



Australian Government  
Department of Health and Ageing

## - FACT SHEET -

### **Improving access to Magnetic Resonance Imaging (MRI) services**

The Australian Government supports access to high quality health care services, including MRI services, for all Australians. The Diagnostic Imaging Reform Package will ensure ongoing, affordable and convenient diagnostic imaging services for patients, with a key focus on the staged expansion of patient access to Medicare-eligible MRI services.

#### **Improving access to Medicare-eligible MRI units:**

The Package includes the provision of partial Medicare-eligibility for approved MRI units located in metropolitan locations which have been operating or planned since 10 May 2011. It also includes the further provision of full Medicare-eligibility for up to 30 MRI units in regional locations.

#### Full Medicare-eligible MRI units

These units may provide **ALL** the MRI items listed on the MBS. These include the:

- Six new GP requested items for patients under the age of 16;
- Five existing specialist and consultant physician requested cancer staging items and breast screening services for woman at risk and under 50 years of age; and
- Four interim listed PIP Breast MRI items.

#### Partial Medicare-eligible MRI units

These units may provide a limited number of MRI items listed on the MBS. These are the:

- Six new GP requested items for Patients under the age of 16;
- Five existing specialist and consultant physician requested cancer staging items and breast screening services for woman at risk and under 50 years of age;
- Three existing modifying items; and
- Four interim listed PIP Breast MRI items.

#### **Improving access to Medicare-eligible MRI items:**

The Package includes increased access to MRI services for primary care patients by extending requesting rights to GPs for all patients under 16 years for a small set of clinically appropriate indications from 1 November 2012.

Extending MRI requesting rights to GPs is aimed at avoiding exposure of children to unnecessary radiation associated with other types of diagnostic imaging like computed tomography (CT) scans.

Six GP MRI requested items for patients under the age of 16 were developed with the assistance of an Expert Working Group which was established to provide advice to the department on the appropriate indications for the proposed new items. These items and explanatory notes can be found at [www.mbsonline.gov.au](http://www.mbsonline.gov.au).

#### **Health Insurance (Diagnostic Imaging Services Table) 2012 Regulations – MRI Expansion**

Subject to the passage of legislation on 1 November 2012, the measure introduces six new GP requested MRI items for children under the age of 16 years for the following indications: scan of the head for certain indications, the spine for unexplained neck or back pain, the knee for internal joint derangement, the hip for certain indications, the elbow and the wrist.

**Amendment 1:** Addition of *Subdivision E – Subgroup 33 of Group I5*

- This amendment is the addition of items 63507, 63508, 63510, 63511, 63513, 63514, 63516, 63517, 63519, 63520, 63522, 63523<sup>1</sup>. These items are the six new GP requested MRI items for children under the age of 16 years.

**Amendment 2:** Amendment of *Division 2.5 Group I5 – Magnetic Resonance Imaging – Subdivision A General – Clause 2.5.1*

- This amendment identifies the different eligibility arrangements that will exist from 1 November 2012 for eligible MRI and MRA services on eligible equipment:
  - Items 63001 to 63482 (all items on the MBS) can be provided on full Medicare- eligible equipment.
  - Items 63464 to 63476 (cancer staging and breast screening items) can be provided on full and partial Medicare-eligible equipment.
  - Items 63491 to 63497 (modifying items) can be requested by medical practitioners to full and partial Medicare-eligible equipment.
  - Items 63507 to 63522 (new GP requested items for under 16 years) can be provided on full and partial Medicare-eligible equipment.

