



Expansion of genetic testing for myeloproliferative neoplasms

Last updated: 8 June 2022

- From 1 July 2022, eligibility for existing Medicare Benefits Schedule (MBS) item 73325 will be expanded for use in the diagnosis of patients with suspected polycythaemia vera, essential thrombocythaemia, and primary myelofibrosis.
- From 1 July 2022, four new genetic testing items will also be introduced to the MBS. New MBS items 73396, 73397, 73398, and 73399 will support the diagnosis of patients with suspected polycythaemia vera, essential thrombocythaemia, and primary myelofibrosis.
- These changes are relevant to specialists and consultant physicians who manage patients with suspected and diagnosed myeloproliferative neoplasms, and Approved Pathology Practitioners (APP) who provide these referred services

What are the changes?

Myeloproliferative neoplasms (MPNs) are a group of rare blood cancers. The three “classical” MPNs are polycythaemia vera (PV), essential thrombocythaemia (ET), and primary myelofibrosis (PMF). In September 2017, a new edition of the World Health Organization (WHO) classification system of tumours of the hematopoietic and lymphoid tissues was published, which updated and introduced several genetic variants as part of the diagnostic criteria for PV, ET, and PMF.

From 1 July 2022, individuals with suspected classical MPNs will be able to access genetic testing which will have diagnostic, prognostic, and predictive clinical utility value in the management of MPNs, aligning with current WHO clinical guidelines.

Why are the changes being made?

This proposal to introduce new genetic tests for MPNs was first raised in March 2019 by the Genetics Working Group of the Pathology Clinical Committee of the MBS Review Taskforce. In November 2020, the Medical Services Advisory Committee (MSAC) supported the expansion of public funding for genetic tests for the diagnosis of MPNs.

What does this mean for providers/referrers/other stakeholders?

From 1 July 2022, specialists or consultant physicians who manage MPNs will be able to order genetic tests as part of the diagnostic work-up of a patient with suspected PV, ET, or PMF.

To be eligible for Medicare rebates, laboratories providing this service must be accredited according to the pathology accreditation standards specified in the *Health Insurance (Accredited Pathology Laboratories-Approval) Principles 2017*.

How will these changes affect patients?



These changes will align the MBS with the latest WHO clinical guidelines and contemporary clinical practice in the management of MPNs. The genetic tests will be used in the diagnosis of MPNs and may also inform prognosis or guide decisions surrounding treatment options.

Who was consulted on the changes?

Consultation has been undertaken with key stakeholders, clinical experts, and providers as part of the MSAC process, including the Royal College of Pathologists of Australasia and the Haematological Society of Australia and New Zealand.

How will the changes be monitored and reviewed?

The new MBS items will be subject to MBS compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed.

Significant variation from forecasted expenditure may warrant review and amendment of the items and fees, and incorrect use of MBS items can result in penalties including the health professional being asked to repay monies that have been incorrectly received.

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'.

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.

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 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.