s22 From: Friday, 19 July 2024 1:06 PM Sent: s22 To: Subject: FW: Seeking feedback on proposed changes to Cardiothoracic Surgery items [SEC=OFFICIAL] ED 1982 GED ARE Kind regards s22 Assistant Director **MBS Clinical Policy Section** P: 02 6289s22 E: S22 @health.gov.au **MBS Policy & Reviews** Medicare Benefits & Digital Health Australian Government Department of Health and Aged Care From: s22 Sent: Thursday, January 13, 2022 8:28 AM s47F **To:** \$47F @sa.gov.au>; ANZSCTS s47F (Health) s47F @anzscts.org>; s47F ANZSCTS <\$47F @svha.org.au> Cc: \$22 health.gov.au>; Cardiac Services <cardiacservices@health.gov.au>; MBS Clinical Policy < MBSClinicalPolicy@health.gov.au> Subject: RE: Seeking feedback on proposed changes to Cardiothoracic Surgery items [SEC=OFFICIAL] Hi All, I will add the suggested change to clause (a) as suggested for 38513. Regards s22 (Health) s47F From: \$47F @sa.gov.au> Sent: Wednesday, 12 January 2022 6:54 PM To: ANZSCTS s47F ANZSCTS s47F anzscts.org>; s47F svha.org.au> s22 Cc: s22 health.gov.au> Subject: Re: Seeking feedback on proposed changes to Cardiothoracic Surgery items [SEC=OFFICIAL] REMINDER: Think before you click! This email originated from outside our organisation. Only click links or open attachments if

Thanks S22

These are the changes I discussed with <sup>\$22</sup> following our webinar and other feedback

#### My only comment would be re 38513

you recognise the sender and know the content is safe.

Part a. proposed change should also say ' billable once per case" or something similar.

Otheriwse very happy

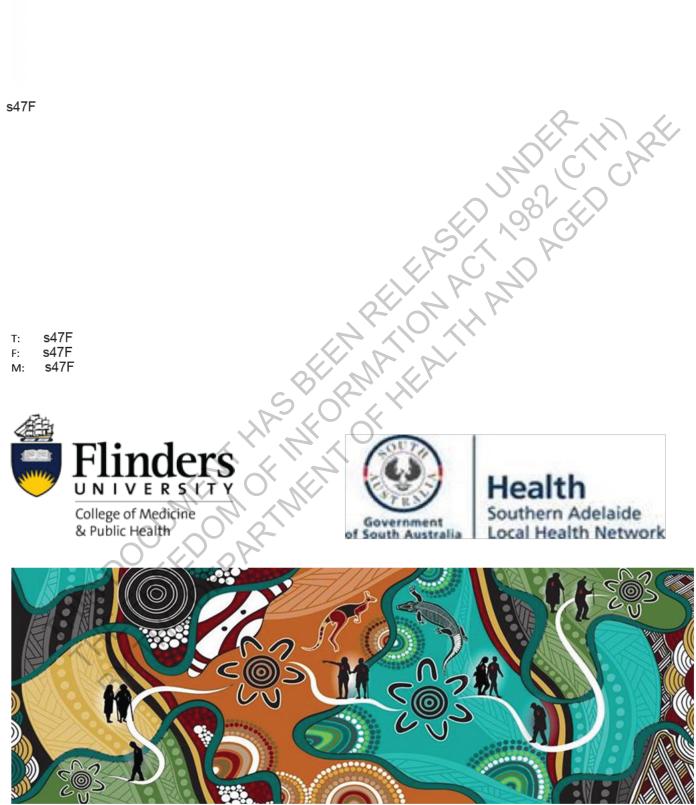
I have copied \$22 into this response – Thanks \$22

Thanks

s

4 s47F

s47F



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# FOI 5277 - Document 1

#### its contents to any other party or take action in reliance of any material contained within. If you have received this message in error, please notify the sender immediately by return email informing them of the mistake and delete all copies of the message from your computer system.

