# Changes to General Gynaecology MBS items

Last updated: 21 February 2022

* From 1 March 2022, some of the Medicare Benefits Schedule (MBS) items for gynaecology services are changing to align with contemporary and evidenced based treatment. The changes are a result of the MBS Review Taskforce recommendations for gynaecology and extensive consultation with stakeholders.
* The changes relate to four subspecialty areas - General Gynaecology, Assisted Reproductive Technology, Urogynaecology and Gynaecological Oncology. There is a separate factsheet for each area.
* This factsheet covers General Gynaecology services.

## What are the changes?

From 1 March 2022, changes will be made to some of the General Gynaecology services funded through the MBS. The changes comprise 3 new items, 28 amended items and 9 deleted items.

**New items:**  35631, 35632, 35751

**Amended items:** 35503, 35506, 35513, 35517, 35518, 35611, 35616, 35620, 35622, 35623, 35626, 35630, 35633, 35635, 35636, 35637, 35640, 35641, 35643, 35649, 35653, 35658, 35756, 35759, 35661, 35750, 35753, 35754,

**Deleted items:** 35502, 35520, 35572, 35627, 35634, 35638, 35677, 35678, 35688

This factsheet also includes Private Health Insurance (PHI) classifications and categorisations for the new and amended MBS items.

## Why are the changes being made?

These changes give effect to the recommendations of the independent MBS Review Taskforce, which was informed by the Gynaecology Clinical Committee, plus further consultation with clinical experts and stakeholders through the Gynaecology Implementation Liaison Group. The changes will promote best clinical practice, patient safety and quality of care.

More information about the Taskforce and associated Committees is available on the Department of Health website:[Medicare Benefits Schedule Review](https://www.health.gov.au/initiatives-and-programs/mbs-review?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation).A full copy of the Taskforce’s final report, including the rationales for the changes which are outlined in this factsheet, can be found at: 2020 – [Medicare Benefits Schedule Review Taskforce. – Final Report on the Review of Gynaecology MBS Items.](https://www.health.gov.au/resources/publications/taskforce-final-report-gynaecology-mbs-items)

## What does this mean for providers?

Providers will need to familiarise themselves with the changes to the MBS items relevant to their practice, 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.

## How will these changes affect patients?

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

## Who was consulted on the changes?

A number of peak bodies were consulted during the MBS Review process, including the Royal Australian and New Zealand College of Obstetrician and Gynaecologists, National Association of Specialist Obstetricians and Gynaecologists, Australian Society of Gynaecologic Oncologists, UroGynaecological Society of Australia, Fertility Society of Australia, Australian Gynaecological Endoscopy & Surgery Society, Royal Australian College of General Practitioners, Australian Medical Association, Private Healthcare Australia, Australian Private Hospital Association, and consumer representatives.

## New item descriptors (to take effect from 1 March 2022)

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| **Group T8 – Surgical Operations**  |
| **Subgroup 4 – Gynaecology**  |
| **Item**  | **Descriptor**  |
| 35631 | Operative laparoscopy, including any of the following:(a) unilateral or bilateral ovarian cystectomy;(b) salpingo-oophorectomy;(c) salpingectomy for tubal pathology (including ectopic pregnancy by tubal removal or salpingostomy, but excluding sterilisation);(d) excision of stage II (mild) endometriosis;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.)MBS Schedule Fee: $740.35 75% Benefit: $555.30 Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology Note: Item 35631 and 35632 result from deleting and splitting item 35638 into two new items. |
| 35632 | Complicated operative laparoscopy, including either or both of the following:(a) excision of stage III endometriosis;(b) laparoscopic myomectomy for a myoma of at least 4 cm, including incision and repair of the uterus;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) (Anaes.) (Assist.)MBS Schedule Fee: $925.4075% Benefit: $694.05Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology Note: Item 35631 and 35632 result from deleting and splitting item 35638 into two new items. |
| 35751 | Hysterectomy, laparoscopic, by any approach, including any endometrial sampling, with or without removal of the tubes, not being a service associated with a service to which item 35595 applies (H) (Anaes.) (Assist.)MBS Schedule Fee: $816.4075% Benefit: $612.30Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology Note: This item results from the amendment to item 35750 (below) to split into two items being 35750 and 35751. |

