



MBS items (10998, 10999) for Pap smears taken by a practice nurse in a regional, rural or remote area

Medicare item numbers 10998 and 10999 apply to Pap smears taken by a practice nurse in regional, rural and remote areas.

Item 10998

Service provided by a practice nurse, being the taking of a cervical smear from a person, if:

- (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and
- (b) the service is provided at, or from, a practice location in a regional, rural or remote area; and
- (c) the person is not an admitted patient of a hospital or approved day hospital facility.

Item 10999

Service provided by a practice nurse, being the taking of a cervical smear from a woman between the ages of 20 and 69 inclusive, who has not had a cervical smear in the last 4 years, if:

- (a) the service is provided on behalf of, and under the supervision of, a medical practitioner; and
- (b) the service is provided at, or from, a practice location in a regional, rural or remote area; and
- (c) the person is not an admitted patient of a hospital or approved day hospital facility.

Item 10998 and 10999 only apply where:

- the practice nurse is appropriately qualified and trained to take a cervical smear; and
- the medical practitioner under whose supervision the smear is taken retains responsibility for the health, safety and clinical outcomes of the person.

Who can claim items 10998 and 10999?

Items 10998 and 10999 can only be claimed by a GP for a Pap smear that is taken by a practice nurse on behalf of the GP.

All vocationally registered and non-vocationally registered GPs are eligible to claim items 10998 and 10999.

What's the difference between item 10998 and 10999?

Both items 10998 and 10999 are for Pap smears taken by a practice nurse on behalf of a GP in a regional, rural or remote (RRMA 3-7) area.

Item 10998 can be used by all practices in these areas and applies to women of all ages.

Item 10999 is available to practices participating in the Practice Incentives Program (PIP) and generates a Service Incentive Payment (SIP). Item 10999 only applies where the Pap smear is taken from a woman between the ages of 20 and 69 inclusive, who has not had a Pap smear in the last 4 years.

Item 10999 cannot be claimed in conjunction with item 10998 or with a PIP attendance item (2497-2509 and 2598-2616).

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What qualifications and training are required for a practice nurse to take a Pap smear?

It is a requirement of the items that the practice nurse must be appropriately qualified and trained to take Pap smears.

This means that, where credentialling arrangements are in place, the practice nurse should be credentialled as qualified and trained to take Pap smears.

All practice nurses taking Pap smears should have undertaken an accredited course. For information about accredited training for nurse Pap smear providers, you should contact the Royal College of Nursing, Australia on **1800 061 660**, or the Cervical Screening Program in your state or territory on **131 556**.

In all cases, the GP (who is responsible for the health, safety and clinical outcomes of the patient) must be satisfied that the practice nurse is appropriately qualified and trained to take Pap smears.

The practice nurse must also comply with any relevant legislative or regulatory requirements, including those applying to state and territory cervical cytology registers or laboratories.

Quality assurance and continuing professional development

Quality assurance is an important part of cervical screening. Continuing professional development is a compulsory part of the credentialling arrangements and is also recommended for nurses taking Pap smears in jurisdictions where credentialling arrangements are not available.

General practices, where nurses take Pap smears, should also have a written clinical risk management strategy covering issues like clinical roles, pathology follow-up and patient consent.

National and state and territory cervical screening policies

When providing services covered by items 10998 and 10999, the practice nurse should be aware of national and state and territory cervical screening policies for the prevention of cervical cancer (information on the National Policy is provided on page 22 of the November 2005 Medicare Benefits Schedule Book).

Must the GP see the patient first, or be present, in order to claim item 10998 or 10999?

As the service is being provided on behalf of, and under the supervision of the GP, the GP retains responsibility for the health, safety and clinical outcomes of the patient.

However, this does not mean that the GP is required to see the patient first, or be present with the practice nurse during the service, to claim item 10998 or 10999. It is up to the GP to decide whether they need to initially see the patient.

Where a consultation has taken place with the patient first, the GP is only eligible to claim a Medicare item for the length of time that the GP spends with the patient. The time the practice nurse spends with the patient to take the Pap smear is claimed separately under the practice nurse item.

What level of medical indemnity insurance is required?

The GP who claims item 10998 or 10999 will need to ensure that their medical indemnity insurance covers circumstances where a practice nurse takes a Pap smear on their behalf.

Can a practice nurse order the pathology for a Pap smear?

Where pathology services are claimed through Medicare for this item, the pathology can only be ordered by a GP. In some jurisdictions, and in specific circumstances, a practice nurse may be able to order pathology through public pathology laboratories.

Which practice locations are considered to be regional, rural and remote?

For the purposes of items 10998 and 10999, a practice location in a regional, rural or remote area means a practice location in an area classified as RRMA 3 - 7 under the Rural Remote and Metropolitan Areas (RRMA) classification system.

A practice location is the place associated with the GP's provider number from which the service has been provided.

If you are unsure whether you are practising in an eligible area, you can call Medicare Australia on **132 150**.

Do Pap smears taken by a practice nurse count towards the outcomes component under the Practice Incentives Program (PIP) cervical screening initiative?

Yes. Pap smears taken by a practice nurse on behalf of a GP still count towards the PIP practices outcomes component.

What is the level of the Medicare rebate for items 10998 and 10999?

The Medicare rebate for items 10998 and 10999 is paid at 100% of the schedule fee. The Medicare rebate is \$10.40 (from 1 November 2005).

Can items 10998 and 10999 be claimed in conjunction with the bulk billing incentive item 10991?

Yes, as long as the Pap smear service is provided to a Commonwealth concession card holder, or person under the age of 16, and the service is bulk billed.

Further information

For further information, visit the Medicare Australia website at www.medicareaustralia.gov.au/medicareinitiatives or call Medicare Australia on **132 150**.

Information on these items is also available in the November 2005 Medicare Benefits Schedule Book.