



Permanent Medicare Benefits Schedule (MBS) items for testing respiratory pathogens including COVID-19

Last updated: 31 May 2024

- From 1 July 2024, two new items will be listed on the MBS for nucleic acid testing for 4, and 5 or more respiratory pathogens, which may include SARS-CoV-2 (COVID-19), in patients with a suspected respiratory infection.
- The items will replace the previous temporary pathology items (items 69511 - 69515) for COVID-19 and other respiratory pathogen testing.
- The new items will continue the previous requirement for a medical or nurse practitioner to determine the test is necessary for the clinical management of their patient. Contrary to the previous items, the new items will no longer require providers to:
 - bulk-bill out-of-hospital patients
 - test for COVID-19, where a test for multiple pathogens is requested
- This change is relevant for medical professionals who manage patients with respiratory infections.

What are the changes?

Effective 1 July 2024, two new MBS items (69421 and 69422) will be introduced to support testing respiratory pathogens, which may include SARS-CoV-2 (COVID-19), in patients with suspected respiratory infection. These items are to replace the temporary COVID-19 items 69511 – 69515, which are scheduled to cease on 30 June 2024. **Attachment A** to this factsheet lists the new items.

The new items will enable medical practitioners to request respiratory pathogen nucleic acid testing of multiple pathogens, from a nasal swab, throat swab, nasopharyngeal aspirate and/or lower respiratory tract sample:

- Item 69421: **4** pathogens
- Item 69422: **5 or more** pathogens

These items apply where a medical practitioner determines the test is necessary for the clinical management of their patient. Contrary to previous temporary arrangements, providers will not be required to bulk-bill out-of-hospital patients for tests claimed under the new items.

Items 69421 and 69422 **must** be used to support any test for respiratory pathogens. Existing generic nucleic acid amplification test (NAAT) MBS items 69494, 69495 and 69496 may **not** be used for this purpose from 1 July 2024, as they support testing of pathogens not

elsewhere specified. Therefore, in order to receive a Medicare rebate for a respiratory pathogen test, providers must test for either four, or five or more pathogens under items 69421 or 69422 respectively.

However, MBS items 69494, 69495 and 69496 will remain in place to support testing for 1, 2, or 3 or more pathogens other than respiratory pathogens.

The new items will be listed under the following Private health insurance minimum benefit classifications:

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

Why are the changes being made?

The new items will provide continued access to Medicare funded PCR pathology laboratory testing for respiratory pathogens (including COVID-19), where requested as clinically necessary by a treating medical practitioner. These items will provide access to testing under Medicare on a permanent basis following the various temporary arrangements that will cease on 30 June 2024 since the World Health Organisation (WHO) declared on 5 May 2023 that COVID-19 is no longer a global health emergency.

This will ensure that Medicare-eligible patients at risk of severe illness – including older Australians, patients with pre-existing conditions and residents of aged care facilities – can continue to access subsidised pathology laboratory testing for respiratory pathogens.

The new items will support upfront testing of multiple respiratory pathogens for patients with suspected respiratory infection, in line with clinical best practice. Various respiratory pathogens often present similarly, which makes upfront multi-pathogen testing clinically appropriate.

In many cases, this approach to testing may decrease the number of tests patients need to receive a diagnosis, which may in turn lead to earlier and better patient management. This includes prescription of PBS-listed treatments, minimising inappropriate antibiotic prescriptions, and patient cohorting or quarantining.

At its meeting in July 2023, the Medical Services Advisory Committee (MSAC) supported the listing of the two new items under MSAC [Application 1747](#). Further details about MSAC applications can be found under [MSAC Applications](#) on the MSAC website ([Medical Services Advisory Committee](#)).

What does this mean for requesters and providers?

The new MBS items will allow continued support for pathology providers testing for respiratory pathogens, including COVID-19 where requested.

Medical practitioners will be able to request respiratory pathogen nucleic acid testing of **4 pathogens** through item 69421 and **5 or more pathogens** through item 69422.

The new items will continue the previous requirement for a medical or nurse practitioner to determine the test is necessary for the clinical management of their patient. Where a treating practitioner considers a test for COVID-19 to be necessary for the clinical management of their patient, it should be **explicitly stated in the request**, including where testing for COVID-19 is requested alongside testing for other respiratory pathogens (e.g., “Respiratory virus polymerase chain reaction (PCR) including COVID-19”).

As under the previous temporary items, public providers will continue to receive the same reimbursement as private providers, for tests provided from 1 January 2024. Contrary to the previous items, the new items applicable from 1 July 2024 will not require providers to:

- bulk-bill out-of-hospital patients
- test for COVID-19, where a test for multiple pathogens is requested

Providers are encouraged to provide cost information to their patient prior to undertaking a test, including notifying them of any out-of-pocket expenses, and obtaining their agreement to proceed.

To be eligible for Medicare benefits, laboratories providing this service must be accredited according to the pathology accreditation standards specified in the [Health Insurance \(Accredited Pathology Laboratories-Approval\) Principles 2017](#).

How will these changes affect patients?

These MBS items will ensure Medicare-eligible patients with suspected respiratory infections have continued access to pathology laboratory-based testing for respiratory pathogens, including COVID-19, through the MBS on a permanent basis.

Contrary to the previous temporary arrangements, providers will not be required to bulk-bill out-of-hospital patients for COVID-19 tests provided from 1 July 2024. Patients are encouraged to clarify cost information with their provider prior to receiving a test, including whether there will be any out-of-pocket expenses.

Who was consulted on the changes?

Feedback from targeted consultation was received from four organisations which included representation from pathology providers and industry: Australian Pathology, Public Pathology Australia, and the Royal College of Pathologists of Australasia and Roche Diagnostics Australia.

How will the changes be monitored and reviewed?

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.

Providers are responsible for ensuring services claimed from Medicare using their provider number meet all legislative requirements. These changes are subject to MBS compliance checks and providers may be required to submit evidence about the services claimed.

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 at www.mbsonline.gov.au. You can also subscribe to future MBS updates by visiting [MBS Online](#) and clicking 'Subscribe'.

The Department of Health and Aged Care 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.

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 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](#) page.

Attachment A: New Item descriptors (Effective 1 July 2024)

Category 6 – Pathology Services	
Group P3 - Microbiology	
69421	Detection of respiratory pathogen nucleic acid from a nasal swab, throat swab, nasopharyngeal aspirate and/or lower respiratory tract sample;
	Testing of 4 pathogens
	MBS Fee: \$78.25
	Benefit: 75% = \$58.70 85% = \$66.55
69422	Detection of respiratory pathogen nucleic acid from a nasal swab, throat swab, nasopharyngeal aspirate and/or lower respiratory tract sample, including a service described in item 69421;
	Testing of 5 or more pathogens
	MBS Fee: \$85.55
	Benefit: 75% = \$64.20 85% = \$72.75

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.