



Changes to MBS Items for Spinal Surgery Services

Last updated: 12/10/2018

Effective from 1 November 2018

What do the changes involve?

The Government’s changes to the MBS items for spinal surgery replace previous spinal surgery services with items that reflect contemporary surgical practice. The changes include:

- Replacing the previous schedule of 76 spinal surgery services with 60 new MBS items.
- Removing three services identified as obsolete (an item for intradiscal injection of chymopapain, and two items for manipulation of spine, performed in an operating theatre). These services are not included in the new schedule.
- Introducing new rules to ensure that claiming is consistent and appropriate.

Previous 76 spinal surgery items deleted from the MBS:

- 40300 to 40352 (24 items)
- 47681 to 47723 (16 items)
- 48600 to 48694 (36 items)

The 60 new items are organised into eight categories:

Spinal Decompression	51011 to 51015 (5 items)
Spinal Instrumentation (cervical, thoracic and lumbar)	51020 to 51026 (7 items)
Posterior and/or posterolateral (intertransverse or facet joint) bone graft (cervical, thoracic and lumbar)	51031 to 51036 (6 items)
Anterior column fusion, with or without implant, or limited vertebrectomy (less than 50%) and anterior fusion (cervical, thoracic and lumbar)	51041 to 51045 (5 items)
Spinal osteotomy and/or vertebrectomy	51051 to 51059 (9 items)
Anterior and posterior (combined) spinal fusion under one anaesthetic via separate incisions	51061 to 51066 (6 items)
Intradural procedures	51071 to 51073 (3 items)
Miscellaneous spinal procedures (cervical, thoracic and lumbar)	51102 to 51171 (19 items)



The new Spinal Surgery Schedule

The 60 new spinal surgery items will be included in the MBS under ‘Subgroup 17 – Spinal Surgery’, of ‘Group T8 – Surgical Operations’.

The intent of the new spinal surgery schedule is to ensure practitioners can access a suite of MBS items which accurately describe contemporary spinal surgery practice. Additionally, the new spinal surgery schedule will enhance the uniformity of item number usage, which will ensure patients are billed consistent MBS items when undergoing the same procedure.

The spinal surgery items have been restructured to reflect the procedures being performed, rather than diagnosis or anatomical site. As such, there are categories for decompression, instrumentation, posterior bone graft, anterior column fusion, osteotomy/ vertebrectomy, combined anterior/posterior surgery and intradural procedures. From within each of these categories only the single most appropriate item number can be claimed. In addition, there is a collection of miscellaneous procedures that can be claimed where appropriate.

There are no modifiers for revision surgery or co-morbidities; for example obesity, diabetes, etc.

Anterior/posterior surgeries are to be claimed using items 51061 to 51066, and should be claimed for any appropriate combined anterior and posterior surgeries which are completed under one anaesthetic.

A number of new clauses (rules) underpin the new spinal surgery schedule that will prevent spinal surgeons claiming any additional surgical items outside of the spinal surgery schedule, as well as internal category restrictions and a definition for spinal ‘motion segment’ which is a term used throughout the schedule and replaces spinal ‘level’. The clauses are described in the overarching explanatory note below. Please note some categories of items will also have their own additional explanatory note, as outlined on the relevant sections of this document.

New overarching explanatory note relating to all Spinal Surgery MBS items:

Explanatory Note TN.8.141: Application of spinal surgery items 51011 to 51171 (subgroup 17)

Spinal surgery items 51011 to 51171 cannot be performed in conjunction with any other item (outside of subgroup 17) in Group T8 of the MBS (surgical operation items 30001 to 50952), when that surgical item is related to spinal surgery.

Meaning of Motion Segment

Motion segment is defined as including all anatomical structures (including traversing and exiting nerve roots) between and including the top of the pedicle above to the bottom of the pedicle below.

Combined Anterior and Posterior Surgery

Combined anterior/ posterior surgery items 51061, 51062, 51063, 51064, 51065 and 51066 cannot be claimed with any item between 51020 and 51045 (i.e. items for spinal instrumentation, posterior bone graft and/or anterior column fusion).

Interpretation of Spinal Fusion

Lumbar spinal fusion may not be claimed for chronic low back pain for which a diagnosis has not been made.



Items 51011 to 51015 – Spinal Decompression

Explanatory Note TN.8.142: Spinal Decompression - Items 51011 to 51015

Items 51011 to 51015 are for services which include discectomy, decompression of central spinal canal by laminectomy or partial corpectomy (vertebral spurs and osteophytes; less than 50% of the vertebral body), and decompression of the subfacetal recess, the exit foramen and far lateral (intertransverse) space.

For decompression procedures, only one item is selected from 51011 to 51015.

