



## Changes to MBS Cardiac Imaging Services - Echocardiography and Myocardial Perfusion Studies (Nuclear Medicine) items

Important Note: The information in this document is subject to the passage of legislation and may change as a result of legislative process.

Date of change: 1 August 2020

New items: **55126** **55127** **55128** **55129** **55132** **55133** **55134** **55137** **55141**  
**55143** **55145** **55146** **61321** **61324** **61325** **61329** **61345** **61349**  
**61357**

Deleted items: **55113** **55114** **55115** **55116** **55117** **61302** **61303** **61306** **61307**

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### Revised structure

- Restructured echocardiography items (55113, 55114, 55115, 55116 and 55117) to better align with clinical guidelines and reduce low value care.
- Created one new item for an initial real time echocardiographic examination of the heart (item 55126). This item will provide a baseline initial echocardiogram service that is an entry point for adult patients who may require ongoing echocardiographic examinations. This item can also be claimed for persons under 17 years for an initial examination. Note: item 55132 can only be requested by a specialist or consultant physician and can also be the initial entry point for persons under 17 years.
- Created three new items for repeat serial real time echocardiographic examination of the heart (items 55127, 55128 and 55129). Item 55127 for request by specialists or consultant physicians and item 55128 for request by GPs located in a Modified Monash Model (MMM) 3-7 designated area, will provide a repeat serial valve investigation. Item 55129 will provide an echocardiographic examination for heart failure or structural heart disease.
- Created one new item for a serial real time echocardiographic examination of the heart for patients aged under 17 years, or for patients 17 years and over with complex congenital heart disease (item 55132). This item can be used for initial and repeat examinations in the stated cohorts.



- Created one new item for a frequent repetition serial real time echocardiographic examination for patients with isolated pericardial effusion or pericarditis, or for patients who have commenced medication for non-cardiac purposes (item 55133), that require repeat investigations for the purpose of Pharmaceutical Benefits Scheme (PBS) prescribing.
- Created one new item for a repeat real time echocardiographic examination for rare cases that do not meet the indications of the other new items (item 55134).
- Created one new item for a serial real time echocardiographic examination of the heart for a fetus that is suspected of having congenital heart disease (item 55137).
- Restructured stress echocardiography and myocardial perfusion studies to better describe the indications for these tests and reduce unnecessary exposure to radiation for myocardial perfusion study services.
- Created one new item for an exercise stress echocardiography study (item 55141).
- Created two new items for pharmacological stress echocardiography studies (item 55145 and 55146).
- Create one new item for a repeat pharmacological or exercise stress echocardiography study (item 55143).
- Create seven new items for myocardial perfusion studies (nuclear medicine studies) (items 61321, 61324, 61325, 61329, 61345, 61349 and 61357).
- The stress echocardiography and stress myocardial perfusion study items include the requirements of an electrocardiograph (ECG) exercise stress test (current MBS item 11712). This is reflected in the new fees.

## Patient impacts

- Patients will receive Medicare rebates for cardiac imaging services that are clinically appropriate and reflect modern clinical practice.
- The cardiac changes ensure patients only undergo cardiac diagnostic tests when there is a clinical need, in relation to myocardial perfusion studies this will reduce unnecessary exposure to radiation.

## Restrictions or requirements

- Providers should familiarise themselves with the changes to MBS items for cardiac imaging services 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.
- A new rule has been introduced for the same day claiming for plain echocardiogram items (55126, 55127, 55128, 55129, 55132, 55133, 55134 and 55137) with stress echocardiogram items (55141, 55143, 55145 and 55146). If a stress echocardiogram is completed on the same day as a plain echocardiogram by the same provider or a provider in the same group practice, the schedule fee of the item with the lower schedule fee will be reduced to 60% of its fee and the higher schedule fee will be paid at 100%. These



new items will be included in a new subgroup, subgroup 7 and the new echocardiogram multiple service rule only applies to the items within this subgroup.

- Plain echocardiogram item for known valvular dysfunction (item 55128) allows GPs in a rural area, (as defined by the Modified Monash Model area 3-7) to request this service.
- Plain echocardiogram item that is accessible for all paediatric patients and those adults with known, complex congenital heart disease (item 55132).
- A consultation may only be claimed with Ambulatory ECG (AECG), echocardiography, ECG stress testing, stress echocardiography, myocardial perfusion studies (nuclear medicine) items under the following circumstances.
  - i. both the consultation and the service were specifically and separately requested by another provider; or
  - ii. the consultation was specifically requested by another provider and the decision to perform the service was made during a consultation with the service provider on the same day as the service; or
  - iii. the provider claiming both services is responsible for the ongoing care of the patient and provides a consultation after the service where clinical management decisions are made.
- The only exception to this rule is for specialist paediatric cardiologists who will be able to co-claim a consultation with AECG, echocardiography, ECG stress testing, stress echocardiography, myocardial perfusion studies (nuclear medicine) items when not specifically requested by the referrer.
- Single rest myocardial perfusion study will have two items numbers that reflect the use of different isotopes when conducting the investigation. Item 61321 will allow the use of a single rest technetium-99m (Tc-99m) protocol and will be claimable only once in a 24 month period. Item 61325 will allow an initial rest study followed by redistribution study, later the same day, with or without 24 hour imaging, with thallous chloride-201 (Tl-201). This will be claimable twice in a 24 month period, which in effect allows the item to be claimed twice in a 24 hour period to match the requirements of the investigation.
- Single stress myocardial perfusion study will have an item (61357) when requested by a medical practitioner (other than a specialist or consultant physician) and a second item (61324) when requested by a specialist or consultant physician. Claimable once in a 24 month period.
- Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion will have an item (61329) when requested by a medical practitioner (other than a specialist or consultant physician) and a second item (61345) when requested by a specialist or consultant physician. Claimable once in a 24 month period.
- A myocardial perfusion study is claimable once every two years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study (noting that claiming item 61325 twice in a 24 hour period constitutes a single rest study).