### Overview of Medicare-eligible MRI items

Item Range	Status	Description	Requester	Access
63001 to 63482	Existing items	MRI items	<ul style="list-style-type: none"><li>• Specialist; or</li><li>• Consultant physician</li></ul>	Full Medicare-eligible
63507 to 63523	New items	MRI items for patients under the age of 16	<ul style="list-style-type: none"><li>• Medical practitioners other than specialist or consultant physicians</li></ul>	Full Medicare-eligible; and Partial Medicare-eligible
63464 to 63476	Existing items (Amended access arrangements)	Existing Cancer staging & breast screening items	<ul style="list-style-type: none"><li>• Specialist; or</li><li>• Consultant physician</li></ul>	Full Medicare-eligible; and Partial Medicare-eligible
63491 to 63497	Existing items (Amended requesting arrangements)	MRI modifying items	<ul style="list-style-type: none"><li>• All medical practitioners.</li></ul>	Full Medicare-eligible; and Partial Medicare-eligible
63501 63502 63504 63505	Interim listed items	Interim listed PIP breast MRI	<ul style="list-style-type: none"><li>• All medical practitioners.</li></ul>	Any MRI unit (eligible or ineligible) that have: <ul style="list-style-type: none"><li>• Practice Accreditation under the Diagnostic Imaging Accreditation Scheme (DIAS); and</li><li>• Operates a dedicated breast coil.</li></ul>

<sup>1</sup> All existing and new NK items (50% of the MBS Fee) are included in the new arrangements resulting from the MRI Expansion measure.

## Health Insurance (Diagnostic Imaging Services Table) 2012 Regulations – GP MRI Items

MAGNETIC RESONANCE IMAGING		MRI
GROUP 15 – Magnetic Resonance Imaging		
SUBGROUP 33 – MAGNETIC RESONANCE IMAGING - FOR SPECIFIED CONDITIONS – PERSON UNDER THE AGE OF 16YRS		
63507	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of head for any of the following: <ul style="list-style-type: none"> <li>- unexplained seizure(s) (R) (Contrast) (Anaes.)</li> <li>- unexplained headache where significant pathology is suspected (R) (Contrast) (Anaes.)</li> <li>- paranasal sinus pathology which has not responded to conservative therapy (R) (Contrast) (Anaes.)</li> </ul>	<b>Fee:</b> \$403.20 <b>Benefit:</b> 75% = \$302.40    85% = \$342.75
63508	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of head for any of the following: <ul style="list-style-type: none"> <li>- unexplained seizure(s) (R) (NK) (Contrast) (Anaes.)</li> <li>- unexplained headache where significant pathology is suspected (R) (NK) (Contrast) (Anaes.)</li> <li>- paranasal sinus pathology which has not responded to conservative therapy (R) (NK) (Contrast) (Anaes.)</li> </ul>	<b>Fee:</b> \$201.60 <b>Benefit:</b> 75% = \$151.20    85% = \$171.40
63510	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of spine following radiographic examination for any or the following: <ul style="list-style-type: none"> <li>- significant trauma (R) (Contrast) (Anaes.)</li> <li>- unexplained neck or back pain with associated neurological signs (R) (Contrast) (Anaes.)</li> <li>- unexplained back pain where significant pathology is suspected (R) (Contrast) (Anaes.)</li> </ul>	<b>Fee:</b> \$448.00 <b>Benefit:</b> 75% = \$336.00    85% = \$380.80
63511	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of spine following radiographic examination for any or the following: <ul style="list-style-type: none"> <li>- significant trauma (R) (NK) (Contrast) (Anaes.)</li> <li>- unexplained neck or back pain with associated neurological signs (R) (NK) (Contrast) (Anaes.)</li> <li>- unexplained back pain where significant pathology is suspected (R) (NK) (Contrast) (Anaes.)</li> </ul>	<b>Fee:</b> \$224.00 <b>Benefit:</b> 75% = \$168.00    85% = \$190.40
63513	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of knee following radiographic examination for internal joint derangement. (R) (Contrast) (Anaes.)	<b>Fee:</b> \$403.20 <b>Benefit:</b> 75% = \$302.40    85% = \$342.75
63514	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of knee following radiographic examination for internal joint derangement. (R) (NK) (Contrast) (Anaes.)	<b>Fee:</b> \$201.60 <b>Benefit:</b> 75% = \$151.20    85% = \$171.40
63516	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of hip following radiographic examination for any of the following: <ul style="list-style-type: none"> <li>- suspected septic arthritis (R) (Contrast) (Anaes.)</li> <li>- suspected slipped capital femoral epiphysis (R) (Contrast) (Anaes.)</li> <li>- suspected Perthes disease (R) (Contrast) (Anaes.)</li> </ul>	<b>Fee:</b> \$403.20 <b>Benefit:</b> 75% = \$302.40    85% = \$342.75
63517	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of hip following radiographic examination for any of the following: <ul style="list-style-type: none"> <li>- suspected septic arthritis (R) (NK) (Contrast) (Anaes.)</li> <li>- suspected slipped capital femoral epiphysis (R) (NK) (Contrast) (Anaes.)</li> <li>- suspected Perthes disease (R) (NK) (Contrast) (Anaes.)</li> </ul>	<b>Fee:</b> \$201.60 <b>Benefit:</b> 75% = \$151.20    85% = \$171.40
63519	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of elbow following radiographic examination where a significant fracture or avulsion injury is suspected that will change management (R) (Contrast) (Anaes.)	<b>Fee:</b> \$403.20 <b>Benefit:</b> 75% = \$302.40    85% = \$342.75
63520	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of elbow following radiographic examination where a significant fracture or avulsion injury is suspected that will change management (R) (NK) (Contrast) (Anaes.)	<b>Fee:</b> \$201.60 <b>Benefit:</b> 75% = \$151.20    85% = \$171.40
63522	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of wrist following radiographic examination where scaphoid fracture is suspected (R) (Contrast) (Anaes.)	<b>Fee:</b> \$448.00 <b>Benefit:</b> 75% = \$336.00    85% = \$380.80
63523	referral by a medical practitioner (excluding a specialist or consultant physician) for a scan of wrist following radiographic examination where scaphoid fracture is suspected (R) (NK) (Contrast) (Anaes.)	<b>Fee:</b> \$224.00 <b>Benefit:</b> 75% = \$168.00    85% = \$190.40

