Medicare Benefits Schedule

Summary of Changes

Effective 1 May 2009

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Publications Approval Number: P3-4526

Summary of Additions, Deletions, and Revisions undertaken since 1 November 2008

New Items are indicated as "New". Deleted items are indicated as "Del".

Amended items are indicated as "Amend" Within revised items, the deleted language appears with a double strikethrough while new text appears <u>underlined</u>. These changes will be highlighted in yellow.

Note: Revisions to the headings, notes, introductory paragraphs, and cross references are not included in this summary of changes.

New Items (New)

1 May 2009

<u>66660</u>	<u>66607</u>	<u>66900</u>	73062	<u>73063</u>	<u>73064</u>	<u>73065</u>
1 Morob 1	2000					

1 March 2009

<u>11823</u> <u>32220</u> <u>32221</u>

1 February 2009 63464 63467

Deleted Items (Del)

No deleted items.

Amended Description (Amend)

1	December	2008	

<u>61541</u>	<u>61544</u>	<u>61553</u>	<u>61556</u>	<u>61565</u>	<u>61568</u>
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1 January 2009

10992

1 February 2009

<u>61462</u> <u>61484</u> <u>61485</u>

1 May 2009

<u>106</u>	<u>109</u>	22055	22060	22065	22070	22075	<u>35321</u>	<u>45720</u>
<u>45723</u>	<u>45726</u>	<u>45729</u>	<u>45731</u>	<u>45732</u>	<u>45735</u>	<u>45738</u>	<u>45741</u>	<u>45744</u>
<u>45747</u>	<u>45752</u>	<u>45857</u>	<u>45877</u>	<u>46300</u>	<u>46303</u>	<u>46396</u>	<u>47501</u>	<u>47504</u>
<u>47507</u>	<u>47510</u>	<u>47933</u>	<u>47936</u>	<u>47954</u>	<u>47957</u>	<u>47966</u>	<u>48400</u>	<u>48403</u>
<u>48406</u>	48409	<u>48412</u>	<u>48415</u>	<u>48418</u>	<u>48421</u>	<u>48424</u>	<u>48427</u>	48939
<u>48942</u>	<u>49106</u>	<u>49118</u>	<u>49200</u>	49203	49224	<u>49306</u>	<u>49360</u>	<u>49363</u>
<u>49366</u>	<u>49509</u>	<u>49512</u>	<u>49536</u>	<u>49539</u>	49542	<u>49545</u>	<u>49564</u>	<u>49566</u>
<u>49703</u>	<u>49712</u>	<u>49815</u>	<u>49845</u>	<u>50109</u>	<u>50118</u>	<u>50218</u>	<u>50312</u>	<u>50450</u>
<u>50451</u>	<u>63464</u>	<u>66605</u>	<u>66659</u>	<u>71200</u>	73049	73059	<u>73060</u>	<u>73061</u>
<u>73300</u>	73314	<u>73315</u>						

Assist (Added)

1 May 2009 47465

Amended Fee

1 May 2009

<u>66638</u> <u>73049</u>

CHANGES TO ALLIED HEALTH SERVICES - effective 1 January 2009

From 1 January 2009, the requirement to claim a rebate for chronic disease management care planning items before items 10950 - 10970 and 81100 - 81125 can be claimed will be removed. However, note that eligibility requirements for these items have not changed.

Table of Contents

SUMMARY OF ADDITIONS, DELETIONS, AND REVISIONS UNDERTAKEN SINC 1 NOVEMBER 2008	
New Items (New)	3
1 May 2009	3
66660 66607 66900 73062 73063 73064 73065	3
1 March 2009	3
1 February 2009	3
DELETED ITEMS (DEL)	3
AMENDED DESCRIPTION (AMEND)	
1 December 2008	
1 January 2009	
1 February 2009	
1 May 2009	
ASSIST (ADDED)	
1 May 2009	
AMENDED FEE	
1 May 2009CHANGES TO ALLIED HEALTH SERVICES - EFFECTIVE 1 JANUARY 2009	
CATEGORY 1 – PROFESSIONAL ATTENDANCES	
GROUP A3 - SPECIALIST ATTENDANCES TO WHICH NO OTHER ITEM APPLIES	
106 109	
GO TO TABLE OF CONTENTS	10
CATEGORY 3 – THERAPEUTIC PROCEDURES	10
GROUP T10 - RELATIVE VALUE GUIDE FOR ANAESTHESIA - MEDICARE BENEFITS ARE O	
FOR ANAESTHESIA PERFORMED IN ASSOCIATION WITH AN ELIGIBLE SERVICE.	
SUBGROUP 19 - THERAPEUTIC AND DIAGNOSTIC SERVICES22055	
22060	
22065	
22070	
22075	
GROUP T8 - SURGICAL OPERATIONS	
SUBGROUP 3 - VASCULAR	
35321	10
GROUP T8 - SURGICAL OPERATIONS	11
SUBGROUP 13 - PLASTIC AND RECONSTRUCTIVE SURGERY	
45720	
45723	
45726	
45729	
45731	
45732	
45735	
45738SUBGROUP 13 - PLASTIC AND RECONSTRUCTIVE SURGERY	
45741	
45744	
45747	
45752	
45857	
45877	
SUBGROUP 14 - HAND SURGERY	
46300	
SUBGROUP 14 - HAND SURGERY	
46303	13

