

## MBS changes announced with the 2023-24 Budget

### Indexation

Indexation for MBS services will be higher than in recent years, with a new method of calculating increases which may affect estimates going forward.

The overall effect includes an indexation boost to Medicare rebates of more than \$1.5 billion over the forward estimates.

We will seek further details of the new formulae and forward when we can.

### Advice from the department on various issues

The Department of Health and Ageing has released a number of advices on MBS changes. These are consolidated on the following pages

## Budget 2023-24- Medicare Benefits Schedule – New and Amended Listings

The Australian Government is committed to ensuring all Australians are able to access timely and affordable, high quality healthcare by funding medical services that are proven to be best clinical practice, safe and cost effective.

The Government, acting on the considered recommendations of clinicians and sector experts through the Medical Services Advisory Committee (MSAC) and the MBS Review Taskforce, will add and amend listings on the Medicare Benefits Schedule (MBS) to improve access to health care for all Australians.

These changes ensure the Medicare system keeps up with the changing health needs of Australians, giving access to a 21<sup>st</sup> century system that reflects the disease profile of an older population, with more complex and chronic diseases.

These measures strengthen the Government's investment in preventative and early interventions that will ensure Australians, with a focus on priority populations, stay healthy, and reduce pressure on the health care system.

### **MBS Taskforce Recommendations**

In response to recommendations of the clinician-led MBS Review Taskforce, MBS item amendments include:

- Cleft Lip and Palate Scheme –introduces new cleft dental services to the MBS, removes obsolete services and amends existing services, to ensure that cleft dental items better align with contemporary practice and improve access to services for the small population of patients who require treatment for cleft and craniofacial conditions.
- Psychiatry – ensures patients receive the highest quality clinical care and that MBS funded services represent value for the patient and the community, by:
  - updating item descriptors to remove stigma associated with specific diagnostic references and introduce telehealth equivalent items.
  - applying appropriate benchmarking of procedural fees for electroconvulsive therapy (ECT);
  - aligning non-patient interview items with a time-tiered model,
  - updating item descriptors and explanatory notes to clarify intention of group therapy items and GP/Nurse practitioner requested management plan items to provide additional clarity and ensure appropriate use of these items for the intended patient cohort.
  - align clinical requirements of psychiatry telehealth attendance items with equivalent face-to-face attendance items to ensure consistency of annual service caps, which will include the introduction of new telehealth items.

### **Medical Services Advisory Committee**

In response to recommendations from the independent Medical Services Advisory Committee (MSAC), the Government will introduce the following new services and amendments to the MBS from 1 March 2024 (unless otherwise stated):

- minimally invasive ventral rectopexy for the repair of external rectal prolapse and symptomatic high-grade internal rectal intussusception

- new items for the treatment of patients with medically refractory essential tremor via magnetic resonance-guided focused ultrasound (MRgFUS)
- amendments to ensure the appropriate co-claiming of procedural items by anaesthetists
- new items for the insertion and removal of a leadless permanent cardiac pacemaker for treatment of patients with bradyarrhythmia (from 1 November 2023)
- a new item for intravascular ultrasound (IVUS) coronary stent insertion
- a new item for exercise electrocardiogram (ECG) stress testing for patients under investigation, monitoring or treatment for genetic heart disease diagnoses
- amend the item for complex replacement or repair of aortic arch, to allow two surgeons to complete separate components of complex aortic procedures
- amendment to genetic testing for cardiac arrhythmia to align with genetic testing for cardiomyopathy and contemporary clinical practice (from 1 November 2023)
- whole genome sequencing (WGS) for the diagnosis of mitochondrial disease in patients who are suspected of having either acute or chronic disease and cascade testing of their biological relatives and testing of their reproductive partners (from 1 November 2023)
- extend access to 17p chromosomal deletion testing for more patients with chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL) (from 1 July 2023)
- introduce genetic testing to diagnose a genetic cause of hearing loss in children (from 1 November 2023)
- introduce new items to test for genetic variants in patients suspected of having either a myeloid or lymphoid haematological malignancy. This will be used by clinicians to inform prognosis and optimal treatment pathways for patients (from 1 November 2023)
- introduce new items for the detection of measurable residual disease in patients with acute lymphoblastic leukaemia (ALL) (from 1 November 2023)
- introduce small gene panel testing for non-small cell lung carcinoma which is more effective, safer; has a higher rate of success, and a higher rate of gene variant detection than current testing (from 1 November 2023)
- introduce reproductive carrier genetic testing for patients of Ashkenazi Jewish descent, their reproductive partners and fetal testing, for severe monogenic conditions that, although relatively rare in the general population, are much more common in the Ashkenazi Jewish population (from 1 November 2023)
- introduce a gene expression profiling test to determine the risk of early and late metastasis in node negative and positive cancer under endocrine treatment (from 1 November 2023)
- introducing testing for the quantification of N-terminal pro B-type natriuretic peptide (NT-proBNP) testing in patients with systemic sclerosis to assess the risk of pulmonary arterial hypertension (PAH). This testing is better and cheaper than the current standard testing (from 1 November 2023)
- align prostate specific antigen testing with the Prostate Cancer Foundation of Australia (PCFA) Guidelines, assisting patients at higher risk of prostate cancer by allowing for more frequent testing (from 1 November 2023)
- remove barriers and improve access to pathology testing for breast, ovarian, fallopian tube or primary peritoneal cancer (from 1 November 2023)

