



## Guaranteeing Medicare – Updating the Medicare Benefits Schedule

The Australian Government acts on the best advice to continue to add and amend listings on the Medicare Benefits Schedule (MBS) to improve access to medical services for all Australians. A total of \$711.7 million will be invested in this Budget for new and amended MBS items, including:

- \$288.5 million to improve mental health outcomes for patients with a medication-resistant major depressive disorder. For the first time, Repetitive Transcranial Magnetic Stimulation (rTMS) therapy prescribing and treatment services will become available from 1 November 2021
- \$111.4 million to support the take up of group therapy sessions and participation of family and carers in treatment provided under the Medicare Better Access to Psychiatrists, Psychologists and General Practitioners initiative
- \$27 million for plastic and reconstructive surgery items, including general and skin surgeries, cranio-maxillofacial/oral and maxillofacial items
- \$26.8 million for amended orthopaedic surgery items, streamlining groups of items for certain sub-specialties, with fees reflecting the level of service involved
- \$22 million for gynaecological procedures, including long-term reversible contraceptives, rebates for gonadotrophin-stimulated ovulation induction, and restructuring gynaecological oncology services to align with clinical practice
- \$18.8 million for a new Proton Beam Therapy (PBT) item that utilises external beam radiotherapy for paediatric and rare cancers
- \$40.5 million for ambulatory blood pressure monitoring – a new service for diagnosing high blood pressure (hypertension) that provides greater accuracy for diagnosis through continuous monitoring over 24 hours. Ambulatory blood pressure monitoring is superior to the currently MBS funded service of discrete blood pressure measurements in a clinic, or using home blood pressure monitors in conjunction with GP consultations

- Further amendments to the MBS include a wide spectrum of health items, including heart health, cancers, pain management, and irritable bowel syndrome (\$55.1 million)
- \$95.9 million for 5 new MBS items for pre-implantation genetic testing (PGT) of embryos for specific genetic or chromosomal abnormalities prior to implantation and pregnancy
- \$11.6 million for MBS items for genetic testing for diagnosis of hydatidiform moles (molar pregnancy), pregnancies with identified major foetal structural abnormalities, and for people with multiple myeloma and chronic lymphocytic leukaemia, and
- \$14.2 million for new MBS items for allied health professionals who participate in case conferences which are organised by a patient's GP. This will support increased allied health participation in multidisciplinary, coordinated care for patients with chronic and complex conditions.

This will be delivered as part of 546 changes to new or amended MBS-subsidised items being introduced over the next 4 years.

The Australian Government is committing a further \$3.2 million in the 2021–22 Budget to introduce a continuous review mechanism for the MBS, reinforcing the commitment to providing Australians with affordable access to universal health care, a key pillar of *Australia's Long Term National Health Plan*.

The continuous review will:

- provide clinician-led, independent advice to drive value for the patient and taxpayer
- deliver program assurance across the \$125.7 billion in MBS expenditure over the forward estimates by reviewing thematic issues across the MBS and identifying opportunities to improve how services are funded
- ensure the MBS continues to provide high value care, remains flexible and contemporary, and provides value for money for patients and taxpayers, and
- enable consideration of critical issues relating to health financing and affordable access to clinical care, particularly where existing assessment pathways such as the Medical Services Advisory Committee (MSAC) are not suitable.

The Australian Government will also provide \$3.8 million to enhance data-matching activities through the National Health Funding Body to compare public hospital activity data and MBS claims data. This project will identify any instances where the

Commonwealth has paid for the same service twice, which can result in compliance action.

### **Why is this important?**

The MBS is a critical element of the Australian Health System and continues to evolve to meet societal challenges such as the growing burden of chronic disease, an ageing population, workforce pressures and inequities in health outcomes and access.

The MSAC is responsible for assessing the safety, effectiveness and value-for-money of medical services and technologies proposed for public funding.

The MBS Review Taskforce was established to consider how the more than 5,700 items on the MBS could better align with contemporary clinical evidence and practice, and improve health outcomes for Australians.

The MBS supported more than 428 million health services to patients in 2019–20, and more than half a million health professionals provide services that are subsidised through the MBS each year across Australia.

### **Who will benefit?**

This will benefit many thousands of Australian patients with a wide variety of health problems, including patients in need of pain management, women seeking long-term reversible contraceptive treatment and other gynaecological medical services. There are also measures that will assist patients in need of colorectal surgery, and plastic and reconstructive surgery.

The inclusion of genetic testing items on the MBS will benefit women and families who are predisposed to certain inherited diseases, and women who may be prone to molar pregnancies. There will also be benefits for sufferers of multiple myeloma and chronic lymphocytic leukaemia, to access genetic testing for diagnosis.

Australians experiencing antidepressant medication-resistant major depressive disorder will benefit from access to rTMS, which offers a non-invasive alternative to electroconvulsive therapy. Its listing on the MBS will significantly reduce the out-of-pocket costs for patients, making this treatment more accessible.

Many of the amendments will combine and revise items where they form part of a single complete medical service, reducing administrative burden, and items that are no longer best practice will be deleted, supporting clinicians in providing medical services that align with contemporary best practice guidelines.

### **How much will this cost?**

The Australian Government is committing \$718.7 million over 4 years, from 2021–22.