Myringoplasty and tympanomastoid procedures changes

Last updated: 3 October 2025

What are the changes?

Effective 1 November 2025 there will be amendments to 15 items for otolaryngology, head and neck services for myringoplasty and tympanomastoid procedures:

Items 41527, 41530, 41533, 41536, 41545, 41551, 41554, 41557, 41560, 41563, 41564, 41566, 41629, 41635 and 41638 will be amended to allow co-claiming with services in Subgroup 18 – Myringoplasty and Tympanomastoid Procedures when provided on separate sides (left ear/right ear).

Why are the changes being made?

These changes are minor amendments to the co-claiming restrictions for myringoplasty and tympanomastoid procedures, to ensure that the changes align with the intent of the recommendations made by the MBS Review Taskforce. The recommendations were informed by advice from the Otolaryngology, Head and Neck Surgery Clinical Committee. More information about the Taskforce and associated Committees is available at Medicare Benefits Schedule Review in the consumer section of the Department of Health, Disability and Ageing's (the department's) website.

A full copy of the Otolaryngology, Head and Neck Surgery Clinical Committee's final report can be found in the <u>Clinical Committee section</u> of the department's website. A full copy of the final MBS Review Taskforce report is available in the <u>Taskforce final reports</u> section of the department's website.

What does this mean for providers?

These changes will allow providers to co-claim these procedures where clinically relevant and when provided on separate sides of the body.

Providers will need to familiarise themselves with the descriptor changes set out below. 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 should not be negatively affected by amended items and will have continued access to clinically relevant services.

Effective from 1 November 2025 (subject to the passage of legislation), patients will receive Medicare benefits for myringoplasty and tympanomastoid services, including when two of the amended services are provided on separate ears.

Who was consulted on the changes?

The Otolaryngology, Head and Neck Surgery Clinical Committee was established in 2018 by the MBS Review Taskforce (the 'Taskforce'), to provide broad clinician and consumer expertise. The MBS Review included a targeted consultation process. Feedback was considered by the Committee prior to making its final recommendations to the Taskforce.

Following the MBS Review (during implementation), ongoing consultation occurred with the Otolaryngology, Head and Neck Surgery Implementation Liaison Group (ILG), which included representatives from the Australian Medical Association, Australasian Society of Otolaryngology, Head and Neck Surgery, Laryngology Society of Australia, Audiology Australia, Independent Audiologists Australia and Private Healthcare Australia.

These changes were recommended by the Chair of the ILG to align with the correct policy intent of the Committee's recommendation.

How will the changes be monitored and reviewed?

Providers are responsible for ensuring Medicare services claimed using their provider number meet all legislative requirements. All Medicare claiming is subject to compliance checks and providers may be required to submit evidence about the services they bill. More information about the department's compliance program can be found on its website at Medicare compliance.

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. You can also subscribe to future MBS updates by visiting 'Subscribe to the MBS' on the MBS Online website.

Providers seeking advice on interpretation of MBS items, explanatory notes and associated legislation can use the department's email advice service by emailing askMBS@health.gov.au.

Private health insurance information on the product tier arrangements is available at www.privatehealth.gov.au. Detailed information on the MBS item listing within clinical categories is available on the department's website. Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the Private Health Insurance (Benefit Requirements) Rules 2011 found on the Federal Register of Legislation. If you have a query in relation to private health insurance, you should email PHI@health.gov.au.

Subscribe to 'News for Health Professionals' on the Services Australia website to 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 when available can be accessed via the **Downloads** page.

Amended item descriptors (to take effect 1 November 2025 subject to the passage of legislation)

Category 3 - Therapeutic Procedures

Group T8 – Surgical Operations

Subgroup 18 – Myringoplasty and Tympanomastoid Procedures

41527

Myringoplasty, by trans-canal approach, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Surgical

41530

Myringoplasty, post-aural or endaural approach, with or without mastoid inspection, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41533

Atticotomy without reconstruction of the bony defect, with or without myringoplasty, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

Category 3 - Therapeutic Procedures

41536

Atticotomy with reconstruction of the bony defect, with or without myringoplasty, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41545

Mastoidectomy (cortical), other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Surgical

41551

Mastoidectomy, intact wall technique, with myringoplasty, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41554

Mastoidectomy, intact wall technique, with myringoplasty and ossicular chain reconstruction, other than a service associated with a service to which item 41603 or another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41557

Mastoidectomy (radical or modified radical), other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

Category 3 - Therapeutic Procedures

41560

Mastoidectomy (radical or modified radical) and myringoplasty, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41563

Mastoidectomy (radical or modified radical), myringoplasty and ossicular chain reconstruction, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41564

Mastoidectomy (radical or modified radical), obliteration of the mastoid cavity, blind sac closure of external auditory canal and obliteration of eustachian tube, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41566

Revision of mastoidectomy (radical, modified radical or intact wall), including myringoplasty, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

Category 3 - Therapeutic Procedures

41629

Middle ear, exploration of, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Surgical

41635

Clearance of middle ear for granuloma, cholesteatoma and polyp, one or more, with or without myringoplasty, other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

41638

Clearance of middle ear for granuloma, cholesteatoma and polyp, one or more, with or without myringoplasty with ossicular chain reconstruction other than a service associated with a service to which another item in this Subgroup applies on the same side (H) (Anaes.) (Assist.)

Private Health Insurance Classification:

- Clinical category: Ear, nose and throat
- Procedure type: Type A Advanced Surgical

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