## Amended item descriptors (to take effect from 1 March 2022)

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| **Group T8 – Surgical Operations**  |
| **Subgroup 3 – Gynaecology**  |
| **Item**  | **Descriptor**  |
| 35503 | Introduction of an intra-uterine device for abnormal uterine bleeding or contraception or for endometrial protection during oestrogen replacement therapy, if the service is not associated with a service to which another item in this Group applies (other than a service described in item 30062, 35506 or 35620) (Anaes.)MBS Schedule Fee: $83.40 85% Benefit: $70.9075% Benefit: $62.55Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type CPHI Clinical Category: GynaecologyNote: This amendment consolidates deleted item 35502 into this service and increases the schedule fee from $55.70 to $83.40.  |
| 35506 | Intra-uterine device, removal of under general anaesthesia, for a retained or embedded device, not being a service associated with a service to which another item in this Group applies (other than a service described in item 35503) (Anaes.)MBS Schedule Fee: $55.8585% Benefit: $47.5075% Benefit: $41.90Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: UnlistedPHI Clinical Category: Gynaecology  |
| 35513  | Bartholin's abscess, cyst or gland, excision of (Anaes.)MBS Schedule Fee: $230.7085% Benefit: $196.1075% Benefit: $173.05Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type B Non-band specificPHI Clinical Category: Gynaecology |
| 35517 | Bartholin's abscess, cyst or gland, marsupialisation of (Anaes.)MBS Schedule Fee: $151.9585% Benefit: $129.2075% Benefit: $114.00Extended Medical Safety Net (EMSN) cap: nil Procedure Type: Type B Non-band specificClinical Category: Gynaecology  |
| 35518 | Ovarian cyst aspiration, for cysts of at least 4 cm in diameter in a premenopausal patient and at least 2 cm in diameter in a postmenopausal patient, by abdominal or vaginal route, using interventional imaging techniques and not associated with services provided for assisted reproductive techniques, and not in cases of suspected or possible malignancy (Anaes.)MBS Schedule Fee: $216.3085% Benefit: $183.9075% Benefit: $162.25Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: UnlistedPHI Clinical Category: Gynaecology  |
| 35611 | Removal of cervical or vaginal polyp or polypi, with or without dilatation of cervix, not being a service associated with a service to which item 35608 applies (Anaes.)MBS Schedule Fee: $66.5585% Benefit: $56.6075% Benefit: $49.95Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: UnlistedPHI Clinical Category: Gynaecology  |
| 35616 | Endometrial ablation by thermal balloon or radiofrequency electrosurgery, for abnormal uterine bleeding, with or without endometrial sampling, including any hysteroscopy performed on the same day (H) (Anaes.)MBS Schedule Fee: $467.8075% Benefit: $350.85Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology  |
| 35620 | Endometrial biopsy for pathological assessment in women with abnormal uterine bleeding or post‑menopausal bleeding (Anaes.)MBS Schedule Fee: $55.50 85% Benefit: $47.2075% Benefit: $41.65Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type C PHI Clinical Category: Gynaecology  |
| 35622 | Endometrial ablation, using hysteroscopically guided electrosurgery or laser energy for abnormal uterine bleeding, with or without endometrial sampling, not being a service associated with a service to which item 30390 applies (H) (Anaes.)MBS Schedule Fee: $626.9075% Benefit: $470.20 Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology  |
| 35623 | Endometrial ablation and resection of myoma or uterine septum (or both), using hysteroscopic guided electrosurgery or laser energy, for abnormal uterine bleeding, with or without endometrial sampling (H) (Anaes.)MBS Schedule Fee: $852.4575% Benefit: $639.35Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical and Type B Non-band specificPHI Clinical Category: Gynaecology Note: This amendment consolidates deleted item 35634 into this service. |
| 35626 | Hysteroscopy for investigation of suspected intrauterine pathology, with or without local anaesthesia, including any associated endometrial biopsy, not being a service associated with a service to which item 35630 appliesMBS Schedule Fee: $233.10 85% Benefit: $198.1575% Benefit: $174.85Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type CPHI Clinical Category: Gynaecology Note: This amendment increases the schedule fee from $86.10 to $233.10. |
| 35630 | Hysteroscopy for investigation of suspected intrauterine pathology if performed under general anaesthesia, including any associated endometrial biopsy, not being a service associated with a service to which item 35626 applies (H) (Anaes.)MBS Schedule Fee: $190.4575% Benefit: $142.85Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type B Non-band specific PHI Clinical Category: Gynaecology Note: This amendment consolidates deleted item 35627 into this service.  |
| 35633 | Hysteroscopy, under visual guidance, including any of the following:(a) removal of an intra-uterine device;(b) removal of polyps by any method;(c) division of minor adhesions (ESH Grade 1)(Anaes.)MBS Schedule Fee: $226.80 85% Benefit: $192.8075% Benefit: $170.10Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type B Non-band specific PHI Clinical Category: Gynaecology  |
| 35635 | Hysteroscopy involving division of:(a) a uterine septum; or(b) intrauterine adhesions ESH Grade 2 or higher (H) (Anaes.)MBS Schedule Fee: $311.60 75% Benefit: $233.70Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical and Type B Non-band specificPHI Clinical Category: Gynaecology  |
| 35636 | Hysteroscopy, resection of myoma or myoma and uterine septum (if both are performed) (H) (Anaes.)MBS Schedule Fee: $450.5575% Benefit: $337.95Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology  |
