Cardiac magnetic resonance imaging for myocarditis from 1 January 2025

Last updated: 11 December 2024

* From 1 January 2025, a new item for cardiac magnetic resonance imaging (MRI) will commence on the Medicare Benefits Schedule (MBS) for the diagnosis of myocarditis in acute onset heart failure or unexplained arrhythmia, or in suspected drug-induced myocarditis.
* This change is relevant to health professionals who request, provide and claim cardiac MRI under the MBS, as well as patients, private health insurers and hospitals.
* Temporary cardiac MRI Item 63399, which was available for the diagnosis of mRNA COVID-19 vaccine associated myocarditis, will cease from 31 December 2024.

## What are the changes?

The following changes will occur:

* From 31 December 2024, item 63399 will be deleted and can no longer be provided.
* Effective 1 January 2025, a new item (63390) will be listed for cardiac MRI to diagnose myocarditis in acute onset heart failure or unexplained arrhythmia, or in suspected drug induced myocarditis.

For private health insurance purposes, item 63390 will be listed under the following clinical category and procedure type:

* Private Health Insurance Classification:
* Clinical category: Support list (DI)
* Procedure type: Type C

## Why are the changes being made?

The listing of this service was recommended by the Medical Services Advisory Committee (MSAC) in April 2024 in their consideration of Application 1713. Further details about MSAC applications can be found under [MSAC Applications](http://www.msac.gov.au/internet/msac/publishing.nsf/Content/application-page) on the MSAC website ([Medical Services Advisory Committee](http://www.msac.gov.au/)).

## What does this mean for requestors?

Specialists and consultant physicians can request Item 63390 in circumstances where it is clinically necessary, and the request meets the requirements in the item descriptor.

Patients who previously would have been eligible for cardiac MRI for suspected myocarditis under temporary Item 63399 will be able to receive the new item.

Explanatory Note IN.0.18 provides additional clarification on the use of the new item.

## What does this mean for providers?

The service can be performed on both partially and fully Medicare-eligible MRI machines.

Item 63390 can be provided by a person who is:

* a specialist in diagnostic radiology and satisfies the Chief Executive Medicare that the specialist is a participant in the Royal Australian and New Zealand College of Radiologists’ Quality and Accreditation Program; or
* a specialist in diagnostic radiology or a consultant physician and is recognised by the Conjoint Committee for Certification in Cardiac MRI.

## How will these changes affect patients?

Effective 1 January 2025, the Government is changing who can get a Medicare benefit for a cardiac MRI for myocarditis, by listing a new MBS item for this purpose (item 63390).

The changes will provide greater access for patients who need a cardiac MRI scan for the diagnosis of myocarditis, leading to improved health outcomes.

Patients should not be negatively affected by the removal of temporary item 63399, as they will be able to receive the new item and have continued access to clinically relevant services.

## Who was consulted on the changes?

## In addition to the MSAC consultation process, the Department of Health and Aged Care consulted with a wide range of stakeholders representing experts across the diagnostic imaging and medical sector, including consumer representative groups and those with expertise working with patients with cardiac and myocarditis related conditions.

## Stakeholders were supportive of the commencement of the new item on the MBS.

## How will the changes be monitored and reviewed?

The Department of Health and Aged Care regularly reviews the use of new and amended MBS items in consultation with the profession.

## 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 of Health and Aged Care’s (the Department’s) compliance program can be found on its website at [[Medicare compliance](https://www.health.gov.au/topics/medicare/compliance)](https://www.health.gov.au/topics/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](https://www.mbsonline.gov.au/). You can also subscribe to future MBS updates by visiting ‘[Subscribe to the MBS](https://www9.health.gov.au/mbs/subscribe.cfm)’ on the MBS Online website.

The Department provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the *Health Insurance Act 1973* 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).

Private health insurance information on the product tier arrangements is available at [www.privatehealth.gov.au](https://www.privatehealth.gov.au/health_insurance/phichanges/index.htm). Detailed information on the MBS item listing within clinical categories is available on the [Department’s website](https://www.health.gov.au/topics/private-health-insurance/private-health-insurance-reforms). 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](https://www.legislation.gov.au). If you have a query in relation to private health insurance, you should email [PHI@health.gov.au](mailto:PHI@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 the Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the [Downloads](https://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/downloads) page.

## New item descriptor (to take effect 1 January 2025)

| Category 5 – Diagnostic Imaging Services |
| --- |
| Group I5 – Magnetic Resonance Imaging |
| **Subgroup 14 – Scans of Cardiovascular System – for Specified Conditions** |
| Item 63390  MRI – scan of the cardiovascular system for the assessment of myocardial structure and function and characterisation, if the service is requested by a specialist or consultant physician who has assessed the patient, and the request for the scan indicates   1. acute onset (less than 3 months) heart failure caused by suspected myocarditis which would otherwise require endomyocardial biopsy to confirm the diagnosis of myocarditis; or 2. unexplained arrhythmia caused by suspected myocarditis which would otherwise require endomyocardial biopsy to confirm the diagnosis of myocarditis; or 3. suspected drug-induced myocarditis, where the results from the following examinations are inconclusive to form a diagnosis: 4. troponin, and 5. chest x-ray, and 6. transthoracic echocardiogram.   (R) (Anaes.) (Contrast)  Fee: $602.15 Benefit: 85%: $511.83, 75%: $451.61   * Private Health Insurance Classification: * Clinical category: Support list (DI) * Procedure type: Type C |
| Explanatory Note IN.0.18 |
| MRI scan of the cardiovascular system for suspected myocarditis (MBS Item 63390)  *Clinical Notes*  For Item 63390, the term ‘drug’ includes pharmaceutical preparations such as mRNA vaccinations. |

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.