SUBGROUP 15 - ORTHOPAEDIC	
47465	
47501	
47504	
47507	
47510	
SUBGROUP 15 - ORTHOPAEDIC	
47933	
47936	
47954	
47957	
47966	
48400	
48403	
48406	
48409	
SUBGROUP 15 - ORTHOPAEDIC	
48412	
48415	
48418	
48421	
48424	
48427	
48939	
SUBGROUP 15 - ORTHOPAEDIC	
48942	
49106	
49118	
49200	
49203	
49224	
49306	
49360SUBGROUP 15 - ORTHOPAEDIC	
49363	
49366	
49509	
49512	
49536	
49539	
49542	
49545	
SUBGROUP 15 - ORTHOPAEDIC	
49564	
49566	
49703	
49712	
49815	
49845	
SUBGROUP 15 - ORTHOPAEDIC	
50109	
50118	
50218	
50312	
50450	
50451	

GROUP I5 - MAGNETIC RESONANCE IMAGING	20
SUBGROUP 19 - SCAN OF BODY - FOR SPECIFIED CONDITIONS	20
63464	20
66605	21
66607	21
66638	21
66659	21
66660	21
66900	21
71200	21
73049	22
73059	22
73060	22
73061	22
73062	22
73063	22
73064	22
73065	22
GROUP P7 - GENETICS	23
73300	23
73314	
73315	23

Category 1 - Professional Attendances

	GROUP A3 - SPECIALIST ATTENDANCES TO WHICH NO OTHER ITEM APPLIES
† 106 Amend	INITIAL SPECIALIST OPHTHALMOLOGIST ATTENDANCE, REFERRED CONSULTATION in a single course of treatment, being an attendance at which the sole service provided is refraction testing for the issue of a prescription for spectacles or contact lenses not being a service to which items 104, 109 or 10801 to 10816 apply
1 May 2009	Fee: \$65.65 Benefit: 75% = \$49.25 85% = \$55.85
‡	INITIAL SPECIALIST OPHTHALMOLOGIST PAEDIATRIC ATTENDANCE, REFERRED
109	CONSULTATION in a single course of treatment, being an attendance at which a comprehensive eye examination is performed on a child aged 8 years or under, or on a child aged 14 years or under
Amend 1 May	with developmental delay, not being a service to which item 104, 106 or any of items 10801 to 10816 applies
2009	Fee: \$118.70 Benefit: 75% = \$89.05 85% = \$100.90

