

# PSA Billing Guidelines

## Updated November 2023

### Key Changes at a Glance - Effective November 1, 2023

#### 1. Introduction of a new PSA item for patients with a Significant Family History\*

**New:** Eligible for one PSA test every year

#### 2. Change in testing frequency for patients without Significant Family History or Previous Prostatic Disease

**New:** One PSA test every 2 years (previously one PSA test every year)

#### 3. Free-to-Total PSA Ratio

**New:** Implement clinical decision limits of total PSA > 3ug/L for men aged 50 – 69 to determine the need for additional PSA testing. For men with a significant family history, a lower threshold of >2 ug/L is used.

#### 4. Previously Diagnosed Prostatic Disease

**New:** Medicare now accepts monitoring of prostatic malignancy and prostatitis only. It no longer accepts benign prostatic hypertrophy as “previous prostatic disease”.

\*Significant family history<sup>1</sup>: Men whose risk of prostate cancer is estimated to be at least 2 times higher than the average, i.e., those with a father, brother, or son diagnosed with prostate cancer.

### HOW TO ORDER PSA

To order, request “PSA” on our request form and include all relevant clinical and family history. Free-to-Total PSA ratio will be reported in accordance with Medicare billing criteria.

**Note:** If free PSA is requested for patients who do not meet the Medicare criteria for payment, there may be an associated out-of-pocket fee.

### CLINICAL NOTES

Written clinical notes on the request form advising prostatic disease are required. We are using the table below as valid clinical notes. Any other terminology is not considered valid.

Cancer of the prostate
Prostatic/Prostate adenocarcinoma
Prostatitis
Significant family history i.e., a first-degree relative (father, brother, or son) diagnosed with prostate cancer

The image shows two versions of the qml pathology request form. The top form is a 'LABORATORY COPY' and the bottom is a 'PATIENT COPY'. Both forms include fields for patient details (last name, given names, address, sex, date of birth, postcode, tel), tests requested (PSA), clinical notes (e.g., 'Cancer of the prostate'), and Medicare assignment information. The forms also include checkboxes for self-determined, standard precautions, private and confidential, and cumulative. There are also fields for urgent/phone/fax/by time, QML fee, vet affairs, and doctor's signature and request date.

# Medicare Item Numbers

➤ Medicare Prostate-Specific Antigen (PSA) billing criteria have been amended to align with NHMRC-endorsed guidelines<sup>2</sup>. These changes consider family history, personal history of prostatic disease and previous or current PSA levels.

➤ It is now crucial to provide relevant clinical notes when ordering a PSA test to ensure that patients do not receive unexpected out-of-pocket bills.

➤ Healthcare providers should document patient's family history of prostatic cancer and personal history of prostatic diseases (if any) on the request form.

This information will be used to determine the appropriate billing and testing schedule for each patient. These criteria apply to requests for PSA testing from general practitioners, urologists and other medical specialists.

## Prostate Specific Antigen (PSA): Total

Medicare Eligibility Criteria	Item Number	Testing Frequency
PSA Testing for those without significant family history or previously diagnosed prostatic disease	Item 66655	One PSA test every 2 years
PSA Testing for those with significant family history	Item 66654	One PSA test every year
PSA Testing for monitoring of previously diagnosed prostatic disease**	Item 66656	Unrestricted, as needed for monitoring

\*\*Previously diagnosed prostatic disease includes prostate cancer, prostatitis and premalignant conditions such as atypical small acinar proliferation. Medicare no longer accepts monitoring of benign prostatic hypertrophy. Elevated PSA levels (above the method specific 97.5th age related upper reference limit) can be monitored using this item. (New.PN.14.2).

## Prostate Specific Antigen(PSA): Free-to-Total Ratio

Medicare Eligibility Criteria	Item Number	Testing Frequency
<b>Follow-up</b> of a patient without previously diagnosed prostatic disease and previous PSA result lies: <ul style="list-style-type: none"> <li>- above 2.0 ug/L but below 5.6 ug/L for patients with family history; or</li> <li>- above 3.0 ug/L but below 5.6 ug/L for patients at or over 50 years of age but under 70 years of age; or</li> <li>- above 5.5 ug/L but below 10.0 ug/L for patients at or over 70 years of age.</li> </ul>	Item 66659	One Test of free/total PSA ratio every year
<b>Monitoring</b> of previously diagnosed prostatic disease when <b>current PSA level</b> lies: <ul style="list-style-type: none"> <li>- above 2.0 ug/L but below 5.6 ug/L for patients with family history; or</li> <li>- above 3.0 ug/L but below 5.6 ug/L for patients at or over 50 years of age but under 70 years of age; or</li> <li>- above 5.5 ug/L but below 10.0 ug/L for men at or over 70 years of age.</li> </ul>	Item 66660	Four Tests of free/total PSA ratio every year

## References

1: PSA-Test-Reporting.aspx (rcpa.edu.au)

<https://www.rcpa.edu.au/getattachment/75ca004c-4bc3-4104-8e1c-7e6a37f4ce15/PSA-Test-Reporting.aspx>

2: PSA-Testing-Guidelines.pdf (pcfa.org.au) <https://www.pcfa.org.au/media/612113/PSA-Testing-Guidelines.pdf>

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