Amendment of MBS items 73296 and 73297 for *BRCA* and other relevant genetic variant testing in patients at a greater risk of *BRCA*-related breast, ovarian, fallopian tube or primary peritoneal cancer due to family history

Last updated: 25 February 2025

- From **1 March 2025**, the Government is making minor amendments to Medicare Benefits Schedule (MBS) items 73296 and 73297. MBS items 73296 and 73297 are relevant to patients at a greater risk of BRCA-related breast, ovarian, fallopian tube, or primary peritoneal cancer due to family history. The amendments will enable clinicians to select the most appropriate genes for testing, in addition to *BRCA* 1 and 2. Prior to the changes, MBS items 73296 and 73297 only supported testing in specified genes (*STK11, PTEN, CDH1, PALB2* and *TP53)* in addition to *BRCA* 1 and *2*.
- These amended items remain relevant for specialists, consultant physicians and pathologists who manage patients who are at a greater risk of these cancers.

What are the changes?

From 1 March 2025, existing MBS items 73296 and 73297 for *BRCA* variant and other relevant genetic variant testing in patients at a greater risk of *BRCA*-related breast, ovarian, fallopian tube or primary peritoneal cancer due to family history will be amended to support testing in 'one or more relevant genes' in addition to *BRCA* 1 and 2.

These items previously only supported testing in one or more of the following prescribed genes in addition to *BRCA* 1 and 2, namely *STK11, PTEN, CDH1, PALB2* and *TP53*.

In addition, an administrative amendment will be made to MBS item 73297 to clarify that the conditions specified in both subparagraphs (b)(i) and (b)(ii) must apply.

There are no other changes with MBS item 73296 remaining applicable once per cancer diagnosis, and item 73297 remaining applicable once per variant.

Summary table of changes

MBS item	Prior to 1 March 2025	From 1 March 2025
73296	Characterisation of germline gene variants, including copy number variation where appropriate, requested by a specialist or consultant physician: (a) in genes associated with breast, ovarian, fallopian tube or primary peritoneal cancer, which must include at least: (i) *BRCA1* and *BRCA 2* genes; and (ii) one or more *STK11, PTEN, CDH1, PALB2* and *TP53* genes; and (b) in a patient: (i) with breast, ovarian, fallopian tube or primary peritoneal cancer; and (ii) for whom clinical and family history criteria place the patient at greater than 10% risk of having a pathogenic or likely pathogenic gene associated with breast, ovarian, fallopian tube or primary peritoneal cancer	Characterisation of germline gene variants, including copy number variation where appropriate, requested by a specialist or consultant physician: (a) in genes associated with breast, ovarian, fallopian tube or primary peritoneal cancer, which must include at least: (i) *BRCA1* and *BRCA 2* genes; and (ii) one or more other relevant genes; and (b) in a patient: (i) with breast, ovarian, fallopian tube or primary peritoneal cancer; and (ii) for whom clinical and family history criteria place the patient at greater than 10% risk of having a pathogenic or likely pathogenic gene associated with breast, ovarian, fallopian tube or primary peritoneal cancer
73297	Characterisation of germline gene variants, including copy number variation where appropriate, requested by a specialist or consultant physician: (a) in genes associated with breast, ovarian, fallopian tube or primary peritoneal cancer, which may include the following genes: (i) *BRCA1* or *BRCA2;* (ii) *STK11, PTEN, CDH1, PALB2* and *TP53*; and (b) in a patient: (i) who has a biological relative who has had a pathogenic or likely pathogenic gene variant identified in one or more of the genes mentioned in paragraph (a); or (ii) who has not previously received a service to which item 73295, 73296 or 73302 applies	Characterisation of germline gene variants, including copy number variation where appropriate, requested by a specialist or consultant physician: (a) in genes associated with breast, ovarian, fallopian tube or primary peritoneal cancer, which may include the following genes: (i) *BRCA1* or *BRCA2;* (ii) one or more other relevant genes; and (b) in a patient: (i) who has a biological relative who has had a pathogenic or likely pathogenic gene variant identified in one or more of the genes mentioned in paragraph (a); and (ii) who has not previously received a service to which item 73295, 73296 or 73302 applies

For private health insurance purposes, items 73296 and 73297 will continue to be listed under the following clinical category and procedure type:

- Clinical category: Support List (pathology)
- Procedure type: Type C

For their patients to be eligible for Medicare benefits, providers providing this service must be accredited according to the pathology accreditation standards specified in the *Health Insurance (Accredited Pathology Laboratories-Approval) Principles 2017*.

Why are the changes being made?

The Australian Government recognises that breast cancer is a significant health issue for Australians and is committed to improving the diagnosis and treatment of this disease.

The changes arise from recommendations of the Medical Services Advisory Committee (MSAC) and Pharmaceutical Benefits Advisory Committee (PBAC) under Application 1507.1.

At its August 2024 meeting, the Medical Services Advisory Committee (MSAC) supported the amendment of items 73296 and 73297 after its assessment of Application 1507.1. Further details about MSAC applications can be found under MSAC Applications on the MSAC website.

Who was consulted on the changes?

The Medical Oncology Group of Australia provided consultation input during the MSAC process.

How will the changes be monitored and reviewed?

Providers must ensure that Medicare services requested or claimed using their provider number meet all legislative requirements. These services should also be considered acceptable by a general body of their profession. All Medicare claiming and requesting is subject to compliance checks. Providers or requesters may be required to submit evidence about the services they bill or request and should retain adequate and contemporaneous records. More information about the Department of Health and Aged Care's (the Department) 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.

The department provides an email advice service for providers seeking advice on interpretation of 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.

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 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 when available can be accessed via the Downloads page.

Amended item descriptors (to take effect 1 March 2025)

Category 6 – Pathology Services

Group 7 – Genetics

73296

Characterisation of germline gene variants, including copy number variation where appropriate, requested by a specialist or consultant physician:

(a) in genes associated with breast, ovarian, fallopian tube or primary peritoneal cancer, which must include at least:
  (i) *BRCA1* and *BRCA2* genes; and
  (ii) one or more other relevant genes; and
(b) in a patient:
  (i) with breast, ovarian, fallopian tube or primary peritoneal cancer; and
  (ii) for whom clinical and family history criteria place the patient at greater than 10% risk of having a pathogenic or likely pathogenic gene associated with breast, ovarian, fallopian tube or primary peritoneal cancer

Once per cancer diagnosis

Fee: $1,200.00 Benefit: 75% = $900.00 85% = $1,097.60*

73297

Characterisation of germline gene variants, including copy number variation where appropriate, requested by a specialist or consultant physician:

(a) in genes associated with breast, ovarian, fallopian tube or primary peritoneal cancer, which may include the following genes:
  (i) *BRCA1* or *BRCA2*;
  (ii) one or more other relevant genes; and
(b) in a patient:
  (i) who has a biological relative who has had a pathogenic or likely pathogenic gene variant identified in one or more of the genes mentioned in paragraph (a); and
  (ii) who has not previously received a service to which item 73295, 73296 or 73302 applies

Once per variant

Fee: $400.00 Benefit: 75% = $300.00 85% = $340.00

*subject to Greatest Permissible Gap.

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.