

THE HANDSHAKE

The Australian Hand Surgery Society



INAUGURAL NEWSLETTER

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This is the inaugural newsletter to keep you informed of what is happening in the world of hand surgery in Australia.

2022 ANNUAL SCIENTIFIC MEETING IN PORT DOUGLAS

Please put aside the dates and register for the AHSS ASM in Port Douglas to be held 9-12 March 2021. We have 3 virtual speakers – Elisabet Hagert, David Ring and Amy Moore. This promises to be a very stimulating, thought provoking and exciting meeting. It is also the first time we will be able to meet since the covid-19 pandemic and a great opportunity to have a break in Northern Queensland.

WHAT YOU'LL FIND INSIDE:

- **ANNUAL SCIENTIFIC MEETING**
- **NIB HONEYSUCKLE**
- **MBS REVISION**
- **BOARD NOMINATIONS**
- **FELLOWSHIP OPPORTUNITY**



MBS Billing Code Revision

The MBS billing codes have been revised to reduce most procedures to one item number.

The Health Department has requested input from the AHSS which will be taken into consideration in the Rapid Review Process. We were hoping that the Rapid Review Process would deal with our concerns about the fee schedule and the loss of billing codes which we considered important. Unfortunately this is not the case. The Rapid Review Process has been limited to correcting inaccurate wording, missing numbers and billing codes that simply do not work. The guidelines of the Rapid Review Process clearly state that no consideration will be given to anything other than these corrections and amendments. The Australian Orthopaedic Association has forwarded a response to the Rapid Review Process.

We understand that amendments which we think are necessary because of the evolution of hand surgery and the redundancy of procedures over time will need to be done as a long-term process based on developing a strong working relationship with the Health Department. In order to do this the AHSS has created a Section 11 Committee with 11 surgeons from around Australia. The Section 11 Committee has met on 2 occasions and formulated a response to the Health Department regarding the new MBS billing codes. Unfortunately the full response will not be taken into consideration in the Rapid Review Process. The Health Department had 2 meetings with representatives from the AHSS and, despite requesting further meetings on multiple occasions, it has become apparent that our requests must be supported and actioned through the Australian Orthopaedic Association and the Australian Society of Plastic Surgeons.

To represent our members [the AHSS has created a forum \(link\)](#) on our website where members can

post their queries about how to use the new MBS billing codes. It will be confusing and difficult at times because there will be no appropriate number. It is also an opportunity for the members to comment on inaccuracies and problems that they are experiencing. The forum can be accessed on the AHSS website and **I encourage you to actively participate.**

The AHSS Board and the Section 11 Committee have passed on our recommendations to the Health Department, the AOA, ASPS and the AMA.



Policing the Use of Codes

The Professional Services Review (PSR) has requested input from the AHSS. Specifically this relates to Section 92 of the Health Insurance Act of 1973. Section 92 gives the Health Department a mechanism to prosecute medical practitioners using MBS codes incorrectly. Medical professionals who are investigated by the Health Department using the guidelines of Section 92 are deemed Persons Under Review (PUR). The AHSS has been asked for guidelines into the review process for PUR. This highlights the importance of members contributing to the Section 11 forum. Not only will members be given an opportunity to resolve any difficulties but this will also provide guidelines regarding what the AHSS considers to be appropriate use of the billing codes.

Has Managed Healthcare Arrived in Australia?

I represented the AHSS at a stake holders meeting where 100 medical and allied health professionals were invited to attend a conference regarding the NIB Honeysuckle application to the ACCC. As a result of the outcome of this meeting the AHSS requested a legal opinion ([link](#)), regarding the dangers and potential problems of the NIB Honeysuckle application not only to the profession but to the health system in Australia. The AHSS was given the opportunity to comment on this application and we once again obtained a legal opinion ([link](#)), about the potential risks and problems of this application. These legal opinions were forwarded to the ACCC, the AMA, the AOA, the RACS, ASPS and COPS. Despite this, the NIB Honeysuckle application was granted by the ACCC with restrictions to 40% of the market and for a 5 year duration.



Summary

The government has the politically sensitive problem of the gap payment. This is often attributed to the 'greedy doctor' but in essence it is the consequence of a failure of the MBS system to keep pace with the cost of providing a medical service. The medical profession has also failed to provide the government with a solution for the escalating costs of providing health for our ageing population. The outcome is that NIB Honeysuckle has been granted exception from the ACCC because it now offers a 'no-gaps' product. This product will be paid for by the medical and allied health professionals not the government nor NIB Honeysuckle. This infers that the MBS benefit is considered to be suitable remuneration for providing healthcare in the private sector. The successful application limiting NIB Honeysuckle to 40% gives them the opportunity to form a

a monopsony and vertically integrate. The current guidelines in the USA is that no such exemption is granted for more than 20% of the market for this reason. NIB Honeysuckle now has the opportunity to purchase hospitals and clinics and subcontract health providers for the MBS rebate. There is also the question of adequate regulation of these rules.

Are you the future of the AHSS?

AHSS Board Nominations

Nominations for the AHSS Board and Executive Committee are now open. Should you wish to nominate, please refer to the email sent on behalf of our Secretary Mark Ross or alternatively contact our Administrator Trudy Wapling to obtain a copy of the nomination form.

Fellowship Opportunity

The Brisbane Hand and Upper Limb Fellowship program is seeking an exceptional candidate for the highly sought-after AOA accredited, internationally renowned, Fellowship program, to begin in February 2022, due to an unexpected withdrawal. This Upper Limb Fellowship comprises upper limb specialists with national and international profiles, who share a common interest in surgical technique excellence and upper limb research. The Fellowship could be offered as a 6 or 12-month position, depending on the candidate.

We encourage you to distribute this information to members or junior colleagues who may be interested.

website: <http://upperlimb.com/fellowship>

email: researchmanager@upperlimb.com