



SPINAL SURGERY

The Australian Government is making changes to Medicare-funded spinal surgery services, following recommendations from the Medicare Benefits Schedule (MBS) Review Taskforce.

What are the changes?

The Government's changes to the MBS items for spinal surgery will replace existing spinal surgery services with items that reflect contemporary surgical practice. The changes include:

- replacing the existing surgical schedule of 74 spinal services with around 60 service items;
- removing three services identified as obsolete (an item for intradiscal injection of chymopapain, and two items for manipulation of spine, performed in an operating theatre); and
- introducing new rules to ensure that claiming is consistent and appropriate.

The Government's changes will also clarify that MBS items for spinal fusion must not be claimed for treatment of uncomplicated axial chronic lower back pain.

Why are these changes being made?

The revised spinal surgery listings were recommended by the independent MBS Review Taskforce, following a comprehensive review of the MBS items by clinicians, health system experts and consumers.

The existing spinal surgery schedule is outdated and ambiguous. The revised spinal surgery listings better describe the procedures being performed by spinal surgeons, reflecting the contemporary practice of spinal surgery.

The changes will also help to ensure the ongoing sustainability of the MBS by preventing inappropriate claiming of multiple MBS items.

The Government's decision to clarify that MBS items for spinal fusion must not be claimed for treatment of uncomplicated axial chronic lower back pain is in accordance with the recommendation in the February 2018 Choosing Wisely Australia report that lumbar spinal fusion is not recommended for the treatment of this condition. Choosing Wisely Australia is an industry-led initiative facilitated by NPS MedicineWise.

What does this mean for patients?

Patients will receive Medicare rebates for spinal surgery services that are clinically appropriate and reflect modern clinical practice.

Patients should also no longer receive different Medicare rebates for the same operations.

What does this mean for providers?

Providers will have access to a logical spinal surgery schedule of items that clearly describes contemporary spinal surgery practice.

Providers will receive further information regarding these changes closer to the implementation date of 1 November 2018.