

29 October 2019

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Locations

- St Vincent's Private Hospital Northside
formerly known as Holy Spirit Northside Private Hospital
- Chermiside Day Hospital
- St Andrew's Hospital
- North West Private Hospital
- North Lakes Consulting Suites

Administration

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Digestive Diseases Queensland Trust
ABN 22 181 826 936

Dear Colleague,

Thank you for your support of Digestive Diseases Queensland. At DDQ we are committed to the highest standards of clinical practice and the care of your patients.

On 1st November 2019, important and comprehensive changes will take effect with a complete overhaul of colonoscopy item numbers. We are writing to inform you of these changes so as to ensure that your patients are eligible for a Medicare rebate when they undergo a colonoscopy. Attached is a copy of the eight item numbers. Your patient's indication for a colonoscopy must fit one of the Medicare rebatable indications.

As a brief overview, we have outlined the indications that will be rebatable under the new Medicare rules.

Indications that will permit a colonoscopy to be performed at any time (item 32222):

1. Positive FOBT.
2. Symptoms consistent with a pathology of the colonic mucosa.
3. Anaemia or iron deficiency.
4. Diagnostic imaging showing any abnormality related to the colon.
5. Undergoing first examination following surgery for colorectal cancer.
6. Undergoing preoperative evaluation.
7. Management of inflammatory bowel disease.

Referral based on previous removal of colonic polyps (item 32223, 32224, 32225):

For a referral based on previous removal of colonic polyps, a patient must fulfil one of the conditions as listed under item numbers 32223, 32224 and 32225 (please see item number descriptors attached). For a referral based on previous removal of colonic polyps, please submit the patient's previous colonoscopy report and the previous colonic polyp histology (not required if their last procedure was with DDQ).

All referrals based on the previous removal of colonic polyps will be assessed by one of our doctors to ensure they meet Medicare criteria before the patient is booked for their procedure.

Referral based on family history (item 32223):

The patient's family history **MUST** fulfil the following criteria in order for them to undergo a Medicare rebatable colonoscopy based on family history alone:

1. First-degree relative < 55 years of age at diagnosis.
2. Two first-degree relatives with a history of colorectal cancer at any age.
3. One first-degree relative and two second-degree relatives with a history of colorectal cancer.

Please note that a surveillance colonoscopy purely based on the above family history alone can only be done once every five years.

Referral based on high risk genetic conditions (item 32226):

1. Known or suspected familial conditions such as familial adenomatous polyposis syndrome, Lynch syndrome or serrated polyposis syndrome.
2. Any other genetic mutation associated with hereditary colorectal cancer.

Under this indication, colonoscopy can be performed once every 12 months

Referral based on specific conditions (item 32227):

1. For treatment of bleeding radiation proctitis, angioectasias and post-polypectomy bleeding.
2. For treatment of colonic strictures with balloon dilatation.

Finally, if a patient does not fulfil any of the other Medicare rebatable criteria but a colonoscopy is deemed clinically appropriate (item 32228):

Patients are allowed one colonoscopy in their lifetime under item number 32228. It is important to reiterate that this item number can only be used **once** in the entire lifetime of a patient.

These changes represent the most comprehensive change to colonoscopy item numbers in the history of the MBS schedule. *A key point is that it is essential that patients retain all records of previous colonoscopies, including the polyp histology.* From this point forward, it is important when a patient books for a colonoscopy that every effort has been made for them to trace their previous reports and polyp histology. This will represent a significant challenge to a number of patients.

At DDQ we are committed to upholding the highest standards of colonoscopy practice and compliance with these new item numbers, despite the logistical challenges. We will be forwarding you new referral templates and pads in the near future to facilitate referrals for appropriate colonoscopies. We will continue to partner with you to ensure that all of your patients receive optimal care.

Yours sincerely

Benedict Devereaux, Patrick Walsh and Tom Zhou