Health Insurance (1999-2000 Pathology Services Table) Regulations 1999 1999 No. 257

EXPLANATORY STATEMENT

STATUTORY RULES 1999 No. 257

Issued by the Authority of the Minister for Health and Aged Care

Health Insurance Act 1973

Health Insurance (1999-2000 Pathology Services Table) Regulations 1999

The Health Insurance Act 1973 (the Act) provides for the payment of professional services through medicare benefits to all eligible persons.

Section 133 of the Act provides that the Governor-General may make regulations prescribing matters for the purpose of the Act.

Section 9 of the Act provides that medicare benefits shall be calculated by reference to the fees for medical services (including pathology services) set out in the table.

Section 4A of the Act provides that a table of pathology services may be prescribed. The Health Insurance (1998-99 Pathology Services Table) Regulations 1998, which commenced on 1 November 1998, prescribes such a table. The new table replaces the Pathology Services Table prescribed by the Health Insurance (1998-99 Pathology Services Table) Regulations 1998.

As part of the annual renewal of the Pathology Services Table of the Medicare Benefits Schedule, a number of changes have been incorporated in the Health Insurance (1999-2000 Pathology Services Table) Regulations 1999.

The changes to the Regulations include one new item, amendments to eleven existing items and targeted fee adjustments to sixty-three items across a range of Groups on the Table.

The changes in the 1999-2000 Pathology Services Table have been developed in cooperation with the two peak pathology professional bodies, the Royal College of Pathologists of Australasia and the Australian Association of Pathology Practices, through the Pathology Services Table Committee (PSTC) and the Pathology Consultative Committee (PCC).

These changes are consistent with provisions in the Pathology Quality and Outlays Agreement for 1999/2000-2001/2002, to manage pathology expenditure within agreed parameters. As part of its role in monitoring the implementation of the Agreement, the PCC proposed that current trends in growth allowed for fee adjustments to be made to sixty-three items on the Table, equating to an across the Table fee increase in pathology expenditure of 1.29%. Together with a number of small changes to items proposed by PSTC, expenditure for 1999-2000 is expected to fall in the upper range of the agreed target parameters. This is acceptable within the terms of the Agreement.

Details of the Regulations are set out in the Attachment.

The Regulations commenced on 1 November 1999.

In addition, the items selected for fee adjustment include:

- * thirteen Haematology items;
- * twenty-three Biochemistry items;

- * six Microbiology items;
- * one Immunology item;
- * four Tissue Pathology items;
- * three Cytology items;
- * two Cytogenetics items;
- * one Infertility item;
- * nine Patient Episode Initiation items; and
- * the Specimen Referred Fee item.

ATTACHMENT

Regulation 1 cites the regulations as the Health Insurance (1999-2000 Pathology Services Table) Regulations 1999.

Regulation 2 prescribes a commencement date of 1 November 1999.

Regulation 3 repeals the 1998-1999 Pathology Services Table.

Regulation 4 prescribes the new table of pathology services and rules of interpretation as set out in Schedule 1.

The 1999-2000 Pathology Services Table differs from previous tables in the following ways:

* a new combined test item (69370) for the detection of Chlamydia by any method and Gonorrhoea by nucleic acid amplification (NAA) techniques

- the test will facilitate access to more effective diagnostic technology in rural and remote areas;

* removal of the restriction of one patient episode in a pregnancy in gestational diabetes items 66545 and 66548

- it is clinically appropriate for a patient with a previous history of gestational diabetes or a patient with a suspicion that the disorder might be present to have more than one test in a pregnancy;

* amendments to leucocyte surface antigen items 71143 and 71145 to more accurately reflect the nature of these tests;

* amendment to haemochromatosis item 66794 to include the detection of other mutations for haemochromatosis other than the C282Y mutation;

* amendment of restrictor for haematology item 65063 from '2 or more instrument generated results' to '1 or more instrument generated results'

- the change is in recognition of the clinical appropriateness of some single test requests eg platelet counts, packed cell volume;

* amendments to chorionic gonadotrophin items 66650 and 73529 to address an anomaly in fee differences;

 \ast $\;$ amendment to microscopy and culture item 69315 to confirm the mandatory testing of Chlamydia; and

 \ast $\;$ amendments to item descriptors 73 527 (HCG) and 73 92 1 (specimen referred) to reflect minor housekeeping changes.