items.

Item [13] – Schedule 1, Part 2, after subrule 12(2)

This item inserts a new subrule to regulate the conditions under which more than one medical practitioner might claim under items 160 to 164 for simultaneous attendances on a patient in imminent danger of death.

Items [14] and [15] – Schedule 1, Part 2, subrules 12(4) and 13(3)

These items amend a list of primary care items to include proposed new item 732 (as inserted by item [78] below), in line with the consolidation and deletion of redundant items.

Item [16] – Schedule 1, Part 2, rules 20 to 28

This item replaces current rules 20 to 28 with new rules to standardise the eligibility criteria for the 10 targeted health assessments, each targeting a different population group, and prescribe the content for the 10 health assessments: the *Healthy Kids Check*, the *type 2 diabetes risk evaluation* and the health assessments for, respectively, a person aged at least 45 but under 50, a person aged at least 75 years, a permanent resident of a residential aged care facility, a person with an intellectual disability, a refugee or other humanitarian entrant and an Aboriginal or Torres Strait Islander person.

Items [17] to [30] – Schedule 1, Part 2, rule 29 heading, subrule 29(2), rule 31, subrule 33(1), rule 34 heading, subrule 34(1), rule 35 heading, subrule 35(1), subrule 38(1) table, rules 39 to 41, subrule 43(1) and subrule 43(2)

These items amend a list of rules regulating *GP Management Plan and Team Care Review* items for chronic disease management, in line with the restructure of these items.

Item [31] – Schedule 1, Part 2, rule 63

This item replaces existing rule 63 to reflect the changes resulting from the amendment to the *after hours* period (as amended by item [1] above).

Item [32] – Schedule 1, Part 2, after rule 64

This item inserts new rules to require that a practice nurse or registered Aboriginal health worker who provides a *Healthy Kids Check* is properly qualified and supervised by a medical practitioner. The item also prevents a specific patient from receiving more than one *Healthy Kids Check* by being billed under different items.

Items [33] to [35] – Schedule 1, Part 2, definitions of *GP management plan*, *person with a chronic illness* and *team care arrangements*

These items replace reference to redundant items with reference to the new composite items.

Item [36] – Schedule 1, Part 2, rule 72

This item replaces existing rule 72 to require that a practice nurse who provides a service under items in Groups M2 and M12 is properly qualified and employed by a general practice.

Services and Fees

Item [37] – Schedule 1, Part 3, items 1 and 2

This item deletes two redundant items in line with the restructuring of urgent after-hours items.

Items [38] and [39] – Schedule 1, Part 3, item 4, column 2 and items 13 and 19

These amendments conflate three items for time-based general practice consultations in various locations into a restructured item 4.

Item [40] – Schedule 1, Part 3, item 23, column 2

This item provides increased emphasis on preventive health care for item 23.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Items [41] and [42] – Schedule 1, Part 3, items 24, 25 and 33, column 2

These items conflate three items for time-based general practice consultations in various locations into a restructured item 24, and also provide increased emphasis on preventive health care.

Items [43] and [44] – Schedule 1, Part 3, item 35, column 2 and item 36

These items provide increased emphasis on preventive health care for items 35 and 36.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Items [45] and [46] – Schedule 1, Part 3, item 37, column 2 and items 38 and 40

These items conflate three items for time-based general practice consultations in various locations into a restructured item 37, and also provide increased emphasis on preventive health care.

Items [47] and [48] – Schedule 1, Part 3, item 43, column 2 and item 44

These items provide increased emphasis on preventive health care for items 43 and 44.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Items [49] and [50] – Schedule 1, Part 3, item 47, column 2 and items 48 and 50

These items conflate three items for time-based general practice consultations in various locations into a restructured item 47, and also provide increased emphasis on preventive health care.

Item [51] – Schedule 1, Part 3, item 51, column 2

This item provides increased emphasis on preventive health care for item 51.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Items [52] to [55] – Schedule 1, Part 3, items 58 to 60 and item 65, column 2

These items conflate existing items for medical practitioner consultations in various locations into a reduced number of items.

The amendments will address GP concerns about the number and complexity of current MBS items. The MBS items referred to in items [52] to [55] are identical services with identical fees at different locations. For example, item [52] refers to the combination of MBS items [58] (home visit), [81] (consultation at an institution other than a hospital or residential aged care facility) and [87] (consultation at a hospital) into a single MBS item at all these locations. Items [53] to [55] make similar conflations.

The amendments will reduce the number of items in the MBS and simplify the Schedule without altering the provision of services available at these locations. MBS items which apply to services at residential aged care facilities have not been included in the MBS Review and will remain unchanged.

Items [56] and [57] – Schedule 1, Part 3 items 89 to 91, 97 and 98

These items repeal several redundant items in line with the restructuring of urgent after-hours items.

Item [58] – Schedule 1, Part 3, items 160 to 164, column 2

This item amends the descriptors for items 160 to 164 to allow more than one medical practitioner to each bill for simultaneous attendances on a patient in imminent danger of death.

Items [59] to [62] – Schedule 1, Part 3, items 193 and 195, column 2 and items 197 and 199

These items amend the descriptors for items 193 to 199, time-based attendances by a GP who is also a qualified medical acupuncturist, to provide an increased emphasis on preventive health care.

