



# Minor changes to Gynaecology MBS items

Last updated: 2 August 2022

- From **1 August 2022**, the item descriptors of 7 gynaecology MBS items and fee of 1 gynaecology MBS item will be amended.
- The changes will improve clarity and better align the items with the original intent of recommendations of the MBS Taskforce Review of Gynaecology items.
- These changes are relevant to specialists involved in the provision of gynaecology procedures, patients receiving these services, private hospitals, and private health insurers.

## What are the changes?

From **1 August 2022**:

- Items **35631**, **35632**, and **35641** will be amended to remove references to the American Fertility Society (rAFS) scale of endometriosis and replace the references with minimal, mild, moderate and severe.
- Items **35633** and **35635** will be amended to remove reference to the European Society for Hysteroscopy (ESH) classifications. This will now be included in the explanatory note.
- Item **35637** will be amended to better reflect the requirements of the service provided by amended the co-claiming restrictions.
- Item **35723** will be amended to increase the fee as recommended by the MBS Taskforce.
- Item **35754** will be amended to better align the requirements of the service provided with the intent of the MBS Review Taskforce recommendation.

This factsheet also includes Private Health Insurance (PHI) classifications and categorisations.

## Why are the changes being made?

On 1 March 2022, several changes were made to gynaecology services to align with contemporary and evidence-based treatment. The changes were a result of the MBS Review Taskforce recommendations and extensive consultation with key stakeholders.

Amendments are required to 8 items to ensure that the operation of these items is consistent with the intent of the MBS Review Taskforce's recommendations. This includes minor terminology changes, more accurate and complete item descriptors, and a corrected MBS fee.

## What does this mean for providers?

The amendments will better support appropriate MBS item billing.

## How will these changes affect patients?

Patients will continue to receive Medicare rebates for gynaecology services that reflect contemporary clinical practice.

## Who was consulted on the changes?

Representatives from a number of peak bodies were consulted in drafting these amendments, including Royal Australian and New Zealand College of Obstetrician and Gynaecologists, National Association of Specialist Obstetricians and Gynaecologists, Australian Society of Gynaecologic Oncologists, Urogynaecology Society of Australia, Fertility Society of Australia, Australian Gynaecological Endoscopy & Surgery Society, Royal Australian College of General Practitioners, Australian Medical Association, Private Healthcare Australia and Australian Private Hospital Association.

### Amended item descriptors (to take effect 1 August 2022)

<b>Group T8 – Surgical Operations</b>	
<b>Subgroup 3 – Gynaecology</b>	
<b>Item</b>	<b>Descriptor</b>
<b>35631</b>	<p>Operative laparoscopy, including any of the following:</p> <ul style="list-style-type: none"><li>(a) unilateral or bilateral ovarian cystectomy;</li><li>(b) salpingo-oophorectomy;</li><li>(c) salpingectomy for tubal pathology (including ectopic pregnancy by tubal removal or salpingostomy, but excluding sterilisation);</li><li>(d) excision of mild endometriosis;</li></ul> <p>not being a service associated with a service to which any other intraperitoneal or retroperitoneal procedure item (other than item 30724 or 30725) applies (H) (Anaes.) (Assist.)</p> <p>MBS Schedule Fee: \$752.20 75% Benefit: \$564.15</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology</p>
<b>35632</b>	<p>Complicated operative laparoscopy, including either or both of the following:</p> <ul style="list-style-type: none"><li>(a) excision of moderate endometriosis;</li><li>(b) laparoscopic myomectomy for a myoma of at least 4cm, including incision and repair of the uterus;</li></ul> <p>not being a service associated with a service to which any other intraperitoneal or retroperitoneal procedure item (other than item 30724 or 30725 or 35658) applies (H)</p>