For posterolateral spinal fusion without instrumentation, if a decompression procedure is combined with the fusion, two items numbers can be selected: one from 51011 to 51015 and one from 51031 to 51036.

For posterolateral spinal fusion with instrumentation, two item numbers can be selected: one from 51020 to 51026 and one from 51031 to 51036. If decompression is also performed, three items can be selected: one from 51011 to 51015, one from 51020 to 51026 and one from 51031 to 51036.

For instrumented spinal fusion with interbody and posterolateral bone graft (with or without cages) and decompression, four item numbers can be selected: one from one from 51011 to 51015, one from 51020 to 51026, one from 51031 to 51036 and one from 51041 to 51045.

If more than 50% of a vertebral body is resected (piecemeal vertebrectomy) an item from 51051 to 51059 can be selected in addition to an item from 51011 to 51015.

Items 51011 to 51015 can be used when the purpose of the laminectomy is exposure or posterior spinal release.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51011	Spinal decompression or exposure via partial or total laminectomy, partial vertebrectomy or posterior spinal release, one motion segment, not being a service associated with a service to which item 51012, 51013, 51014 or 51015 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.142		Fee: \$1,435.50 Benefit: 75% = \$1,076.65
	<u>Multiple operations rule</u>		

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51012	Spinal decompression or exposure via partial or total laminectomy, partial vertebrectomy or posterior spinal release, 2 motion segments, not being a service associated with a service to which item 51011, 51013, 51014 or 51015 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.142		Fee: \$1,913.80 Benefit: 75% = \$1,435.35
	<u>Multiple operations rule</u>		

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51013	Spinal decompression or exposure via partial or total laminectomy, partial vertebrectomy or posterior spinal release, 3 motion segments, not being a service associated with a service to which item 51011, 51012, 51014 or 51015 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.142		Fee: \$2,392.25 Benefit: 75% = \$1,794.18
	<u>Multiple operations rule</u>		



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51014	Spinal decompression or exposure via partial or total laminectomy, partial vertebrectomy or posterior spinal release, 4 motion segments, not being a service associated with a service to which item 51011, 51012, 51013 or 51015 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.142</u> <u>Multiple operations rule</u>		Fee: \$2,870.70 Benefit: 75% = \$2,153.05

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51015	Spinal decompression or exposure via partial or total laminectomy, partial vertebrectomy or posterior spinal release, more than 4 motion segments, not being a service associated with a service to which item 51011, 51012, 51013 or 51014 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.142</u> <u>Multiple operations rule</u>		Fee: \$3,349.15 Benefit: 75% = \$2,512.30



Item 51020 to 51026 – Spinal Instrumentation (cervical, thoracic and lumbar)

Explanatory Note TN.8.143: Spinal Instrumentation (cervical, thoracic and lumbar) - Items 51020 to 51026

Items 51020 to 51026 are intended for spinal instrumentation at any level. The appropriate item is determined by the number of motion segments instrumented, barring item 51020 which applies to one vertebra.

For posterolateral spinal fusion with instrumentation, two item numbers are selected: one from 51020 to 51026 and one from 51031 to 51036. If decompression is also performed, three items are selected: one from 51011 to 51015, one from 51020 to 51026 and one from 51031 to 51036.

For instrumented spinal fusion with interbody and posterolateral bone graft (with or without cages) and decompression, four item numbers are selected: one from one from 51011 to 51015, one from 51020 to 51026, one from 51031 to 51036 and one from 51041 to 51045.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51020	Simple fixation of part of one vertebra (not motion segment) including pars interarticularis, spinous process or pedicle, or simple interspinous wiring between 2 adjacent vertebral levels, not being a service associated with: (a) interspinous dynamic stabilisation devices; or (b) a service to which item 51021, 51022, 51023, 51024, 51025 or 51026 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.143 <u>Multiple operations rule</u>		Fee: \$765.45 Benefit: 75% = \$574.10

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51021	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including sublaminar tapes or wires, one motion segment, not being a service associated with a service to which item 51020, 51022, 51023, 51024, 51025 or 51026 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.143 <u>Multiple operations rule</u>		Fee: \$1,281.20 Benefit: 75% = \$960.90

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51022	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including sublaminar tapes or wires, 2 motion segments, not being a service associated with a service to which item 51020, 51021, 51023, 51024, 51025 or 51026 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.143 <u>Multiple operations rule</u>		Fee: \$1,593.70 Benefit: 75% = \$1,195.30



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51023	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including sublaminar tapes or wires, 3 or 4 motion segments, not being a service associated with a service to which item 51020, 51021, 51022, 51024, 51025 or 51026 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.143</u> <u>Multiple operations rule</u>		Fee: \$1,896.60 Benefit: 75% = \$1,422.45