Items [63] to [68] – Schedule 1, Part 3, items 411 column 2, items 412, 413 and items 415 to 417, column 2

These items amend the descriptors for items 411 to 413 and 415 to 417, time-based attendances by a public health physician, to provide an increased emphasis on preventive health care.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Item [69] – Schedule 1, Part 3 Group A11 heading

This item amends a heading following the reduction in the number of item categories dealing with general practice attendance in an *after-hours* period.

Items [70] and [71] – Schedule 1, part 3, after item 536, and items 602 to 698

These items conflate 10 items which are differentiated by time of day, location of consultation and category of medical practitioner into four simplified *after-hours* items.

Item [72] – Schedule 1, Part 3 items 700 to 719

This item conflates 14 items for health assessments by a medical practitioner into five restructured items.

Items [73] to [77] – Schedule 1, Part 3, items 721, 723, 725, 727, 729 and 731

These items omit redundant items and insert references to their replacement items for management plans and case-conference items.

Item [78] – Schedule 1, Part 3, after item 731

This item inserts new item 732 which is a conflation of two existing items.

Item [79] – Schedule 1, Part 3, items 734 to 779

This item inserts four new items which are conflations of several existing items.

Items [80] to [85] – Schedule 1, Part 3, items 2501, 2503, 2506, and 2509 column 2 and items 2504 and 2507

These items amend the descriptors for items 2501 to 2509, time-based GP attendances where a cervical smear is taken from an unscreened or significantly under-screened person, to provide an increased emphasis on preventive health care.

Items [86] to [91] – Schedule 1, Part 3, items 2517 and 2518, column 2, item 2521, item 2522, column 2, item 2525 and item 2526, column 2

These items amend the descriptors for items 2517 to 2526, time-based GP attendances which complete the care cycle for a patient with established diabetes mellitus, to increase the emphasis on preventive health care.

Items [92] to [97] – Schedule 1, Part 3, items 2546 and 2547, column 2, item 2552, item 2553, column 2, item 2558 and item 2559, column 2

These items amend the descriptors for items 2546 to 2559, time-based GP attendances which complete the Asthma Cycle of Care, to increase the emphasis on preventive health care.

Item [98] – Schedule 1, Part 3, item 2712, column 2

This item rectifies an omission by subjecting item 2712 to the rule defining *associated medical practitioner*.

Item [99] – Schedule 1, part 3, items 5003 and 5007

This item conflates two items for time-based GP consultations in various locations into a restructured item 5003.

Item [100] – Schedule 1, Part 3, item 5020, column 2

This item provides increased emphasis on preventive health care for item 5020.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate

preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Item [101] – Schedule 1, Part 3, items 5023 and 5026

This item conflates two items for time-based GP consultations in various locations into a restructured item 5023, and also provides increased emphasis on preventive health care.

Items [102] and [103] – Schedule 1, Part 3, item 5028, column 2 and item 5040

These items provide increased emphasis on preventive health care for items 5028 and 5040.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Item [104] – Schedule 1, Part 3, items 5043 and 5046

This item conflates two items for time-based GP consultations in various locations into a restructured item 5043, and also provides increased emphasis on preventive health care.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Items [105] and [106] – Schedule 1, Part 3, items 5049, column 2 and item 5060

These items provide increased emphasis on preventive health care for items 5049 and 5060.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Item [107] – Schedule 1, Part 3, items 5063 and 5064

This item conflates two items for time-based GP consultations in various locations into a restructured item 5063, and also provides increased emphasis on preventive health care.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Item [108] – Schedule 1, Part 3, item 5067, column 2

This item provides increased emphasis on preventive health care for item 5067.

Currently rule 9(1) of Part 2 of the Principal Regulations sets out the requirements for a professional attendance. The amendments will include ‘the provision of appropriate preventive health care’ as an additional service that can be provided by a doctor during a professional attendance.

Items [109] to [113] – Schedule 1, Part 3, items 5220, 5223, 5227 and 5228, column 2 and items 5240 to 5248

These items conflate existing items for time-based medical practitioner consultations in various locations into a reduced number of items.

The amendments address the concerns of medical practitioners about the number and complexity of current MBS items. The MBS items referred to in items [109] and [110] are identical services with identical fees at different locations. Item [109] refers to the combination of MBS items 5220 (home visit) and 5240 (consultation at an institution other than a hospital or residential aged care facility) into a single MBS item. Item [110] refers to the combination of MBS items 5223 (home visit) and 5243 (consultation at an institution other than a hospital or residential aged care facility) into a single MBS item.

The amendments reduce the number of items in the MBS and simplify the Schedule without altering the provision of services available at these locations. MBS items which apply to services at residential aged care facilities have not been included in the MBS Review and will remain unchanged.

Item [114] – Schedule 1, Part 3, Group M5, heading

This item renumbers item 711 as 10986 and relocates it in a new group (*Services provided by a practice nurse or registered Aboriginal health worker on behalf of a medical practitioner*).

Item [115] – Schedule 1, Part 3, items 18354, 18356 and 18358

This item amends three existing items to permit the administration of botulinum toxin to adults with dynamic foot deformity.

Items [116] to [118] – Schedule 1, Part 3, items 30479, 32087 and 32093

These items amend three existing items to permit the use of argon plasma in the treatment of intestinal bleeding.

Item [119] – Schedule 1, Part 3, after item 36662

This item introduces six new items to permit the use of sacral nerve stimulation in the treatment of incontinence and urinary retention.