# Change to MBS medical perfusion (item 22060) factsheet

Last updated: 21 December 2020

## What is the change?

* From 1 March 2021, Medicare Benefits Schedule (MBS) medical perfusion item 22060 (whole body perfusion – diverting the blood from the heart using a heart and lung machine) will be amended to increase the schedule fee.
* The schedule fee will increase by 50 percent (from $408 to $612).
* There will be no change to the item descriptor.

## Why is the change being made?

This change will reduce out-of-pocket costs for patients undergoing heart surgery and requiring whole body perfusion.

This change also compensates for the deletion of item 22070 (cardioplegia – stopping the heart) which was deleted on 1 November 2019.

## What does this mean for providers?

This change ensures appropriate remuneration for whole body perfusion. Providers have a responsibility to ensure that any services they bill to Medicare fully meet the eligibility requirements outlined in the legislation.

## How will this change affect patients?

This change supports high value care and ensures patient access to this service by reducing out-of-pocket costs.

## Who was consulted on the change?

This change is a result of extensive consultation with stakeholders including the Australian Society of Anaesthetists, the Australasian Society of Medical Perfusionists and the Australian Medical Association.

## How will the change be monitored and reviewed?

Anaesthesia items are subject to MBS compliance processes and activities, including random and targeted audits, which may require a provider to submit evidence about the services claimed.

Significant variation from forecasted expenditure may warrant review and amendment of fees, and incorrect use of MBS items can result in penalties including the health professional being asked to repay monies that have been incorrectly received.

## Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website at [www.mbsonline.gov.au](http://www.mbsonline.gov.au). You can also subscribe to future MBS updates by visiting [MBS Online](http://www.mbsonline.gov.au/) and clicking ‘Subscribe’.

The Department of Health provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the Health Insurance Act and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email [askMBS@health.gov.au](mailto:askMBS@health.gov.au).

Subscribe to ‘[News for Health Professionals](https://www.servicesaustralia.gov.au/organisations/health-professionals/news/all)’ on the Services Australia website and you will receive regular news highlights.

If you are seeking advice in relation to Medicare billing, claiming, payments, or obtaining a provider number, please go to the Health Professionals page on the Services Australia website or contact Services Australia on the Provider Enquiry Line – 13 21 50.

Please note that the information provided is a general guide only. It is ultimately the responsibility of treating practitioners to use their professional judgment to determine the most clinically appropriate services to provide, and then to ensure that any services billed to Medicare fully meet the eligibility requirements outlined in the legislation.

This sheet is current as of the Last updated date shown above, and does not account for MBS changes since that date.