Expansion of MBS items 73303 and 73304 for BRCA variant testing in patients with prostate cancer to determine eligibility for a PBS treatment

Last updated: 20 December 2024

- From 1 January 2025, the Government is amending Medicare Benefits Schedule (MBS) items 73303 and 73304. These items provide benefits for breast cancer gene 1 and 2 (*BRCA*) variant detection in patients with metastatic castration-resistant prostate cancer.
- The expanded items will support the identification of metastatic castration-resistant
 prostate cancer patients eligible for any relevant Pharmaceutical Benefits Scheme (PBS)
 listed treatments. This may also include treatments listed on the PBS in the future. Prior
 to the change, the items specified that testing was for access to olaparib only.
- This change is relevant for specialists, consultant physicians and pathologists who manage patients with these cancers.

What are the changes?

From 1 January 2025, existing MBS items 73303 and 73304 for *BRCA* variant detection of patients with metastatic castration-resistant prostate cancer, will be amended to support determining patient eligibility for a relevant treatment under the PBS. These items previously only supported testing to determine eligibility to the PBS listed treatment olaparib.

Item 73303 remains applicable once per primary tumour diagnosis, and item 73304 remains applicable once per lifetime.

For private health insurance purposes:

- item 73303 will continue to be listed under the following clinical category and procedure type:
 - Clinical category: Support List (pathology)
 - Procedure type: Unlisted
- item 73304 will continue to be listed under the following clinical category and procedure type:
 - Clinical category: Support List (pathology)
 - Procedure type: Type C

For their patients to be eligible for Medicare benefits, providers providing this service must be accredited according to the pathology accreditation standards specified in the <u>Health</u> <u>Insurance (Accredited Pathology Laboratories-Approval) Principles 2017.</u>

Why are the changes being made?

The Australian Government recognises that prostate cancer is a significant health issue for Australians and is committed to improving the diagnosis and treatment of this disease.

Prior to the change, items 73303 and 73304 were limited to determining patient eligibility for the PBS listed treatment olaparib. The 1 January 2025 amendment of these items will enable them to be used to identify patients eligible for relevant treatments which may be listed on the PBS in the future.

At its April 2024 meeting, the Medical Services Advisory Committee (MSAC) supported the expansion of items 73303 and 73304 after its assessment of <u>Application 1765</u>. Further details about MSAC applications can be found under <u>MSAC Applications</u> on the <u>MSAC website</u>.

Who was consulted on the changes?

Public Pathology Australia, the Urological Society of Australia and New Zealand and Australian Genomics provided consultation input during the MSAC process.

How will the changes be monitored and reviewed?

Providers must ensure that Medicare services requested or claimed using their provider number meet all legislative requirements. These services should also be considered acceptable by a general body of their profession. All Medicare claiming and requesting is subject to compliance checks. Providers or requesters may be required to submit evidence about the services they bill or request and should retain adequate and contemporaneous records. More information about the Department of Health and Aged Care's (the department) compliance program can be found on its website at Medicare compliance.

Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website. You can also subscribe to future MBS updates by visiting 'Subscribe to the MBS' on the MBS Online website.

The department provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the *Health Insurance Act 1973* and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email askMBS@health.gov.au.

Private health insurance information on the product tier arrangements is available at www.privatehealth.gov.au. Detailed information on the MBS item listing within clinical categories is available on the department's website. Private health insurance minimum

accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the *Private Health Insurance (Benefit Requirements)*Rules 2011 found on the Federal Register of Legislation. If you have a query in relation to private health insurance, you should email PHI@health.gov.au.

Subscribe to 'News for Health Professionals' on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact the Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the Downloads page.

Amended item descriptors (to take effect 1 January 2025)

Category 6 - Pathology Services

Group 7 - Genetics

73303

A test of tumour tissue from a patient with metastatic castration-resistant prostate cancer, including subsequent characterisation of germline gene variants should tumour tissue testing undertaken during the same service be inconclusive, requested by a specialist or consultant physician, to determine eligibility relating to *BRCA* status for access to a relevant treatment under the Pharmaceutical Benefits Scheme:

Applicable once per primary tumour diagnosis

Fee: \$1,000.00 Benefit: 75% = \$750.00 85% = \$897.60*

73304

Detection of germline *BRCA1* or *BRCA2* pathogenic or likely pathogenic gene variants, in a patient with metastatic castration-resistant prostate cancer, for whom testing of tumour tissue is not clinically feasible, requested by a specialist or consultant physician, to determine eligibility for a relevant treatment under the Pharmaceutical Benefits Scheme;

Applicable once per lifetime

Fee: \$1,000.00 Benefit: 75% = \$750.00 85% = \$897.60*

^{*}subject to Greatest Permissible Gap.

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This factsheet is current as of the Last updated date shown above and does not account for MBS changes since that date.