- A repeat combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study (item 61349) for patients with evolving cardiac ischaemia, who had a previous study (61329 or 61345) and have undergone a revascularisation procedure in the previous 24 months. This item is claimable once in a 12 month period and can only be requested by a specialist or consultant physician.

## Contents

1. Echocardiograph changes
2. Myocardial perfusion studies

# 1. Echocardiograph changes

## **Deleted item 55113 – M-mode and 2 dimensional real time echocardiographic examination**

Services under item 55113 are now expected to be claimed under new items 55126 or 55129

## **Deleted item 55114 – M-mode and 2 dimensional real time echocardiographic examination**

Services under item 55114 are now expected to be claimed under new items 55126, 55127 or 55128

## **Deleted item 55115 – M-mode and 2 dimensional real time echocardiographic examination**

Services under item 55115 are now expected to be claimed under new items 55126, 55132 or 55137

## **Deleted item 55116 – Exercise stress echocardiography**

Services under item 55116 are now expected to be claimed under new item 55141

## **Deleted item 55117 – Pharmacological stress echocardiography**

Services under item 55117 are now expected to be claimed under new item 55145



GP requested – New items	Specialist or Consultant Physician requested – New items
55126, 55128 (MMM 3-7 area GPs only), 55133	55126, 55127, 55129, 55132, 55133, 55134, 55137

## New item 55126 – Initial real time echocardiographic examination

**Overview:** A new item created as part of the complete restructure of echocardiograph items to align with clinical guidelines and reduce low value care. This item will provide access to a baseline initial echocardiographic examination that is an entry point for adult patients (except those with complex congenital heart disease) who may require ongoing echocardiographic examinations. A service under item 55126 is restricted to two years. If more frequent echocardiograms are required then additional repeat items allow for more frequent services for specific indications in line with accepted clinical guidelines.

**Descriptor:** Initial real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows:

(a) for the investigation of any of the following:

- (i) symptoms or signs of cardiac failure; or
- (ii) suspected or known ventricular hypertrophy or dysfunction; or
- (iii) pulmonary hypertension; or
- (iv) valvular, aortic, pericardial, thrombotic or embolic disease; or
- (v) heart tumour; or
- (vi) symptoms or signs of congenital heart disease; or
- (vii) other rare indications; and

(b) if the service involves all of the following, if appropriate:

- (i) assessment of left ventricular structure and function including quantification of systolic function using M-mode, 2-dimensional or 3-dimensional imaging and diastolic function; and
- (ii) assessment of right ventricular structure and function with quantitative; and
- (iii) assessment of left and right atrial structure including quantification of atrial sizes; and
- (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
- (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
- (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using pulsed wave and continuous wave Doppler techniques with quantitation of stenosis or regurgitation; and



- (vii) assessment of additional haemodynamic parameters including the assessment of pulmonary pressures; and
- (viii) recordings on digital media; and
- (c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies; and
- (d) cannot be claimed within 24 months if a service associated with a service to which item 55127, 55128, 55129, 55132, 55133, 55134 or 55137 is provided

For any particular patient, applicable not more than once in 24 months (R).

**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## New item 55127 – Serial real time echocardiographic examination of the heart for valvular dysfunction requested by a specialist or consultant physician.

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies. This item will provide access to a repeat serial valve investigation requested by a specialist or consultant physician. This service would require examination of the whole heart, including cardiac valves and ventricular function.

**Descriptor:** Serial real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows for the investigation of known valvular dysfunction if:

- (a) the service involves all of the following, if appropriate:
  - (i) assessment of left ventricular structure and function including quantification of systolic function using M-mode, 2-dimensional or 3-dimensional imaging and diastolic function; and
  - (ii) assessment of right ventricular structure and function with quantitative assessment; and
  - (iii) assessment of left and right atrial structure including quantification of atrial sizes; and
  - (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
  - (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
  - (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using pulsed wave and continuous wave Doppler techniques with quantitation of stenosis or regurgitation; and
  - (vii) assessment of additional haemodynamic parameters including the assessment of pulmonary pressures; and
  - (viii) recordings on digital media; and



- (b) the service is requested by a specialist or consultant physician; and
- (c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies (R).

