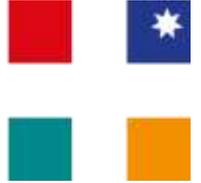


Australian
Private Hospitals
Association



MBS Review: Report from the Anaesthesia Clinical Committee 2017

19 October 2018

Australian Private Hospitals Association ABN 82 008 623 809

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Introduction

The Australian Private Hospitals Association (APHA) is appreciative of the opportunity to make a submission to the Medicare Benefits Schedule (MBS) Review in response to the recommendations in the report from the Anaesthesia Clinical Committee.

In this response, the APHA has focused on issues that could arise for private hospitals if these recommendations were adopted. Some of these issues lie outside the scope of the terms of reference for the MBS Review, for example they pertain to potential implications for the regulations governing private health insurance.

The Private Health Insurance (Benefit Requirements) Rules 2011 (Compilation No. 55, as of [24 September 2018](#): “the Rules”) make detailed reference to relevant MBS items, and it is therefore essential to consider whether recommendations from the MBS Review will give rise to the need for changes to private health insurance regulation.

The issues in this submission are raised with the intention of informing implementation of the proposed recommendations should they be adopted by the Australian Government.

The APHA also advocates there should be sufficient time allocated by the Department of Health for the implementation of the flow-on changes when changes are made to the MBS, such as the Rules (above) and the National Procedure Banding Committee processes, especially when there are changes to a large number of MBS items simultaneously.

In making these comments, APHA remains fully supportive of the objectives of the MBS Review and recommendations intended to promote sound, evidence-based clinical practice.

Anaesthesia recommendations

The APHA is largely supportive of the recommendations made in the anaesthesia report, and will therefore not address all recommendations separately. Below are the APHA comments for a select number of recommendations.

Recommendation 1: The items listed for restructure (items 17610, 17615, 17620 and 17625) are currently all listed in the Rules as Type C, Category 3 (therapeutic procedures), Table T6.

The APHA suggests the new items (Item 1, Item 2 and Item 3) should all be added to the Rules as Type C, Category 3 (therapeutic procedures), Table T6.

Recommendation 64: The APHA notes the recommendation by the Anaesthesia Clinical Committee to record start and end times of all procedures.

The APHA suggests the Principles and Rules Committee, if accepting this recommendation to consider this proposal for other craft groups, needs to consider the impact on existing systems and should show preference for using data already collected routinely during procedures. The Principles and Rules Committee will also need to consider what would be the impact of such a requirement on multiple procedure interventions and whether recording a start and end time for each MBS item is practicable.

The APHA reserves the right to comment on any future recommendations put forward by the Principles and Rules Committee on the recording of start and end times for MBS procedures.

Private hospitals in Australia

The private hospital sector makes a significant contribution to health care in Australia, providing a large number of services and taking the pressure off the already stretched public hospital system.

According to the most recent data available, the private hospital sector treats:

- 4.4 million separations a year.

In 2016–17, it delivered:

- More than a third of chemotherapy
- 60% of all surgery
- 79% of rehabilitation
- 73% of eye procedures
- Almost half of all heart procedures
- 73% of procedures on the brain, spine and nerves.

Australian private hospitals by numbers:

- Half (49%) of Australian hospitals are private
- 657 private hospitals made up of:
 - 300 overnight hospitals
 - 357 day hospitals
- 34,339 beds and chairs
 - 31,029 in overnight hospitals
 - 3,310 in day surgeries
- 69,299 full-time equivalent staff (AIHW 2018, ABS 2018).

The Australian Private Hospitals Association

The APHA is the peak industry body representing the private hospital and day surgery sector. About 70% of overnight hospitals and half of all day surgeries in Australia are APHA members.