

- Revised item descriptors

Suggestions for new/revised descriptors should provide an accurate description of the service covered. Definitions such as 'wide' or 'deep', 'minor' or 'major', 'short' or 'long' etc. should be avoided. Necessary restrictions between the new and existing items must be identified. Relevant clinical standards or additional specialist qualification must be identified.

- Advice as to whether surgical assistance for a procedure is warranted

The justification for a surgical assistant should be included.

- An estimate of annual utilisation of the proposed new/revised item

This should be based on expected or actual assessment of utilisation of the new item.

- A proposed fee (if a revised fee is being considered)

The derivation of the fee should be explained, eg. based on costing data or fee relativity to existing items. Any offsets should be identified, eg. other items that would not be claimed if the new/revised item was introduced.

- An outline of consultations already undertaken with other relevant craft groups

Many areas of the Schedule are utilised by more than one craft group, and the MBCC process is designed to ensure that all relevant groups are involved in the consultative process.

Any consultation that has taken place should be outlined, and if possible, a statement indicating

the level of agreement to the proposal among the relevant craft groups should be provided.

It should be noted that, following the introduction of new items or substantial amendments to an area of the Schedule, it is usual for a review of the changes to take place after two years.

While it is not the intention of this document to deny direct communication between colleges, craft groups or associations/societies and the Department on various issues, and vice versa, in general it is desirable and usually essential that there be AMA involvement in the consultation process.

Preferably submissions should be forwarded, in the first instance, to:

Director
Medical Practice Department
Australian Medical Association
PO Box E115
KINGSTON ACT 2604

Telephone: (02) 6270 5400
Facsimile: (02) 6270 5499

Guidelines for Preparation of Submissions to the Medicare Benefits Consultative Committee (MBCC)



Australian Government

Department of Health and Ageing



AMA

Guidelines for Preparation of Submissions to the Medicare Benefits Consultative Committee (MBCC)

The MBCC is an informal consultative forum established by agreement between the Minister for Health and Ageing and the Australian Medical Association (AMA) to facilitate discussion on reviews of the General Medical Services Table (GMST) of the Medicare Benefits Schedule (MBS). (Reviews of the Diagnostic Imaging and Pathology Services Tables are conducted under other arrangements.) Representation is drawn from the Department of Health and Ageing, the Health Insurance Commission, the AMA and relevant craft groups of the medical profession.

The major function of the consultative process is to review particular services or groups of services within the Schedule, including consideration of new items and appropriate fee levels, to ensure that the Schedule reflects and encourages appropriate clinical practice.

It is Government policy that reviews of Schedule items conducted under the auspices of the MBCC will be on a cost neutral basis, except for genuinely new items where consideration will be given to providing additional funding.

Proposals for listing of new procedures

A specific item for a new procedure is not included in the Schedule until the safety and efficacy of the procedure have been established. Through a government initiative to strengthen the evidence base of the Schedule, the Medicare Services Advisory Committee (MSAC) has been established to advise the Minister for Health and Ageing on the strength of evidence pertaining to new and emerging medical technologies and procedures in relation to their safety, effectiveness and cost effectiveness, and under what circumstances public funding should be supported for these services.

MSAC's activities complement the MBCC process. Accordingly, applications for the inclusion of new services in the GMST of the Schedule should be referred to MSAC for independent evaluation. The MSAC application process differs from the requirements for submissions to MBCC in that applications for evaluation of new procedures are accepted from individuals and medical industry, as well as the medical profession.

Following approval by the Minister of an MSAC recommendation for public funding of a new procedure, an appropriate MBS listing for the service will be negotiated through the MBCC process.

Further information on MSAC's terms of reference, membership, and application and assessment processes and related activities can be found at its Internet site: www.health.gov.au/mpsd/msac. Contact with MSAC can also be made via e-mail on msac.secretariat@health.gov.au or by phoning the MSAC secretariat on 1800 020 103.

Proposals for revised or new item descriptors

Individual practitioners seeking changes to the GMST of the Schedule should seek the support of their relevant craft group or association which can pursue the matter on their behalf through the AMA to the Medicare Benefits Branch of the Department.

An MBCC submission has the capacity to impact significantly on government outlays and must provide information to allow informed decisions to be made. While this can often be seen as bureaucratic to the profession, it is a necessary part of the accountability process for public funds.

While the complexity of information provided will reflect the extent of the review being requested, submissions for amendment to items of service already listed in the GMST should generally include details as listed below.

While reviews, in the main, relate to therapeutic procedures, the Schedule items covering diagnostic and non-procedural therapeutic items on the Schedule may also require review from time to time.

Requirements for submissions

- The rationale for the change
For example, the change may be a result of developments in medical practice.
- An outline of surgical procedures to be covered
Advice should include a description of the procedure, procedural times, and duration and complexity of aftercare required.
- Supporting evidence of the safety and efficacy of procedures
Relevant journal or review articles, or literature references, should be attached. This will assist in assessing whether a particular procedure may need to be evaluated by MSAC. Identification of approval by relevant regulatory authorities where relevant must be included.