## Frequently Asked Questions

*Where can I find the details of the Medicare MRI items?*

Details of the item descriptors and explanatory notes can be found at [mbsonline.gov.au](http://mbsonline.gov.au)

*What is the starting date for the partial Medicare-eligible units?*

From 1 November 2012, approved MRI providers can provide the six GP requested items for children under the age of 16 years, the existing specialist or consultant physicians requested cancer staging items and the interim listed PIP breast items.

*I have signed the Deed of Undertaking with the Department for partial Medicare eligibility can I start billing Medicare for the identified services?*

No, subject to the passage of legislation, you can only start claiming a Medicare rebate from 1 November 2012.

*Our DI practice just installed a new MRI unit, can I claim any of the MRI Medicare services?*

No, you need to have met the eligibility criteria and be approved by the Minister for Health. The eligibility criteria were MRI units located in metropolitan locations which have been operating or planned before 10 May 2011. To be considered a 'planned' unit, practices were required to provide evidence of an arrangement or contractual obligation that demonstrated financial commitment on or before that date.

*Which MRI units can provide these six new Medicare rebated GP requested items?*

Both partial and full Medicare-eligible MRI units can provide these services.

*Can these items also be requested by a specialist?*

No, these items are restricted to request only by medical practitioners excluding specialist or consultant physician. If requested by a specialist or consultant physician a Medicare rebate will not apply. Specialist and consultant physicians can currently request equivalent Medicare-eligible MRI services.

*Are patients that are 16 years of age eligible for these items?*

No, the patient must be under the age of 16 years on the day the service is performed, not on the day the service is requested.

*When will GP requested items be available for adults?*

Under the Diagnostic Imaging Reform package a limited number of GP requested items will be extended to adults from 1 November 2013, subject to development and use of appropriate decisions support tools.

*Where can I get further information?*

Further information can be obtained from [www.mbsonline.gov.au](http://www.mbsonline.gov.au)

*If a request is dated pre 1 November 2012 is it eligible?*

Yes. GP requests dated prior to 1 November 2012 will be Medicare-eligible as long as the service is performed from 1 November 2012