## s47E(c), s47F

**AskMBS** From:

Sent: Monday, 22 April 2024 2:56 PM

To:

Your enquiry has been resolved -s47G Subject: - RE: Fluoroscopic Examination

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Reference: s47G

Subject: RE: Fluoroscopic Examination

Dear s47F

We are writing in response to your recent enquiry, submitted to the Department of Health and Aged Care's AskMBS advice service on 09/04/2024.

The time requirements stipulated in the fluoroscopy items refer to the time spent providing fluoroscopy using a mobile image intensifier in conjunction with a surgical procedure.

These time requirements refer to the duration of the use of fluoroscopy, not the total duration of the procedure itself.

Please remember under MBS claiming arrangements, it is the responsibility of the health care professional claiming the service to ensure that all requirements of the relevant MBS item, as detailed in the item descriptor and associated explanatory notes, have been met and the service provided is clinically relevant. A service is considered clinically relevant if it is generally accepted in the profession as necessary for the appropriate treatment of the patient.

It is the claiming practitioner's responsibility to consider the clinical circumstances of any services rendered and to determine the appropriate MBS item(s) to claim, if any. They should also exercise care to ensure that their conduct in relation to rendering and requesting services cannot be characterised as inappropriate practice (i.e. practice that a practitioner's peers could reasonably conclude was unacceptable to the general body of their profession).

Should you require further clarification please contact AskMBS@health.gov.au, quoting reference \$47G

AskMBS publishes advisories which summarise frequently asked questions and answers on related topics about the correct billing of MBS items. Please see these at the following

link: https://www1.health.gov.au/internet/main/publishing.nsf/Content/AskMBS-Email-Advice-Service.

We invite you to provide feedback at the link below about this AskMBS response and any other recent interactions with the AskMBS advice service. You will not be required to provide any personal or identifying information and your response will be treated in confidence.

Feedback Survey Link

#### **IMPORTANT: ADVICE DISCLAIMERS**

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Yours sincerely AskMBS Department of Health and Aged Care

E: askmbs@health.gov.au

#### PRIVACY AND YOUR PERSONAL INFORMATION

The Australian Government Department of Health and Aged Care (Department) is bound by the Privacy Act 1988 and the Australian Privacy Principles (APPs).

The Department is collecting this personal information about you for the primary purpose of responding to your enquiry and providing authoritative advice on issues related to Medicare Benefits Schedule (MBS) items, explanatory notes and associated legislation to assist with the correct billing of MBS services. Your information may also be used for other purposes such as monitoring trends in the issues raised in AskMBS enquiries, and linking enquiries from the same client to inform a response.

You can get more information about the way in which the Department will manage your personal information, including the AskMBS privacy policy, at <a href="https://www1.health.gov.au/internet/main/publishing.nsf/Content/AskMBS-Email-Advice-Service">www1.health.gov.au/internet/main/publishing.nsf/Content/AskMBS-Email-Advice-Service</a>.

Please note that this email and attachments may contain confidential or legally privileged information. If you receive this email in error, please delete it and contact the sender immediately.

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From: s47F

**Sent:** 9 Apr 2024 05:26:10 **To:** ASKMBS@health.gov.au

Subject: RE: Fluoroscopic Examination

**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.

Good afternoon,

## **RE: Fluoroscopic Examination**

I am seeking clarification regarding the billing of MBS Items 60506 and 60509.

The description for MBS Item 60506 is "Fluoroscopy using a mobile image intensifier, in conjunction with a surgical procedure lasting less than 1 hour, not being a service associated with a service to which another item in this Group applies".

The description for MBS Item 60509 is "Fluoroscopy using a mobile image intensifier, in conjunction with a surgical procedure lasting 1 hour or more, not being a service associated with a service to which another item in this Group applies".

Could you please clarify if the phrases "in conjunction with a surgical procedure lasting less than 1 hour" and "in conjunction with a surgical procedure lasting 1 hour or more" refer to the duration of the associated procedure rather than the duration of the fluoroscopy?

