

# Terms of reference - Medicare Benefits Schedule Review Taskforce

In the 2016-17 Budget, the Government committed an additional three years funding to the MBS Review as part of the Healthier Medicare package. The terms of reference below have been updated to reflect the ongoing work of the Taskforce.

Page last updated: 19 October 2017

## 1. Purpose and structure

An expert, clinician-led Medicare Benefits Schedule (MBS) Review Taskforce (the Taskforce) will be continued to lead an accelerated review of MBS funded services with contemporary clinical evidence and improve health outcomes for patients.

The Taskforce may appoint chairs and members of clinical committees and working groups to progress this work; including clinicians, researchers, health technology assessment experts, health economists and consumers; as appropriate to the issue.

## 2. Roles and responsibilities

The Taskforce will undertake the following:

- Review MBS items taking account of factors including concerns about safety, clinically unnecessary service provision and accepted clinical guidelines.
- Commission evidence-based reviews that rely on assessment of literature and data.
- Provide advice to the Minister, including advice on the evidence for services, appropriateness, best practice options, levels and frequency of support through the MBS.
- Advise on a structure for ongoing review of the MBS.
- Advise on a Departmental program of work that aims to update the Act and regulations (MBS Rules) that underpin MBS funding.
- Provide advice about the MBS and related health financing issues, including where the MBS funding model may not be the appropriate mechanism for providing patients with access to optimal care, as requested by the Minister.
- Engage with health consumers, medical professionals, peak bodies and other stakeholders to seek their views about appropriate review approaches and processes.

## 3. Constitution

1. The Taskforce will comprise:
  - An independent, clinical Chairperson;
  - skills-based members, with a range of clinical and health delivery expertise, health technology assessment, health economics and consumers;
  - an ex-officio medical adviser (department member).
2. The Taskforce may nominate Observers and invite experts on an as needed basis.

3. Membership may be reviewed by the Department, as agreed by the Minister for Health, on the basis of emerging issues or changing needs.
4. The Taskforce clinical committees and working groups will provide objective and robust advice and members will indicate all real, apparent and potential conflicts of interest.
5. Members of the Taskforce, clinical committees and working groups will observe confidentiality requirements.
6. The Taskforce will be a Departmental non-statutory committee, managed according to the Department's External Committee Framework.