



Minor changes to spinal surgery items factsheet

What are the changes?

From 1 November 2019, there will be minor changes to a number of items for spinal surgery. The changes are:

- **Items 51051, 51052 and 51053** – The term ‘motion segment’ will be replaced with the appropriate clinical term ‘vertebra’ or ‘vertebrae’ and restrictions on claiming these items for services associated with the fusion of adjacent vertebrae will be removed.
- **Items 51061 to 51066** – The term ‘spine fusion’ will be replaced with the appropriate clinical term ‘spinal fusion’.
- **Items 51113 and 51114** – Co-claiming restrictions for items 51113 and 51114 will be revised to enable appropriate claiming of these items with the paediatric scoliosis or kyphosis items (50600 to 50644).
- **Item 51145** – A second medical practitioner will be able to bill the MBS for providing assistance at the procedure.

Further information on these changes, including the item descriptors and MBS Explanatory Notes which will come into effect on 1 November 2019 can be viewed [here](#).

Why are the changes being made?

The changes aim to:

- Improve the accuracy of terminology used;
- Clarify the policy intent of these services;
- Ensure patients receive appropriate rebates.

The changes apply to some of the new spinal surgery items which came into effect on 1 November 2018. Further information on the 1 November 2018 changes to the spinal surgery items is available [here](#).

What does this mean for practitioners?

Changes to items 51051, 51052, 51053 and 51061 to 51066 aim to improve the language used to assist in making the descriptors clinically and anatomically accurate. Practitioners can undertake appropriate claiming of items 51051, 51052 and 51053 where the service is associated with the fusion of adjacent vertebrae in the anterior column. There will be no changes the way these items are administered.

From 1 November 2019, practitioners can undertake appropriate claiming of items 51113 and 51114 with the paediatric scoliosis or kyphosis items (50600 to 50644). This claiming exception will be outlined in MBS Explanatory Note [TN.8.141](#).



The change to item 51145 will enable a second medical practitioner to bill the MBS for providing assistance for 'wound debridement or excision for post operative infection or haematoma following spinal surgery'.

Practitioners should familiarise themselves with the [updated item descriptors and MBS Explanatory Notes](#) to ensure the services they provide meet the relevant requirements.

How will these changes affect patients?

The changes to item 51051, 51052 and 51053 will benefit patients who require a procedure to fuse adjacent vertebrae. The removal of co-claiming restrictions for items 51113 and 51114 will benefit paediatric patients with significant spine deformity who require a combination of paediatric and adult spinal surgery procedures. The change to item 51145 will ensure patients receive appropriate rebates when a second practitioner is needed to provide assistance with the procedure.

Who was consulted on the changes?

These changes were undertaken in consultation with relevant professional groups, including the Spine Society of Australia and Australian Paediatric Society.

How will the changes be monitored and reviewed?

The Department of Health regularly reviews the usage of new and amended MBS items in consultation with the profession. All MBS items may be subject to compliance processes and activities, including random and targeted audits which may require a provider to submit information about the services claimed.

Where can I find more information?

Further information about the item changes which came into effect for spinal surgery on 1 November 2018 is available [here](#).

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 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 Department of Human Services website or contact the Department of Human Services on the Provider Enquiry Line – 13 21 50.

The data file for software vendors is expected to become available on 1 November 2019 and can be accessed 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.