Category 3 – Therapeutic Procedures

	GROUP T10 - RELATIVE VALUE GUIDE FOR ANAESTHESIA - Medicare Benefits are only payable for anaesthesia performed in association with an eligible service
	SUBGROUP 19 - THERAPEUTIC AND DIAGNOSTIC SERVICES
‡ 22055 Amend 1 May 2009	PERFUSION OF LIMB OR ORGAN using heart-lung machine or equivalent, not being a service associated with a service to which an item in Subgroup 21 applies (12 basic units) Fee: \$219.60 Benefit: 75% = \$164.70 85% = \$186.70
‡ 22060 Amend 1 May 2009	WHOLE BODY PERFUSION, CARDIAC BYPASS, using heart-lung machine or equivalent, not being a service associated with anaesthesia to which an item in Subgroup 21 applies (20 basic units) Fee: \$366.00 Benefit: 75% = \$274.50 85% = \$311.10
‡ 22065 Amend 1 May 2009	INDUCED CONTROLLED HYPOTHERMIA total body, not being a service associated with a service to which an item in Subgroup 21 applies (5 basic units) Fee: \$91.50 Benefit: 75% = \$68.65 85% = \$77.80
‡ 22070 Amend 1 May 2009	CARDIOPLEGIA, blood or crystalloid, administration by any route, not being a service associated with a service to which an item in Subgroup 21 applies (10 basic units) Fee: \$183.00 Benefit: 75% = \$137.25 85% = \$155.55
‡ 22075 Amend 1 May 2009	DEEP HYPOTHERMIC CIRCULATORY ARREST, with core temperature less than 22°c, including management of retrograde cerebral perfusion if performed, not being a service associated with a service to which an item in Subgroup 21 applies (15 basic units) Fee: \$274.50 Benefit: 75% = \$205.90 85% = \$233.35
	GROUP T8 - SURGICAL OPERATIONS
	SUBGROUP 3 - VASCULAR
‡ 35321 Amend 1 May 2009	PERIPHERAL ARTERIAL OR VENOUS CATHETERISATION to administer agents to occlude arteries, veins or arterio-venous fistulae or to arrest haemorrhage, (but not for the treatment of uterine fibroids or varicose veins) percutaneous or by open exposure, excluding associated radiological services or preparation, and excluding aftercare, not being a service associated with photodynamic therapy with verteporfin (Anaes.) (Assist.) Fee: \$751.35 Benefit: 75% = \$563.55 85% = \$683.25

	GROUP T8 - SURGICAL OPERATIONS
	SUBGROUP 13 - PLASTIC AND RECONSTRUCTIVE SURGERY
‡ 45720 Amend 1 May 2009	MANDIBLE OR MAXILLA, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and excluding services to which item 47933or 47936 apply (Anaes.) (Assist.) Fee: \$893.15 Benefit: 75% = \$669.90 85% = \$825.05
‡ 45723 Amend 1 May 2009	MANDIBLE OR MAXILLA, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,007.30 Benefit: 75% = \$755.50
‡ 45726 Amend 1 May 2009	MANDIBLE OR MAXILLA, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,138.25 Benefit: 75% = \$853.70
‡ 45729 Amend 1 May 2009	MANDIBLE OR MAXILLA, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,278.30 Benefit: 75% = \$958.75
‡ 45731 Amend 1 May 2009	MANDIBLE or MAXILLA, osteotomies or osteectomies of, involving 3 or more such procedures on the 1 jaw, including transposition of nerves and vessels and bone grafts taken from the same site, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,295.90 Benefit: 75% = \$971.95
‡ 45732 Amend 1 May 2009	MANDIBLE OR MAXILLA, osteotomies or osteectomies of, involving 3 or more such procedures on the 1 jaw, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,458.95 Benefit: 75% = \$1,094.25
‡ 45735 Amend 1 May 2009	MANDIBLE AND MAXILLA, osteotomies or osteectomies of, involving 2 such procedures of each jaw, including transposition of nerves and vessels and bone grafts taken from the same site, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,488.35 Benefit: 75% = \$1,116.30
‡ Amend 1 May 2009 45738	MANDIBLE AND MAXILLA, osteotomies or osteectomies of, involving 2 such procedures of each jaw, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) (See para T8.110 of explanatory notes to this Category) Fee: \$1,674.40 Benefit: 75% = \$1,255.80

	SUBGROUP 13 - PLASTIC AND RECONSTRUCTIVE SURGERY
‡ 45741 Amend 1 May 2009	MANDIBLE AND MAXILLA, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of 1 jaw and 2 such procedures of the other jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,637.35 Benefit: 75% = \$1,228.05
‡ 45744 Amend 1 May 2009	MANDIBLE AND MAXILLA, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of 1 jaw and 2 such procedures of the other jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,840.95 Benefit: 75% = \$1,380.75
‡ 45747 Amend 1 May 2009	MANDIBLE AND MAXILLA, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of each jaw, including genioplasty (when performed) and transposition of nerves and vessels and bone grafts taken from the same site, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,786.30 Benefit: 75% = \$1,339.75 85% = \$1,718.20
‡ 45752 Amend 1 May 2009 ‡	MANDIBLE AND MAXILLA, complex bilateral osteotomies or osteectomies of, involving 3 or more such procedures of each jaw, including genioplasty when performed and transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$2,000.85 Benefit: 75% = \$1,500.65 TEMPOROMANDIBULAR JOINT, arthroscopy of, removal of loose bodies, debridement, or treatment
45857 Amend 1 May 2009	of adhesions - 1 or more such procedure of that joint, not being a service associated with any other arthroscopic procedure of the temporomandibular joint (Anaes.) (Assist.) Fee: \$604.00 Benefit: 75% = \$453.00 85% = \$535.90
‡ 45877 Amend 1 May 2009	TEMPOROMANDIBULAR JOINT, arthrodesis of with synovectomy if performed, not being a service to which another item in this Subgroup applies (Anaes.) (Assist.) Fee: \$434.85 Benefit: 75% = \$326.15 85% = \$369.65
	SUBGROUP 14 - HAND SURGERY
‡ 46300 Amend	Note: Items 46300 to 46534 are restricted to surgery on the hand/s. INTER-PHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, arthrodesis of, with synovectomy if performed (Anaes.) (Assist.)
1 May 2009	Fee: \$312.65

