

THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS

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19 January 2017

**Ms Mary Warner
Director, Medical Specialist Services Section
Medical Benefits Division
Department of Health**

Via email: surgicalservices@health.gov.au

Dear Ms Warner,

Re: Skin services review – request for advice on outcomes

On behalf of The Australasian College of Dermatologists, thank you for the letter from A/g Assistant Secretary Michael Ryan, Medical Specialist Services Branch, dated 14 December 2016. The College welcomes the opportunity to provide advice to the Department of Health on outstanding issues resulting from the recent skin services review.

The request for advice from the A/g Assistant Secretary relates to two issues surrounding MBS items for excision and flap repair, namely: 1) the restrictions on billing for the new item 45201; and 2) proposed restrictions to co-claiming Mohs items (31000-31002) with items for flap repair.

The College has carefully considered these two issues and offers the following advice to the Department.

1. Restrictions on item 45201, whereby this item can only be billed when flap repair has been performed on the same date of service as the listed associated excision items.

Is the College of the view that flap repair on a subsequent date to the excision may be appropriate for some patients and if so, within what timeframe would this be reasonable?

College recognises the need for flap repairs to be performed on a subsequent date to the excision in some cases. There are a number of clinical scenarios in which this may apply including:

- Awaiting pathological assessment which confirms clearance of the skin cancer prior to repairing the surgical defect e.g.
 - Certain sub-types of skin cancer, particularly infiltrating or sclerosing tumours, often extend beyond the clinical margin. The sub-clinical growth of these types of skin cancers are well-recognised and often result in surprisingly large defects which may necessitate repair with a skin flap at a later date.
 - Skin cancers with perineural involvement often extend further than the clinical margin and delayed closure and repair with a skin flap may be needed.
 - Excision of melanoma in situ with indistinct margins requiring serial excision with paraffin-embedded horizontal sections with results at least a day later.

- Certain defects require initial healing to occur at the defect site to maximise the success of the subsequent flap repair; the timeframe is usually within a few weeks.
- Mohs surgery which is often performed in co-operation with other surgical sub-specialities such as reconstructive plastic surgeons or oculoplastic surgeons e.g. when damage to the nasolacrimal drainage apparatus may occur. The medical literature supports this.

It is the view of the College that no specific time frame for performing flap repair should be imposed.

Should the flap repair be provided by the same practitioner that performs the original excision?

Surgical excision of skin lesions claimed under items 31356 – 31376 includes repair of the wound. There may be occasional instances, however, in which the defect is more difficult to repair than expected and the practitioner may need to refer the patient to another practitioner with specific skills to repair the defect or underlying structures (e.g. lacrimal drainage apparatus) in which case the flap item will need to be available to the subsequent practitioner.

Mohs surgery (items 31000 – 31002) differs procedurally from standard excision of skin cancers as it involves the excision of large, poorly-defined, aggressive or recurrent skin cancers, often resulting in large and/or complex defects requiring complex repairs. Practitioners with different surgical expertise to the dermatologist performing Mohs surgery may be required to perform the flap repair. Co-operation between surgical specialties is essential to maintain optimal patient outcomes.

It is the view of the College that no restrictions should be applied as to the practitioner performing the delayed flap repair.

2. Proposed amendments to item numbers 45000, 45003, 45200, 45203 and 45206 to prevent their co-claiming with the items for Mohs surgery (31000-31002).

As the Mohs items 31000 – 31002 are currently being reviewed as part of the MBS review process, the College recommends that no change be made to items 31000 – 31002 at this point including linkages to the listed flap items; further consideration can be given to this matter following completion of the MBS review.

The Mohs surgery item numbers were not part of the Skin Services Review. The Skin Services Review was commissioned in response to the spiralling costs of routine surgical treatment of skin cancers due to the excessive use of skin flaps by some practitioners.

Mohs surgery is a specialised technique for the excision of high-risk or recurrent skin cancers performed by dermatologists who have completed post-Fellowship training for one or two years, have met stringent training requirements, and participate in an ongoing annual quality assurance program.

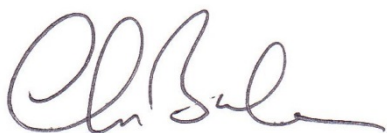
Mohs surgery often results in surgical defects which require complex repairs. These repairs are sometimes performed by practitioners with specialised surgical skills such as reconstructive surgeons and oculoplastic surgeons. These practitioners will be able to claim these item numbers when repairing the defect. It is the College's view that dermatologists should be able to claim the same item numbers when repairing similar defects.

There are some cases involving repair of large defects where the use of an assistant is appropriate. It is critical to retain the ability to claim for a surgical assistant (45203), where appropriate, when performing complex repairs of large Mohs surgery defects. No such assistance allowance is part of the new flap item numbers (45201, 45202).

It is College's recommendation that flap items 45003, 45200, 45203 and 45206 not be amended.

Thank you for your consideration in this matter. I am happy to discuss this further should you have any questions or concerns.

Kind regards,



Associate Professor Chris Baker
President
The Australasian College of Dermatologists