- amendment to MBS items used for Posterior Spinal Fusion (PSF) to exclude use for Vertebral Body Tethering (VBT) due to uncertain safety and clinical effectiveness
- introduce new items to improve the diagnosis of indeterminate biliary strictures and removal of difficult biliary stones (gallstones) using peroral cholangiopancreatography (POCPS)
- introduce the insertion of a breast marker clip during a breast biopsy to easily locate lesion areas where additional intervention may be required
- introduce new non-invasive treatments for men with benign prostatic hyperplasia (BPH)
- delete four outdated benign prostatic hyperplasia services and shift patients to more appropriate MBS items.

Other changes to MBS items:

- extension of the interim heart health assessments (MBS items 177 and 699) until 30 June 2025 (from 1 July 2023)
- extension to the temporary GP and Other Medical Practitioner (OMP) blood borne virus and sexual reproductive health services, to 31 December 2023. And extend the temporary exemption from the established clinical relationship requirement for GP and OMP non-directive pregnancy counselling and mental health services until 31 December 2023. (from 1 July 2023)
- amend plastic and reconstructive surgery items by; creating three items for nurse practitioners (from 1 March 2024), amending selected item fees and in/out of hospital requirements to ensure patient safety (from 1 March 2024), and creating a new item for removal of a single lipoma or other subcutaneous tumour or cyst (from 1 July 2023)
- amend thoracic surgery services by: introducing appropriate co-claiming restrictions when resecting endobronchial tumours and including additional surgical techniques to reflect current clinical practice; and ensuring access to a small volume of appropriate clinical scenarios when performing thoracoscopy and thoracotomy together. (from 1 March 2024)
- defer the deletion of item 32221 (for the removal or revision of an artificial bowel sphincter) until 1 July 2028, subject to further review (from 1 July 2023)
- amendment to intracranial aneurysm item 35412 to allow claiming in association with pre-operative diagnostic imaging items (from 1 March 2024)
- amendment of supervision requirements for musculoskeletal ultrasound and nuclear medicine services to require the supervising practitioner to personally attend the patient receiving a scan for the duration of the service which is consistent with current clinical good practice (from 1 November 2023)
- increase the schedule fee for diagnostic nuclear medicine item 61485 (adrenal study) to more appropriately cover the cost of the radiopharmaceutical administered as part of the service and ensure that these services continue to be accessible and affordable for patients (from 1 November 2023)
- extend temporary item 61477 to offset increased costs of gallium-67 for a further 12 months (from 1 July 2023)
- introduce a temporary item for 12 months to offset increased costs of thallium-201 (from 1 July 2023)
- ongoing extension of alternative services for use in thallium-201 supply disruptions (from 1 July 2023)