Many thanks,

s47F

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s47E(c), s47F

**From:** s47E(c), s47F

**Sent:** Tuesday, 23 April 2024 10:16 AM

**To:** \$47E(c), \$47F **Cc:** \$47E(c), \$47F

**Subject:** FW: response to questions [SEC=OFFICIAL]

**Importance:** High

FYI

s47E(c), s47F

Director – Professional Review Section Health Professionals Compliance Branch

Benefits Integrity Division | Health Resourcing Group

Australian Government, Department of Health and Aged Care

T: 02 6289 s47E(c). | E: s47E(c), s47F @health.gov.au

Location: Sirius 6.S.248

GPO Box 9848, Canberra ACT 2601, Australia

The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present.

From: MCEACHRAN, Anthony s47E(c), s47F @Health.gov.au>

Sent: Tuesday, April 23, 2024 10:14 AM

**To:** LAKE, Christopher s47E(c), s47F @health.gov.au>

Cc: s47E(c), s47F @health.gov.au>; s47E(c), s47F @health.gov.au>; BIDInputs

s47E(d) @health.gov.au>

Subject: FW: response to questions [SEC=OFFICIAL]

Importance: High

Hi Chris

My thanks to suggested edits and content below. Red is suggested text, strikethrough is what we recommend is omitted.

Let us know if you need anything more.

Cheers,

Anthony

Anthony McEachran [he/him]

**Assistant Secretary - Health Professionals Compliance Branch** 

Benefits Integrity Division | Health Resourcing Group Australian Government Department of Health and Aged Care

Location: Sirius 6.S.135

PO Box 9848, Canberra ACT 2601, Australia

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From: s47E(c), s47F @health.gov.au> Sent: Tuesday, April 23, 2024 10:05 AM To: MCEACHRAN, Anthony s47E(c), s47F @Health.gov.au> **Subject:** FW: response to questions [SEC=OFFICIAL] Importance: High Hi My suggested inclusions below in red text. s47E(d), s47C, s47G Regards s47E(c), s47F **Director - Professional Review Section Health Professionals Compliance Branch** Benefits Integrity Division | Health Resourcing Group Australian Government, Department of Health and Aged Care T: 02 6289 s47E(c), s47F @health.gov.au Location: Sirius 6.S.248 GPO Box 9848, Canberra ACT 2601, Australia The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present. From: LAKE, Christopher s47E(c), s47F @health.gov.au> Sent: Tuesday, April 23, 2024 8:48 AM @Health.gov.au>; s47E(c), s47F To: MCEACHRAN, Anthony s47E(c), s47F @health.gov.au> Cc: s47E(c), s47F @health.gov.au>; BIDInputs s47E(d) @health.gov.au> **Subject:** FW: response to questions [SEC=OFFICIAL] Importance: High Hi Anthony and s47E(c), Following on from my email last night, please see that the question I sent to you has been clarified in the highlighted below. s47C



s47C	

If you need to discuss before providing input, please let me know.

Cheers

Chris

# **Chris Lake**

A/g Assistant Secretary - Compliance Risk and Provider Engagement Branch

Benefits Integrity Division | Health Resourcing Group

Australian Government Department of Health and Aged Care

T: s47E(c), s47F | M: s47E(c), s47F | E: s47E(c), s47F | health.gov.au

Location: 160 Ann Street, Brisbane QLD 4000 GPO Box 9848, Brisbane QLD 4001, Australia

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From: BIDInputs s47E(d) @health.gov.au>

**Sent:** Tuesday, April 23, 2024 7:58 AM

**To:** LAKE, Christopher 447E(c), 847F @health.gov.au>; 447E(c), 847F @health.gov.au>

Cc: JIN, Hongxia 47E(c), s47F @health.gov.au>
Subject: FW: response to questions [SEC=OFFICIAL]

Good morning

Just for your awareness, s47F wrote back to the Minister office, clarifying one question below (highlighted in yellow)

Kind Regards

s47E(c), s47F

Executive Officer
Acting Director Parliamentary, Media and Cultural Change
Hongxia Jin
Acting First Assistant Secretary
Benefits Integrity Division

Australian Government Department of Health and Aged Care

+61 2 6289 s47E(c), s47E(c), s47F

s47E(c), s47F @health.gov.au

GPO Box 9848, Canberra ACT 2601

From: News < news@health.gov.au >
Sent: Monday, April 22, 2024 7:20 PM
To: BIDInputs \*47E(d) @health.gov.au >

