

EXPLANATORY STATEMENT

Issued by Authority of the Minister for Health and Ageing

National Health Act 1953
Determination under subsections 73AAG (6) and (7)
(HIB 23/2005)

Subsection 73AAG(6) of the *National Health Act 1953* (the Act) provides that the Minister may determine in writing the prostheses that are no gap prostheses and the benefit amount for each no gap prosthesis.

Subsection 73AAG(7) provides that the Minister may determine in writing the prostheses that are gap permitted prostheses, and the minimum and maximum benefit amounts for each gap permitted prosthesis.

This determination amends the determination signed by the delegate of the Minister on 19 October 2005 (HIB18/2005). Some products have been added, some products have been deleted, and some product details have been corrected.

Specifically, the following amendments are contained in the determination.

Additions

1. The addition of the following items to Part A – Prostheses:

- Item 1 of the determination adds a product with Billing Code NM002 – Constant Rx Coronary Stent System;
- Item 22 of the determination adds a product with Billing Code IQ002 – Ocuvis and Ocumax 2% Hydroxypropylmethylcellulose;
- Item 29 of the determination adds six products:
 - Billing Code GM060 – Maxima/Optima Anterior Cervical Plate System
 - Billing Code GM061 – Maxima/Optima Anterior Cervical Plate System
 - Billing Code GM062 - Maxima/Optima Anterior Cervical Plate System
 - Billing Code GM063 - Maxima/Optima Anterior Cervical Plate System
 - Billing Code GM064 - Maxima/Optima Anterior Cervical Plate System
 - Billing Code GM065 - Maxima/Optima Anterior Cervical Plate System;
- Item 30 of the determination adds a product with Billing Code ZI459 – Collagen Meniscus Implant;
- Item 43 of the determination adds two products:
 - Billing Code BB047 – Downs Austin-Moore Hip
 - Billing Code BB048 – Downs Thompson Stem;
- Item 46 of the determination adds a product with Billing Code ST001 – Restoration T3 Revision Hip System – Proximal Sleeve;

- Item 49 of the determination adds a product with Billing Code AD293 – WMT Perfecta Hip System;
- Item 50 of the determination adds a product with Billing Code GM045 – BioBall - Femoral Modular Head System;
- Item 51 of the determination adds a product with Billing Code BI895 – M2A Magnum Prosthesis;
- Item 53 of the determination adds a product with Billing Code ZI460 – Natural Knee Patella;
- Item 59 of the determination adds a product with Billing Code ZI331 – Zimmer Periarticular Locking Plates;
- Item 71 of the determination adds two products:
 - Billing Code ZI356 – Medullary Plug, MS30
 - Billing Code ZI451 – Allofit screw hole plugs;
- Item 72 of the determination adds six products:
 - Billing Code ZI342 - GSB Cemented Elbow
 - Billing Code ZI343 – GSB Cemented Elbow
 - Billing Code ZI344 - GSB Cemented Elbow
 - Billing Code ZI345 - GSB Cemented Elbow
 - Billing Code ZI464 - GSB Cemented Elbow
 - Billing Code ZI465 - GSB Cemented Elbow;
- Item 73 of the determination adds two products:
 - Billing Code ZI366 – Natural Hip System
 - Billing Code ZI374 – MS-30 Hip Prosthesis;
- Item 74 of the determination adds three products:
 - Billing Code ZI398 – High Tibia Osteotomy
 - Billing Code ZI406 – Natural Knee
 - Billing Code ZI407 – Natural Knee;
- Item 76 of the determination adds a product with Billing Code EK028 – ESKA Modular Shoulder;
- Item 77 of the determination adds two products:
 - Billing Code ZI440 – Anatomical
 - Billing Code ZI441 – Select Shoulder;
- Item 79 of the determination adds four products:
 - Billing Code ZI443 – Select Shoulder
 - Billing Code ZI444 – BiPolar Head
 - Billing Code ZI445 – Intermedics Select Shoulder
 - Billing Code ZI446 – Intermedics Select Shoulder;

- Item 85 of the determination adds a product with Billing Code ZI336 – Polypin Resorbable Bone Pin;
- Item 86 of the determination adds a product with Billing Code ZI447 – Bioresorbable Screw;
- Item 89 of the determination adds four products:
 - Billing Code ZI370 – Cancellous Screws
 - Billing Code ZI399 – Cancellous Screws
 - Billing Code ZI400 – Cortical Screws
 - Billing Code ZI488 – Cannulated Screw;
- Item 90 of the determination adds a product with Billing Code ZI471 – NCB-Femur Plate System Complete;
- Item 96 of the determination adds a product with Billing Code WC002 – Sof-Flex Multilength Ureteric Stent;