- introduce surgical assistance for complex circumcision revision services (from 1 March 2024)
- clarifying a co-claiming restriction when claims for surgical operations and subsequent attendances are received on separate days (from 1 March 2024)
- enable First Nation Australians to access 10 allied health services by having either chronic disease management arrangements or a health assessment rather than requiring both (from 1 March 2024)
- increase the age limit on multidisciplinary case conference items to enable access for people under 25 years of age that have or are suspected of having a complex developmental disorder or eligible disability (from 1 March 2024)
- amend orthopaedic surgery items following a post implementation review of the 1 July 2021 changes. This will address unintended consequences of the previous changes, ensure appropriate patient access to needed services. and improve the quality of services listed on the MBS orthopaedic item schedule (from 1 March 2024)

### Why is this important?

The MBS is a critical element of the Australian health system and continues to evolve to meet societal challenges such as the growing burden of chronic disease, an ageing population, workforce pressures and inequities in health outcomes and access.

The Medical Services Advisory Committee is responsible for assessing the safety, effectiveness and value-for-money of medical services and technologies proposed for public funding. Along with the former MBS Review Taskforce, and the current MBS Review Advisory Committee, these processes ensure that the MBS continues to reflect safe, high quality, contemporary best clinical practice.

## Budget 2023-24 – Detail of specialist changes to MBS

Topic	Type of change	Summary of change (expected from March 2024 unless otherwise stated)
<b>General surgery - diagnosis of indeterminate biliary strictures and removal of difficult biliary stones</b>	2 new items recommended by MSAC	<p>Two new items will be listed, one for the use of peroral cholangiopancreatography (POCPS) for the diagnosis of indeterminate biliary strictures, and the other for the use of POCPS for the removal of difficult biliary stones.</p> <p>The listing of these items was recommended by MSAC. POCPS is considered to produce clearer images of the inside of biliary and pancreatic duct allowing for a more definitive diagnosis of indeterminate biliary strictures, and to assist with the removal of difficult biliary stones.</p>
<b>General surgery – localisation of breast lesions</b>	New item recommended by MSAC.	A new MBS item will be listed for the insertion of a breast marker clip during a breast biopsy. Listing was recommended by MSAC. The new item will be a substitute for some hook wire services under MBS item 31536 and will benefit patients who are suffering from difficult, multiple, and/or small lesions who often require additional intervention to these areas after a biopsy.
<b>Paediatric surgery – surgical assistance for complex circumcision revision services</b>	Amend item 30662	Item 30662 (Complex surgical repair following complication from circumcision of a penis) was listed on 1 November 2022 following a recommendation of the MBS Review Taskforce. Item 30662 will be amended to include a benefit when a surgical assistant is required for the procedure.
<b>Surgical operations - clarify co-claiming restriction</b>	Amend legislation to clarify co-claiming restriction.	<p>The relevant legislation which applies a co-claiming restriction when a subsequent attendance is billed at the same time as a surgical operation, which has a MBS fee currently greater than \$317.15, will be amended to clarify the co-claiming restriction applies if the claims are provided to Services Australia on separate occasions.</p> <p>The co-claiming restriction was introduced on 1 November 2017 based on a recommendation of the MBS Review Taskforce, to ensure that patients receive the same benefits for the same services and improve consistency of practitioner billing practices.</p>