| 35637 | Operative laparoscopy, including any of the following:(a) excision or ablation of stage l (minor) endometriosis;(b) division of pathological adhesions;(c) sterilisation by application of clips, division, destruction or removal of tubes;not being a service associated with a service to which any other item in this Group applies (H) (Anaes.) (Assist.)MBS Schedule Fee: $423.1075% Benefit: $317.35Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology Note: This amendment consolidates item 35688 into this service.  |
| 35640 | Uterus, curettage of, with or without dilation (including curettage for incomplete miscarriage), if performed under:(a) general anaesthesia; or(b) epidural or spinal (intrathecal) nerve block; or(c) sedation;including procedures (if performed) to which item 35626 or 35630 applies (Anaes.)MBS Schedule Fee: $190.4585% Benefit: $161.9075% Benefit: $142.85Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type B Non-band specificPHI Clinical Category: Miscarriage and termination of pregnancy  |
| 35641 | ENDOMETRIOSIS rAFS stage IV, laparoscopic resection of, involving two of the following procedures, resection of the pelvic side wall including dissection of endometriosis or scar tissue from the ureter, resection of the Pouch of Douglas, resection of an ovarian endometrioma greater than 2 cm in diameter, dissection of bowel from uterus from the level of the endocervical junction or above (H) (Anaes.) (Assist.)MBS Schedule Fee: $1,293.0575% Benefit: $969.80Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Advanced Surgical and Type B Non-band specific PHI Clinical Category: Gynaecology  |
| 35643 | Evacuation of the contents of the gravid uterus by curettage or suction curettage, if performed under:(a) local anaesthesia; or(b) general anaesthesia; or(c) epidural or spinal (intrathecal) nerve block; or(d) sedation;including procedures (if performed) to which item 35626 or 35630 applies (Anaes.)MBS Schedule Fee: $226.8085% Benefit: $192.8075% Benefit: $170.10Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type B Non-band specificPHI Clinical Category: Miscarriage and termination of pregnancy  |
| 35649 | Myomectomy, one or more myomas, when undertaken by an open abdominal approach (H) (Anaes.) (Assist.)MBS Schedule Fee: $557.7075% Benefit: $418.30 Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology  |
| 35653 | Hysterectomy, abdominal, with or without removal of fallopian tubes and ovaries (H) (Anaes.) (Assist.)MBS Schedule Fee: $702.0575% Benefit: $526.55Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A SurgicalPHI Clinical Category: Gynaecology |
| 35658 | Uterus (at least equivalent in size to a 10 week gravid uterus), debulking of, prior to vaginal or laparoscopic removal at hysterectomy or myoma of at least 4 cm removed by laparoscopy when retrieved from the abdomen (H) (Anaes.) (Assist.)MBS Schedule Fee: $432.9075% Benefit: $324.70Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology  |
| 35661 | Hysterectomy, abdominal, that concurrently requires extensive retroperitoneal dissection with exposure of one or both ureters and complex side wall dissection, including when performed with one or more of the following procedures:(a) salpingectomy;(b) oophorectomy;(c) excision of ovarian cyst(H) (Anaes.) (Assist.)MBS Schedule Fee: $1,755.3575% Benefit: $1,316.55Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology Note: The schedule fee for this item will increase from $906.65 to $1,755.35.  |
| 35750 | Hysterectomy, laparoscopic assisted vaginal, by any approach, including any endometrial sampling, with or without removal of the tubes or ovarian cystectomy or removal of the ovaries and tubes due to other pathology, not being a service associated with a service to which item 35595 or 35673 applies (Anaes.) (Assist.)MBS Schedule Fee: $816.40 75% Benefit: $612.30Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology Note: This item has been split into two items; 35750 and new item 35751 and is intended to be a hospital service only. |
| 35753 | Hysterectomy, complex laparoscopic, by any approach, including endometrial sampling, with either or both of the following procedures:(a) unilateral or bilateral salpingo-oophorectomy (excluding salpingectomy);(b) excision of moderate endometriosis or ovarian cyst;including any associated laparoscopy, not being a service associated with a service to which item 35595 applies (H) (Anaes.) (Assist.)MBS Schedule Fee: $902.7575% Benefit: $677.10Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology  |
| 35754 | Hysterectomy, laparoscopic, by any approach, including any of the following procedures:(a) salpingectomy;(b) oophorectomy;(c) excision of ovarian cyst;(d) any endometrial sampling that concurrently requires complex side wall dissection;(e) any associated laparoscopy;other than a service to which item 35595 or 35641 applies (H) (Anaes.) (Assist.)MBS Schedule Fee: $1,744.3575% Benefit: $1,308.30Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology Note: The schedule fee for this item will increase from $1,136.15 to $1,744.35.  |
| 35756 | Hysterectomy, laparoscopic, by any approach, if the procedure is completed by open hysterectomy for control of bleeding or extensive pathology, including any associated laparoscopy, not being a service associated with a service to which item 35595 or 35641 applies (H) (Anaes.) (Assist.)MBS Schedule Fee: $ 1,488.9075% Benefit: $1,116.70Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Advanced Surgical PHI Clinical Category: Gynaecology Note: The schedule fee for this item will increase from $816.40 to $1,488.90. |
| 35759 | Procedure for the control of post operative haemorrhage following gynaecological surgery, under general anaesthesia, utilising a vaginal, abdominal or laparoscopic approach if no other procedure is performed (H) (Anaes.) (Assist.)MBS Schedule Fee: $586.15 75% Benefit: $439.65Extended Medical Safety Net (EMSN) cap: nil PHI Procedure Type: Type A Surgical PHI Clinical Category: Gynaecology  |