Cc: News < news@health.gov.au >

**Subject:** FW: response to questions [SEC=OFFICIAL]

Hi team,

Additional clarification for the query below – can you please organise a response for this?

s47E(c), s47F

Media Unit, Communication Branch

People, Communication and Parliamentary Division | Corporate Operations Group

Australian Government, Department of Health and Aged Care

T: 02 6289 7400 | E: <u>news@health.gov.au</u> GPO Box 9848, Canberra ACT 2601, Australia

The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country

From: <sup>s47E(c), s47F</sup> @Health.gov.au>

**Sent:** Monday, April 22, 2024 7:04 PM **To:** News < news@health.gov.au>

Cc: 

@Health.gov.au>; 

s47E(c), s47F

@health.gov.au>; 

s47E(c), s47F

@Health.gov.au>; s47E(c), s47F @Health.gov.au>

Subject: FW: response to questions [SEC=OFFICIAL]

Additional clarification below

From: s47F @abc.net.au>

Sent: Monday, April 22, 2024 6:57 PM

To: S47E(c), S47F @Health.gov.au>

Subject: Re: response to questions









From: News < news@health.gov.au > Sent: Tuesday, 23 April 2024 5:04 PM

To: s47E(c), s47F @Health.gov.au>; News <news@health.gov.au>

Cc: s47E(c), s47F @Health.gov.au>; s47E(c), s47F @health.gov.au>; s47E(c), s47F

@Health.gov.au>; s47E(c), s47F @Health.gov.au>

Subject: Cleared response: response to questions [SEC=OFFICIAL]

Hi s47E(c),

Please see response below.

# Anaesthesia Clinical Committee of the MBS Reviews Taskforce

The anaesthesia recommendations made by the Anaesthesia Clinical Committee of the MBS Reviews Taskforce (Taskforce) were split into two phases to allow for adequate consultation, communication, and implementation time. Following implementation of an initial 33 recommendations on 1 November 2019 (representing those changes that had strong sector and policy support), implementation of the remaining 34 recommendations was further considered by the sector with feedback received and considered by the Anaesthesia Implementation Liaison Group (AILG). Membership of the AILG included representatives from the Australian and New Zealand College of Anaesthetists, Australian College of Rural and Remote Medicine, Australian Medical Association, Australian Society of Anaesthetists, Australasian Society of Medical Perfusionists, Consumer Health Forum, Private Health Insurance, Private Hospitals as well as an independent anaesthetist and an academic anaesthetist.

Advice received from the AILG and agreed by the department supported five of the remaining Taskforce recommendations progressing to implementation. These recommendations were brought forward for Government consideration in MYEFO 2021 and implemented on 1 March 2022.

Of the remaining 29 recommendations, 28 were identified by the AILG as either not supporting best clinical practice with likely unintended consequences for patient access or resulting in unnecessary administrative burden on providers. Recommendation 67 was determined to be redundant, with the need for an Anaesthetic Advisory Committee superseded by the establishment of the Medicare Benefits Schedule Review Advisory Committee

(MRAC). The Minister supported the AILG and Department advice and agreed that anaesthesia recommendations 1–7, 10, 11, 14, 19, 21, 26, 29, 35, 39, 43, 45–48, 50–52, 56, 58, 65–67 would not proceed to implementation.