<b>Orthopaedic surgery</b>	30 new and 86 amended items	The amendments reflect the early-post implementation review of the orthopaedic changes implemented on 1 July 2021. The changes will restore patient access to critical orthopaedic surgery services, improve patient affordability for a range of procedures, and address some inconsistencies in the billing of MBS orthopaedic items. Patients will benefit from the restoration of MBS rebates in key orthopaedic procedures that were unintentionally removed as a result of changes implemented on 1 July 2021. In addition, changes will improve clarity on appropriate items that should be billed for relevant procedures.
<b>Prostatic urethral lift (PUL)</b>  <b>Transurethral water vapour ablation (TUWA)</b>	New item recommended by MSAC  New item recommended by MSAC	A new MBS item for PUL as a minimally invasive treatment benign prostatic hyperplasia (BPH). Listing of a new item specific for PUL was supported by MSAC. The item descriptor and fee recommended by MSAC are in the Public Summary Document or visit the MSAC website at <a href="http://www.msac.gov.au">www.msac.gov.au</a> and entering "1612", the MSAC application number, in the search bar.  A new MBS item for TUWA as a minimally invasive treatment benign prostatic hyperplasia (BPH). Listing was recommended by MSAC. The item descriptor and fee recommended by MSAC are in the Public Summary Document or visit the MSAC website at <a href="http://www.msac.gov.au">www.msac.gov.au</a> and entering "1586", the MSAC application number, in the search bar.
<b>Delete four outdated MBS benign prostatic hyperplasia services</b>	Item deletion recommended by MSAC	Removal of Items 37230 and 37233 for transurethral microwave thermotherapy (TUMT), item 37202 for continuation of initial treatment for transurethral radio-frequency needle ablation (TUNA), and item 37206 for continuation of initial treatment for transurethral resection of the prostate (TURP). Removal recommended by MSAC. Rationale is in Public Summary Document, application number 1697 on MSAC website at <a href="http://www.msac.gov.au">www.msac.gov.au</a> .
<b>Cleft dental services</b>	Response to recommendations from the MBS Review Taskforce on cleft dental services.	Changes ensure current cleft dental MBS items align with contemporary clinical practice with appropriate practitioner where applicable. Changes include <ul style="list-style-type: none"> <li>• Amend the scheme name from 'Cleft Lip and Cleft Palate Scheme' to 'Cleft and Craniofacial Services'.</li> <li>• Expand practitioner access to the scheme by amending the definition of 'eligible practitioners' to encompass a wider scope of specialists. Eligible practitioners are</li> </ul>

		<p>registered dental practitioners, including those who hold qualifications and are registered in the speciality of orthodontics, paediatric dentistry, oral and maxillofacial surgery, and prosthodontics.</p> <ul style="list-style-type: none"> <li>• Consolidate 24 existing items of similar procedural complexity and merge into 9 new items.</li> <li>• Delete obsolete items 75018, 75021 and 75830</li> <li>• Update remaining items in line with modern clinical practice, as advised by clinical members of the Cleft Review Implementation Liaison Group</li> <li>• Updated list of eligible craniofacial conditions</li> </ul>
<b>New MBS item 31227 for the removal of a single tumour, lipoma or cyst</b>	Recommendation 18 of the MBS Review Taskforce Report on Plastic and Reconstructive Surgery	This proposal will introduce from 1 July 2023, subject to passage of regulations, a new MBS item for removal of a single tumour, lipoma or cyst.
<b>Three new MBS items to be created specifically for Nurse Practitioners, mirroring items 30003, 30006 and 45546</b>	Access for Nurse Practitioners to these services forms part of recommendations 32 and 35 of the MBS Review Taskforce Report on Plastic and Reconstructive Surgery.	This proposal will introduce three new items mirroring items 30003, 30006 for dressing of burns and item 45546 for intradural colouration of the nipple or areola, to provide access for Nurse Practitioners performing these services independently. These procedures are already within the scope of practice for nurse practitioners. However, items listed under Group T8—Surgical operations on the General Medical Services Table currently can only be accessed by medical practitioners. This change will create new items (mirroring items 30003, 30006 and 45546) to provide independent access for nurse practitioners.
<b>Out of hospital benefits removed from 14 MBS</b>	This item forms part of the	Out of hospital benefits (85%) will be removed from 14 items, in line with advice from the Plastic and Reconstructive sector, to reduce misuse of these items and ensure patient safety is maintained. This