	SUBGROUP 14 - HAND SURGERY
‡ 46303	CARPOMETACARPAL JOINT, arthrodesis of with synovectomy if performed (Anaes.) (Assist.) Fee: \$347.45 Benefit: 75% = \$260.60
Amend 1 May 2009	
# 46396 Amend 1 May 2009	PHALANX OR METACARPAL OF THE HAND, osteotomy or osteectomy of, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$304.50 Benefit: 75% = \$228.40 85% = \$258.85
	SUBGROUP 15 - ORTHOPAEDIC
Α	
47465 Amend 1 May 2009	CLAVICLE, treatment of fracture of, by open reduction (Anaes.) (Assist.) Fee: \$208.80 Benefit: 75% = \$156.60 85% = \$177.50
‡ 47501 Amend 1 May 2009	ACETABULUM, treatment of single column fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$869.80 Benefit: 75% = \$652.35
‡ 47504 Amend 1 May 2009	ACETABULUM, treatment of T-shape fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,304.70 Benefit: 75% = \$978.55 85% = \$1,236.60
‡ 47507 Amend 1 May 2009	ACETABULUM, treatment of transverse fracture of, by open reduction and internal fixation, including any osteotomy, osteoctomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,304.70 Benefit: 75% = \$978.55
‡ 47510 Amend 1 May 2009	ACETABULUM, treatment of double column fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$1,304.70 Benefit: 75% = \$978.55

	SUBGROUP 15 - ORTHOPAEDIC
‡ 47933 Amend 1 May 2009	SMALL EXOSTOSIS (NOT MORE THAN 20MM OF GROWTH ABOVE BONE)—OF SMALL BONE, excision of, including or simple removal of bunion and any associated bursa, not being a service associated with a service for removal of bursa (Anaes.) Fee: \$191.25 Benefit: 75% = \$143.45 85% = \$162.60
‡ 47936 Amend 1 May 2009	LARGE EXOSTOSIS (GREATER THAN 20MM GROWTH ABOVE BONE) (Anaes.) (Assist.) Fee: \$234.85 Benefit: 75% = \$176.15
47954 Amend 1 May 2009	TENDON, repair of, <u>as an independent procedure</u> —net being a service to which another item in this Group applies (Anaes.) (Assist.) Fee: \$347.90 Benefit: 75% = \$260.95 85% = \$295.75
‡ 47957 Amend 1 May 2009	TENDON, large, lengthening of, <u>as an independent procedure not being a service to which another</u> item in this Group applies (Anaes.) (Assist.) Fee: \$260.85 Benefit: 75% = \$195.65
‡ 47966 Amend 1 May 2009	TENDON OR LIGAMENT, TRANSFER, as an independent procedure not being a service to which another item in this Group applies (Anaes.) (Assist.) Fee: \$400.00 Benefit: 75% = \$300.00
‡ 48400 Amend 1 May 2009	PHALANX, METATARSAL, ACCESSORY BONE OR SESAMOID BONE, osteotomy or osteectomy of, excluding services to which item 49848 or 49851 applies, any of items 49848, 49851, 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$304.50 Benefit: 75% = \$228.40
‡ 48403 Amend 1 May 2009	PHALANX OR METATARSAL, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$478.40 Benefit: 75% = \$358.80
‡ 48406 Amend 1 May 2009	FIBULA, RADIUS, ULNA, CLAVICLE, SCAPULA (other than acromion), RIB, TARSUS OR CARPUS, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$304.50 Benefit: 75% = \$228.40
‡ 48409 Amend 1 May 2009	FIBULA, RADIUS, ULNA, CLAVICLE, SCAPULA (other than Acromion), RIB, TARSUS OR CARPUS, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$478.40 Benefit: 75% = \$358.80