**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## New item 55128 – Serial real time echocardiographic examination of the heart for valvular dysfunction requested by medical practitioners in a Modified Monash Model (MMM) 3 to 7 area.

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies. The service provided under item 55128 is identical to the service under item 55127 except the service must be requested by a medical practitioner (other than a specialist or consultant physician) that is located within a Modified Monash Model (MMM) 3 to 7 area.

**Descriptor:** Serial real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows for the investigation of known valvular dysfunction if:

- (a) the service involves all of the following, if appropriate:
  - (i) assessment of left ventricular structure and function including quantification of systolic function using M-mode, 2-dimensional or 3-dimensional imaging and diastolic function; and
  - (ii) assessment of right ventricular structure and function with quantitative assessment; and
  - (iii) assessment of left and right atrial structure including quantification of atrial sizes; and
  - (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
  - (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
  - (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using pulsed wave and continuous wave Doppler techniques with quantitation of stenosis or regurgitation; and
  - (vii) assessment of additional haemodynamic parameters including the assessment of pulmonary pressures; and
  - (viii) recordings on digital media; and
- (b) the service is requested by a medical practitioner (other than a specialist or consultant physician) at, or from, a practice location in:
  - (i) a Modified Monash 3 area; or
  - (ii) a Modified Monash 4 area; or





- (iii) a Modified Monash 5 area; or
  - (iv) a Modified Monash 6 area; or
  - (v) a Modified Monash 7 area; and
- (c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies (R).

**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## New item 55129 – Serial real time echocardiographic examination of the heart related to known heart failure or structural heart disease.

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies. A service provided under item 55129 is for a repeat echocardiographic examination of the heart related to known heart failure or structural heart disease, excluding valvular dysfunction.

**Descriptor:** Serial real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows for the investigation of patients with known heart failure or structural heart disease, excluding valvular dysfunction, if:

- (a) the service involves all of the following, if appropriate:
  - (i) assessment of left ventricular structure and function including quantification of systolic function using M-mode, 2-dimensional or 3-dimensional imaging and diastolic function; and
  - (ii) assessment of right ventricular structure and function with quantitative assessment; and
  - (iii) assessment of left and right atrial structure including quantification of atrial sizes; and
  - (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
  - (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
  - (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using pulsed wave and continuous wave Doppler techniques with quantitation of stenosis or regurgitation if present; and
  - (vii) assessment of additional haemodynamic parameters including the assessment of pulmonary pressures when possible; and
  - (viii) recordings on digital media; and
- (b) the service is requested by a specialist or consultant physician; and





(c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies (R)

**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## New item 55132 – Serial real time echocardiographic examination of the heart for a person who is under 17 years or for people with complex congenital heart disease.

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies. A service under item 55132 is for a serial real time echocardiographic examination for paediatric patients who are under 17 years old, or for patients of any age with complex congenital heart disease. This item can be claimed for initial and repeat investigations for all patients under 17 years of age (specialist paediatric cardiologist) and adults with complex congenital heart disease (adult congenital heart disease specialist).

**Descriptor:** Serial real time echocardiographic examination of the heart with real time colour flow mapping from at least 4 acoustic windows for the investigation of paediatric patients who are under 17 years of age, or patients of any age with complex congenital heart disease if:

(a) the service involves the all of the following, if appropriate:

- (i) assessment of ventricular structure and function including quantification of systolic function (if the ventricular configuration allows accurate quantification) using at least one of M-mode, 2-dimensional or 3-dimensional imaging; and
- (ii) assessment of diastolic function, unless not clinically relevant due to underlying physiology or anatomy; and
- (iii) assessment of atrial structure including quantification of atrial sizes unless not clinically relevant due to underlying physiology or anatomy; and
- (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
- (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
- (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using relevant Doppler techniques with quantitation where relevant; and
- (vii) subxiphoid views where recommended for congenital heart lesions; and
- (viii) additional haemodynamic parameters relevant to the clinical condition under review; and
- (ix) recordings on digital media; and

(b) the service is requested by a specialist or consultant physician; and



- (c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies (R).

**Indication:** The service is to be requested by a specialist or consultant physician and can only be performed by a specialist paediatric cardiologist for a patient that is under 17 years of age, or an adult congenital heart disease specialist for a patient who is 17 years old or older.

**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## New item 55133 – Frequent repetition serial real time echocardiographic examination of the heart

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies. A service provided under item 55133 is for a frequent repetition serial real time echocardiographic examination of the heart for a patient with two specific clinical indications.

