



## MBS Review recommendations: Colonoscopy services

Date of change: **1 November 2019**

New items: **32222 32223 32224 32225 32226 32227 32228 32229**

Deleted items: **32088 32089 32090 32093**

Amended items: **32084 32087**

### Revised structure

- The revised structure contains eight new items and deletes four items.
- The new items better describe clinical indications for colonoscopy and ensure appropriate surveillance intervals for patients with an increased risk of colorectal cancer.
- The revised structure supports the provision of effective, evidence-based colonoscopy services and reduces low-value care. The new eight item structure also improves access to MBS-funded colonoscopy services for those who need it, while being implementable and practical.
- Note that minor amendments will also be made to explanatory notes TN.8.2 and TN.8.17 to align with item changes. Explanatory note TN.8.134 will be deleted due to being obsolete. Explanatory note TN.8.152 will be added to support the appropriate use of the new colonoscopy items.
- The Health Insurance (General Medical Services Table) Regulations wording for MBS item descriptors has been used in this document.

### Patient impacts

- Patients will receive Medicare rebates for colonoscopy services that are clinically appropriate and reflect modern clinical practice.

### Restrictions or requirements

- Item 32222 (Endoscopic examination of the colon to the caecum by colonoscopy)
  - > This item is applicable to patients with accepted and demonstrated clinical indication/s.
  - > This item is 'Applicable only once on a day under a single episode of anaesthesia or other sedation'.
  - > This item may be used following a positive faecal occult blood test (FOBT). This includes, but is not restricted to, a positive FOBT via the National Bowel Cancer Screening Program.
  - > Further information on this item is provided in Explanatory Note TN.8.152 including:



- clarification that a patient with a low-risk family history should undergo FOBT as the primary surveillance tool
  - details on appropriate colonoscopy intervals for patients with a positive FOBT and subsequent colonoscopy with no abnormalities detected
  - clarification that MBS item 32084 should be billed if preparation is inadequate to allow visualisation up to the caecum.
- Item 32223 (endoscopic examination of the colon to the caecum by colonoscopy)
  - > This item is restricted to patients with a history of low risk adenomas, and/or MODERATE risk of colorectal cancer due to family history, and/or history of colorectal cancer where the initial colonoscopy did not reveal any adenomas.
  - > This item is 'Applicable only once in any 5-year period'. This is an appropriate and conservative surveillance interval for patients that fit the applicable risk profile. National clinical guidelines indicate that a colonoscopy every 10 years is sufficient for patients with 1-2 adenoma (<10mm with no high-risk histological features).
  - > Explanatory Note TN.8.152 defines MODERATE risk of colorectal cancer due to family history as:
    - 1 first degree relative less than 55 years of age at diagnosis; OR
    - 2 first degree relatives with a history of colorectal cancer; OR
    - 1 first degree relative and 2 second degree relatives with a history of colorectal cancer.
  - > National clinical practice guidelines support the use of FOBT as a first line test for patients with a low risk family history of colorectal cancer, that is, for patients that do not meet the definition of MODERATE risk.
  - > Further information, including appropriate time intervals for surveillance, is provided in Explanatory Note TN.8.152.
- Item 32224 (endoscopic examination of the colon to the caecum by colonoscopy)
  - > This item is applicable to patients with a MODERATE risk of colorectal cancer due to specified previous procedure findings.
  - > This service is 'Applicable only once in any 3-year period'.
  - > This service is restricted to patients with a history of adenomas  $\geq 10$ mm in diameter, and/or adenomas with histological features indicative of colorectal cancer risk, and/or 5-9 adenomas, each which were <10mm in diameter and without specified histological features.
  - > Further information, including appropriate time intervals for surveillance, is provided in Explanatory Note TN.8.152.
- Item 32225 (endoscopic examination of the colon to the caecum by colonoscopy)
  - > This item is applicable to patients with a HIGH risk of colorectal cancer due to specified previous procedure findings and/or outcomes.
  - > This service is 'Applicable not more than 4 times in any 12-month period'.
  - > Further information, including appropriate time intervals for surveillance, is provided in Explanatory Note TN.8.152.
- Item 32226 (Endoscopic examination of the colon to the caecum by colonoscopy)