	SUBGROUP 15 - ORTHOPAEDIC
‡ 48412 Amend 1 May 2009	HUMERUS, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$582.60 Benefit: 75% = \$436.95
‡ 48415 Amend 1 May 2009	HUMERUS, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$739.30 Benefit: 75% = \$554.50
‡ 48418 Amend 1 May 2009	TIBIA, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$582.60 Benefit: 75% = \$436.95 85% = \$514.50
‡ 48421 Amend 1 May 2009	TIBIA, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$739.30 Benefit: 75% = \$554.50
‡ 48424 Amend 1 May 2009	FEMUR OR PELVIS, osteotomy or osteectomy of excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$695.90 Benefit: 75% = \$521.95
‡ 48427 Amend 1 May 2009	FEMUR OR PELVIS, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply (Anaes.) (Assist.) Fee: \$843.70 Benefit: 75% = \$632.80
‡ 48939 Amend 1 May 2009	SHOULDER, arthrodesis of, with synovectomy if performed (Anaes.) (Assist.) Fee: \$1,000.25 Benefit: 75% = \$750.20

	SUBGROUP 15 - ORTHOPAEDIC
‡	SHOULDER, arthrodesis of, with synovectomy if performed, including with removal of prosthesis,
48942 Amend 1 May 2009	requiring bone grafting or internal fixation (Anaes.) (Assist.) Fee: \$1,304.70 Benefit: 75% = \$978.55
‡ 49106 Amend 1 May 2009	ELBOW, arthrodesis of with synovectomy if performed (Anaes.) (Assist.) Fee: \$869.80 Benefit: 75% = \$652.35 85% = \$801.70
‡	ELBOW, diagnostic arthroscopy of, including biopsy and lavage, not being a service associated with
49118 Amend 1 May 2009	any other arthroscopic procedure of the elbow (Anaes.) (Assist.) Fee: \$252.15 Benefit: 75% = \$189.15
‡ 49200	WRIST, arthrodesis of, with synovectomy if performed, including bone graft with or without bone graft and internal fixation of the radiocarpal joint (Anaes.) (Assist.)
Amend 1 May 2009	(See para T8.120 of explanatory notes to this Category) Fee: \$756.60 Benefit: 75% = \$567.45
‡ 49203 Amend 1 May 2009	WRIST, limited arthrodesis of the intercarpal joint, with synovectomy if performed, including with or without bone graft (Anaes.) (Assist.) Fee: \$565.35 Benefit: 75% = \$424.05
‡	WRIST, arthroscopic debridement of 2 or more distinct areas; or osteoplasty including excision of
49224 Amend 1 May 2009	the distal ulna; or total synovectomy, not being a service associated with any other arthroscopic procedure of the wrist (Anaes.) (Assist.) Fee: \$652.30 Benefit: 75% = \$489.25
‡ 49306	HIP arthrodesis of, with synovectomy if performed (Anaes.) (Assist.) Fee: \$1,000.25 Benefit: 75% = \$750.20
Amend 1 May 2009	
‡ 49360	HIP, diagnostic arthroscopy of not being a service associated with any other arthroscopic procedure of the hip (Anaes.) (Assist.)
Amend 1 May 2009	Fee: \$317.80 Benefit: 75% = \$238.35