**Descriptor:** Frequent repetition serial real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows:

- (a) for the investigation of a patient:
- (i) with isolated pericardial effusion or pericarditis; or
  - (ii) who has commenced medication for non-cardiac purposes that have cardiotoxic side effects, and if the patient has a normal baseline study which requires echocardiograms to comply with the requirements of the Pharmaceutical Benefits Scheme; and
- (b) the service involves all of the following, if appropriate:
- (i) assessment of left ventricular structure and function including quantification of systolic function using M-mode, 2-dimensional or 3-dimensional imaging and diastolic function; and
  - (ii) assessment of right ventricular structure and function with quantitative assessment; and
  - (iii) assessment of left and right atrial structure including quantification of atrial sizes; and
  - (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
  - (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
  - (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using pulsed wave and continuous wave Doppler techniques with quantitation of stenosis or regurgitation; and
  - (vii) assessment of additional haemodynamic parameters including the assessment of pulmonary pressures; and



(viii) recording on digital media; and

(c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies (R).

**Indications:** For a patient with isolated pericardial effusion or pericarditis; or if the patient is commenced on a medication for non-cardiac purposes that have cardiotoxic side effects and the patient has a normal baseline study which requires echocardiograms to comply with the prescribing requirements of the Pharmaceutical Benefits Scheme.

**MBS fee:** \$210.75

**Benefit:** 85% = \$179.15      75% = \$158.10

## New item 55134 – Repeat real time echocardiographic examination of the heart

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies, a service provided under item 55134 is for repeat real time echocardiographic examination for rare cases that do not meet the requirements of the other echocardiographic items 55127, 55128, 55129, 55132, 55133 or 55137.

**Descriptor:** Repeat real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows for rare cardiac pathologies if:

- (a) the service involves all of the following, if appropriate:
- (i) assessment of left ventricular structure and function including quantification of systolic function using M-mode, 2-dimensional or 3-dimensional imaging and diastolic function; and
  - (ii) assessment of right ventricular structure and function with quantitative assessment; and
  - (iii) assessment of left and right atrial structure including quantification of atrial sizes; and
  - (iv) assessment of vascular connections of the heart including the great vessels and systemic venous structures; and
  - (v) assessment of pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
  - (vi) assessment of all present valves including structural assessment and measurement of blood flow velocities across the valves using pulsed wave and continuous wave Doppler techniques with quantitation of stenosis or regurgitation; and
  - (vii) assessment of additional haemodynamic parameters including the assessment of pulmonary pressures; and
  - (viii) recording on digital media; and
- (b) the service is requested by a specialist or consultant physician; and



(c) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) applies (R).

**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## New item 55137 – Serial real time echocardiographic examination of the heart of a fetus.

**Overview:** A new item created as part of the restructure of echocardiograph items to align with clinical guidelines and reduce low value care. The new structure reflects the need for specific clinical indications for repeat studies, a service provided under item 55137 is for serial real time echocardiographic examination of the fetal heart suspected of having complex congenital cardiac disease or previously confirmed complex congenital heart disease.

**Descriptor:** Serial real time echocardiographic examination of the heart with real time colour flow mapping from at least 3 acoustic windows:

- (a) for the investigation of a fetus with suspected or confirmed of one or more of the following:
  - (i) complex congenital heart disease; or
  - (ii) functional heart disease; or
  - (iii) fetal cardiac arrhythmia; or
  - (iv) cardiac structural abnormality requiring confirmation; and
- (b) the service involves the assessment all of the following, if appropriate:
  - (i) ventricular structure and function; and
  - (ii) atrial structure; and
  - (iii) vascular connections of the heart including the great vessels and systemic venous structures; and
  - (iv) pericardium and assessment of any haemodynamic consequences of pericardial abnormalities; and
  - (v) all present valves including structural assessment and measurement of blood flow velocities across the valves using relevant Doppler techniques with quantitation; and
  - (vi) recording on digital media; and
- (c) the service is requested by a specialist or consultant physician; and
- (d) not being a service associated with a service to which another item in this Subgroup (except items 55141, 55143, 55145 and 55146) or an item in Subgroup 2 (except items 55118 and 55130) (R)

**Indications:** The service under this item can only be performed by a paediatric cardiologist with advanced training and expertise in fetal cardiac imaging.



**MBS fee:** \$234.15

**Benefit:** 85% = \$199.05      75% = \$175.65

## Stress Echocardiography

GP requested – New items	Specialist or Consultant Physician requested –New items
55141, 55145, 55146	55141, 55143, 55145, 55146

Items (55141, 55143, 55145 and 55146) include the exercise ECG component (item 11729 or 11730) which is also reflected in the fee.