<b>items under Plastic and Reconstructive Surgery</b>	response to the MBS Review Taskforce Report on Plastic and Reconstructive Surgery	will prevent complex procedures being done in inadequate facilities, improve patient safety and reduce misuse of these items.
<b>Amendments to posterior spinal fusion items to exclude use for vertebral body tethering (VBT) as recommended by MSAC.</b>	MSAC did not support public funding of VBT for the treatment of Adolescent Idiopathic Scoliosis.	<p>MSAC considered the evidence for comparative safety, clinical effectiveness, and cost-effectiveness for VBT compared with PSF was uncertain.</p> <p>This change will amend the current posterior spinal fusion (PSF) items (51021 to 51026) and the associated item for anterior exposure of the spine (51165), to clarify clinical intent and explicitly exclude their use for VBT.</p> <p>Specifically excluding the use of these items for VBT will make it more transparent to practitioners on the clinical circumstances for which these items can be billed, provide clarity on the intent of these items, and make it clear that they should not be used for VBT.</p>
<b>Magnetic resonance-guided focused ultrasound (MRgFUS) for the treatment of medically refractory essential tremor</b>	New items 63019, 40804, 40805, 40806 and 63020	Five new items will be introduced for the treatment of patients with medically refractory essential tremor via MRgFUS as an alternative treatment to deep brain stimulation.
<b>Intravascular ultrasound (IVUS) guided coronary stent insertion</b>	New item 38325	A new item will be introduced for IVUS guided coronary stent insertion as an adjunct treatment to invasive coronary angiogram for patients undergoing percutaneous coronary intervention with complex anatomical characteristics.
<b>Exercise electrocardiogram (ECG) stress testing</b>	New item 11732	A new item for exercise ECG stress testing will be introduced for patients under investigation, monitoring or treatment for genetic heart disease (channelopathy) diagnoses, or the first degree relative of patients with confirmed genetic heart disease. This new item will facilitate best practice for assessment, risk stratification and management of patients suspected or diagnosed with inherited arrhythmia syndrome or arrhythmogenic cardiomyopathy.

<b>Cardiothoracic Surgery - complex replacement or repair of aortic arch</b>	Amend item 38557	Item 38557 will be amended for complex replacement or repair of aortic arch to remove item associations with the ascending aortic items. This will allow two surgeons to complete separate components of complex aortic procedures and allow individual claiming.
<b>Intracranial aneurysm administrative change</b>	Amend item 35412	Intracranial aneurysm item 35412 will be amended to allow claiming in association with pre-operative diagnostic imaging items 60009 and 60072, 60075 and 60078. This is to fix an administrative error implemented on 1 November 2022.
<b>Thoracic surgery - endobronchial tumours</b>	Amend item 38425	This item will be amended to remove the term “laser” from the descriptor to allow for additional surgical techniques.
<b>Thoracic surgery – thoracotomy and thoracoscopy</b>	Amend items 38816 and 38815	These items will be amended to clarify that the claiming restriction between these procedures will apply when performed on the same lung and through the same incision.
<b>Anaesthetic Relative Value Guide (RVG)</b>	New anaesthetic RVG items 22052, 22053 and 22054	Three existing MBS procedural items (13703, 40018 and 55135) will be replicated into the anaesthetic RVG, which will allow an anaesthetist to co-claim the procedural item in association with the administration of anaesthesia. The replication of these items was necessitated by a change in the application of the Health Insurance Act 1973.
<b>Leadless permanent pacemaker</b>	New items 38372, 38373, 38374 and 38375  Amend item 90300	This proposal will introduce from 1 November 2023, subject to passage of legislation, four new items for leadless permanent cardiac pacemaker. These items are for treatment of patients with bradyarrhythmia, including cardiac electrophysiological services where transvenous pacemaker is inappropriate due to an inaccessible upper extremity venous system, increased risk of infection or history of venous thrombosis. Item 90300 will be amended to include the new leadless pacemaker service under a professional attendance of a cardiothoracic surgeon to provide immediate surgical backup when and interventional cardiologist undertakes percutaneous extraction.
<b>Colorectal surgery – Ventral rectopexy for the repair of rectal prolapse and intussusception</b>	New item recommended by MSAC	This proposal will introduce a new item for minimally invasive ventral rectopexy for the repair of external rectal prolapse and symptomatic high-grade internal rectal intussusception. The introduction of this new item was recommended by the MBS Review Taskforce (Taskforce) and was supported by MSAC in November 2022. The new item will replace the temporary item for ventral rectopexy (item 32118) to support patient access on an ongoing basis.