From: ANZ	SCTS \$47F	anzscts.org>			
Date: Mon	day, 10 January 2022 at 1:44	1 pm			
To: "s47F		sa.gov.a	au>, s47F	ANZSCTS	
s47F	@svha.org.au>		_ ·		
Subject: E	W: Seeking feedback on prop	osed changes to Ca	ardiothoracic S		
Subjectin	W. Seeking reedback on prop			argery items [520-011	
Dears47F					
				12-11	
All the best	for 2022.			MDECTH	R
Refer below	۷.			JANO	
s22	now seeking feedback/confirm	ation of the proposed	l changes that v	will be put forward to the	e Govt?
Please let m	ne know by 28 January or earlie	er	1 PC	K CP	
regards			NY P	A	
From: Card	iac Services < <u>cardiacservices@</u>	health.gov.au>			
	lay, 10 January 2022 1:42 PM		$( \ )$		
	Services < cardiacservices@hea	alth.gov.au> \$4 @am	a.com.au:s47F	@pha.org.au;	
	a.org.au1 <admin@pha.org.au< td=""><td></td><td>oha.org.au; info</td><td></td><td></td></admin@pha.org.au<>		oha.org.au; info		
s47F	@ozemail.com.au; s47F			F @membershealth.co	m au:
		@cha.org.au; s47F		pitalsaustralia.net.au;	inida,
s47F	@hambs.com.au; admin@hai				75CTS <b>5</b> 47
s47F	@anzscts.org>; receptio				
	@anzsvs.org.au>		, <u>concecture</u>	, angeotionerg,	
	Health Industry Branch < <u>PHI@</u>	ealth yoy aus: MBS (	linical Policy <	MBSClinicalPolicy@healt	h gov aus:
	vices < <u>cardiacservices@health</u> .			Wibbennieun oney@neure	nigovidu <sup>2</sup> ,
	eking feedback on proposed ch		cic Surgery item		
Subject. Set	exing recubick on proposed en		cic surgery item		
Dear stakeh	nolder	>			
Re:	Proposed changes to the Card	iothoracic Surgery ite	ems to be put f	orward to Government f	for
	sideration.	0,			
The Depart	ment of Health has received fe	edback from the relev	/ant peak surgic	cal Societies regarding so	ome minor
	consequences in the following				
Car	diothoracic Surgery items (imp	lemented 1 July 2021	)		

In order to inform consideration by Government, the Department is seeking input on the proposed changes outlined in red:

### **Cardiothoracic Surgery**

Category 3 – Therapeutic Procedures	Group 6 – Cardiothoracic
MBS item number 38513	

Creation of Y-graft, T-graft and graft-to-graft extensions , with micro-arterial or micro-venous anastomosis using microsurgical techniques, if:

a) the service is for one or more anastomoses; and

\_\_\_\_\_

b) the service is performed in conjunction with a service to which item 38502 applies (H) (Anaes.) (Assist.)

Fee: \$1,040.55

This purpose of this proposed change is to clarify that item 38513 is to only be claimed once in the same occasion of service.

Group 6 – Cardiothoracic
coronary artery bypass if:
it; and
ary surgeon or surgical assistant
i

This proposed new service is for a provider (other than the primary surgeon or surgical assistant) that harvests additional arterial conduits e.g. radial artery during coronary artery bypass grafting.

For items 38516 and 38517 the purpose of the proposed change is a redistribution of fees to reflect the complexity and time differences between a simple and complex valve repair.

Category 3 – Therapeutic Procedures Group 6 – Cardiothoracic
MBS item number 38516
Simple valve repair:
(a) with or without annuloplasty; and
(b) including quadrangular resection, cleft closure or alfieri; and
(c) including retrograde cardioplegia (if performed);
other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418,
38806 or 45503 applies (H) (Anaes.) (Assist)
Fee: \$2600.00 (proposed new fee)

Category 3 – Therapeutic Procedures	Group 6 – Cardiothoracic	
MBS item number 38517		
Complex valve repair:		
(a) with or without annuloplasty; and		
(b) including retrograde cardioplegia (if performed); and		
<ul> <li>(c) including one of the following:</li> <li>(i) neochords;</li> <li>(ii) chordal transfer;</li> <li>(iii) patch augmentation;</li> <li>(iv) multiple leaflets;</li> </ul>		
other than a service associated with a service to which ite 38806 or 45503 applies (H) (Anaes.) (Assist)	em 11704, 11705, 11707, 11714, 18260, 33824, 38418,	

For items 38555 and 38557 the purpose of the proposed change is a redistribution of fees to reflect the complexity and time differences between simple and complex aortic arch repair or replacement.