- > This item is applicable to patients with a HIGH risk of colorectal cancer due to a known or suspected familial condition and/or a genetic mutation associated with hereditary colorectal cancer.
- > This item is 'Applicable only once in any 12-month period'.
- > Further information, including appropriate time intervals for surveillance, is provided in Explanatory Note TN.8.152.
- Item 32227 (Endoscopic examination of the colon to the caecum by colonoscopy)
  - > This item is for the treatment of colonic bleeding, and/or for the treatment of colonic strictures with balloon dilation.
  - > This item is 'Applicable only once on a day under a single episode of anaesthesia or other sedation'.
- Item 32228 (Endoscopic examination of the colon to the caecum by colonoscopy)
  - > This item is an exemption item to be used where the clinician is unable to access sufficient patient information to enable a colonoscopy to be performed under items 32222-32226 but, in their opinion, there is a clinical need for a colonoscopy.
  - > In the absence of reliable clinical history, clinicians should use their best clinical judgement to determine the interval between testing and the item that best suits the condition of the patient.
  - > This item is intended to support the transition to the new MBS items.
  - > This item is 'Applicable only once' per patient, per lifetime.
- Item 32229 (Removal of one or more polyps during colonoscopy)
  - > This item is to be used in association with a service to which item 32222, 32223, 32224, 32225, 32226 or 32228 applies.
  - > There is no time restriction for the use of this item.
- Items 32222 to 32228 (new items for endoscopic examination of the colon to the caecum by colonoscopy)
  - > For these items, the 'to the caecum' requirements for colonoscopy examinations do not apply to patients who have no caecum following right hemi colectomy. For these patients the examination should be to the anastomosis. Item 32084 should be billed if preparation is inadequate to allow visualisation to the caecum.
- Colonoscopy where a polyp or polyps have been removed
  - > Items 32222-32226 and 32228 provide for diagnostic colonoscopy when claimed alone. Where a polyp or polyps are removed during the colonoscopy, item 32229 should also be claimed in association with the appropriate colonoscopy item.
- Definition of previous history (items 32222-32225)
  - > For items 32223-32225, the most appropriate item to be billed is determined by the previous history of the patient as defined by the number, size and type of adenomas removed during any previous colonoscopy.



## New item 32222 – Endoscopic examination of the colon to the caecum

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Endoscopic examination of the colon to the caecum by colonoscopy, for a patient:

- (a) following a positive faecal occult blood test; or
- (b) who has symptoms consistent with pathology of the colonic mucosa; or
- (c) who has anaemia or iron deficiency; or
- (d) for whom diagnostic imaging has shown an abnormality of the colon; or
- (e) who is undergoing the first examination following surgery for colorectal cancer; or
- (f) who is undergoing pre-operative evaluation; or
- (g) for whom a repeat colonoscopy is required due to inadequate bowel preparation for the patient's previous colonoscopy; or
- (h) for the management of inflammatory bowel disease

Applicable only once on a day under a single episode of anaesthesia or other sedation (Anaes.)

**MBS fee:** \$339.70.

**Benefit:** 75% = \$254.80      85% = \$288.75

## New item 32223 – Endoscopic examination of the colon to the caecum

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Endoscopic examination of the colon to the caecum by colonoscopy, for a patient:

- (a) who has had a colonoscopy that revealed 1 to 4 adenomas, each of which was less than 10 mm in diameter, had no villous features and had no high grade dysplasia; or
- (b) who has a moderate risk of colorectal cancer due to family history; or
- (c) who has a history of colorectal cancer and has had an initial post-operative colonoscopy that did not reveal any adenomas or colorectal cancer

Applicable only once in any 5-year period (Anaes.)

