

Health Insurance (1998-99 General Medical Services Table) Amendment Regulations 1999 (No. 1) 1999 No. 16

EXPLANATORY STATEMENT

STATUTORY RULES 1999 NO. 16

Issued by authority of the Minister for Health and Aged Care

Health Insurance Act 1973

Health Insurance (1998-99 General Medical Services Table) Amendment Regulations 1999 (No. 1)

The *Health Insurance Act 1973* ("the Act") provides for payments by way of Medicare benefits and payments for hospital services.

Section 133 of the Act provides that the Governor-General may make regulations for the purposes of the Act.

Section 4 of the Act provides that the regulations may prescribe a table of medical services, (other than diagnostic imaging services and pathology services) (the table). The Health Insurance (1998-99 General Medical Services Table) Regulations currently prescribe such a table.

Section 9 of the Act provides that Medicare benefits shall be calculated by reference to the fees for medical services set out in the table.

The Regulations amend the current table of general medical services to increase the fee levels for attendances by general practitioners. This is the second stage of the implementation of the 1998-99 Budget commitment to increase fees for general practitioner attendances. The increase is in addition to the full indexation that was applied from 1 November 1998.

Other changes to the table resulted from ongoing reviews by the Medicare Benefits Consultative Committee designed to ensure that the table reflects current medical practice. These included the insertion of new services, the renumbering of items, moving two services from their position within the table to a more appropriate clinical grouping, and the amendment of existing item descriptions for correction or clarification.

Details of the Regulations are set out in the Attachment.

The Regulations came into effect on 1 March 1999.

ATTACHMENT

Details of the proposed Health Insurance (1998-99 General Medical Services Table) Amendment Regulations 1999 (NO. 1)

Regulation 1 provided for the Regulations to be referred to as the Health Insurance (1998-99 General Medical Services Table) Amended Regulations 1999 (No. 1)

Regulation 2 provided for the Regulations to commence on 1 March 1999.

Regulation 3 prescribes the amended table 1998-99 General Medical Services Table as set out in Schedule 1.

Part 1 - Rules of Interpretation

Item 1 amended rule 7 relating to derived fee levels for general medical practitioners to reflect the second stage of the increase approved in the 1998-99 Budget.

Items 2 and 3 amended rules 15 and 16 to reflect the new plain english drafting style recently adopted by the Office of Legislative Drafting.

Part 2 - Services and Fees

Items 4 and 5 amended the descriptions of existing items and included new items in the table to reflect current medical practice. The amendments related to items covering:

- * Chemotherapeutic procedures - clarified the intent that the items relate to services for the treatment of cancer by referring to cytotoxic chemotherapy,
- * Administration of an anaesthetic - rectified a previous drafting error which contained an incorrect anaesthetic value,
- * Gastric banding for the treatment of obesity - included new items for accessing and changing of fluids in an implanted reservoir associated with adjustable gastric band and repair, replacement or revision of the implanted reservoir,
- * Implanted devices for delivery of therapeutic agents - included new items to cover accessing and loading of implanted drug delivery devices other than for Cytotoxic chemotherapy,
- * Vascular surgery - amended items covering patch grafting to allow the items to be claimed in association with other vascular procedures,
- * Tracheostomy - included new item for percutaneous tracheostomy and amended items covering open tracheostomy and cricothyrostomy,
- * Plastic and Reconstructive surgery - amended items covering abrasive therapy to limit their use to specific conditions, and restructured items covering microvascular anastomosis of blood vessels and skin flap surgery, and

* Ultrasonic echography of orbital contents - transferred an item from the Diagnostic Imaging Services Table as it was not a diagnostic imaging service.

Proposed item 6 deleted items 340 and 41883 as they had been renumbered and relocated within the table to a more appropriate clinical grouping.

Proposed item 7 amended fee levels for general practitioner attendances, not calculated by rule 7, to reflect the second stage of the increase approved in the 1998-99 Budget.