Category 3 – Therapeutic Procedures	Group 6 – Cardiothoracic		
MBS item number 38555			
Simple replacement or repair of aortic arch, performed in conjunction with a service to which item 38550, 38553, 38554, 38556, 38568 or 38571 applies, including:			
(a) deep hypothermic circulatory arrest; and			
(b) peripheral cannulation for cardiopulmonary bypass; and			
(c) antegrade or retrograde cerebral perfusion (if performed);			
other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38603, 38806 or 45503 applies (H) (Anaes.) (Assist.) Fee: \$2,600.00 (proposed new fee)			
	SCY NºS GV		
Category 3 – Therapeutic Procedures	Group 6 – Cardiothoracic		
MBS item number 38557			
Complex replacement or repair of aortic arch, performed 38553, 38554, 38556, 38568 or 38571 applies, including:			
(a) debranching and reimplantation of head and neck ves	sels; and		
(b) deep hypothermic circulatory arrest; and			
(c) peripheral cannulation for cardiopulmonary bypass; and			
(d) antegrade or retrograde cerebral perfusion (if perform	ed);		
other than a service associated with a service to which ite 38806 or 45503 applies (H) (Anaes.) (Assist.) Fee: \$4,500.00 (proposed new fee)	em 11704, 11705, 11707, 11714, 18260, 33824, 38418,		

The Department is seeking feedback from your organisation on the proposed changes to the items to ensure that it meets the clinical requirements of the service and to avoid any unintended consequences for patients, providers, hospitals or insurers. Please provide any feedback you have to <u>MBSClinicalPolicy@health.gov.au</u> by no later than 1 February 2022.

Kind regards s22

Cardiac and Vascular Services Assistant Director MBS Clinical Policy Section P: 02 6289s22 E: s22 <u>@health.gov.au</u> MBS Reviews Unit Medical Benefits Division Australian Government Department of Health

5

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From: Sent: To: Subject: Attachments:	s22 Friday, 19 July 2024 1:03 PM s22 FW: Item mapping MBS Changes ~ 1 Jan and 1 March 2022 MYEFO announcement - Media release 13 Dec 2021 [SEC=OFFICIAL] Cardiac Surgery item descriptors budget 22-23.docx
Kind regards s22	
	health.gov.au
MBS Policy & Reviews Medicare Benefits & Digital Healt	
Australian Government Departme	
From: S47F	sa.gov.au>
Sent: Wednesday, December 15,	
<b>To:</b> \$22	health.gov.au>; 'ANZSCTS s47F anzscts.org>; s47F
@svha.org.au>	
Cc: \$22	health.gov.au>
	hanges ~ 1 Jan and 1 March 2022 MYEFO announcement - Media release 13 Dec
2021 [SEC=OFFICIAL]	
Thanks \$22	L'H'I
I have attached Word doc with so	me suggestions
Re text below – have added my th	oughts in red
Enjoy the break Cheers s 4	RA
As discussed. Please provide com	ment on the descriptors in the attachment.

**For the following:** can you provide your suggested fees for each item to reflect your comments (fix the imbalances to incentivise advanced skills and time spent): **MV Repair codes** 

As discussed , my concern here is the combination of Annuloplasty into the repair codes may relatively undervalue the procedure compared to MV Replacement.

38516 – Simple Repair	\$2509.25	2600.00
38517 – Complex Repair	\$3055.85, versus	3200.00

38499 – MVR	\$2112.20	
38490 – Sub valve resusp	\$577.00	(MPR = ~\$279.00) – Total \$2391.20

This provides stepwise increase from base (MVR 2112.00) to simple repair then complex repair and would reflect the same increase in technical skill, difficulty, and time for these procedures.

There is a small step to simple repair from replacement, yet different skill sets and usually a significant increase in time and effort. Best practice should incentivise Repair. The step from simple to complex is reasonable.

