
Medicare Benefits Schedule Review Taskforce

Taskforce Findings

Dermatology, Allergy and Immunology

Clinical Committee Report

This document outlines the Medicare Benefits Schedule (MBS) Taskforce's recommendations in response to the Dermatology, Allergy and Immunology Clinical Committee Report.

The Taskforce considered the recommendations from the Dermatology, Allergy and Immunology Clinical Committee and feedback from the public consultation.

The Taskforce endorsed all recommendations, with minor amendments, from the Dermatology, Allergy and Immunology Clinical Committee and submitted them to the Minister for Health for Government consideration.

Number of items reviewed	38
Number of recommendations made	18

The recommendations are intended to encourage best practice, improve patient care and safety, and ensure that MBS services provide value for the patient and the healthcare system. These recommendations will improve patient outcomes and reduce low-value care.

Taskforce recommendations

Recommendation 1 – Replace and modify whole body cabinet phototherapy items (14050 and 14053)

The Taskforce recommends consolidating items 14050 and 14053 to stipulate supervision requirements and place an annual cap on treatments to improve patient safety.

Recommendation 2 – Remove benign skin neoplasms item (30195) and modify malignant skin neoplasm items (30196 and 30197)

The Taskforce recommends deleting item 30195. Appropriate services should instead be claimed under biopsy item 30071 and sent to pathology for definitive diagnosis. This change will improve patient safety and reduce misuse.

Consolidating item 30196 with 30197 and change the descriptor to mandate histopathology to ensure best practice is also recommended by the Taskforce.

Recommendation 3 – Allergy testing items (12003, 12000, 21981 and 53600)

To improve skin tests for allergens by removing obsolete items and ensuring best practice, the Taskforce recommends:

- △ Deleting item 12003 for testing more than 20 allergens and deleting item 53600 for skin sensitivity testing for anaesthetics and materials allergens used in oral and maxillofacial surgery (OMS) surgery.
- △ Splitting item 12000 and changing item 21981 into four items to accurately describe the allergens tested and the scope of practice required for each. This aims to support effective, contemporary practice for allergen testing.

This recommendation was amended by the Dermatology, Allergy and Immunology Clinical Committee following public consultation. The Taskforce endorses the amended recommendation.

Recommendation 4 – Treating malignant lesions by liquid nitrogen cryotherapy items (30202, 30203 and 30205)

The Taskforce recommends amending the descriptor for item 30202 to limit the use of this item to Australian Medical Council-recognised dermatologists and mandate histopathology for all other medical professions to support appropriate use of the item and improve patient safety.

Delete item 30205 and using item 30202 instead.

Consolidating item 30203 under item 30202 is also recommended by the Taskforce. Changes under this recommendation aim to increase patient safety, promote best practice, and stop inappropriate claiming.

Recommendation 5 – Delete definitive removal of palmar or plantar warts items (30185 and 30186)

The Taskforce recommends deleting items 30185 and 30186, to encourage treatment of warts using other therapies, including cryotherapy, within a normal consultation.

Recommendation 6 – Update laser photocoagulation items (14100-14124)

To update laser photocoagulation items, the Taskforce recommends:

- △ Requiring all laser equipment to be listed by the Therapeutic Goods Administration to improve patient safety.
- △ Updating the descriptor for item 14100 to include the use of Intense Pulsed Light treatment and decreasing the maximum number of sessions from six to four sessions within a 12-month period.
- △ Consolidating items 14106, 14109, 14112, 14115 and 14118 into three items to simplify the MBS and support appropriate use.
- △ Amending the descriptor for item 14124 to replace 'haemangiomas of infancy' with 'infantile haemangiomas' and monitor non-specialist providers to ensure that the item is being used properly.

Recommendation 7 – Restrict micrographically controlled serial excision (Mohs) items (31000 – 31002)

To ensure patients will receive a more appropriate set of procedures the Taskforce recommends that items (31000 – 31002) be split into two separate items based on body area with the use of the services to be monitored. In addition the Taskforce recommends updating the item descriptors to recognise Mohs surgery and restrict services to providers that are certified by the Australasian College of Dermatologists. This aims to lower the risk of poor surgical outcomes.

Recommendation 8 – Delete telangiectases or starburst vessels items (30213-30214)

The Taskforce recommends deleting items 30213 and 30214. Patients will receive more effective and up-to-date treatment by removing these obsolete items that no longer reflect best practice.

Recommendation 9 – Leave treatment of pre-malignant skin lesions item unchanged (30192)

No change to item 30192 is recommended by the Taskforce as it is required for the treatment of 10 or more pre-malignant skin lesions by ablation. No major issues were identified.

Recommendation 10 – Update skin lesions, multiple injections of hydrocortisone or similar preparations items (30207 and 30210)

The Taskforce recommends amending the descriptor for item 30210 to restrict use to patients less than 16 years old. This aims to reduce the risk of patients receiving inappropriate medications for this procedure. Adults and older teenagers will not receive this treatment in an operating theatre. Patients less than 16 years old can still receive general anaesthetic for this potentially painful procedure.

Recommendation 11 – Consolidate superficial radiotherapy item (15000)

Pending agreement from the Oncology Clinical Committee, the Taskforce recommends consolidating orthovoltage radiotherapy items (items 15100-15115) with superficial radiotherapy items (15000-15009). This would allow for simplified billing for providers and no change in service for patients.

Recommendation 12 – Leave administration of immunomodulating agent item unchanged (14245)

The Taskforce recommends no changes be made to this item as it is still a clinically relevant treatment.

Recommendation 13 – Leave bone or cartilage excision item unchanged (31340)

The Taskforce recommends no changes be made to this item as it is still a clinically relevant treatment.

Recommendation 14 – Amend laser excision of face or neck tumours item (30190)

The Taskforce recommends excluding common lesions from this item, while still allowing patients with rare conditions to access this service. This recommendation aims to prevent doctors inappropriately billing this item instead of 30195. A new item is recommended for removing less than 10 tumours by laser excision, to ensure that items are being appropriately claimed

Recommendation 15 – Amend laser resurfacing for face or neck items (45025 and 45026)

To allow patients access to fractionated laser therapy that can have equivalent results as non-fractionated lasers and improve the safety of the procedure, the Taskforce recommends adding the use of fractional ablative lasers (Erbium and CO₂) to these items.

Recommendation 16 – Update laser vermilionectomy item (45669)

The Taskforce recommends adding a requirement for biopsy proof in the item descriptor to ensure best practice and patient safety.

Recommendation 17 – Amend laser treatment of rhinophyma item (45652)

To ensure this item is used to treat the appropriate thickening associated with rhinophyma the Taskforce recommends amending the descriptor to specify moderate or severe rhinophyma. Photo evidence will also be required which will assist compliance monitoring of the item.

Recommendation 18 – Amend and restrict full-face chemical peel item (45019)

The Taskforce recommends amending the descriptor to include resurfacing lasers Erbium CO₂ and Fractional Thulium 1927 and restricting use of this item to Australian Medical Council-recognised dermatologists and plastic surgeons. This aims to modernise the MBS and to reflect current best-practice standards of care in treating multiple areas of facial dysplasia that have resisted other therapies.