

EXPLANATORY STATEMENT

Select Legislative Instrument 2009 No. 371

Health Insurance Act 1973

Health Insurance (General Medical Services Table) Amendment Regulations 2009 (No. 3)

Subsection 133(1) of the *Health Insurance Act 1973* (the Act) provides that the Governor-General may make regulations, not inconsistent with the Act, prescribing all matters required or permitted by the Act to be prescribed, or necessary or convenient to be prescribed for carrying out or giving effect to the Act.

Part II of the Act provides for the payment of Medicare benefits for professional services rendered to eligible persons. Section 9 of the Act provides that Medicare benefits are calculated by reference to the fees for medical services set out in prescribed tables.

Subsection 4(1) of the Act provides that the regulations may prescribe a table of medical services (other than diagnostic imaging services and pathology services) which sets out items of medical services, the fees applicable for each item, and rules for interpreting the table. The *Health Insurance (General Medical Services Table) Regulations 2009* (the Principal Regulations) currently prescribe such a table.

The Regulations amend the Principal Regulations by introducing six new items and amending 25 items to either clarify the intent of underlying policy or to ensure that the items reflect current medical practice.

The new items:

- set a fee for the preparation of a Mental Health Treatment Plan by a general practitioner (GP) without relevant 'higher level' training;
- reflect the latest developments in assisted reproductive technology (ART) which are a part of a measure to restructure ART items to better represent the cost of each stage of the treatment cycle;
- two items apply only to obstetrician consultations and which are part of measures to cap certain benefits under the extended Medicare safety net; and
- set a fee for pregnancy planning and management if provided by a medical practitioner who will not be undertaking the labour and delivery.

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Details of the Regulations are set out in the Attachment.

Except for two items which correct spelling or remove redundant references, all amendment to the Regulations stem from the 2009-10 Budget. In formulating these measures, consultation was undertaken with the Royal Australian College of General Practitioners (items for Mental Health Treatment Plans provided by a general practitioner) and the IVF Directors' Group (items for new and restructured artificial reproduction technologies). These organisations support the changes. Consultation was not undertaken for the new and amended obstetric items.

The Act specifies no conditions which need to be met before the power to make the Regulations is exercised.

The Regulations are a legislative instrument for the purposes of the *Legislative Instruments Act 2003*.

The Regulations commence on 1 January 2010.

**DETAILS OF THE HEALTH INSURANCE (GENERAL MEDICAL SERVICES TABLE)
AMENDMENT REGULATIONS 2009 (No. 3)**

Regulation 1 – Name of Regulations

This regulation provides that the title of the Regulations is the *Health Insurance (General Medical Services Table) Amendment Regulations 2009 (No. 3)*.

Regulation 2 - Commencement

This regulation provides for the Regulations to commence on 1 January 2010.

Regulation 3 – Amendment of the *Health Insurance (General Medical Services Table) Regulations 2009*

This regulation provides that Schedule 1 amends the *Health Insurance (General Medical Services Table) Regulations 2009*.

Schedule 1 - Amendments

Rules of interpretation

Items [1] to [3] Subrule 8(2); rule 10 and subrule 10(1)

These items reference new items 16401 and 16404 as inserted by item [25] below which provides benefit for first and subsequent consultations by obstetricians, respectively. These items provide the same level of benefit as existing specialist attendance items, 104 and 105, but specifically relate to consultations for pregnancy. These items are part of the implementation of the 2009-2010 Budget measure to cap benefits for obstetric services under the extended Medicare safety net.

Item [4] Schedule 1, Paragraph 48(4)(c)

This item updates the text to remove reference to ‘enhanced primary care’, a term which is no longer used.

Items [5] to [15] Subrules 55(1) and (2), subrules 56(1), (2), (4), (5), (7) and (8)

These items reference new item 2702 as inserted by item [21] below and amendments to item 2710 as made by item [22] below, which effect a decision in the 2009-10 Budget to provide differential fees preparing a GP Mental Health Treatment Plan according to whether or not the GP has higher-level mental health skills training.

Items [16] to [21] Subrule 62(2), rule 76 heading, subrule 76(2), rule 79, rule 82 heading and rule 82

These items include references to new items 13201, 13202 and 16591 as inserted by items [24] and [34] below.

Services and Fees

Item [22] Schedule 1, after item 2677

This item introduces item 2702 which sets a fee for the preparation of a GP Mental Health Treatment Plan by a GP who does not have higher-level mental health skills training.

Item [23] Schedule 1, item 2710

This item amends item 2710 to ensure a higher fee for the preparation of a GP Mental Health Treatment Plan by a GP who has higher-level mental health skills training.

Item [24] Schedule 1, items 13200 to 13251

This item introduces new items 13201 and 13202, and restructure items 13200 and 13203 to 13251, to ensure that ART items reflect contemporary clinical practice and reflect the cost of stage of the treatment cycle.

Item [25] Schedule 1, item 16400

This item increases the fee for antenatal services provided by a midwife, nurse or a registered Aboriginal Health Worker, provided on behalf of, and under the supervision of, a medical practitioner.

Item [26] Schedule 1, after item 16400

This item introduces new items 16401 and 16404 which provide benefit for first and subsequent consultations by obstetricians, respectively. These items provide the same level of benefit as existing specialist attendance items, 104 and 105, but specifically relate to consultations for pregnancy. These items are part of the implementation of the 2009-2010 Budget measure to cap benefits for obstetric services under the extended Medicare safety net.

Items [27] to [33] Schedule 1, items 16500, 16502, 16504, 16505, 16508, 16509, 16515, 16518, 16519, 16520, 16522, 16525 and 16590

These items increase the fees for obstetrics items to reduce out-of-pocket costs. The fee increases range from 10 per cent to 150 per cent with all but one item falling in the range of 10 to 30 per cent. The level of fee increases was set in the Budget and follow consultations with the profession. The items represent services which differ in time and complexity.

Item [34] Schedule 1, after item 16590

This item introduces new item 16591 to complement item 16590 by providing a fee for pregnancy planning and management when the labour and delivery will be undertaken by another medical practitioner.

Item [35] Schedule 1, item 22051

This item corrects a spelling mistake in a medical term in item 22051.