#### **Aortic Arch Surgery**

38555 - Simple Arch\$3374.002600.0038557 - Complex Arch\$3894.304500.00

As discussed, the step from Simple to Complex arch is imbalanced

Simple arch is basically a bevelled anastomosis across the proximal arch under Deep Hypothermic Circulatory arrest. Complex Arch is Axillary artery and femoral artery cannulation, Hypothermic Arrest, Debranch head and neck vessels and re-anastomose, plus arch and proximal anastomoses, with reconnection of the debranched arch inflow. Clearly a different operation, which usually takes 6 – 8 hours at most centres.

I would suggest Simple is "overs" and Complex is "unders" and could be easily realigned.

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s47F



College of Medicine & Public Health





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From: S22

<u>health.gov.au</u>>

Date: Wednesday, 15 December 2021 at 3:18 pm

To: "s47F

<s47F <u>@anzscts.org</u>>, 's47F

<u>sa.gov.au</u>>, 'ANZSCTS s47F

<u>svha.org.au</u>> health.gov.au>

Cc: "s22

**Subject:** RE: Item mapping MBS Changes ~ 1 Jan and 1 March 2022 MYEFO announcement - Media release 13 Dec 2021 [SEC=OFFICIAL]

His47F

I am off until next Friday. If you could reply all and <sup>S22</sup> in my team will progress your advice so we can do costings for the item descriptors and the outstanding queries ANZSCTS has on the valve price relativities. No problems though if you need to ring me for anything.

Kind regards s22

Cardiac and Vascular Services Assistant Director Clinical Committee Support and Implementation P: 02 6289<sup>s22</sup> E: <sup>s22</sup> @health.gov.au

**MBS Reviews Unit** Medical Benefits Division Australian Government Department of Health From: s47F sa.gov.au> Sent: Wednesday, 15 December 2021 9:01 AM health.gov.au>; 'ANZSCTS s47F To: \$22

anzscts.org>; s47F

#### svha.org.au>

Subject: Re: Item mapping MBS Changes ~ 1 Jan and 1 March 2022 MYEFO announcement - Media release 13 Dec 2021 [SEC=OFFICIAL]

репати REMINDER: Think before you click! This email originated from outside our organisation. Only click links or open attachments if you recognise the sender and know the content is safe.

Thanks \$22

Your efforts to turn these around is appreciated Especially 519 and 643

Cheers s47F

s47F



College of Medicine & Public Health



#### FOI 5277 - Document 2



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''s47F

From: "s22

health.gov.au>

Date: Monday, 13 December 2021 at 4:16 pm To: 'ANZSCTS s47F anzscts.org> s47F

@sa.gov.au>, 's47F

(Health)" svha.org.au>

Subject: FW: Item mapping MBS Changes ~ 1 Jan and 1 March 2022 MYEFO announcement - Media release 13 Dec 2021 [SEC=OFFICIAL] SFORM OF

Kind regards s22

Cardiac and Vascular Services Assistant Director **Clinical Committee Support and Implementation** E: s22 P: 02 6289s22 @health.gov.au **MBS Reviews Unit Medical Benefits Division** 

Australian Government Department of Health

From: MBS Clinical Policy < MBSClinicalPolicy@health.gov.au> Sent: Monday, 13 December 2021 4:44 PM @pha.org.au's47F To: s47 @ama.com.au's47 @ama.com.au>; s47F @pha.org.au>; s47F @apha.org.au; info@apha.org.au; s47F @ozemail.com.au' <s47F @ozemail.com.au>;s47F @ramsayhealth.com.au' s47F @ramsayhealth.com.au>; 'info@membershealth.com.au' <info@membershealth.com.au>; s47F @cha.org.au's47F @cha.org.au>;s47F @dayhospitalsaustralia.net.au' s11C @dayhospitalsaustralia.net.au>; s47F @hambs.com.au; 'admin@hambs.com.au' <admin@hambs.com.au>; \$4 @ahsa.com.au' \$47 @ahsa.com.au>; 'assistance@ahsa.com.au' <assistance@ahsa.com.au>; 'consultations@ama.com.au' <consultations@ama.com.au>; s47F @sydney.edu.au's47F @sydney.edu.au>; info@csanz.edu.au; 'racgp@org.au' <racgp@org.au>; 'info@anzscts.org' <info@anzscts.org>; 's47F @anzscts.org's47F @anzscts.org>;