**For the following stress echocardiography items (55141, 55143, 55145 and 55146) the following indications for requesting apply:**

For a service to be provided under items 55141, 55143, 55145 or 55146 a patient is required to meet one or more of the following indications:

- (a) if the patient displays one or more of the following symptoms of typical or atypical angina:
  - (i) constricting discomfort in the:
    - a. front of the chest; or
    - b. neck; or
    - c. shoulders; or
    - d. jaw; or
    - e. arms; or
  - (ii) the patient's symptoms are precipitated by physical exertion; or
  - (iii) the patient's symptoms are relieved by rest or glyceryl trinitrate within 5 minutes or less; or
- (b) if the patient has known coronary artery disease and displays one or more symptoms that are suggestive of ischaemia:
  - (i) which are not adequately controlled with medical therapy; or
  - (ii) have evolved since the last functional study; or
- (c) if the patient qualifies for one or more of the following indications:
  - (i) assessment of myocardial ischaemia with exercise is required if a patient with congenital heart lesions has undergone surgery and ischemia is considered reversible; or
  - (ii) assessment indicates that resting 12 lead electrocardiogram changes are consistent with coronary artery disease or ischaemia, in a patient that is without known coronary artery disease; or



- (iii) assessment of coronary artery disease indicates uncertain functional significance demonstrated on computed tomography coronary angiography; or
- (iv) assessment indicates that the patient has potentially non-coronary artery disease, which includes undue exertional dyspnoea of uncertain aetiology; or
- (v) a pre-operative assessment of a patient with functional capacity of less than 4 Metabolic equivalents indicates that surgery is intermediate to high risk, and the patient has at least one of following conditions:
  - a. ischaemic heart disease or previous myocardial infarction; or
  - b. heart failure; or
  - c. stroke or transient ischaemic attack; or
  - d. renal dysfunction (serum creatinine greater than 170umol/L or 2 mg/dL or a creatinine clearance of less than 60 mL/min); or
  - e. diabetes mellitus requiring insulin therapy; or
- (vi) assessment before cardiac surgery or catheter-based interventions is required to:
  - a. increase the cardiac output to assess the severity of aortic stenosis; or
  - b. determine whether valve regurgitation worsens with exercise and/or correlates with functional capacity; or
  - c. correlate functional capacity with the ischaemic threshold; or
- (vii) for patients where silent myocardial ischaemia is suspected or due to the patient's cognitive capacity or expressive language impairment, it is not possible to accurately assess symptom frequency based on medical history.

## New item 55141 – Exercise stress echocardiography focused stress study

**Overview:** Exercise stress echocardiography focused study if ;

- (a) the service involves all of the following:
  - (i) two-dimensional recordings before exercise (baseline) from at least 2 acoustic windows; and
  - (ii) matching recordings at or immediately after peak exercise, which include at least parasternal short and long axis views, and apical 4-chamber, 2 chamber and long axis views; and
  - (iii) recordings on digital media with equipment permitting display of baseline and matching peak images on the same screen; and
  - (iv) resting electrocardiogram and continuous multi-channel electrocardiogram monitoring and recording during stress; and
  - (v) blood pressure monitoring and the recording of other parameters; and
- (b) cannot be claimed if a service associated with a service to which item 55143, 55145 or 55146 is provided in the previous 24 months; and
- (c) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729 or 11730 applies



For any particular patient, applicable not more than once in 24 months (R).

**MBS fee:** \$417.45

**Benefit:** 85% = \$354.85      75% = \$313.10

## New item 55143 – Repeat pharmacological or exercise stress echocardiography

**Overview:** A new item created as a part of a restructure stress echocardiography to better describe the indications for these tests and reduce low value care. A service provided under new item 55143 is for either a pharmacological stress echocardiography, or an exercise stress echocardiography, for a patient who has either one or more symptoms of typical or atypical angina, or one or more indications related to cardiac ischemia and has had a previous stress echocardiogram in the previous 24 months.

**Descriptor:** Repeat pharmacological or exercise stress echocardiography if:

- (a) the patient has had service provided under items 55141, 55145 or 55146 in the previous 24 months; and
- (b) the patient has symptoms of ischaemia that have evolved and are not adequately controlled with optimal medical therapy; and
- (c) the requirements of either item 55141 or 55145 are applied to this service; and
- (d) the service is requested by a specialist or a consultant physician; and
- (e) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729 or 11730 applies.

For any particular patient, applicable not more than once in 12 months (R).

**Indications:** This item can only be requested by a specialist or a consultant physician.

**MBS fee:** \$417.45

**Benefit:** 85% = \$354.85      75% = \$313.10

## New item 55145 – Pharmacological stress echocardiography

**Overview:** A new item created as a part of a restructure stress echocardiography to better describe the indications for these tests and reduce low value care. A service provided under new item 55145 is for a pharmacological stress echocardiography for a patient who has specific clinical indications.

