POSITION STATEMENT: MBS Item 30196

In recent case outcomes published on the Professional Services Review (PSR) website, GPs have been required to pay back Medicare under Section 92 for claims made using MBS item 30196. Due to the nature of negotiated S.92 agreements* and the secrecy limitations imposed by the legislative scheme, we do not have explicit details.

However, due to concerns over clinically incorrect interpretation of item 30196 by regulatory agencies, a request was sent to *askMBS† to confirm its use for the treatment of Intra-epidermal Carcinoma (IEC) by serial curettage or laser therapy.

The following statement was received from *askMBS:

Reference 3001 – 3 May 2019:

In regard to the billing of item 30196, you are correct in stating that this item may be billed for treating invasive squamous cell carcinomas and basal cell carcinomas if confirmed by histology.

The Department confirms that the current item does not preclude the billing of item 30196 for the treatment of intraepidermal carcinoma (IEC) by serial curettage or laser therapy.

Where there is any doubt about the appropriateness or clinical relevance of a particular medical service, it may be appropriate to seek the support of the relevant professional college prior to claiming a Medicare rebate for the service.

The Skin Cancer College Australasia (SCCA) is therefore publishing the following position statement.

1. MBS item 30196 can be claimed for serial curettage or laser therapy for SCC in situ, also known as intraepidermal carcinoma (IEC) and Bowen’s disease, if confirmed by histology.

2. Any doctor who is advised that they are required to payback claims made under item 30196 should ascertain the reasons for this.

3. If the doctor is told that IEC is non-malignant, the doctor should draw attention to this position statement, and contact SCCA.

4. SCCA does not condone fraud or inappropriate practice but maintains that full or part-time skin cancer doctors will have a billing pattern very different from that of most GPs, and that their peers are other primary care skin cancer doctors, not GPs or dermatologists.
**POSITION STATEMENT: MBS Item 30196**

**Descriptor for Medicare Item 30196**


<table>
<thead>
<tr>
<th>30196</th>
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<tr>
<td><strong>Group:</strong> T8 - Surgical Operations</td>
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<tr>
<td><strong>Subgroup:</strong> 1 - General</td>
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<tr>
<td>Malignant neoplasm of skin or mucous membrane that has been:</td>
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<tr>
<td>(a) proven by histopathology; or</td>
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<td>(b) confirmed by the opinion of a specialist in the specialty of dermatology where a specimen has been submitted for histologic confirmation;</td>
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<td>removal of, by serial curettage, or carbon dioxide laser or erbium laser excision-ablation, including any associated cryotherapy or diathermy</td>
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**Multiple Operation Rule**

(Anees.)

Fee: $126.30 Benefit: 75% = $94.75 85% = $107.40

(See para TN.8.10 of explanatory notes to this Category)

*Agreement entered into between PSR Director and person under review. See the HEALTH INSURANCE ACT 1973 - SECT 92

†askMBS is an email advice service from the Department of Health for providers seeking advice on interpretation of the Medicare Benefits Schedule items and rules. Further details are available here.