	SUBGROUP 15 - ORTHOPAEDIC
‡ 49363 Amend 1 May 2009	HIP, diagnostic arthroscopy of, with synovial biopsy, not being a service associated with any other orthroscopic procedure of the hip (Anaes.) (Assist.) Fee: \$382.70 Benefit: 75% = \$287.05 85% = \$325.30
‡ 49366 Amend 1 May 2009	HIP, arthroscopic surgery of not being a service associated with any other arthroscopic procedure of the hip (Anaes.) (Assist.) Fee: \$565.35 Benefit: 75% = \$424.05
‡ 49509 Amend 1 May 2009	KNEE, total synovectomy or arthrodesis ef-with synovectomy if performed (Anaes.) (Assist.) Fee: \$695.90 Benefit: 75% = \$521.95
‡ 49512 Amend 1 May 2009	KNEE, arthrodesis of, with synovectomy if performed, with removal of prosthesis (Anaes.) (Assist.) Fee: \$1,000.25 Benefit: 75% = \$750.20
‡ 49536 Amend 1 May 2009	KNEE, repair or reconstruction of, for chronic instability (open or arthroscopic, or both) involving either cruciate or collateral ligaments, including notchplasty when performed, not being a service associated with any other arthroscopic procedure of the knee (Anaes.) (Assist.) Fee: \$869.80 Benefit: 75% = \$652.35
‡ 49539 Amend 1 May 2009	KNEE, reconstructive surgery of cruciate ligament or ligaments (open or arthroscopic, or both), including notchplasty when performed and surgery to other internal derangements, not being a service to which another item in this Group applies or a service associated with any other arthroscopic procedure of the knee (Anaes.) (Assist.) Fee: \$869.80 Benefit: 75% = \$652.35
‡ 49542 Amend 1 May 2009	KNEE, reconstructive surgery to cruciate ligament or ligaments (open or arthroscopic, or both), including notchplasty, meniscus repair, extracapsular procedure and debridement when performed not being a service associated with any other arthroscopic procedure of the knee (Anaes.) (Assist.) Fee: \$1,217.50 Benefit: 75% = \$913.15
‡ 49545 Amend 1 May 2009	KNEE, revision arthrodesis of with synovectomy if performed (Anaes.) (Assist.) Fee: \$695.90 Benefit: 75% = \$521.95

	SUBGROUP 15 - ORTHOPAEDIC
49564 Amend 1 May 2009	KNEE, patello-femoral stabilisation of, combined arthroscopic and open procedure, including lateral release, medial capsulorrhaphy and tendon transfer, not being a service associated with any other arthroscopic procedure of the knee (Anaes.) (Assist.) Fee: \$849.00 Benefit: 75% = \$636.75
‡ 49566 Amend 1 May 2009	KNEE, arthroscopic total synovectomy of not being a service associated with any other arthroscopic procedure of the knee (Anaes.) (Assist.) Fee: \$695.90 Benefit: 75% = \$521.95
‡ 49703 Amend 1 May 2009	ANKLE, arthroscopic surgery of not being a service associated with any other arthroscopic procedure of the ankle (Anaes.) (Assist.) Fee: \$565.35 Benefit: 75% = \$424.05
‡ 49712 Amend 1 May 2009	ANKLE, arthrodesis of with synovectomy if performed (Anaes.) (Assist.) Fee: \$695.90 Benefit: 75% = \$521.95
‡ 49815 Amend 1 May 2009	FOOT, triple arthrodesis of with synovectomy if performed (Anaes.) (Assist.) Fee: \$695.90 Benefit: 75% = \$521.95
‡ 49845 Amend 1 May 2009	FOOT, arthrodesis of, first metatarso-phalangeal joint, with synovectomy if performed (Anaes.) (Assist.) Fee: \$434.85 Benefit: 75% = \$326.15

	SUBGROUP 15 - ORTHOPAEDIC
\$ 50109 Amend 1 May 2009	JOINT, arthrodesis of, not being a service to which another item in this Group applies, with synovectomy if performed (Anaes.) (Assist.) Fee: \$434.85 Benefit: 75% = \$326.15
‡ 50118 Amend 1 May 2009	SUBTALAR JOINT, arthrodesis of with synovectomy if performed (Anaes.) (Assist.) Fee: \$400.00 Benefit: 75% = \$300.00
\$ 50218 Amend 1 May 2009	MALIGNANT TUMOUR of LONG BONE, enbloc resection of, with replacement or arthrodesis of adjacent joint, with synovectomy if performed (Anaes.) (Assist.) Fee: \$2,522.40 Benefit: 75% = \$1,891.80
‡ 50312 Amend 1 May 2009	ANKLE, synovectomy of by arthroscopic or open means - not associated with any other arthroscopic procedure of the ankle (Anaes.) (Assist.) Fee: \$646.80 Benefit: 75% = \$485.10
‡ 50450 Amend 1 May 2009	 UNILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with hemiplegic cerebral palsy comprising three or more of the following: (a) Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. (b) Correction of muscle imbalance by tendon transfer/transfers. (c) Correction of femoral torsion by rotational osteotomy of the femur. (d) Correction of tibial torsion by rotational osteotomy of the tibia. (e) Correction of joint instability by varus derotation osteotomy of the femur, subtalar arthrodesis, with synovectomy if performed, or os calcis lengthening. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare (Anaes.) (Assist.) Fee: \$1,133.50 Benefit: 75% = \$850.15
‡ 50451 Amend 1 May	 UNILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with hemiplegic cerebral palsy comprising three or more of the following: (a) Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. (b) Correction of muscle imbalance by tendon transfer/transfers. (c) Correction of femoral torsion by rotational osteotomy of the femur. (d) Correction of tibial torsion by rotational osteotomy of the tibia. (e) Correction of joint instability by varus derotation osteotomy of the femur, subtalar arthrodesis, with synovectomy if performed, or os calcis lengthening. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare (Anaes.) (Assist.)
2009	Fee: \$1,133.50 Benefit: 75% = \$850.15