**Descriptor:** Pharmacological stress echocardiography if:

- (a) the service involves all of the following:
  - (i) two-dimensional recordings before drug infusion (baseline) from at least 2 acoustic windows; and





- (ii) matching recordings at least twice during drug infusion, including a recording at the peak drug dose, which include at least parasternal short and long axis views, and apical 4-chamber, 2 chamber and long axis views; and
  - (iii) recordings on digital media with equipment permitting display of baseline and matching peak images on the same screen; and
  - (iv) resting electrocardiogram and continuous multi-channel electrocardiogram monitoring and recording during stress; and
  - (v) blood pressure monitoring and the recording of other parameters; and
- (b) a service to which item 55146 or 55143 applies has not been provided in the previous 24 months; and
- (c) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729 or 11730 applies
- For any particular patient, applicable not more than once in 24 months (R)

**MBS fee:** \$483.85

**Benefit:** 85% = \$411.30      75% = \$362.90

## New item 55146 – Pharmacological stress echocardiography following a failed exercise stress echocardiograph.

**Overview:** A new item created as a part of a restructure stress echocardiography to better describe the indications for these tests and reduce low value care. A service provided under new item 55146 is for a pharmacological stress echocardiography for a patient who has failed an exercise stress test provided under item 55141 within the previous 4 weeks.

**Descriptor:** Pharmacological stress echocardiography if:

- (a) the service involves all of the following:
  - (i) two-dimensional recordings before drug infusion (baseline) from at least 2 acoustic windows; and
  - (ii) matching recordings at least twice during drug infusion, including a recording at the peak drug dose, which include at least parasternal short and long axis views, and apical 4-chamber, 2 chamber and long axis views; and
  - (iii) recordings on digital media with equipment permitting display of baseline and matching peak images on the same screen; and
  - (iv) resting electrocardiogram and continuous multi-channel electrocardiogram monitoring and recording during stress; and
  - (v) blood pressure monitoring and the recording of other parameters; and
- (b) the patient has had a service performed under item 55141 in the previous 4 weeks and the test has failed due to an inadequate heart rate response; and
- (c) a service to which item 55143 or 55145 applies has not been provided in the previous 24 months; and



(d) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729 or 11730 applies  
For any particular patient, applicable not more than once in 24 months (R)

**MBS fee:** \$483.85

**Benefit:** 85% = \$411.30      75% = \$362.90

## 2. Myocardial perfusion study (MPS) changes (nuclear medicine)

### Deleted item 61302 – Single stress or rest myocardial perfusion study

The service provided under this item is obsolete.

### Deleted item 61303 – Single stress or rest myocardial perfusion study

The service provided under this item is obsolete.

### Deleted item 61306 – Combined stress and rest myocardial perfusion study

This service provided under this item would now be expected to be claimed under new item 61329 (for medical practitioner other than specialist) or 61345 (for specialist or consultant physician).

### Deleted item 61307 – Combined stress and rest myocardial perfusion study

This service provided under this item would now be expected to be claimed under new item 61329 (for medical practitioner other than specialist) or 61345 (for specialist or consultant physician).



## New item 61321 – Single rest myocardial perfusion study for assessment in people with known disease (technetium-99m (Tc-99m) protocol).

**Overview:** A new item created as a part of the complete restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under new item 61321 is for the single rest MPS for the assessment of extent and severity of viable and non-viable heart tissue (myocardium). This item allows the use of a single rest technetium-99m (Tc-99m) protocol. A myocardial perfusion study is claimable once every 2 years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study (except when a thallous chloride-201 (TI-201) protocol is used for single rest MPS which can be claimed twice in a 24 hour period).

**Descriptor:** Single rest myocardial perfusion study for the assessment of extent and severity of viable and non-viable myocardium – with single photon emission tomography and with planar imaging, when performed on a patient who has left ventricular systolic dysfunction, if:

- (a) using a single rest technetium-99m (Tc-99m) protocol; and
- (b) the service is requested by a specialist or a consultant physician; and
- (c) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61325, 61329 or 61345 applies (R).

**MBS fee:** \$329.00

**Benefit:** 85% = \$279.65      75% = \$246.75

## New item 61325 – Single rest myocardial perfusion study for assessment in people with known disease (thallous chloride-201 (TI-201) protocol).

**Overview:** A new item created as a part of the complete restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under new item 61325 is for the single rest MPS for the assessment of extent and severity of viable and non-viable heart tissue (myocardium). This item allows the use of an initial rest study followed by redistribution study, later the same day, with or without 24 hour imaging, with thallous chloride-201 (TI-201). A myocardial perfusion study is claimable once every 2 years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study (except when a thallous chloride-201 (TI-201) protocol is used for single rest MPS which can be claimed twice in a 24 hour period).

**Descriptor:** Single rest myocardial perfusion study for the assessment of extent and severity of viable and non-viable myocardium – with single photon emission tomography and with planar imaging, when performed on a patient with left ventricular systolic dysfunction, if:

- (a) performing an initial rest study followed by redistribution study on the same day; and
- (b) using a thallous chloride-201 (TI-201) protocol: and:
- (c) the service is requested by a specialist or a consultant physician; and



(d) claimable twice in a 2 year period; and

(e) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61329 or 61345 applies (R)

**MBS fee:** \$329.00

**Benefit:** 85% = \$279.65      75% = \$246.75

## Stress - Myocardial Perfusion Studies (nuclear medicine)

GP items requested- New items	Specialist or Consultant Physician requested- New items
61329, 61357	61321, 61325, 61324, 61345, 61349

Items (61324, 61329, 61345, 61349 and 61357) include the exercise ECG component (items 11729 or 11730) which is also reflected in the fee.

