

Health Insurance (General Medical Services Table) Amendment Regulation 2013 (No. 1)¹

Select Legislative Instrument 2013 No. 12

I, QUENTIN BRYCE, Governor-General of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following regulation under the *Health Insurance Act 1973*.

Dated 14 February 2013

QUENTIN BRYCE Governor-General

By Her Excellency's Command

TANYA PLIBERSEK Minister for Health

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1 Name of regulation

This regulation is the *Health Insurance (General Medical Services Table) Amendment Regulation 2013 (No. 1).*

2 Commencement

This regulation commences as follows:

- (a) on 1 March 2013—sections 1 to 3 and Schedule 1;
- (b) on 1 May 2013—Schedule 2.

3 Amendment of Health Insurance (General Medical Services Table) Regulation 2012

Schedules 1 and 2 amend the *Health Insurance (General Medical Services Table) Regulation 2012.*

Schedule 1 Amendments commencing on 1 March 2013

(section 3)

[1] Schedule 1, subclause 1.2.8 (1)

after 11721,

insert

11727,

[2] Schedule 1, after item 109

insert

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- Initial professional attendance of 10 minutes or less in duration on a patient by a specialist in the practice of his or her speciality if:
 - (a) the attendance is by video conference; and
 - (b) the patient is not an admitted patient; and
 - (c) the patient:
 - (i) is located both:
 - (A) within a telehealth eligible area; and
 - (B) at the time of the attendance—at least 15 kms by road from the specialist; or
 - (ii) is a care recipient in a residential care service; or
 - (iii) is a patient of:
 - (A) an Aboriginal Medical Service; or
 - (B) an Aboriginal Community Controlled Health Service;

for which a direction made under subsection 19 (2) of the Act applies; and

(d) no other initial consultation has taken place for a single course of treatment

[3] Schedule 1, Group A4, item 113

omit

[4] Schedule 1, item 133, paragraph (d)

after

physician

insert

or locum tenens

[5] Schedule 1, item 11503

substitute

11503 Measurement of the:

138.65

- (a) mechanical or gas exchange function of the respiratory system; or
- (b) respiratory muscle function; or
- (c) ventilatory control mechanisms

Various measurement parameters may be used including any of the following:

- (a) pressures;
- (b) volumes;
- (c) flow;
- (d) gas concentrations in inspired or expired air;
- (e) alveolar gas or blood;
- (f) electrical activity of muscles

The tests being performed under the supervision of a specialist or consultant physician or in the respiratory laboratory of a hospital. Each occasion at which one or more of such tests are performed, not being a service associated with a service to which item 22018 applies

57.75

75.70

75.70

[6] Schedule 1, items 11602 to 11605

substitute

- Investigation of venous reflux or obstruction in one or more limbs at rest by CW Doppler or pulsed Doppler involving examination at multiple sites along each limb using intermittent limb compression or Valsalva manoeuvres, or both, to detect prograde and retrograde flow, other than a service associated with a service to which item 32500 or 32501 applies—hard copy trace and written report, the report component of which must be performed by a medical practitioner, maximum of 2 examinations in a 12 month period, not to be used in conjunction with sclerotherapy
- Investigation of chronic venous disease in the upper and lower extremities, one or more limbs, by plethysmography (excluding photoplethysmography)—examination, hard copy trace and written report, not being a service associated with a service to which item 32500 or 32501 applies
- Investigation of complex chronic lower limb reflux or obstruction, in one or more limbs, by infrared photoplethysmography, during and following exercise to determine surgical intervention or the conservative management of deep venous thrombotic disease—hard copy trace, calculation of 90% recovery time and written report, not being a service associated with a service to which item 32500 or 32501 applies

[7] Schedule 1, items 11708 and 11709

substitute

11708 Continuous ECG recording of ambulatory patient for 12 or more hours (including resting ECG and the recording of parameters), not in association with ambulatory blood pressure monitoring, involving microprocessor based analysis equipment, interpretation and report of recordings by a specialist physician or consultant physician

127.90

Not being a service to which item 11709 applies

The changing of a tape or batteries does not constitute a separate service. Where a recording is analysed and reported on and a decision is made to undertake a further period of monitoring, the second episode is regarded as a separate service

11709 Continuous ECG recording (Holter) of ambulatory patient for 12 or more hours (including resting ECG and the recording of parameters), not in association with ambulatory blood pressure monitoring, utilising a system capable of superimposition and full disclosure printout of at least 12 hours of recorded ECG data, microprocessor based scanning analysis, with interpretation and report by a specialist physician or consultant physician

167.45

The changing of a tape or batteries does not constitute a separate service. Where a recording is analysed and reported on and a decision is made to undertake a further period of monitoring, the second episode is regarded as a separate service