s47F @svha.org.au' <s47F @svha.org.au>;s47F @sa.gov.au' <s47F @sa.gov.au>; president@acrrm.org.au; info@chf.org.au; 'companysecretary@racp.edu.au' <companysecretary@racp.edu.au>; racp@racp.edu.au; ceo@rdaa <ceo@rdaa.com.au>; college.sec@surgeons.org; college.president@surgeons.org; 'R.A.C.S@surgeons.org' <R.A.C.S@surgeons.org> Cc: AskMBS Internal Queries <<u>AskMBS.internal@health.gov.au</u>>; Private Health Industry Branch <PHI@health.gov.au>; MBS Clinical Policy <MBSClinicalPolicy@health.gov.au> Subject: Item mapping MBS Changes ~ 1 Jan and 1 March 2022 MYEFO announcement - Media release 13 Dec 2021 [SEC=OFFICIAL]

#### Dear Stakeholders

We are writing to provide an update on changes to MBS items following today's media announcement of the Government's agreement as part of the "improving access to the MBS" MYEFO 21/22 budget process. The media release can be found at: Permanent telehealth to strengthen universal Medicare | Health Portfolio Ministers. The changes announced are summarised in the tables below and will be implemented by the team in the MBS Clinical Policy Section. An item mapping document is attached which provides further details on the changes.

Further announcements regarding 1 March 2022 changes are anticipated later in the week and our team will provide an updated summary and mapping document appropriately. Communication materials on the changes, which includes fact sheets and Quick Reference guides, will be made available shortly at: www.mbsonline.gov.au and under the factsheet tab. Any additional questions in relation to these changes please reach out to our team via EN RELEVACIAND return email.

Kind regards **MBS Clinical Policy Team** 

ltem Number	Summary of Change	ltem fee
38358 - Amend	Fee change only (increase)	\$2984.25
90300 - Amend	This item will now only be claimable by a Cardiothoracic Surgeon when providing surgical back-up for an Interventional Cardiologist who is conducting the primary procedure (38358).	\$ 895.25 (unchanged)
38254 - Amend	Descriptor amended to allow services that involve selective coronary angiography preceding percutaneous coronary intervention to be co-claimed with this service (38254)	\$463.50 (unchanged)
38519 - Amend	Descriptor amended to ensure all open cardiac procedures requiring the removal of an existing valve prothesis prior to the insertion of a new valve are permitted.	\$1,100.00 (unchanged)
38643 - Amend	Descriptor amended to clarify that the service is claimable for any instance where the division of adhesions exceeding 30mins is required.	\$1,567.65 (unchanged)

# Changes effective 1 January 2022

# Changes effective 1 March 2022

ltem	Summary of Change	ltem fee
Number		
38276 -	This item provides for a transcatheter closure of the left atrial appendage for	\$949.25
Amend	stroke prevention. After consideration by MSAC this item has been amended to	
	increase the population eligible to receive this procedure and will include patients	(unchanged)
	with an absolute permanent contraindication to oral anti-coagulant therapy	

	FOI 5277 - D	ocument 2
	determined by a practitioner independent of the practitioner performing the procedure.	
38495 - Amend	This item provides for transcatheter aortic valve implantation for patients with symptomatic severe aortic stenosis at high risk for open surgical aortic valve	\$1490.25
	replacement, device agnostic.	(unchanged)
38514 - New item	This item provides for transcatheter aortic valve implantation for patients with symptomatic severe aortic stenosis at intermediate risk for open surgical aortic	\$1490.25
	valve replacement, device agnostic.	(unchanged)

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ed that any use error please notific error please n "Important: This transmission is intended only for the use of the addressee and may contain confidential or legally privileged information. If you are not the intended recipient, you are notified that any use or dissemination of this communication is strictly prohibited. If you receive this transmission in error please notify the author immediately and delete all copies of this transmission."