**For the following stress myocardial perfusion items (61324, 61329, 61345, 61349 and 61357) the following indications for requesting apply:**

For a service to be provided under items 61324, 61329, 61345, 61349 and 61357 a patient is required to meet one or more of the following indications:

- (a) if the patient displays one or more of the following symptoms of typical or atypical angina:
  - (i) constricting discomfort in the:
    - a. front of the chest; or
    - b. neck; or
    - c. shoulders; or
    - d. jaw; or
    - e. arms; or
  - (ii) the patient's symptoms are precipitated by physical exertion; or
  - (iii) the patient's symptoms are relieved by rest or glyceryl trinitrate within 5 minutes or less; or
  
- (b) if the patient has known coronary artery disease, and displays one or more symptoms that are suggestive of ischaemia:



- (i) which are not adequately controlled with medical therapy; or
- (ii) which have evolved since the last functional study; or
- (c) if the patient qualifies for one or more of the following indications:
  - (i) assessment of myocardial ischaemia with exercise is required if a patient with congenital heart lesions has undergone surgery and ischemia is considered reversible; or
  - (ii) assessment indicates that resting 12 lead electrocardiogram changes are consistent with coronary artery disease or ischaemia, in a patient that is without known coronary artery disease; or
  - (iii) assessment of coronary artery disease indicates uncertain functional significance demonstrated on computed tomography coronary angiography; or
  - (iv) assessment indicates that the patient has potentially non-coronary artery disease, which includes undue exertional dyspnoea of uncertain aetiology; or
  - (v) a pre-operative assessment of a patient with functional capacity of less than 4 Metabolic equivalents provides that surgery is intermediate to high risk, and the patient has at least one of following conditions:
    - a. ischaemic heart disease or previous myocardial infarction; or
    - b. heart failure; or
    - c. stroke or transient ischaemic attack; or
    - d. renal dysfunction (serum creatinine greater than 70umol/L or 2 mg/dL or a creatinine clearance of less than 60 mL/min); or
    - e. diabetes mellitus requiring insulin therapy; or
  - (vi) quantitation of extent and severity of myocardial ischaemia, before either percutaneous coronary intervention or coronary bypass surgery, to ensure the criteria for intervention are met; or
  - (vii) assessment of relative amounts of ischaemic viable myocardium and non-viable (infarcted) myocardium, in patients with previous myocardial infarction; or
  - (viii) assessment of myocardial perfusion in persons who are under 17 years old with coronary anomalies, before and after cardiac surgery for congenital heart disease, where there is likely or confirmed acquired coronary artery abnormality; or
  - (ix) for patients where myocardial perfusion abnormality is suspected, or due to the patient's cognitive capacity or expressive language impairment, it is not possible to accurately assess symptom frequency based on medical history.

## New item 61324 – Single stress myocardial perfusion study for assessment of cardiac ischaemia

**Overview:** A new item created as a part of the restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under new item 61324 is for the single stress MPS for assessment of cardiac ischemia. A myocardial perfusion study is claimable once every 2 years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study.



**Descriptor:** Single stress myocardial perfusion study – with single photon emission tomography and with planar imaging, if:

- (a) the patient has symptoms of cardiac ischaemia where at least one of the following applies:
  - (i) the patient has body habitus or other physical condition/s (including heart rhythm disturbance) such that stress echo is unlikely to provide adequate information; or
  - (ii) the patient is unable to exercise; or
  - (iii) the patient has had a failed stress echocardiography provided under a service to which items 55141, 55143, 55145 or 55146 applies; or
  - (iv) the patient has had an assessment of undue exertional dyspnoea of uncertain aetiology.; and
- (b) the service includes continuous ECG monitoring, blood pressure monitoring and the recording of other parameters; and
- (c) the service has been requested by a specialist or consultant physician
- (d) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61325, 61329, 61345 or 61357 applies (R).

**MBS fee:** \$653.05

**Benefit:** 85% = \$568.35      75% = \$489.80

## New item 61329 – Combined stress and rest myocardial perfusion study for assessment of cardiac ischaemia (GP)

**Overview:** A new item created as a part of the restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under item 61329 is for a combined stress and rest MPS for assessment of cardiac ischaemia requested by a medical practitioner (other than a specialist or consultant physician). A myocardial perfusion study is claimable once every 2 years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study.