<p><b>Colorectal surgery – extend the item for the removal or revision of an artificial bowel sphincter</b></p>	<p>Amend item 32221</p>	<p>Effective 1 July 2023, item 32221 for the removal or revision of an artificial bowel sphincter will be extended for an additional five years, until 30 June 2028, subject to further review. The item had been planned for deletion on 1 July 2023, but this deletion will be deferred due to continuing patient need.</p> <p>The Taskforce recommended the deletion of artificial bowel sphincter items 32220 (for insertions) and 32221 (for removals or revisions) as these devices are no longer considered best practice for the treatment of severe faecal incontinence. Item 32220 was deleted on 1 July 2022, however the deletion of item 32221 was deferred for an initial 12-month period due to continuing patient need. This further deferral will ensure that the small number of patients with an artificial bowel sphincter will continue to have access to affordable removal and revision services, if required.</p>
<p><b>Psychiatry Services</b></p>	<p>Response to recommendations from the MBS Review Taskforce on Psychiatry</p>	<p>Ensuring patients receive the highest quality clinical care and that MBS funded services represent value for the patient and the community, by:</p> <ul style="list-style-type: none"> <li>• updating item descriptors to remove stigma associated with specific diagnostic references and introduce telehealth equivalent items.</li> <li>• applying appropriate benchmarking of procedural fees for electroconvulsive therapy (ECT);</li> <li>• aligning non-patient interview items with a time-tiered model,</li> <li>• updating item descriptors and explanatory notes to clarify intention of group therapy items and GP/Nurse practitioner requested management plan items to provide additional clarity and ensure appropriate use of these items for the intended patient cohort.</li> <li>• align clinical requirements of psychiatry telehealth attendance items with equivalent face-to-face attendance items to ensure consistency of annual service caps, which will include the introduction of new telehealth items.</li> </ul>

## Cleft and Craniofacial Services

To: Members of the MBS Review Cleft & Craniofacial Implementation Liaison Group

In yesterday's Budget the Government announced a range of measures to strengthen Medicare, with a particular focus on measures to support primary care and GPs.

For patients with cleft and craniofacial conditions, Budget measures include the introduction of new MBS services, the removal of obsolete services, amendments to existing services, and expansion of practitioner access, to ensure that cleft MBS items better align with contemporary clinical practice. The measures align with advice from the MBS Cleft Review Implementation Liaison Group to:

- Amend the scheme name from 'Cleft Lip and Cleft Palate Scheme' to 'Cleft and Craniofacial Services'
- Expand practitioner access to the scheme by amending the definition of 'eligible practitioners' to encompass a wider scope of specialists. Eligible practitioners are registered dental practitioners, including those who hold qualifications and are registered in the speciality of orthodontics, paediatric dentistry, oral and maxillofacial surgery, and prosthodontics.
- Consolidate 24 existing items of similar procedural complexity, merging into 9 new items
- Delete obsolete items 75018, 75021, and 75830
- Update remaining items in line with modern clinical practice
- Update the list of eligible craniofacial conditions

The Bill to remove the legislative age restrictions on access to MBS benefits for patients with cleft and craniofacial conditions (October 2022-23 Budget) is with the Senate.

## Federal Budget 2023-24: Announced measure for upcoming changes to psychiatry MBS items

Dear Stakeholders

As many of you would be aware, the Psychiatry Clinical Committee (PCC) established in 2018 undertook a review of psychiatry MBS items. The PCC made 10 recommendations which were endorsed by the Medicare Benefit Schedule (MBS) Review Taskforce (the Taskforce). As an outcome of these recommendations and as a result of other policy changes, measures relating to psychiatry MBS Items have been announced as part of the Federal Budget 2023-2024. From 1 March 2024, there will be a number of changes to the MBS items to improve psychiatry services. Changes include the deletion of items to provide for more flexible arrangements, amending items to strengthen the intent, further clarify and remove obsolete terms from items, and the creation of new items including telehealth items. A mapping document outlining the proposed changes is *attached*.

The MBS Schedule Review Taskforce Final Report on the review of psychiatry MBS items can be viewed [online here](#)

General feedback, issues and concerns should be provided to [MBSClinicalPolicy@health.gov.au](mailto:MBSClinicalPolicy@health.gov.au). The Department will continue to liaise with stakeholders to consider feedback as part of ongoing management of the MBS.