From: Sent: To: Subject: **Attachments:** 

s22

s22 Friday, 19 July 2024 1:02 PM s22 FW: Cardiac Surgery item descriptors budget 22-23.docx [SEC=OFFICIAL] Cardiac Surgery item descriptors budget 22-23.docx

Kind regards s22

Assistant Director MBS Clinical Policy Section P: 02 6289s22 E: S22

@health.gov.au

#### **MBS Policy & Reviews**

Medicare Benefits & Digital Health Australian Government Department of Health and Aged Care

ACTING AC From: \$22 Sent: Monday, December 13, 2021 2:50 PM To: 's47F sa.gov.au> Subject: Cardiac Surgery item descriptors budget 22-23.docx [SEC=OFFICIAL]

HIS47F

As discussed. Please provide comment on the descriptors in the attachment.

For the following: can you provide your suggested fees for each item to reflect your comments (fix the imbalances to incentivise advanced skills and time spent): **MV Repair codes** 

As discussed, my concern here is the combination of Annuloplasty into the repair codes may relatively undervalue the procedure compared to MV Replacement. \$2509.25 38516 – Simple Repair 38517 - Complex Repair \$3055.85, versus

38499 - MVR \$2112.20 38490 – Sub valve resusp \$577.00 (MPR = ~\$279.00) – Total \$2391.20

There is a small step to simple repair from replacement, yet different skill sets and usually a significant increase in time and effort. Best practice should incentivise Repair. The step from simple to complex is reasonable.

#### **Aortic Arch Surgery**

38555 - Simple Arch \$3374.00 38557 – Complex Arch \$3894.30

As discussed, the step from Simple to Complex arch is imbalanced Simple arch is basically a bevelled anastomosis across the proximal arch under Deep Hypothermic Circulatory arrest.

# FOI 5277 - Document 3

Complex Arch is Axillary artery and femoral artery cannulation, Hypothermic Arrest, Debranch head and neck vessels and re-anastomose, plus arch and proximal anastomoses, with reconnection of the debranched arch inflow. Clearly a different operation, which usually takes 6 – 8 hours at most centres.

I would suggest Simple is "overs" and Complex is "unders" and could be easily realigned.

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SED 1982 EED ARE

s22

From: Sent: To: Subject: s22 Friday, 19 July 2024 11:01 AM s22 FW: your sign-off [SEC=OFFICIAL]

Kind regards s22

Assistant Director MBS Clinical Policy Section P: 02 6289s22 E: s22 <u>@health.gov.au</u> **MBS Policy & Reviews** Medicare Benefits & Digital Health Australian Government Department of Health and Aged Care

From: s47F Sent: Tuesday, May 17, 2022 7:24 PM To: s22 health.gov.au> Subject: Re: your sign-off [SEC=OFFICIAL] sa.gov.au>

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Thankss22

Think we need to specifiy "once per procedure"

Could we say:

Creation of Y-graft, T-graft and graft-to-graft extensions, with micro-arterial or micro-venous anastomosis using microsurgical techniques, if:

(a) the service is for one or more anastomoses, claimed once per procedure; and

(b) the service is performed in conjunction with a service to which item 38502 applies (H) (Anaes.) (Assist.)

Cheers s47F



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From: "s22 hea Date: Tuesday, 17 May 2022 at 14:34 To: "s47F Subject: your sign-off [SEC=OFFICIAL]

<u>health.gov.au</u>>

<u>sa.gov.au</u>>

His47F

Just want to double check this wording for 1 November 2022.

## 2 Schedule 1 (cell at item 38513, column 2)

Repeal the cell, substitute with:

Creation of Y-graft, T-graft and graft-to-graft extensions, with micro-arterial or micro-venous anastomosis using microsurgical techniques, if:

- (a) the service is for one or more anastomoses; and
- (b) the service is performed in conjunction with a service to which item 38502 applies (H) (Anaes.) (Assist.)

Kind regards s22

Cardiac and Vascular Services Assistant Director MBS Clinical Policy Section P: 02 6289S22 E: S22 @health.gov.au MBS Reviews Unit Medical Benefits Division Australian Government Department of Health

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