

# New and amended items for prostate specific antigen testing

Last updated: 22 November 2023

- On 1 November 2023, four Medicare Benefits Schedule (MBS) items for prostate specific antigen testing (PSA) were amended to reflect the PSA guidelines endorsed by the National Health and Medical Research Council (NHMRC).
- In addition, one new item for PSA testing was listed from 1 November 2023.
- These changes allow prostate cancer patients to access the most suitable testing schedule, depending on their risk level.

## What are the changes?

Effective 1 November 2023, one new item (item 66654) and four amended items were listed on the MBS for testing high risk patients with a first degree relative diagnosed with prostate cancer. **Attachment A** to this factsheet lists the new and amended items.

In addition, existing prostate specific antigen testing items 66655, 66656, 66659 and 66660 were updated to reflect the Prostate Cancer Foundation of Australia Guidelines on PSA Testing and the Royal College of Pathologists of Australasia's (RCPA) Position Statement. The guidelines were endorsed by the NHMRC.

For private health insurance purposes, these items are listed under the following clinical category and procedure type:

• New item 66654 and amended items 66655, 66656, 66659 and 66660:

Clinical category: Support List (pathology)

Procedure type: Type C

### Why are the changes being made?

The changes were recommended by the Executive Committee of the Medical Services Advisory Committee (MSAC) in August 2022 in response to the Prostate Cancer Foundation of Australia Guidelines on PSA Testing and the Royal College of Pathologists of Australasia's (RCPA) Position Statement.

### What does this mean for requestors and providers?

Specialists and other treating medical practitioners who treat patients with prostate cancer can now request PSA testing to monitor high-risk patients.

To be eligible for Medicare benefits, laboratories providing this service must be accredited according to the pathology accreditation standards specified in the <u>Health Insurance</u> (Accredited Pathology Laboratories-Approval) Principles 2017.

## How will these changes affect patients?

The changes will help doctors refer patients for the most suitable test for them depending on risk level, leading to better health outcomes.

## Who was consulted on the changes?

The Department consulted the Public Pathology Australia (PPA) and Australian Pathology (AP) and RCPA.

## How will the changes be monitored and reviewed?

All MBS items are subject to compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed.

## Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website at <u>www.mbsonline.gov.au</u>. You can also subscribe to future MBS updates by visiting <u>MBS Online</u> and clicking 'Subscribe'.

The Department of Health and Aged Care provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the *Health Insurance Act 1973* and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email <u>askMBS@health.gov.au</u>.

Private health insurance information on the product tier arrangements is available at <u>www.privatehealth.gov.au</u>. Detailed information on the MBS item listing within clinical categories is available on the <u>Department's website</u>. Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the *Private Health Insurance (Benefit Requirements) Rules 2011* found on the <u>Federal Register of Legislation</u>. If you have a query in relation to private health insurance, you should email <u>PHI@health.gov.au</u>.

Subscribe to '<u>News for Health Professionals</u>' on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact the Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the **Downloads** page.

## Attachment A:

## New item descriptors (commenced 1 November 2023)

**Category 6 – Pathology Services** 

### Group P2 – Chemical

### 66654

Prostate specific antigen – quantitation in the monitoring of high-risk patients For any particular patient, applicable not more than once in 11 months

MBS Fee: \$20.15 Benefit: 75% = \$15.15 85% = \$17.15

## Amended item descriptors (commenced 1 November 2023)

Category 6 – Pathology Services

### Group P2 – Chemical

66655

Prostate specific antigen - quantitation For any particular patient, applicable not more than once in 23 months

MBS Fee: \$20.15 Benefit: 75% = \$15.15 85% = \$17.15

### Category 6 – Pathology Services

### Group P2 – Chemical

#### 66656

Prostate specific antigen (PSA) quantitation in the monitoring of previously diagnosed prostatic disease (including prostate cancer, prostatitis or a premalignant condition such as atypical small acinar proliferation)

### Category 6 – Pathology Services

MBS Fee: \$20.15

Benefit: 75% = \$15.15 85% = \$17.15

### Group P2 – Chemical

#### 66659

Prostate specific antigen (PSA), quantitation of 2 or more fractions of PSA and any derived index, including, if performed, a test described in item 66656, in the follow up of a PSA result under item 66654 or 66655 that lies at:

(a) more than 2.0 ug/L but less than or equal to 5.5 ug/L for patients with a family history of prostate cancer; or

(b) more than 3.0 ug/L but less than or equal to 5.5 ug/L for patients who are at least 50 years of age but under 70 years of age; or

(c) more than 5.5 ug/L but less than or equal to 10.0 ug/L for patients who are at least 70 years of age

For any particular patient, applicable not more than once in 11 months

MBS Fee: \$37.30 Benefit: 75% = \$28.00 85% = \$31.75

### Category 6 – Pathology Services

### Group P2 – Chemical

66660

Prostate specific antigen (PSA), quantitation of 2 or more fractions of PSA and any derived index, in the monitoring of previously diagnosed prostatic disease, including, if performed, a test described in item 66656, if the current PSA level lies at:

(a) more than 2.0 ug/L but less than or equal to 5.5 ug/L for patients with a family history of prostate cancer; or

(b) more than 3.0 ug/L but less than or equal to 5.5 ug/L for patients who are at least 50 years of age but under 70 years of age; or

(c) more than 5.5 ug/L but less than or equal to 10.0 ug/L for patients who are at least 70 years of age

For any particular patient, applicable not more than 4 times in 11 months

MBS Fee: \$37.30 Benefit: 75% = \$28.00 85% = \$31.75 Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This factsheet is current as of the Last updated date shown above and does not account for MBS changes since that date.