Category 5 - Diagnostic Imaging

	GROUP 15 - MAGNETIC RESONANCE IMAGING
	SUBGROUP 19 - SCAN OF BODY - FOR SPECIFIED CONDITIONS
	MAGNETIC RESONANCE IMAGING performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician and where: (a) a dedicated breast coil is used; and (b) the request for scan identifies that the woman is asymptomatic and is less than 50 years of age; and (c) the request for scan identifies either: (i) that the patient is at high risk of developing breast cancer due to 1 of the following: (A) 3 or more first or second degree relatives on the same side of the family diagnosed with breast or ovarian cancer; (B) 2 or more first or second degree relatives on the same side of the family diagnosed with breast or ovarian cancer, including any of the following features: - bilateral breast cancer; - onset of breast cancer before the age of 40 years; - onset of ovarian cancer before the age of 50 years; - breast and ovarian cancer in one relative; - Ashkenazi Jewish ancestry; - breast cancer in a male relative; (C) 1 first or second degree relative diagnosed with breast cancer at age 45 years or younger, plus another first or second degree relative on the same side of the family with bone or soft tissue sarcoma at age 45 years or younger; or
	(ii) that genetic testing has identified the presence of a high risk breast cancer gene mutation.
	Scan of both breasts for:
	- detection of cancer (R)
‡	NOTE: Benefits are payable on one occasion only in any 12 month period (Anaes.)
63464	Fee: \$690.00 Benefit: 75% = \$517.50 85% = \$621.90

Category 6 - Pathology

	jory 6 – Pathology
	GROUP P2 - CHEMICAL
‡ Amend 1 May 2009	Vitamins - quantitation of vitamins A B1, B2, B3, B6 and C and E in blood, urine or other body fluid - 1 or more tests within a 6 month period Fee: \$31.15 Benefit: 75% = \$23.40 85% = \$26.50
† New 1 May 2009	Vitamins - quantitation of vitamins A and E in blood, urine or other body fluid - 1 or more tests within a 6 month period Fee: \$76.25 Benefit: 75% = \$57.20 85% = \$64.85
66607	
+ Amend 1 May 2009	Isoelectric focussing or similar methods for determination of alpha-1-antitrypsin phenotype in serum - 1 or more tests Fee: \$49.70 Benefit: 75% = \$37.30 85% = \$42.25
66638	
‡ Amend	Prostate specific antigen - quantitation of 2 or more fractions of PSA and any derived index including (if performed) a test described in item 66656, in the followup of a PSA result which lies above the age related median but below the age related, method specific 97.5% reference limit
1 May 2009	equivocal range of the particular method of assay used to determine the level - 1 of this item in a 12 month period (Item is subject to rule 25)
66659	Fee: \$37.80 Benefit: 75% = \$28.35 85% = \$32.15
† New 1 May 2009	Prostate specific antigen – quantitation of 2 or more fractions of PSA and any derived index including (if performed) a test described in item 66656, in the follow up of a PSA result which lies above the age related, method specific 97.5% reference limit, but below a value of 10 ug/L – 4 of this item in a 12 month period. (Item is subject to rule 25) Fee: \$37.80 Benefit: 75% = \$28.35 85% = \$32.15
	Deficit. 7570 = \$20.33 8370 = \$32.13
† New 1 May 2009	CARBON-LABELLED UREA BREATH TEST using oral C-13 or C-14 urea, including the measurement of exhaled 13CO2 or 14CO2 (except if item 12533 applies) for either:- (a) the confirmation of Helicobacter pylori colonisation OR (b) the monitoring of the success of eradication of Helicobacter pylori.
66900	Fee: \$78.15 Benefit: 75% = \$58.65 85% = \$66.45
	GROUP P4 - IMMUNOLOGY
‡ Amend 1 May 2009	Detection and quantitation, if present, of free kappa eff and lambda light chains in serum for the diagnosis or monitoring of amyloidosis, myeloma or plasma cell dyscrasias. Fee: \$36.30 Benefit: 75% = \$27.25 85% = \$30.90
71200	