## **Department of Health and Aged Care's compliance framework**

- The Department of Health and Aged Care (department) delivers a robust compliance program, informed by
  risk, to respond to potential fraudulent and non-compliant health program payments, including those made
  under Medicare.
- The department's overarching provider compliance model ensures that resources and effort are prioritised based on the seriousness and scale of compliance concerns. This allows for a responsive and proportionate approach to compliance utilising the wide range of tools and powers available to the department.
- Based on its assessment of a compliance concern, the department may pursue a range of responses including education, review, audit and investigation into breaches of Australian laws.
- The Professional Services Review (PSR) is a key part of the Medicare compliance regime. Referrals to the PSR are made where appropriate and in accordance with Departments risk-based compliance framework.
- Where concerns are identified sitting outside the department's, such as patient safety or professional
  conduct, the department may refer these concerns to other regulatory bodies as appropriate. For example,
  the Australian Health Practitioner Regulation Agency, has access to different regulatory controls and can act
  where individual practitioners are identified as practising in a way that places the public at risk of harm or
  departs significantly from expected standards of practice.
- On 1 July 2023 a taskforce was established to strengthen the integrity of the Medicare system in response to findings and recommendations of the Independent Review of Medicare Integrity and Compliance (Philip Review).
- The taskforce continues to consider and progress options for reform in response to the review, including
  assessing improved up-front controls, developing robust analytical models, more frequent and
  comprehensive monitoring of MBS claims, and consideration of legislative amendments that provide
  additional effective and efficient regulatory tools.
- While the department has well developed processes for targeted data analysis and intelligence collection to identify signals of fraud and non-compliance, its assessment is only as good at the information it has access to.
- Further, noting that the department is aware that there have been several specific cases referred to in various media, where someone suspects and/or has information indicating that health program payments have been made incorrectly or inappropriately, the department encourages that concerns about specific health providers are submitted as a tip-off to the department:
  - o at Reporting incorrect billing, claiming, or suspected fraud | Australian Government Department of Health and Aged Care
  - by calling the department's tip-off line on 1800 314 808, between 8:30am and 5:00pm Monday to Friday.

## **Spinal Surgery Medical Claims Payment Integrity Report**

- Private Healthcare Australia has provided the Spinal Surgery Medical Claims Payment Integrity Report
  (Report) prepared by Drs Faux and Peck, as well as the deidentified data upon which the reports analysis
  was based, the department acknowledges the inferences made but cannot reliably draw the same
  conclusions regarding the likelihood of incorrect payment of Medicare benefits.
- Despite this, the department is reviewing the concerns raised in the Report, along with the deidentified data and Medicare claiming data in accordance with its compliance assessment procedures.
- Current privacy and secrecy provisions set out in legislation do not permit the department to share data
  with private health funds and further do not permit the sharing of information related to its review of
  specific circumstances of incorrect health program payments.

Apologies for the wait,

s47E(c), s47F

#### Media Unit

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From: s47E(c), s47F @Health.gov.au>

**Sent:** Tuesday, April 23, 2024 3:18 PM **To:** News <news@health.gov.au>

Cc: s47E(c), s47F @Health.gov.au>; s47E(c), s47F @health.gov.au>; s47E(c), s47F

@Health.gov.au>; s47E(c), s47F @Health.gov.au>

**Subject:** RE: response to questions [SEC=OFFICIAL]

How are we going with this?

---

Sent from Workspace ONE Boxer

On 23 April 2024 at 11:15:09 AM AEST, s47E(c), s47F

@Health.gov.au > wrote:

That's fine

---

Sent from Workspace ONE Boxer

On 23 April 2024 at 11:14:53 AM AEST, News <news@health.gov.au> wrote:

Hi s47E(c),

The line area is seeking an extension to 1pm today please.

Thanks, s47E(c), s47F

**Media Unit** 

Australian Government, Department of Health and Aged Care T: 02 6289 7400 | \$47E(c), \$47F | E: news@health.gov.au

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From: s47E(c), s47F @Health.gov.au>

**Sent:** Monday, April 22, 2024 3:58 PM

To: News <<u>news@health.gov.au</u>>

Cc: s47E(c), s47F @Health.gov.au>; s47E(c), s47F @health.gov.au>;

s47E(c), s47F <u>@Health.gov.au</u>>; s47E(c), s47F

@Health.gov.au>

**Subject:** FW: response to questions [SEC=OFFICIAL]

Hi can we please get a response to this by midday tomorrow.

From: 847F @abc.net.au>

Sent: Monday, April 22, 2024 3:55 PM

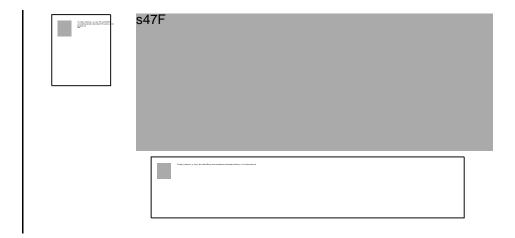
To: s47E(c), s47F @Health.gov.au>

**Subject:** response to questions

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s47E(d), s47G		





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[SEC=OFFICIAL]

[SEC=OFFICIAL]