# Medicare Benefits Schedule (MBS) item 18361 factsheet

Last updated: 17 November 2020

## What are the changes?

From 1 December 2020, amendments to MBS item 18361 for the treatment of moderate to severe upper limb spasticity due to cerebral palsy will enable Medicare benefits to be paid for injection of the patients who meet the same criteria as the Pharmaceutical Benefits Schedule (PBS) listed medicines.

The changes to item 18361 will include:

* Adding Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport®) as an acceptable alternative treatment, and
* A patient who is at least 18 years of age no longer has to have commenced treatment for the spasticity with botulinum toxin supplied under the PBS, as is currently outlined in part (b) of the existing MBS descriptor.

## Why are the changes being made?

The amendment is being made following the recommendations from the Pharmaceutical Benefits Advisory Committee (PBAC), with the support of the Medical Services Advisory Committee (MSAC). The MBS changes are designed to align the delivery service of botulinum toxin for moderate to severe upper limb spasticity due to cerebral palsy with the criteria for the PBS listed medicines and improve patient access.

A full copy of the PBAC’s public summary document can be found at: [PBAC Public Summary Document – Meeting July 2020](https://www.pbs.gov.au/info/industry/listing/elements/pbac-meetings/psd/2020-07/clostridium-botulinum-type-a-toxin-haemagglutinin-complex). More information about the Health Technology Assessment process can be found at [msac.gov.au](http://www.msac.gov.au/) and [pbs.gov.au](https://www.pbs.gov.au/info/industry/listing/participants/pbac).

## What does this mean for providers?

Specialists and consultant physicians can provide botulinum toxin supplied under the PBS to patients who require treatment for moderate to severe upper limb spasticity due to cerebral palsy. When accessing item 18361, providers must familiarise themselves with the item descriptor and explanatory note to maintain contemporary best practice and clinical informed consent.

## How will these changes affect patients?

This change will continue to allow access to Medicare rebates for treatment of moderate to severe upper limb spasticity due to cerebral palsy. The requirement that patients be at least 18 years of age to have commenced treatment for the spasticity with botulinum toxin supplied under the PBS has been removed. This will result in improved access to clinically proven medicines and with fewer restrictions.

## Who was consulted on the changes?

The Government undertook public consultation during the health technology assessment of the original service. However, consultation regarding the proposed changes was undertaken with relevant Government stakeholders including Services Australia, Department of Veterans’ Affairs, the Department of Finance, and in consultation with the relevant medicine sponsors.

The changes to MBS Item 18361 are a result of the recommendations from the PBAC, with the support of the MSAC,

## How will the changes be monitored and reviewed?

MBS item 18361 will be subject to MBS compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed.

Significant variation from forecasted expenditure may warrant review and amendment of fees, and incorrect use of MBS items can result in penalties including the health professional being asked to repay monies that have been incorrectly received.

The amended MBS item will be reviewed approximately 24 months post-implementation.

## Where can I find more information?

The current item descriptors and information on other changes to the MBS can be found on the MBS Online website at [www.mbsonline.gov.au](http://www.mbsonline.gov.au). You can also subscribe to future MBS updates by visiting [MBS Online](http://www.mbsonline.gov.au/) and clicking ‘Subscribe’.

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

Subscribe to ‘[News for Health Professionals](https://www.servicesaustralia.gov.au/organisations/health-professionals/news/all)’ 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 Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors and can be accessed via the MBS Online website under the [Downloads](https://protect-au.mimecast.com/s/YGuBCWLVnwSNGEDUxwHa2?domain=mbsonline.gov.au) page.

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

## Amended item descriptor details

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| 18361 item descriptor  | Clostridium Botulinum Type A Toxin-Haemagglutinin Complex (Dysport) or Botulinum Toxin Type A Purified Neurotoxin Complex (Botox), injection of, for the treatment of moderate to severe upper limb spasticity due to cerebral palsy if:(a) the patient is at least 2 years of age; and(b) the treatment is for all or any of the muscles subserving one functional activity and supplied by one motor nerve, with a maximum of 4 sets of injections for the patient on any one day (with a maximum of 2 sets of injections for each upper limb), including all injections per set(Anaes.) Fee: $128.75 Benefit: 75% = $96.60 85% = $109.45 |