	GROUP P6 - CYTOLOGY
‡ + Amend 1 May 2009	Cytology of material obtained directly from a patient by fine needle aspiration of solid tissue or tissues - 1 identified site Fee: \$68.60 Benefit: 75% = \$51.45 85% = \$58.35
73049	
‡ Amend 1 May 2009 73059	Immunocytochemical examination of material obtained by procedures described in items 73045, 73047, 73049, 73062 and 73051 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 1 to 3 antibodies except those listed in 73061 (Item is subject to rule 13) Fee: \$43.30 Benefit: 75% = \$32.50 85% = \$36.85
	ree. \$45.30 Delient. 75% = \$52.50 85% = \$50.65
‡ Amend 1 May 2009	Immunocytochemical examination of material obtained by procedures described in items 73045, 73047, 73049, 73062 and 73051 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 4 or more to 6 antibodies (Item is subject to rule 13)
73060	Fee: \$57.75 Benefit: 75% = \$43.35 85% = \$49.10
‡ Amend 1 May 2009	Immunocytochemical examination of material obtained by procedures described in items 73045, 73047, 73049, 73062 and 73051 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 1 to 3 of the following antibodies - oestrogen, progesterone and c-erb-B2 (HER2) (Item is subject to rule 13)
73061	Fee: \$51.55 Benefit: 75% = \$38.70 85% = \$43.85
† New 1 May 2009	Cytology of material obtained directly from a patient by fine needle aspiration of solid tissue or tissues – 2 or more separately identified sites. Fee: \$89.60 Benefit: 75% = \$67.20 85% = \$76.20
73062	
† New 1 May 2009	Cytology of material obtained directly from a patient by fine needle aspiration of solid tissue or tissues, where an employee of the APA also attends the aspiration for confirmation of sample adequacy. Fee: \$100.00 Benefit: 75% = \$75.00 85% = \$85.00
73063	
† New 1 May 2009	Immunocytochemical examination of material obtained by procedures described in items 73045, 73047, 73049, 73062 and 73051 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen – 7 to 10 antibodies
73064	(Item is subject to rule 13) Fee: \$72.20 Benefit: 75% = \$54.15 85% = \$61.40
† New 1 May 2009	Immunocytochemical examination of material obtained by procedures described in items 73045, 73047, 73049, 73062 and 73051 for the characterisation of a malignancy by immunofluorescence, immunoperoxidase or other labelled antibody techniques with multiple antigenic specificities per specimen - 11 or more antibodies
73065	(Item is subject to rule 13) Fee: \$86.60 Benefit: 75% = \$64.95 85% = \$73.65

Go to Table of Contents

	GROUP P7 - GENETICS
‡	Detection of mutation of the FMR1 gene where: (a) the patient exhibits one or more of the clinical features of fragile X (A) syndrome, including intellectual disability, ataxia, neurodegeneration, or premature ovarian failure consistent
73300	with an FMRI mutation; or (b) the patient has a relative with a fragile X (A) FMR1 mutation
Amend 1 May 2009	1 or more tests (See para 16.12 of explanatory notes to this Category) Fee: \$103.10 Benefit: 75% = \$77.35 85% = \$87.65
† 73314 Amend 1 May	Characterisation of gene rearrangement or the identification of mutations within a known gene rearrangement, in the diagnosis and monitoring of patients with laboratory evidence of: (a) acute myeloid leukaemia; or (b) acute promyelocytic leukaemia; or (c) acute lymphoid leukaemia; or (d) chronic myeloid leukaemia; (Htem subject to Rule 25)
2009	Fee: \$235.00 Benefit: 75% = \$176.25 85% = \$199.75
† 73315 Amend 1 May 2009	A test described in item 73314, if rendered by a receiving APP - 1 or more tests (Item is subject to rule 18 and 25) Fee: \$235.00 Benefit: 75% = \$176.25 85% = \$199.75