

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2010-11, 20 October 2010

Question: E10-139

OUTCOME 1: Population Health

Topic: DIAGNOSTIC MAMMOGRAMS

Hansard page: CA 99

Senator Adams asked:

In regard to diagnostic mammograms, where people are having screening mammograms free through BreastScreen and then they have to have a diagnostic one, they, of course, cannot claim on Medicare for it. Can anyone help me?

Answer:

BreastScreen Australia aims to detect early signs of breast cancer, and does not provide mammograms for women diagnosed with, or undergoing treatment for, breast cancer.

A woman diagnosed with breast cancer is cared for by a specialist external to the program. The specialist may require a diagnostic mammogram to provide more detailed images of the cancer or to assess the impact of treatment.

Follow-up of women who have had breast cancer is undertaken by health care providers outside of BreastScreen Australia. These women should receive regular check-ups involving a thorough clinical examination by a doctor, annual mammograms and any other tests that may be required.

Diagnostic mammograms receive a rebate under the Medical Benefits Schedule (MBS) if it is provided on referral from a doctor and there is a reason to suspect a malignancy. The rebate ranges from \$40.50 to \$76.10 depending on where the mammogram is taken and whether images are taken of one or both breasts.

Under the MBS, medical practitioners, including radiologists, are free to set their own value on the services they provide. If the imaging provider chooses to bulk bill the service there will be no charge to the patient. If the provider chooses to charge above the scheduled fee, patients may be required to pay the gap between the fee charged and the Medicare rebate.