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Department of Health
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To whom it may concern

Report from the Otolaryngology, Head and Neck Surgery Clinical Committee of the Medicare Benefits Schedule Review Taskforce

The Royal Australian College of General Practitioners (RACGP) thanks the Department of Health (the Department) for the opportunity to comment on the report from the Otolaryngology, Head and Neck Surgery Clinical Committee of the Medicare Benefits Schedule (MBS) Review Taskforce.

The RACGP's response addresses the following recommendations in the Committee's report:

- Recommendations 1 and 2 – access to MBS audiology items should be expanded to include any medical practitioner referral.
- Recommendation 24 – the item descriptor for item 41647 should be amended to address inappropriate use for the removal of uncomplicated wax and debris.

Recommendations 1 and 2 – Expanding referral options for audiology items

The RACGP supports the Committee's recommendation that access to MBS audiology items be expanded to include any medical practitioner referral.

As noted in the report, access is currently limited to referrals from ear, nose and throat (ENT) surgeons and neurologists. The Committee considers this restriction to be a barrier to accessing audiology services, particularly for consumers in rural and regional areas. The report also states that the current restriction does not reflect the value audiology has in patient case management in a wider variety of clinical pathways.

As the first point of entry into the healthcare system, specialist general practitioners (GPs) are responsible for assessing and managing the health needs of their patients, and facilitating their patients' access to other health professionals for assessment and care. This can often take the form of a referral to a non-GP medical specialist or consultant physician.¹

Expanding referral options for audiology services through the MBS, including allowing referrals from GPs, will improve patient access to appropriate care. This change will be of particular benefit to patients and providers in rural, regional and remote areas, including remote Aboriginal Medical Services that provide audiology services.

Recommendation 24 – Amendment of item descriptor for item 41647

The Committee has recommended that the item descriptor for item 41647 be amended to address inappropriate use for the removal of uncomplicated wax and debris.

The Committee has also called for an explanatory note to be added which states that the item is not for the removal of uncomplicated wax or debris if it can be achieved using a simpler method, such as topical eardrops or syringing.

GPs who perform microsuction and operating microscopy provide a service for:

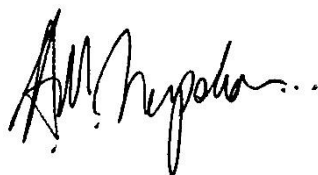
- difficult canals
- difficult wax build-up
- patients who have had complications from syringing
- patients for whom syringing is risky
- identification of small perforations/tears in the tympanic membrane.

Should the descriptor be amended, there is a risk that microsuction will be exclusively performed by non-GP specialists. This has implications in terms of reducing patient access to these services when needed and increasing costs by making patients attend other medical specialists for this service unnecessarily.

The RACGP recommends that appropriately trained GPs be able to perform microsuction (and claim the MBS item) in the general practice setting in circumstances where other ear clearing techniques have failed or are inappropriate.

The RACGP looks forward to contributing to further discussions around the Committee's recommendations. Should you have any questions or comments regarding the RACGP's submission, please contact either myself or Ms Michelle Gonsalvez, National Manager, Policy and Advocacy, on (03) 8699 0490 or at michelle.gonsalvez@racgp.org.au

Yours sincerely



Dr Harry Nespolon
President

References

¹ The Royal Australian College of General Practitioners. Referring to other medical specialists: A guide for ensuring good referral outcomes for your patients. East Melbourne, Vic: RACGP, 2019.