**Descriptor:** Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion – with single photon emission tomography and with planar imaging, if:

- (a) the patient has symptoms of cardiac ischaemia where at least one of the following applies:
  - (i) the patient has body habitus or other physical condition (including heart rhythm disturbance) such that stress echocardiography is unlikely to provide adequate information; or
  - (ii) the patient is unable to exercise; or
  - (iii) the patient has had a failed stress echocardiography provided under a service to which item 55141, 55143, 55145 or 55146 applies; or
- (b) the service includes blood pressure monitoring and the recording of other parameters; and



(c) the service is requested by a medical practitioner (other than a specialist or consultant physician); and not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61324, 61325, 61345 or 61357 applies (R)

**MBS fee:** \$982.05

**Benefit:** 85% = \$897.35      75% = \$736.55

## New item 61345 – Combined stress and rest myocardial perfusion study for assessment of cardiac ischaemia (specialist or consultant physician)

**Overview:** A new item created as a part of the restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under item 61345 is for a combined stress and rest MPS for assessment of cardiac ischaemia (when requested by a specialist or consultant physician). A myocardial perfusion study is claimable once every 2 years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study.

**Descriptor:** Combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion – with single photon emission tomography and with planar imaging, if:

- (a) the patient has symptoms of cardiac ischaemia where at least one of the following applies:
  - (i) the patient has body habitus or other physical condition (including heart rhythm disturbance) such that stress echocardiography is unlikely to provide adequate information; or
  - (ii) the patient is unable to exercise; or
  - (iii) the patient has had a failed stress echocardiography provided under a service to which item 55141, 55143, 55145 or 55146 applies; or
  - (iv) the patient has had an assessment of undue exertional dyspnoea of uncertain aetiology; and
- (b) the service includes blood pressure monitoring and the recording of other parameters; and
- (c) the service is requested by a specialist or consultant physician; and

not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61324, 61325, 61329 or 61357 applies (R).

**MBS fee:** \$982.05

**Benefit:** 85% = \$897.35      75% = \$736.55





## New item 61349 – Repeat combined stress and rest myocardial perfusion study

**Overview:** A new item created as a part of the restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under item 61349 is for a repeat combined stress and rest MPS for a person who has a previous MPS under item 61345 and has undergone a revascularisation procedure (such as coronary artery bypass graft or stenting) and cardiac ischaemic symptoms have evolved.

**Descriptor:** Repeat combined stress and rest, stress and re-injection or rest and redistribution myocardial perfusion study, including delayed imaging or re-injection protocol on a subsequent occasion—with single photon emission tomography and with planar imaging, if:

- (a) in the previous 24 months, the patient has had a combined rest and stress myocardial perfusion study performed under item 61329 or 61345, and has undergone a revascularisation procedure performed under item 38300, 38303, 38306, 38309, 38312, 38315, 38318, 38497, 38498, 38500, 38501, 38503, 38504 or 38505; and
  - (b) the patient has one or more of the following symptoms of cardiac ischaemia that have evolved and are not adequately controlled with optimal medical therapy, where at least one of the following applies;
    - (i) the patient has body habitus or other physical condition (including heart rhythm disturbance) such that stress echocardiography is unlikely to provide adequate information; or
    - (ii) the patient is unable to exercise; or
    - (iii) the patient has had a failed stress echocardiography provided under service to which item 55141, 55143, 55145 or 55146 applies; or
    - (iv) the patient has had an assessment of undue exertional dyspnoea of uncertain aetiology; and
  - (c) the service is requested by a specialist or a consultant physician; and
  - (d) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729 or 11730 applies
- For any particular patient, applicable not more than once in 12 months (R).

**MBS fee:** \$982.05

**Benefit:** 85% = \$897.35      75% = \$736.55

## New item 61357 – Single stress myocardial perfusion study for assessment of cardiac ischaemia (GP)

**Overview:** A new item created as a part of the restructure of myocardial perfusion studies (MPS) to better describe the indications for these tests and reduce low value testing. A service provided under new item 61357 is for the single stress MPS for assessment of cardiac ischemia requested by a medical practitioner, other than a specialist or consultant physician. A myocardial perfusion study is claimable once every 2 years, consisting of 1 combined study (rest & stress) or 1 rest study and 1 stress study.



**Descriptor:** Single stress myocardial perfusion study – with single photon emission tomography and with planar imaging, if:

- (a) the patient has symptoms of cardiac ischaemia where at least one of the following applies:
  - (i) the patient has body habitus or other physical condition/s (including heart rhythm disturbance) such that stress echo is unlikely to provide adequate information; or
  - (ii) the patient is unable to exercise; or
  - (iii) the patient has had a failed stress echocardiography provided under a service to which items 55141, 55143, 55145 or 55146 applies; or
- (b) with continuous ECG monitoring, blood pressure monitoring and the recording of other parameters; and
- (c) the service is requested by a medical practitioner (other than a specialist or consultant physician).
- (d) not being a service associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61324, 61325, 61329 or 61345 applies (R)

**MBS fee:** \$653.05

**Benefit:** 85% = \$568.35      75% = \$489.80

To view previous item descriptors and deleted items, visit MBS Online at [www.mbsonline.gov.au](http://www.mbsonline.gov.au), navigate to 'Downloads' and then select the relevant time period at the bottom of the page. The old items can then be viewed by downloading the MBS files published in the month before implementation of the changes.

*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 and does not account for MBS changes since that date.*