# Continuation of MBS item 63399 – cardiac magnetic resonance imaging (MRI) for myocarditis associated with mRNA COVID-19 vaccination

Last updated: 28 November 2022

# What are the changes?

Item 63399 will remain listed on the Medicare Benefits Schedule (MBS) and be available for use until 31 December 2023.

# Why are the changes being made?

Item 63399 was introduced to the MBS on 1 January 2022 to provide cardiac MRI to assist in diagnosing myocarditis that may occur after vaccination with an mRNA COVID-19 vaccine.

The item is for use in circumstances where myocarditis cannot be definitively diagnosed using conventional imaging and other diagnostic tests.

This is a temporary item. It is being made available pending a full health technology assessment by the Medical Services Advisory Committee (MSAC) on the use of cardiac MRI in diagnosing myocarditis in a broader patient population (Application 1713).

Item 63399 was due to cease after 31 December 2022. The item will be available for an additional 12 months pending MSAC consideration of Application 1713.

Further details about MSAC applications can be found under <u>MSAC Applications</u> on the MSAC website (<u>Medical Services Advisory Committee</u>).

### What does this mean for requestors?

Item 63399 can be requested by consultant physicians in circumstances where it is clinically necessary, and the request meets the requirements in the item descriptor.

# What does this mean for providers?

The cardiac MRI can be provided by a person who is:

 (a) a specialist in diagnostic radiology and satisfies the Chief Executive Medicare that the specialist is a participant in the Royal Australian and New Zealand College of Radiologists' Quality and Accreditation Program; or (b) a specialist in diagnostic radiology or a consultant physician and is recognised by the Conjoint Committee for Certification in Cardiac MRI.

This service can be performed on both partially and fully Medicare-eligible MRI machines.

## How will these changes affect patients?

Patients who receive an mRNA COVID-19 vaccine will continue to have access to cardiac MRI in circumstances where it is clinically appropriate.

The item can be used once in a patient's lifetime.

#### 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 <a href="www.mbsonline.gov.au">www.mbsonline.gov.au</a>. You can also subscribe to future MBS updates by visiting <a href="MBS Online">MBS Online</a> 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 <u>Health Insurance</u> <u>Act 1973</u> and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email <u>askMBS@health.gov.au</u>.

Private health insurance information on the product tier arrangements is available at <a href="https://www.privatehealth.gov.au">www.privatehealth.gov.au</a>. Detailed information on the MBS item listing within clinical categories is available on the <a href="https://pepartment's website">Department's website</a>. Private health insurance minimum accommodation benefits information, including MBS item accommodation classification, is available in the latest version of the <a href="https://private.nealth.gov.au">Private Health Insurance (Benefit Requirements) Rules 2011 found on the <a href="https://pepartments.gov.au">Federal Register of Legislation</a>. If you have a query in relation to private health insurance, you should email <a href="https://pepartments.gov.au">PHI@health.gov.au</a>.

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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.

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.