

Point-of-care HbA1c testing for patients with diagnosed diabetes

Last updated: 20 October 2021

- On 24 March 2021, the Australian Government announced an investment of \$2.1 million over four years to support Australians with diabetes mellitus (diabetes).
- From 1 November 2021, point-of-care (PoC) testing for glycated haemoglobin (HbA1c) will be listed on the Medicare Benefits Schedule (MBS) for the monitoring of diabetes in patients with diagnosed diabetes.
- HbA1c is used to determine blood glucose levels over a period of months to help aid practitioners in determining patient risk of diabetes-related complications.
- Traditionally, medical practitoners have requested HbA1c testing for patients from pathology laboratories, with
 patients required to attend a follow-up consultation with their practitioner to discuss the results of the laboratory
 test.
- The inclusion of MBS Items for PoC HbA1c testing will enable testing to be performed in an accredited medical
 practice. The provision of PoC HbA1c testing at the site of patient care allows for the practitioner to discuss the
 results of the test with the patient as part of the same consultation.

What are the changes?

From 1 November 2021, two new MBS items will be available to eligible patients, these include:

- New MBS item 73812 for the quantitation of HbA1c performed in the management of established diabetes when
 performed as a PoC test by or on behalf of a medical practitioner who works in a general practice that is
 accredited against the PoC testing accreditation module under the National General Practice Accreditation
 Scheme (NGPAS).
- New MBS item 73826 for the quantitation of HbA1c performed in the management of established diabetes when
 performed as a PoC test by a nurse practitioner who works in a general practice that is accredited against the PoC
 testing accreditation model under the NGPAS.

A test performed under either item 73812 or 73826 must use instrumentation certified under the National Glycohemoglobin Standardization Program (NGSP) with a total coefficient of variation less than 3.0% at 48 mmol/mol (6.5%). These specifications ensure appropriate instrumentation is used for PoC testing. Information on the NGSP can be found at: http://www.ngsp.org/.

Claiming frequency

For any particular patient, PoC HbA1c testing for the management of established diabetes (item 73812 or 73826) may be claimed a maximum of three (3) times in a 12-month period. This is consistent with Medical Services Advisory Committee (MSAC) guidance that it is clinically appropriate for patients to continue to have one HbA1c laboratory test (item 66551) as part of a routine yearly health assessment.



Additionally, for any particular patient, items 73812 and 73826 may not be claimed by a patient if a total of four (4) other HbA1c testing items for the monitoring of established diabetes, being items 66551, 73826 and 73812, have already been provided to the patient in the last 12 months. This is in accordance with the recommendation from MSAC that HbA1c testing should be used for the ongoing management of patients with established diabetes on an as needed basis every three to six months to assess blood glucose control. MSAC considered that HbA1c testing provides a clinically meaningful indication of diabetes status over the previous three to four months. Therefore, it is not of value to repeat the test within this timeframe.

Accreditation requirements

Medical practitioners and nurse practitioners providing these services must work in a general practice that is accredited against the PoC testing accreditation model under the National General Practice Accreditation (NGPA) Scheme administered by the Australian Commission on Safety and Quality in Health Care.

From 1 November 2021, a medical practice will be able to provide Medicare eligible PoC HbA1c testing services once the practice has registered with an accrediting agency to be assessed against the NGPA Scheme PoC testing accreditation module developed by the Royal Australian College of General Practitioners. Practices registered for accreditation will be required to achieve accreditation against the NGPAS PoC testing accreditation module within 12 months of the date of registration.

After this one off 12-month registration period, the PoC testing accreditation cycle will be three years, in line with general practice accreditation. If a practice wishes to have their general practice and PoC testing accreditation assessed together, the PoC testing or general practice accreditation cycle can be shortened so they can be aligned.

Further information regarding the NGPAS can be found on the Australian Commission on Safety and Quality in Healthcare website at:

https://www.safetyandquality.gov.au/our-work/primary-health-care/national-general-practice-accreditation-scheme

Registered practices are expected to adhere to the RACGP Standards for Point-of-Care Testing (5th edition) when providing PoC HbA1c testing services prior to accreditation assessment and once assessed while-ever they are accredited.

The RACGP Standards for Point-of-Care Testing (5th edition) can be found can be found on the RACGP website at:

https://www.racgp.org.au/running-a-practice/practice-standards/standards-5th-edition/point-of-care-testing-1

Why are the changes being made?

In March 2020, the MSAC recommended public funding of PoC HbA1c testing for the monitoring of established diabetes, including in pregnancy. Following this recommendation, in the 2021-22 Budget the Australian Government agreed to list new MBS Items for PoC HbA1c testing, for the monitoring of established diabetes from 1 November 2021.



What does this mean for providers/referrers/other stakeholders?

Medical practitioners and nurse practitioners may use items 73812 and 73826, respectively, for PoC HbA1c testing at the site of patient care.

How will these changes affect patients?

Patients will be able to access four (4) Medicare eligible HbA1c testing services (both laboratory based and PoC) every 12 months, comprised of a maximum of three (3) Medicare eligible PoC HbA1c testing services (73812 or 73826).

Who was consulted on the changes?

Consultation has been undertaken with key stakeholders, clinical experts and providers, and consumer health representatives as part of the MSAC process.

The National Pathology Accreditation Advisory Council, Royal Australian College of General Practitioners and the Australian Commission on Safety and Quality in Health Care have been consulted and have assisted with the development of appropriate quality assurance standards and accreditation practices.

How will the changes be monitored and reviewed?

The new MBS items will be subject to MBS compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed.

Significant variation from forecasted expenditure may warrant review and amendment of the items and fees, and incorrect use of MBS items can result in penalties including the health professional being asked to repay monies that have been incorrectly received.

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 at www.mbsonline.gov.au. You can also subscribe to future MBS updates by visiting MBS Online and clicking 'Subscribe'.

The Department of Health provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the Health Insurance Act and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email askMBS@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 MSAC Public Summary Document provides the full MSAC advice to the Minister and is available via the Department's website at http://www.msac.gov.au/internet/msac/publishing.nsf/Content/1431.1-public.

The data file for software vendors was released on 22 September 2021 and can be accessed via the MBS Online website under the <u>Downloads</u> page.

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.