## Deleted item descriptors

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| **Group T8 – Surgical Operations**  |
| **Subgroup 3 – Gynaecology**  |
| **Item**  | **Descriptor**  |
| 35502 | INTRAUTERINE DEVICE, INTRODUCTION OF, for the control of idiopathic menorrhagia, AND ENDOMETRIAL BIOPSY to exclude endometrial pathology, not being a service associated with a service to which another item in this Group applies (Anaes.)MBS Schedule Fee: $83.40Note: This item has been consolidated into item 35503.  |
| 35520 | BARTHOLIN'S ABSCESS, incision ofMBS Schedule Fee: $60.70 |
| 35572 | COLPOTOMY not being a service to which another item in this Group applies (Anaes.)MBS Schedule Fee: $128.85 |
| 35627 | HYSTEROSCOPY with dilatation of the cervix performed in the operating theatre of a hospital - not being a service associated with a service to which item 35626 or 35630 applies (Anaes.)MBS Schedule Fee: $111.50Note: This item has been consolidated into item 35630. |
| 35634 | HYSTEROSCOPIC RESECTION of uterine septum followed by endometrial ablation by laser or diathermy (Anaes.)MBS Schedule Fee: $713.45Note: This item has been consolidated into item 35623. |
| 35638 | Complicated operative laparoscopy, including use of laser when required, for one or more of the following procedures:(a) oophorectomy;(b) ovarian cystectomy;(c) myomectomy;(d) salpingectomy;(e) salpingostomy;(f) ablation of moderate or severe endometriosis requiring more than 1 hour’s operating time;(g) division of utero‑sacral ligaments for significant dysmenorrhoea;other than a service associated with another intraperitoneal or retroperitoneal procedure except item 30724 (H) (Anaes.) (Assist.)MBS Schedule Fee: $740.35Note: This item is being split into two new items; 35631 and 35632.  |
| 35677 | ECTOPIC PREGNANCY, removal of (Anaes.) (Assist.)MBS Schedule Fee: $557.70Note: Where appropriate, item 35717 may be used.  |
| 35678 | ECTOPIC PREGNANCY, laparoscopic removal of (Anaes.) (Assist.)MBS Schedule Fee: $672.45Note: Where appropriate item, 35631 may be used. |
| 35688 | STERILISATION BY TRANSECTION OR RESECTION OF FALLOPIAN TUBES, via abdominal or vaginal routes or via laparoscopy using diathermy or any other method. (Anaes.) (Assist.)MBS Schedule Fee: $413.35Note: This item has been consolidated into item 35637.  |

## 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 current gynaecology 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). The updated item descriptors will be live on the website from
1 March 2022.

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 services for providers seeking advice on interpretation of 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 askMBS@health.gov.au.

For questions regarding the PHI classifications, please email PHI@health.gov.au.

Subscribe to ‘[News for Health Professionals](https://www.humanservices.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 Services Australia on the Provider Enquiry Line – 13 21 50.

The data file for software vendors will be available via the MBS Online website under the [Downloads](https://protect-au.mimecast.com/s/YGuBCWLVnwSNGEDUxwHa2?domain=mbsonline.gov.au) 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.