

## MEDICAL SERVICES ADVISORY COMMITTEE (MSAC) EXECUTIVE

### Minutes from the MSAC Executive Meeting, 31 May 2024

#### **Mobile X-ray services provided within residential aged care facilities – Medical Research Future Fund (MRFF) Project 1183855 Report (in relation to MSAC Application 1482)**

The MSAC Executive recalled that at the September 2017 MSAC Executive meeting, it considered *MSAC Application 1482 – New item numbers and rebates for mobile radiology services*. This application proposed an additional fee to the current Medical Benefit Schedule (MBS) items for x-ray and ultrasound imaging services provided within Residential Aged Care Facilities (RACF). The MSAC Executive recalled that this application did not involve a health technology assessment (HTA) question, therefore the MSAC Executive requested a cost analysis be undertaken by the department. This cost analysis was to provide a comparison of the costs involved in delivering a mobile X-ray (MXR) and ultrasound services at RACFs, compared to the cost of presentations at emergency departments. Additionally, the MSAC Executive recalled that it requested a review of the service post implementation be conducted via the Medical Research Future Fund (MRFF).

The MSAC Executive recalled that in June 2018, it recommended MBS funding for a limited number of X-ray services, conditional on the resident at the RACF being assessed in person by a General Practitioner (GP). On 1 November 2019, MBS item number 57541 was listed as a ‘call out’ fee for MXR services within RACFs under certain conditions with a fee of \$73.65.

The MSAC Executive noted that since the implementation of the ‘call out’ fee item, the applicant of MSAC application 1482, Aged Care Imaging Pty Ltd (Assoc Prof Michael Montalto) has contacted the department on several occasions. The applicant requested the MSAC Executive to review and consider increased funding for MBS item 57541. The MSAC Executive noted that most of the recommendations from the applicant are beyond the scope of the MBS and/or were not considered suitable by the MSAC Executive when it discussed MSAC application 1482 at the September 2017 MSAC meeting.

The MSAC Executive noted that most stakeholders consulted within the department advised that within the MBS framework, telehealth consultations must be between the resident and the GP with which they have an established clinical relationship. However, the MSAC Executive noted that the Chief Nurse and Midwifery Office, recommended that nurse practitioners be able to request a MXR after they have physically examined the resident and provided a service described in MBS item 57541.

The MSAC Executive noted the department reviewed and considered the recommendations provided in the MRFF *Mobile X-ray services provided within residential aged care facilities* Report (the Report). The MSAC Executive noted that the department does not support progressing with any of the recommendations and that some of the recommendations were not supported in application 1482 (2017). The MSAC Executive considered that most MBS services for this item are currently bulk billed, inferring that the broader market accepts the current fee as reasonable. Without sufficient justification for a fee increase, the MSAC Executive did not support a fee increase to MBS item 57541. The MSAC Executive noted the utilisation estimates demonstrate an increase of MBS item 57541 over time. The MSAC Executive considered that this does not suggest current arrangements are preventing subsidised access, given the increased utilisation estimates of MBS item 57541. Therefore, the MSAC Executive agreed with the department and supported not progressing with any of the recommendations.

The MSAC Executive noted that the department supported extension of MBS item 57541 to enable nurse practitioners to request MXR, following a physical examination with the resident of the RACF, as per advice from the Chief Nurse and Midwifery Office. The MSAC Executive considered the proposal appropriate and within the scope of nurse practitioners at RACFs. The MSAC Executive noted that some residents within RACFs may experience difficulties in accessing GPs and/or medical facilities. The MSAC Executive noted that increasing access to medical services for residents in RACFs by offering greater access to mobile 'call out' services, could potentially reduce the burden on GPs, hospitals and/or medical facilities. However, the MSAC Executive considered that although increased access to mobile 'call out' imaging services could provide greater access, most RACF patients will still require treatment at a hospital/GP due to more complex conditions with multiple comorbidities. Therefore, the MSAC Executive considered the proposed extension of MBS item 57541 would have minimal impact on reducing the overall number of RACF patients presenting at a hospital/GP, The MSAC Executive supported extension of MBS item 57541 to enable a Medicare rebate for a 'call out' fee when a nurse practitioner requests an MXR, after physically examining the resident of the RACF.

The MSAC Executive noted that the request(s) to amend MBS item 57541 had been raised by an individual/business entity, rather than from clinicians or peak bodies. The MSAC Executive considered that the current information does not suggest a clinical need and/or justification for a fee increase or extension to MBS item 57541. However, the MSAC Executive noted that peak bodies such as the Royal Australian College of General Practitioners (RACGP) and relevant medical clinicians/specialists such as GPs and/or Geriatricians would be best placed to determine if a clinical need is present.