Deletions

2. The deletion of the following items from Part A – Prostheses:

- Item 11 of the determination deletes a product with Billing Code SI032 –CADD-Micro Model 5900 Ambulatory Infusion Pump;
- Item 24 of the determination deletes three products:
 - Billing Code SK236 – BoneSource Classic Bone Cement
 - Billing Code SK237 – BoneSource Classic Bone Cement
 - Billing Code SK238 – BoneSource Classic Bone Cement;
- Item 25 of the determination deletes a product with Billing Code ST800 –2.5gm Bone Source Hydroxyapatite Cement with Sodium Phosphate;
- Item 31 of the determination deletes a product with Billing Code LM034 –Trimed Bullet;
- Item 84 of the determination deletes a product with Billing Code LM019 – Ascension Radial Head;
- Item 94 of the determination deletes three products:
 - Billing Code ST071 – Bone Source Hydroxyapatite Cement with Sodium Phosphate
 - Billing Code ST073 – Bone Source Hydroxyapatite Cement with Sodium Phosphate
 - Billing Code ST075 – Bone Source Hydroxyapatite Cement with Sodium Phosphate;

Corrections

3. Changes to the following items in Part A – Prostheses:

- Item 2 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code OS016;

- Items 3 and 4 of the determination correct the Product Name, Further Description & Size for Billing Code SI026;
- Item 5 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SI042;
- Item 6 of the determination corrects the Size and adds a Notation for Billing Code SI042;
- Item 7 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SI043;
- Item 8 of the determination corrects the Size and adds a Notation for Billing Code SI043;
- Item 9 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SI044;
- Item 10 of the determination corrects the Size and adds a Notation for Billing Code SI044;
- Item 12 of the determination corrects the Product Name for Billing Code AB005;
- Item 13 of the determination adds a Notation for Billing Code AB005;
- Item 14 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code AB006;
- Item 15 of the determination corrects the Product Name for Billing Code AB007;
- Item 16 of the determination adds a Notation for Billing Code AB007;
- Item 17 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code AB008;
- Item 18 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code AB009;
- Item 19 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code AB010;
- Item 20 of the determination corrects the Product Name for Billing Code AB011;
- Item 21 of the determination adds a Notation for Billing Code AB011;
- Item 23 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SK176;
- Item 26 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code DY350;
- Item 27 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code GM025;
- Item 28 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code GM026;
- Item 32 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code LM029;
- Item 33, Item 34, Item 35, Item 36 and Item 37 of the determination add Notations for Billing Codes MO252, MO253, MO254, MO255 and MO256 inclusive;

- Item 38 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SK221;
- Item 39 of the determination adds a Maximum Benefit Amount for Billing Code GS174;
- Item 40 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SK010;
- Item 41 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code ST565;
- Item 42 of the determination corrects the Size for Billing Code AD289;
- Item 44 of the determination deletes the Maximum Benefit Amount for Billing Code DP119;
- Item 45 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code DY474;
- Items 47 and 48 of the determination corrects the Product Name, Description and Size for Billing Code AD292;
- Item 52 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code BI896;
- Item 54 of the determination corrects the Size for Billing Code AD144;
- Item 55 of the determination corrects the Size for Billing Code AD148;
- Item 56 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code HW091;
- Item 57 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code ST608;
- Item 58 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SR008;
- Item 60 of the determination adds a Notation for Billing Code BB215;
- Item 61 of the determination adds a Notation for Billing Code BB216;
- Item 62 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code DP311;
- Item 63 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code DP848;
- Items 64 and 65 of the determination correct the Sponsor Name for Billing Code SY051;
- Item 66 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code DP074;
- Items 67 and 70 of the determination correct the Sponsor Name for Billing Code SY188;
- Item 68 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code ST771;
- Item 69 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code ST772;

- Item 75 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SK091;
- Item 78 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code ZI442;
- Item 80, Item 82 and Item 83 correct the Grouping for Billing Codes AD160, AD161, AD283, AD284 and AD285;
- Item 81 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code LM010;
- Items 87 and 88 of the determination correct the Sponsor Name for Billing Code SY173;
- Items 91 and 92 of the determination correct the Sponsor Name for Billing Code SY091;
- Item 93 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code ZI323;
- Item 95 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code SP039;
- Item 97 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code AY014;
- Item 98 of the determination corrects the Benefit Amount/Minimum Benefit Amount for Billing Code AY016.

CONSULTATION

This Determination has been made having regard to advice provided by the Prostheses and Devices Committee (PDC), a ministerially appointed committee comprised of nominees from health funds, hospitals, clinicians, prostheses and devices suppliers, the Commonwealth, and consumer representatives. In making their recommendations, the PDC were advised by CAGs, other clinical experts, and benefits negotiators, all appointed by the PDC.

This determination and this Explanatory Statement have been registered on the Federal Register of Legislative Instruments.

PRIVATE HEALTH INSURANCE BRANCH
DEPARTMENT OF HEALTH AND AGEING
NOVEMBER 2005