

17 August 2021

Pathology Services Section
Diagnostic Imaging and Pathology Branch
Australian Government Department of Health
PO Box 9848, Canberra, ACT 2601

Email: commentsMSAC@health.gov.au cc: MSAC.Pathology.Policy@health.gov.au

Dear MSAC Pathology Services Section secretariat,

Re: MSAC Application 1637 - Expanded Reproductive Carrier Screening of couples for joint carrier status of genes associated with autosomal recessive and X-linked conditions and MSAC Application 1671 - Targeted carrier testing for severe monogenic conditions

The Royal Australian College of General Practitioners (RACGP) thanks the Medical Services Advisory Committee (MSAC) for the opportunity to provide comment on the consultation for MSAC applications 1637 and 1671.

While the RACGP is overall supportive of these genetic tests being available through the Medical Benefits Schedule (MBS), we provide the following comment and requests for clarification regarding each of the applications.

MSAC Application 1637

The proposed medical service is to identify the carrier status of couples for autosomal recessive conditions and of women for X-linked recessive conditions, at pre-conception or early pregnancy.

- The RACGP requests clarification on the decision to only offer this test to couples. Individuals should
 also be provided the opportunity to have the test as part of pre-conception counselling.
- The applicant requests that health care professionals, including general practitioners (GPs), would be
 able to offer the test. It is important that education is made available to assist GPs who wish to utilise the
 MBS item. Appropriate information should also be available to GPs to provide to patients to enable them
 to make informed decisions.

MSAC Application 1671

This proposal relates to expanding testing for specific genes based on ethnicity and family history. The following points require further clarification.

- The examples provided relate to Ashkenazi Jewish people. How will this model be expanded to other ethnicities?
- Australia has a diverse multi-racial population. Which other populations would be offered other targeted genetic carrier panels, and more importantly, how would ancestry/ethnicity be determined to select the panel?
- As genetic health professionals are a small workforce, we anticipate pre-test and post-test counselling
 will be carried out in general practice. The brief options provided in the application on the models of pretest and post-test counselling do not address the role of the GP. As such, the models of implementation
 and how GPs fit into the model need further clarification.



If you have any queries regarding this submission, please contact Stephan Groombridge at stephan.groombridge@racgp.org.au or telephone +61 3 8699 0544.

Yours sincerely,

Dr Karen PricePresident