If you have a query relating exclusively to interpretation of the Schedule, you should email [askmbs@health.gov.au](mailto:askmbs@health.gov.au).

Further information on these psychiatry changes will be provided closer to 1 March 2024 via factsheets published to [MBS Online](#).

Federal Budget 2023-24: Announced measures for upcoming changes to the MBS - MBS Clinical Policy Section [SEC=OFFICIAL]

Dear Stakeholder

We wish to provide an update on the Medicare Benefits Schedule (MBS) changes following Government agreement as part of the 2023-24 Budget process.

The following changes will be implemented by the MBS Clinical Policy Section:

Topic	Type of change	Summary of change
<b>From 1 November 2023</b>		
<b>Leadless permanent pacemaker</b>	New items 38372, 38373, 38374 and 38375  Amend item 90300	Four new items will be introduced for leadless permanent cardiac pacemaker. These items are for treatment of patients with bradyarrhythmia, including cardiac electrophysiological services where transvenous pacemaker is inappropriate due to an inaccessible upper extremity venous system, increased risk of infection or history of venous thrombosis. Item 90300 will be amended to include the new leadless pacemaker service under a professional attendance of a cardiothoracic surgeon to provide immediate surgical backup when and interventional cardiologist undertakes percutaneous extraction.
<b>From 1 March 2024</b>		
<b>Magnetic resonance-guided focused ultrasound (MRgFUS) for the treatment of medically refractory essential tremor</b>	New items 63019, 40804, 40805, 40806 and 63020	Five new items will be introduced for the treatment of patients with medically refractory essential tremor via MRgFUS as an alternative treatment to deep brain stimulation.
<b>Intravascular ultrasound (IVUS)</b>	New item 38325	A new item will be introduced for IVUS guided coronary stent insertion as an adjunct treatment to invasive coronary angiogram for patients undergoing

<b>guided coronary stent insertion</b>		percutaneous coronary intervention with complex anatomical characteristics.
<b>Exercise electrocardiogram (ECG) stress testing</b>	New item 11732	A new item for exercise ECG stress testing will be introduced for patients under investigation, monitoring or treatment for genetic heart disease (channelopathy) diagnoses, or the first degree relative of patients with confirmed genetic heart disease. This new item will facilitate best practice for assessment, risk stratification and management of patients suspected or diagnosed with inherited arrhythmia syndrome or arrhythmogenic cardiomyopathy.
<b>Cardiothoracic Surgery - complex replacement or repair of aortic arch</b>	Amend item 38557	Item 38557 will be amended for complex replacement or repair of aortic arch to remove item associations with the ascending aortic items. This will allow two surgeons to complete separate components of complex aortic procedures and allow individual claiming.
<b>Intracranial aneurysm administrative change</b>	Amend item 35412	Intracranial aneurysm item 35412 will be amended to allow claiming in association with pre-operative diagnostic imaging items 60009 and 60072, 60075 and 60078. This is to fix an administrative error implemented on 1 November 2022.
<b>Thoracic surgery - endobronchial tumours</b>	Amend item 38425	This item will be amended to remove the term “laser” from the descriptor to allow for additional surgical techniques.
<b>Thoracic surgery – thoracotomy and thoracoscopy</b>	Amend items 38816 and 38815	These items will be amended to clarify that the claiming restriction between these procedures will apply when performed on the same lung and through the same incision.
<b>Anaesthetic Relative Value Guide (RVG)</b>	Replication of three existing items (22052, 22053 and 22054) into the anaesthetic RVG	Three existing MBS procedural items will be replicated into the anaesthetic RVG, which will allow an anaesthetist to co-claim the procedural item in association with the administration of anaesthesia. The replication of these items was necessitated by a change in the application of the <i>Health Insurance Act 1973</i> .

Communication materials on the changes, including factsheets and quick reference guides, will be made available in due course at [www.mbsonline.gov.au](http://www.mbsonline.gov.au) under the ‘Fact Sheets’ tab.

Feedback on appropriate private health insurance (PHI) classifications and categorisations for these changes can be emailed to [PHI@health.gov.au](mailto:PHI@health.gov.au). Consultation on the proposed classifications will follow at a later date.