



Changes to Gastroenterology Services (not including Colonoscopy)

Last updated: 08/11/2017

Effective from 1 November 2017

What do the changes involve?

Changes will be made to a number of items for gastroenterology, as follows:

1 - Capsule endoscopy

- Item 11820 will be amended to better describe the service and eligible patient population.

2 – Upper gastrointestinal services

- Item 30478 will be amended to allow services currently provided under 30476 to be claimed. Item 30476 will be deleted from the schedule.
- Item 30479 will be amended to remove Argon Plasma Coagulation (APC) from the item descriptor. The item descriptor for 30478 will be amended to allow APC to be claimed.
- Claiming restrictions will prevent MBS item 30479, 30473 and 30478 from being claimed together on the same day, for the same patient, by the same provider.
- Item 30478 will be amended to allow for the claiming of push enteroscopy services currently claimed under item 30487. Item 30487 has been deleted. Item 32095 is available for endoscopic examination of the small bowel via a stoma.

3 - Endoscopic upper gastrointestinal stricture services

- Item 30475 will be amended to allow for the claiming of services currently provided under items 41819 and 41820 to be claimed. Items 41819 and 41820 have been deleted.
- The MBS fee for item 30475 will be the MBS fee for item 41819 of \$348.95 which is higher than the current fee for item 30475.
- Item 41831 will be amended to indicate this service is specific to the treatment of achalasia.

4 - Sigmoidoscopy/colonoscopy

- The item descriptors for 32084 and 32087 will be amended to better define the extent of the examinations covered under these items to 'does not reach the caecum' and to remove reference to 'fiberoptic' as these days scopes are digital.
- The item descriptor for 32087 will also be amended to remove specific reference to APC to enable other therapies to be used.
- Introduce claiming restrictions to prevent MBS items 32084 and 32087 from being claimed with other colonoscopy items 32090 and 32093 on the same day, same patient, same provider, unless the subsequent service has been provided under a second episode of sedation/anaesthesia.

5 - Endoscopic ultrasound services

- Items 30688, 30690, 30692, 30694 will be amended to remove the current restrictions on the claiming of certain other items during the same episode of care.



- Interventional items 30484, 30485, 30491, 30494 will be eligible for an MBS payment on the same day, same patient, same provider as an endoscopic ultrasound service.

6 – Biliary manometry

- Item 30493 will be removed from the schedule as the service is obsolete.

Why is the Government making this change?

The changes to MBS items for gastroenterology are intended to align MBS items with clinical best practice, better describe/prescribe indications and ensure appropriate claiming of MBS items:

These changes are based on recommendations of the Medicare Benefits Schedule Review Taskforce.

What does this mean for MBS claiming?

All practitioners that perform these services will continue to be able to claim the relevant MBS items, provided the services reflect the updated descriptions.

Change to item description/fees:

Items to be deleted from the MBS:

30487, 41819, 41820, 30493, 30476

Amendments to items on the MBS:

11820	<p>Capsule endoscopy to investigate an episode of obscure gastrointestinal bleeding, using a capsule endoscopy device (including administration of the capsule, associated endoscopy procedure if required for placement, imaging, image reading and interpretation, and all attendances for providing the service on the day the capsule is administered) if:</p> <p>(a) the service is provided to a patient who:</p> <p>(i) has overt gastrointestinal bleeding; or</p> <p>(ii) has gastrointestinal bleeding that is recurrent or persistent, and iron deficiency anaemia that is not due to coeliac disease, and, if the patient also has menorrhagia, has had the menorrhagia considered and managed; and</p> <p>(b) an upper gastrointestinal endoscopy and a colonoscopy have been performed on the patient and have not identified the cause of the bleeding; and</p> <p>(c) the service has not been provided to the same patient on more than 2 occasions in the preceding 12 months; and</p> <p>(d) the service is performed by a specialist or consultant physician with endoscopic training that is recognised by the Conjoint Committee for the Recognition of Training in Gastrointestinal Endoscopy; and</p> <p>(e) the service is not associated with a service to which item 30680, 30682,</p>
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	<p>30684 or 30686 applies</p> <p>Fee: \$2,039.20 Benefit: 75% = \$1,529.40 85% = \$1,957.50</p>
30473	<p>Oesophagoscopy (not being a service to which item 41816 or 41822 applies), gastroscopy, duodenoscopy or panendoscopy (1 or more such procedures), with or without biopsy, not being a service associated with a service to which item 30478 or 30479 applies.</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$177.10 Benefit: 75% = \$132.85 85% = \$150.55</p>
30478	<p>Oesophagoscopy (other than a service to which item 41816, 41822 or 41825 applies), gastroscopy, duodenoscopy, panendoscopy or push enteroscopy, one or more such procedures, if:</p> <p>(a) the procedures are performed using one or more of the following endoscopic procedures:</p> <ul style="list-style-type: none">(i) polypectomy;(ii) sclerosing or adrenalin injections;(iii) banding;(iv) endoscopic clips;(v) haemostatic powders;(vi) diathermy;(vii) argon plasma coagulation; and <p>(b) the procedures are for the treatment of one or more of the following:</p> <ul style="list-style-type: none">(i) upper gastrointestinal tract bleeding;(ii) polyps;(iii) removal of foreign body;(iv) oesophageal or gastric varices;(v) peptic ulcers;(vi) neoplasia;(vii) benign vascular lesions;(viii) strictures of the gastrointestinal tract;(ix) tumorous overgrowth through or over oesophageal stents; <p>other than a service associated with a service to which item 30473 or 30479 applies</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$245.55 Benefit: 75% = \$184.20 85% = \$208.75</p>
30479	<p>Endoscopy with laser therapy, for the treatment of one or more of the following:</p> <ul style="list-style-type: none">(a) neoplasia;(b) benign vascular lesions;(c) strictures of the gastrointestinal tract;(d) tumorous overgrowth through or over oesophageal stents;(e) peptic ulcers;



	<p>(f) angiodysplasia; (g) gastric antral vascular ectasia; (h) post-polypectomy bleeding;</p> <p>other than a service associated with a service to which item 30473 or 30478 applies</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$476.10 Benefit: 75% = \$357.10 85% = \$404.70</p>
30475	<p>Endoscopic dilatation of stricture of upper gastrointestinal tract (including the use of imaging intensification where clinically indicated)</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$348.95 Benefit: 75% = \$261.75 85% = \$296.65</p>
41831	<p>Oesophagus, endoscopic pneumatic dilatation of, for treatment of achalasia</p> <p>Multiple Services Rule</p> <p>(Anaes.) (Assist.)</p> <p>Fee: \$357.00 Benefit: 75% = \$267.75 85% = \$303.45</p>
30688	<p>Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, for the staging of 1 or more of oesophageal, gastric or pancreatic cancer, not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis.</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$364.90 Benefit: 75% = \$273.70 85% = \$310.20</p>
30690	<p>Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, with fine needle aspiration, including aspiration of the locoregional lymph nodes if performed, for the staging of 1 or more of oesophageal, gastric or pancreatic cancer, not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis.</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$563.30 Benefit: 75% = \$422.50 85% = \$481.60</p>
30692	<p>Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, for the diagnosis of 1 or more of pancreatic, biliary or gastric submucosal tumours, not in association with another item in this Subgroup (other than</p>



	<p>item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis.</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$364.90 Benefit: 75% = \$273.70 85% = \$310.20</p>
30694	<p>Endoscopic ultrasound (endoscopy with ultrasound imaging), with or without biopsy, with fine needle aspiration, for the diagnosis of 1 or more of pancreatic, biliary or gastric submucosal tumours, not in association with another item in this Subgroup (other than item 30484, 30485, 30491 or 30494) and other than a service associated with the routine monitoring of chronic pancreatitis.</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$563.30 Benefit: 75% = \$422.50 85% = \$481.60</p>
32084	<p>Flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy up to the hepatic flexure, with or without biopsy, other than a service associated with a service to which item 32090 or 32093 applies.</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$111.35 Benefit: 75% = \$83.55 85% = \$94.65</p>
32087	<p>Endoscopic examination of the colon up to the hepatic flexure by flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy for the removal of 1 or more polyps or the treatment of radiation proctitis, angiodysplasia or post-polypectomy bleeding by argon plasma coagulation, one or more of, other than a service associated with a service to which item 32090 or 32093 applies</p> <p>Multiple Services Rule</p> <p>(Anaes.)</p> <p>Fee: \$204.70 Benefit: 75% = \$153.55 85% = \$174.00</p>