**MBS fee:** \$339.70

**Benefit:** 75% = \$254.80      85% = \$288.75



## New item 32224 – Endoscopic examination of the colon to the caecum

**Overview:** . New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** . Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a moderate risk of colorectal cancer due to:

(a) a history of adenomas, including an adenoma that:

- (i) was greater than 10 mm in diameter; or
- (ii) had villous features; or
- (iii) had high grade dysplasia; or
- (iv) was an advanced serrated adenoma; or

(b) having had a previous colonoscopy that revealed 5 to 9 adenomas, each of which was less than 10 mm in diameter, had no villous features and had no high grade dysplasia.

Applicable only once in any 3-year period (Anaes.).

**MBS fee:** \$339.70

**Benefit:** 75% = \$254.80 85% = \$288.75

## New item 32225 – Endoscopic examination of the colon to the caecum

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a high risk of colorectal cancer due to having had a previous colonoscopy that:

(a) revealed 10 or more adenomas; or

(b) included a piecemeal, or possibly incomplete, excision of a large, sessile polyp

Applicable not more than 4 times in any 12-month period (Anaes.)

**MBS fee:** \$339.70

**Benefit:** 75% = \$254.80 85% = \$288.75



## New item 32226 – Endoscopic examination of the colon to the caecum

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Endoscopic examination of the colon to the caecum by colonoscopy, for a patient who has a high risk of colorectal cancer due to:

- (a) a known or suspected familial condition, such as familial adenomatous polyposis, Lynch syndrome or serrated polyposis syndrome; or
- (b) a genetic mutation associated with hereditary colorectal cancer

Applicable only once in any 12-month period (Anaes.)

**MBS fee:** \$339.70

**Benefit:** 75% = 254.80 85% = \$288.75

## New item 32227 – Endoscopic examination of the colon to the caecum

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Endoscopic examination of the colon to the caecum by colonoscopy:

- (a) for the treatment of bleeding, including one or more of the following:
  - (i) radiation proctitis;
  - (ii) angioectasia;
  - (iii) post-polypectomy bleeding; or
- (b) for the treatment of colonic strictures with balloon dilatation

Applicable only once on a day under a single episode of anaesthesia or other sedation (Anaes.)

**MBS fee:** \$476.70

**Benefit:** 75% = \$357.55 85% = \$405.20



## New item 32228 – EXCEPTION ITEM

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Endoscopic examination of the colon to the caecum by colonoscopy, other than a service to which item 32222, 32223, 32224, 32225 or 32226 applies

Applicable only once (Anaes.)

**MBS fee:** \$339.70

**Benefit:** 75% = \$254.80 85% = \$288.75

## New item 32229 – REMOVAL OF 1 OR MORE POLYPS

**Overview:** New item – Colonoscopy items 32088, 32089, 32090, 32093 deleted and replaced with eight new items 32222-32229 for colonoscopy services.

**Descriptor:** Removal of one or more polyps during colonoscopy, in association with a service to which item 32222, 32223, 32224, 32225, 32226 or 32228 applies (Anaes.)

**MBS fee:** \$274.00

**Benefit:** 75% = \$205.50 85% = \$232.90

## Deleted item 32088 Fiberoptic Colonoscopy

Services under this item are expected to be claimed under items 32222-32229.

## Deleted item 32089 Endoscopic examination of the colon beyond the hepatic flexure by fiberoptic colonoscopy for the removal of 1 or more polyps

Services under this item are expected to be claimed under items 32222-32229.

## Deleted item 32090 Fiberoptic colonoscopy examination of colon beyond the hepatic flexure with or without biopsy

Services under this item are expected to be claimed under items 32222-32229.

## Deleted item 32093 Endoscopic examination of the colon beyond the hepatic flexure by fiberoptic colonoscopy for the removal of one or more polyps, or the treatment of radiation proctitis, angiodysplasia or post-polypectomy bleeding by argon plasma coagulation, one or more of (Anaes.)

Services under this item are expected to be claimed under items 32222-32229.



To view previous item descriptors and deleted items, visit MBS Online at [www.mbsonline.gov.au](http://www.mbsonline.gov.au), navigate to 'Downloads' and then select the relevant time period at the bottom of the page. The old items can then be viewed by downloading the MBS files published in the month before implementation of the changes

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