



Minor changes to clarify the intent of orthopaedic surgery items (26 items)

Last updated: 27 September 2021

- From 1 November 2021, minor administrative amendments will be made to 26 MBS items for orthopaedic surgery.
- The changes will better align the items with the original intent of recommendations of the MBS Review of Orthopaedic Surgery, and correct some minor errors or omissions in the items.
- These changes are relevant to specialists involved in the provision of orthopaedic surgery services, consumers receiving these services, private hospitals, and private health insurers.

What are the changes?

From 1 November 2021:

- 12 items (45720-45752) will be amended to reflect the deletion of items 47933 and 47936.
- 1 item (46486) will be amended to clarify that the item is for 'acute' nail bed laceration.
- 1 item (46498) will be amended to include provisions for an assistant surgeon and to reflect the deletion of the item 30106.
- 3 items (46500, 46501 and 46503) will be amended to reflect the deletion of the item 30106.
- 1 item (46534) will be amended to include provisions for an assistant surgeon.
- 1 item (47450) will be amended to clarify that the item is for treatment of fracture by internal or external 'fixation'.
- 1 item (48958) will be amended to clarify that the item includes labral 'reattachment', if performed.
- 1 item (49776) will be amended to clarify that the item 'may only be claimed once per joint'.
- 4 items (49833-49838) will be amended to correct the spelling of 'hallux valgus'.
- 1 item (50224) will be amended to clarify that the item includes wide excision of an 'aggressive' bone or soft tissue tumour.

Why are the changes being made?

On 1 July 2021, a number of changes were made to the orthopaedic surgery MBS items to support high value care, reflect contemporary clinical practice, and improve quality of care and safety for patients. The changes were a result of the MBS Review Taskforce (the Taskforce) recommendations and extensive consultation with key stakeholders.

From 1 November 2021, minor amendments will be made to 26 items for orthopaedic surgery. The amendments will better align the schedule with the original intent of Taskforce recommendations, and correct some minor errors or omissions in the items.



What does this mean for providers?

Providers will benefit from clear and concise item descriptors that better reflect the services they describe.

How will these changes affect patients?

Eligible patients will receive Medicare rebates for services that are clinically appropriate and reflect modern clinical practice.

Who was consulted on the changes?

The MBS Review Orthopaedic Clinical Committee was established in September 2016 to provide expert clinical advice and make recommendations to the MBS Review Taskforce on Orthopaedic MBS services. The MBS Review included a public consultation process which provided feedback from peak bodies, clinical experts and consumers.

These subsequent changes are in response to recent feedback from stakeholders.

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.

The Department will continue to work with stakeholders and practitioners to consider how the changes introduced on 1 July 2021 are operating, and where necessary, address any unintended consequences for patients or errors.

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'.

For questions relating to implementation, or to the interpretation of the orthopaedic surgery items, please email 1july2021MBSchanges.orthopaedics@health.gov.au.

Subscribe to '[News for Health Professionals](#)' on the Department of Human Services 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](#) 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.