# Changes to implanted device procedure MBS items

Last updated: 12 April 2022

* From 1 March 2022, changes were made to a number of the Medicare Benefits Schedule (MBS) items for pain management services to align with contemporary best practice. The changes are a result of the MBS Review Taskforce recommendations for pain management and extensive consultation with stakeholders.
* This updated factsheet covers the changes to implanted device procedure MBS services (effective 1 March 2022) and further clarifies that the use of Percutaneous Electrical Nerve Stimulation (PENS) procedures for chronic pain cannot be billed under the MBS.
* There is a separate factsheet for the pain management changes to nerve block and spinal injection items.
* Additional information about recent amendments to the percutaneous neurotomy items (effective 11 April 2022) and responses to a range of questions from stakeholders is provided in a new fact sheet.
* All of the fact sheets are available at [MBS online - Pain Management Services Changes](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-changes-pain-management).

## What are the changes?

From 1 March 2022, changes were made to some of the implanted device procedure services for pain management funded through the MBS. The changes comprise 1 new item and 14 amended items. 2 items remain unchanged.

**New item:** 39129. This item was introduced to differentiate from the surgical placement of leads currently provided under item 39138.

**Amended items:** 14218, 39125, 39126, 39127, 39128, 39130, 39131, 39133, 39134, 39135, 39136, 39137, 39138, 39139. The changes made to these items are highlighted in the item descriptors in this factsheet.

**Items unchanged:** 14221, 39140.

This factsheet also includes the Private Health Insurance (PHI) classifications and categorisations for the new and amended MBS items.

## Why are the changes being made?

These changes give effect to the recommendations of the independent MBS Review Taskforce for the pain management MBS items, which was informed by the Pain Management Clinical Committee (PMCC), and further consultation with clinical experts and stakeholders through the Pain Management Implementation Liaison Group (ILG). The changes will promote best clinical practice, patient safety and quality of care.

More information about the Taskforce and associated Committees is available on the Department of Health website:[Medicare Benefits Schedule Review](https://www.health.gov.au/initiatives-and-programs/mbs-review?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation).A full copy of the Taskforce’s final report, including the rationales of changes which are outlined in this factsheet, can be found at:[2019 – Medicare Benefits Schedule Review Taskforce - Final Report on the Review of Pain Management MBS Items.](http://wcmprd01.central.health/internet/main/publishing.nsf/Content/MBSR-closed-consult)

## What does this mean for providers?

Providers will need to familiarise themselves with the changes to the MBS items relevant to their practice, and any associated rules and/or explanatory notes. Providers have a responsibility to ensure that any services they bill to Medicare fully meet the eligibility requirements outlined in the legislation.

## How will these changes affect patients?

Patients will continue to receive Medicare rebates for pain management services that reflect contemporary clinical practice.

## Who was consulted on the changes?

A number of peak bodies were consulted during the MBS Review process, including the Australian and New Zealand College of Anaesthetists – Faculty of Pain Medicine, Australian Pain Society, Royal Australasian College of Physicians, Neuro-modulation Society of Australia and New Zealand, Australian Society of Anaesthetists, Australian Medical Association, Palliative Care Australia, Royal Australian College of General Practitioners, Private Healthcare Australia, Australian Private Hospital Association, and consumer representatives.

## New item descriptors (effective from 1 March 2022)

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| **Group T8 – Surgical Operations** | |
| **Subgroup 7 – Neurosurgical** | |
| 39129 | Peripheral lead or leads, percutaneous placement of, including intraoperative test stimulation, for the management of chronic neuropathic pain (H) (Anaes.) (Assist.)  MBS Schedule Fee: $ 631.30  75% Benefit: $473.50  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| Note: New item 39129 provides for the percutaneous placement of leads which differentiates from existing item 39138 (surgical placement of leads for the management of chronic neuropathic pain).  ***The use of PENS for the management of chronic pain has not been assessed by the Medical Services Advisory Committee (MSAC) or recommended for public funding. Therefore, PENS procedures for management of chronic pain cannot be billed under the MBS, including items 39129 and 39138.***  ***MSAC appraises new medical services proposed for public funding and provides advice to Government on whether a new medical service should be publicly funded (and if so, its circumstances) on an assessment of its comparative safety, clinical effectiveness, cost-effectiveness, and total cost, using the best available evidence.*** | |