[8] Schedule 1, after paragraph 11820 (e)

insert

- (f) the service has not been provided to the same patient:
 - (i) more than once in an episode of bleeding, being bleeding occurring within 6 months of the prerequisite upper gastrointestinal endoscopy and colonoscopy (any bleeding after that time is considered to be a new episode); or
 - (ii) on more than 2 occasions in any 12 month period

[9] Schedule 1, subclause 2.43.5 (4)

before 55054

insert

55026 or

[10] Schedule 1, after clause 2.44.15

insert

2.44.15A Sacral nerve stimulation

Sacral nerve stimulation under items 32213 to 32218 for faecal incontinence is contraindicated in:

- (a) patients under 18 years of age; and
- (b) patients 18 years of age or older who:
 - (i) are medically unfit for surgery; or
 - (ii) are pregnant or planning pregnancy; or
 - (iii) have irritable bowel syndrome; or
 - (iv) have congenital anorectal malformations; or
 - (v) have active anal abscesses or fistulas; or
 - (vi) have anorectal organic bowel disease, including cancer; or
 - (vii) have functional effects of previous pelvic irradiation; or
 - (viii) have congenital or acquired malformations of the sacrum; or
 - (ix) have had rectal or anal surgery within the previous 12 months.

2.44.15B Artificial bowel sphincter

An artificial bowel sphincter under items 32220 and 32221 is contraindicated in:

(a) patients with inflammatory bowel disease, pelvic sepsis, pregnancy, progressive degenerative diseases or a scarred or fragile perineum; and

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- (b) patients who have had an adverse reaction to radiopaque solution; and
- (c) patients who engage in receptive anal intercourse

[11] Schedule 1, after item 32021

insert

32023 Endoscopic insertion of stent or stents for large bowel obstruction, stricture or stenosis, including colonoscopy and any image intensification, where the obstruction is due to:

555.35

- (a) a pre-diagnosed colorectal cancer, or cancer of an organ adjacent to the bowel; or
- (b) an unknown diagnosis (Anaes.)

[12] Schedule 1, item 33806

substitute

Embolectomy or thrombectomy (including the infusion of thrombolytic or other agents) from an artery or bypass graft of extremities, or embolectomy of abdominal artery via the femoral artery, item to be claimed once per extremity, regardless of the number of incisions required to access the artery or bypass graft (Anaes.) (Assist.)

812.15

[13] Schedule 1, subparagraph 2.44.16 (a) (iii)

omit

vernicular

insert

ventricular

[14] Further amendments—specialist, consultant physician or psychiatrist

Items 2100 to 2220 of Schedule 1 are amended by omitting 'specialist, consultant physician or psychiatrist' and inserting 'specialist or consultant physician'.

[15] Further amendments—specialist, physician or psychiatrist

- (1) Clauses 2.18A.4 and 2.30.6 of Schedule 1 are amended by omitting 'specialist, physician or psychiatrist' and inserting 'specialist or consultant physician'.
- (2) Items 2100 to 2199 of Schedule 1 are amended by omitting 'specialist, physician or psychiatrist' and inserting 'specialist or physician'.

[16] Further amendments—(H)

Items 13870 to 13888 of Schedule 1 are amended by inserting '(H)' at the end of column 2.

[17] Further amendments—(H) (Anaes.)

Items 30165 to 30174, 30189, 30210, 45522, 45556, 45638 to 45644, and 52342 to 52375 of Schedule 1 are amended by omitting '(Anaes.)' and inserting '(H) (Anaes.)'.

Schedule 2 Amendment commencing on 1 May 2013

(section 3)

[1] Schedule 1, after item 32517

insert

- 32520 Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great (long) or small (short) saphenous vein of one leg (and major tributaries of saphenous veins as necessary), using a laser probe introduced by an endovenous catheter, where it is documented by duplex ultrasound that the great or small sapheous vein (whichever is to be treated) demonstrates reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) but not including radiofrequency diathermy or radiofrequency ablation, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 and 32507 (Anaes.)
- Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great (long) and small (short) saphenous vein of one leg (and major tributaries of saphenous veins as necessary), using a laser probe introduced by an endovenous catheter, where it is documented by duplex ultrasound that the great and small sapheous veins demonstrate reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both) but not including radiofrequency diathermy or radiofrequency ablation, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 and 32507 (Anaes.)

793.30

533.60

Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great (long) or small (short) saphenous vein of one leg (and major tributaries of saphenous veins as necessary), using a radiofrequency catheter introduced by an endovenous cathether, where it is documented by duplex ultrasound that the great or small saphenous vein (whichever is to be treated) demonstrates reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both), but not including endovenous laser therapy, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 and 32507 (Anaes.)

533.60

Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great (long) and small (short) saphenous vein of one leg (and major tributaries of saphenous veins as necessary), using a radiofrequency catheter introduced by an endovenous cathether, where it is documented by duplex ultrasound that the great and small saphenous veins demonstrate reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare (including excision or injection of either tributaries or incompetent perforating veins, or both), but not including endovenous laser therapy, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 and 32507 (Anaes.)

793.30

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