**Medicare Benefits Schedule Review Taskforce**

**Obsolete MBS Items Report**

**Taskforce Findings**

This document outlines the Medical Benefits Schedule (MBS) Taskforce’s recommendations relating to consultation on Obsolete MBS Items undertaken in 2015.

The Taskforce considered the recommendations from the Obsolete Items report and feedback from public consultation.

| **Number of items** | 26 |
| --- | --- |
| **Number of recommendations** | 3 |

The Taskforce endorsed all of the recommendations that relate to a number of MBS items which were identified as obsolete by the first tranche of the MBS Review’s clinical committees to remove, or amend to restrict access to certain MBS items.

The recommendations seek to reduce the use of services with limited clinical benefit to enable resources to be redirected to new or existing services with proven benefit.

**List of Taskforce recommendations**

1. **The following items currently listed on the Medicare Benefits Schedule are obsolete.**
2. **The following items be removed from the MBS.**

| **Item** | **Service—Short descriptor** |
| --- | --- |
| **Diagnostic imaging** | |
| 58924 | Graham’s Test (cholecystography), with preliminary plain films and with or without tomography - (R) |
| 58926 | [Mirror item] Graham’s Test (cholecystography), with preliminary plain films and with or without tomography - (R)(NK) |
| 59503 | Pelvimetry, not being a service associated with a service to which item 57201 applies (R)\* |
| 59504 | [Mirror item] Pelvimetry, not being a service associated with a service to which item 57201 applies (R)(NK) |
| 59736 | Vasoepididymography, 1 side (R) |
| 59737 | [Mirror item] Vasoepididymography, 1 side (R)(NK) |
| 59760 | Peritoneogram (herniography) with or without contrast medium including preparation - performed on a person >14 years of age (R) |
| 59761 | [Mirror item] Peritoneogram (herniography) with or without contrast medium including preparation - performed on a person >14 years of age (R)(NK) |
| 61465 | Venography (R) |
| 61711 | [Mirror item] Venography (R)(NK) |
| **Ear, nose and throat surgery** | |
| 11321 | Glycerol induced cochlear function changes assessed by a minimum of 4 air conduction and speech discrimination tests (Klockoff's tests) |
| 18246 | Glossopharyngeal nerve, injection of an anaesthetic agent |
| 41680 | Cryotherapy to nose in the treatment of nasal haemorrhage (Anaes.) |
| 41695 | Turbinates, cryotherapy to (Anaes.) |
| 41758 | Division of pharyngeal adhesions (Anaes.) |
| 41761 | Postnasal space, direct examination of, with or without biopsy (Anaes.) |
| 41849 | Larynx, direct examination of, with biopsy (Anaes.) (Assist.)\* |
| 41852 | Larynx, direct examination of, with removal of tumour (Anaes.) (Assist.)\* |
| **Gastroenterology** | |
| 13500 | Gastric hypothermia by closed circuit circulation of refrigerant in the absence of gastrointestinal haemorrhage |
| 13503 | Gastric hypothermia by closed circuit circulation of refrigerant for upper gastrointestinal haemorrhage |
| 32078 | Sigmoidoscopic examination with diathermy or resection of 1 or more polyps where the time taken is ≦45 minutes (Anaes.) |
| 32081 | Sigmoidoscopic examination with diathermy or resection of 1 or more polyps where the time taken is > 45 minutes (Anaes.)\* |
| **Thoracic medicine** | |
| 11500 | Bronchospirometry, including gas analysis |
| **Obstetrics** | |
| 16504 | Treatment of habitual miscarriage by injection of hormones each injection up to a maximum of 12 injections, where the injection is not administered during a routine antenatal attendance |

1. **That the following diagnostic imaging items are obsolete in relation to adult patients, and that they be amended by the Diagnostic Imaging Clinical Committee to restrict access to paediatric patients.**

|  |  |
| --- | --- |
| 59715 | Bronchography, 1 side, with or without preliminary plain films and with preparation and contrast injection - (R) |
| 59716 | [Mirror item] Bronchography, 1 side, with or without preliminary plain films and with preparation and contrast injection - (R)(NK) |

**Other matters**

In addition, the Taskforce agreed that a number of the items considered for obsolescence are of questionable utility in their current form but, rather than be removed completely from the MBS, should be referred back for further consideration. These items are:

|  |  |
| --- | --- |
| **Diagnostic imaging** | |
| 58706 | Intravenous Pyelography, with or without preliminary plain films and with or without tomography - (R) |
| 58708 | [Mirror item] Intravenous Pyelography, with or without preliminary plain films and with or without tomography - (R)(NK) |

|  |  |
| --- | --- |
| **Ear, nose and throat surgery** | |
| 41846 | Larynx, direct examination of the supraglottic, glottic and subglottic regions, not being a service associated with any other procedure on the larynx or with the administration of a general anaesthetic (Anaes.) |

The Taskforce also agreed that a decision on the gastroenterology item 30493 (Biliary manometry) should be deferred pending further consideration by that Clinical Committee.

**Public consultation**

Between 21 December 2015 and 8 February 2016, stakeholder comment on the proposed obsolescence of these items was sought through online consultation. There were a total of 63 responses to the online survey: 36 respondents identified as health professionals and 23 as consumers. There were also nine written submissions made by a range of professional bodies. The feedback resulted in no changes to the recommendations.

In making these recommendations, the Taskforce is mindful of the potential adverse impact on patient care of the removal of an item from the MBS. However, the Taskforce is absolutely confident, in light of the opinions of the relevant Clinical Committees, the views of stakeholders, and the Taskforce’s own expertise—that the removal of the items listed in this document will have no undesirable consequences. Rather, their removal will improve patient care overall by removing the option of the sub-optimal care that these items represent, and will encourage the use of better investigations and procedures listed on the MBS.