	<p>(Anaes.) (Assist.)</p> <p>MBS Schedule Fee: \$940.20 75% Benefit: \$705.15</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology</p>
<b>35633</b>	<p>Hysteroscopy, under visual guidance, including any of the following:</p> <p>(a) removal of an intra-uterine device; (b) removal of polyps by any method; (c) division of minor intrauterine adhesions (Anaes.)</p> <p>MBS Schedule Fee: \$230.45 85% Benefit: \$195.90 75% Benefit: \$172.85</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type B Non-band specific PHI Clinical Category: Gynaecology</p>
<b>35635</b>	<p>Hysteroscopy involving division of:</p> <p>(a) a uterine septum; or (b) moderate to severe intrauterine adhesions (H) (Anaes.)</p> <p>MBS Schedule Fee: \$316.60 75% Benefit: \$237.45</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology</p>
<b>35637</b>	<p>Operative laparoscopy, including any of the following:</p> <p>(a) excision or ablation of minimal endometriosis; (b) division of pathological adhesions; (c) sterilisation by application of clips, division, destruction or removal of tubes; not being a service associated with another laparoscopic procedure (H) (Anaes.) (Assist.)</p> <p>MBS Schedule Fee: \$429.85 75% Benefit: \$322.40</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology</p>

35641	<p>Severe Endometriosis, laparoscopic resection of, involving 2 of the following procedures:</p> <p>(a) resection of the pelvic side wall including dissection of endometriosis or scar tissue from the ureter;</p> <p>(b) resection of the Pouch of Douglas;</p> <p>(c) resection of an ovarian endometrioma greater than 2 cm in diameter;</p> <p>(d) dissection of bowel from uterus from the level of the endocervical junction or above (H) (Anaes.) (Assist.)</p> <p>MBS Schedule Fee: \$1,313.75 75% Benefit: \$985.35</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Advanced Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology</p>
35723	<p>Para-aortic lymph node dissection from above the level of the aortic bifurcation (unilateral), for staging or restaging of gynaecological malignancy (H) (Anaes.) (Assist.)</p> <p>MBS Schedule Fee: \$1,466.35 75% Benefit: \$1,009.80</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology</p>
35754	<p>Hysterectomy, complex laparoscopic, by any approach, that concurrently requires either extensive retroperitoneal dissection or complex side wall dissection, or both, with any of the following procedures (if performed):</p> <p>(a) endometrial sampling;</p> <p>(b) unilateral or bilateral salpingectomy, oophorectomy or salpingo oophorectomy;</p> <p>(c) excision of ovarian cyst;</p> <p>(d) any other laparoscopy not being a service associated with a service to which item 35595 or 35641 applies (H) (Anaes.) (Assist.)</p> <p>MBS Schedule Fee: \$1,772.25 75% Benefit: \$1,329.20</p> <p>Extended Medical Safety Net (EMSN) cap: nil</p> <p>PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology</p>

## New explanatory notes

Item	Explanatory Notes
35631, 35632, 35637, 35641	<p>TN.8.248 Endometriosis classification system</p> <p>For the purposes of any item in which an endometriosis grading is referenced the equivalent grade under the American Fertility Society (rAFS) endometriosis classification system is as follows:</p> <p>Minimal endometriosis is the equivalent of stage I.</p> <p>Mild endometriosis is the equivalent stage II.</p> <p>Moderate endometriosis is the equivalent to stage III.</p> <p>Severe endometriosis is the equivalent stage IV or higher.</p>
35633, 35635	<p>TN.8.249 Hysteroscopy – (Items 35633 and 35635)</p> <p>For the purposes of item 35633, minor intrauterine adhesions mean Grade 1 under the European Society for Hysteroscopy (ESH) classification system. For the purposes of item 35635, moderate to severe intrauterine adhesions mean Grade 2 or higher under the ESH classification system.</p>

## How will the changes be monitored and reviewed?

The impact of these changes will be closely monitored. The Department will continue to work with stakeholders following implementation of the changes.

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.

## 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](http://www.mbsonline.gov.au).

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

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

For questions regarding the PHI classifications, please email [PHI@health.gov.au](mailto: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 is when available can be accessed via the [Downloads](#) page.

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