## Amended item descriptors (effective from 1 March 2022) – changes represented in blue

|  |  |
| --- | --- |
| Group T1 - Miscellaneous Therapeutic Procedures | |
| Subgroup 13 - Other Therapeutic Procedures | |
| 14218 | Implanted infusion pump, refilling of reservoir with a therapeutic agent or agents for infusion to the subarachnoid ~~or epidural~~ space or accessing the side port to assess catheter patency, with or without pump reprogramming ~~a programmable pump~~, for the management of chronic ~~intractable~~ pain, including cancer pain  MBS Schedule Fee: $101.90  85% Benefit: $86.65  75% Benefit: $76.45  PHI Procedure Type: Type B Non-band specific  PHI Clinical Category: Pain management with device |
| Group T8 – Surgical Operations | |
| Subgroup 7 - Neurosurgical | |
| 39125 | ~~Intrathecal or epidural~~ Spinal catheter, insertion or replacement of, and connection to a subcutaneous implanted infusion pump, for the management of chronic ~~intractable~~ pain, including cancer pain (H) (Anaes.) (Assist.)  MBS Schedule Fee: $310.10  75% Benefit: $232.60  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39126 | All of the following: (a) infusion pump, subcutaneous implantation or replacement of; (b) connection of the pump to a~~n intrathecal or epidural~~ spinal catheter; (c) filling of reservoir with a therapeutic agent or agents; with or without programming the pump, for the management of chronic ~~intractable~~ pain, including cancer pain (H) (Anaes.) (Assist.)  MBS Schedule Fee: $376.55 75% Benefit: $282.45  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39127 | Subcutaneous reservoir and spinal catheter, insertion of, for the management of chronic ~~intractable~~ pain, including cancer pain (H) (Anaes.)  MBS Schedule Fee: $492.85  75% Benefit: $369.65  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39128 | All of the following: (a) infusion pump, subcutaneous implantation of; (b) ~~intrathecal or epidural~~ spinal catheter, insertion of; (c) connection of pump to catheter; (d) filling of reservoir with a therapeutic agent or agents; with or without programming the pump, for the management of chronic i~~ntractable~~ pain, including cancer pain (H) (Anaes.) (Assist.)  MBS Schedule Fee: $686.65  75% Benefit: $515.00  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39130 | Epidural lead or leads, percutaneous placement of, including intraoperative test stimulation, for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris~~—to a maximum of 4 leads~~ (H) (Anaes.) (Assist.)  MBS Schedule Fee: $ 701.45  75% Benefit: $526.10  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39131 | Epidural or peripheral nerve electrodes (management, adjustment, ~~and~~ or ~~electronic~~ reprogramming of neurostimulator), ~~by~~ with a medical practitioner attending, for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris—each day  MBS Schedule Fee: $133.00 85% Benefit:  $113.05  75% Benefit:  $99.75  PHI Procedure Type: Unlisted  PHI Clinical Category: Pain management with device |
| 39133 | Either: (a) subcutaneously implanted infusion pump, removal of; or (b) ~~intrathecal or epidural~~ spinal catheter, removal or repositioning of; for the management of chronic ~~intractable~~ pain, including cancer pain (H) (Anaes.)  MBS Schedule Fee: $165.90  75% Benefit: $124.45  PHI Procedure Type: Type B Non-band specific  PHI Clinical Category: Pain management with device |
| 39134 | Neurostimulator or receiver, subcutaneous placement of, including placement and connection of extension wires to epidural or peripheral nerve electrodes, for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris (H) (Anaes.) (Assist.)  MBS Schedule Fee: $354.40  75% Benefit: $265.80  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39135 | Neurostimulator or receiver that was inserted for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris, open surgical removal of, performed in the operating theatre of a hospital (H) (Anaes.) (Assist.)  MBS Schedule Fee: $165.90  75% Benefit: $124.45  PHI Procedure Type: Type B Non-band specific  PHI Clinical Category: Pain management with device |
| 39136 | Epidural or peripheral nerve lead that was ~~inserted~~ implanted for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris, open surgical removal of, performed in the operating theatre of a hospital (H) (Anaes.) (Assist.)  MBS Schedule Fee: $165.90  75% Benefit: $124.45  PHI Procedure Type: Unlisted  PHI Clinical Category: Pain management with device |
| 39137 | Epidural or peripheral nerve lead that was ~~inserted~~ implanted for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris, open surgical repositioning of, to correct displacement or unsatisfactory positioning, including intraoperative test stimulation, other than a service to which item 39130, 39138 or 39139 applies (H) (Anaes.) (Assist.)  MBS Schedule Fee: $629.90  75% Benefit: $472.45  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device |
| 39138 | Peripheral nerve lead or leads, surgical placement of, including intraoperative test stimulation, for the management of chronic ~~intractable~~ neuropathic pain ~~or pain from refractory angina pectoris—not exceeding 4 leads~~ where the leads are intended to remain in situ long term (H) (Anaes.) (Assist.)  MBS Schedule Fee: $701.45  75% Benefit: $526.10  PHI Procedure Type: Type A Surgical  PHI Clinical Category: Pain management with device  ***PENS procedures cannot be billed under this item.*** |
| 39139 | Epidural lead, surgical placement of one or more of by partial or total laminectomy, including intraoperative test stimulation, for the management of chronic ~~intractable~~ neuropathic pain or pain from refractory angina pectoris~~—to a maximum of 4 leads~~ (H) (Anaes.) (Assist.)  MBS Schedule Fee: $941.80  75% Benefit:  $706.35  PHI Procedure Type: Type A Advanced Surgical  PHI Clinical Category: Pain management with device |

## How will the changes be monitored and reviewed?

The impact of these changes will be closely monitored. The Department will continue to work with stakeholders following implementation of the changes.

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

## Where can I find more information?

The current pain management 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 MBS items and rules and the Health Insurance Act and associated regulations. If you have a question regarding the interpretation of the pain management items, please email [askMBS@health.gov.au](mailto:askMBS@health.gov.au).

For questions regarding the PHI classifications, please email [PHI@health.gov.au](mailto:PHI@health.gov.au).

Subscribe to ‘[News for Health Professionals](https://www.servicesaustralia.gov.au/news-for-health-professionals?type%5Bvalue%5D%5Bnews%5D=news)’ 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.

The data file for software vendors will be available via the MBS Online website under the [Downloads](https://protect-au.mimecast.com/s/YGuBCWLVnwSNGEDUxwHa2?domain=mbsonline.gov.au) page.

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.