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51024	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including sublaminar tapes or wires, 5 or 6 motion segments, not being a service associated with a service to which item 51020, 51021, 51022, 51023, 51025 or 51026 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.143</u> <u>Multiple operations rule</u>		Fee: \$2,189.60 Benefit: 75% = \$1,642.20

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51025	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including sublaminar tapes or wires, 7 to 12 motion segments, not being a service associated with a service to which item 51020, 51021, 51022, 51023, 51024 or 51026 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.143</u> <u>Multiple operations rule</u>		Fee: \$2,559.20 Benefit: 75% = \$1,919.40

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	Fee
51026	Fixation of motion segment with vertebral body screw, pedicle screw or hook instrumentation including sublaminar tapes or wires, more than 12 motion segments, not being a service associated with a service to which item 51020, 51021, 51022, 51023, 51024 or 51025 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.143</u> <u>Multiple operations rule</u>		Fee: \$2,801.90 Benefit: 75% = \$2,101.45



Item 51031 to 51036 – Posterior and/or Posterolateral (intertransverse or facet joint) bone graft (cervical, thoracic and lumbar)

Explanatory Note TN.8.144: Posterior and/or Posterolateral (intertransverse or facet joint) bone graft (cervical, thoracic and lumbar) - Items 51031 to 51036

Items 51031 to 51036 are for services which include local morcellized, artificial or harvested bone graft with or without bone morphogenic protein (BMP).

For posterolateral spinal fusion without instrumentation, if a decompression is combined with the fusion, two items numbers are selected: one from 51011 to 51015 and one from 51031 to 51036.

For posterolateral spinal fusion with instrumentation, two item numbers are selected: one from 51020 to 51026 and one from 51031 to 51036. If decompression is also performed, three items are selected: one from 51011 to 51015, one from 51020 to 51026 and one from 51031 to 51036.

For instrumental spinal fusion with interbody and posterolateral bone graft (with or without cages) and decompression, four item numbers are selected: one from one from 51011 to 51015, one from 51020 to 51026, one from 51031 to 51036 and one from 51041 to 51045.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51031	Spine, posterior and/or posterolateral bone graft to, one motion segment, not being a service associated with a service to which item 51032, 51033, 51034, 51035 or 51036 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.144 <u>Multiple operations rule</u>		Fee: \$941.45 Benefit: 75% = \$706.10

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51032	Spine, posterior and/or posterolateral bone graft to, 2 motion segments, not being a service associated with a service to which item 51031, 51033, 51034, 51035 or 51036 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.144 <u>Multiple operations rule</u>		Fee: \$1,129.75 Benefit: 75% = \$847.30

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51033	Spine, posterior and/or posterolateral bone graft to, 3 motion segments, not being a service associated with a service to which item 51031, 51032, 51034, 51035 or 51036 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.144 <u>Multiple operations rule</u>		Fee: \$1,318.05 Benefit: 75% = \$988.55

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51034	Spine, posterior and/or posterolateral bone graft to, 4 to 7 motion segments, not being a service associated with a service to which item 51031, 51032, 51033, 51035 or 51036 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.144 <u>Multiple operations rule</u>		Fee: \$1,412.20 Benefit: 75% = \$1059.15



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51035	Spine, posterior and/or posterolateral bone graft to, 8 to 11 motion segments, not being a service associated with a service to which item 51031, 51032, 51033, 51034 or 51036 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.144</u> <u>Multiple operations rule</u>		Fee: \$1,506.30 Benefit: 75% = \$1,129.75

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51036	Spine, posterior and/or posterolateral bone graft to, 12 or more motion segments, not being a service associated with a service to which item 51031, 51032, 51033, 51034 or 51035 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.144</u> <u>Multiple operations rule</u>		Fee: \$1,600.50 Benefit: 75% = \$1,200.40



Item 51041 to 51045 – Anterior column fusion, with or without implant, or limited vertebrectomy (less than 50%) (cervical, thoracic and lumbar)

Explanatory Note TN.8.145: Anterior column fusion, with or without implant, or limited vertebrectomy (less than 50%) and anterior fusion (cervical, thoracic and lumbar) - Items 51041 to 51045

Items 51041 to 51045 are for services which include placement of local morcellized, artificial, harvested bone graft, bone morphogenic protein (BMP) and prosthetic devices into the intervertebral space. Artificial bone grafting materials must be used in accordance with the manufacturer’s instructions.

Items 51041 to 51045 are to be selected irrespective of surgical approach (anterior, direct lateral or posterior via open or minimally invasive techniques).

For instrumented spinal fusion with interbody and posterolateral bone graft (with or without cages) and decompression, four item numbers are selected: one from one from 51011 to 51015, one from 51020 to 51026, one from 51031 to 51036 and one from 51041 to 51045.

For and instrumented anterior cervical decompression and fusion, (with or without cage) three items are selected: one from 51011 to 51015, one from 51020 to 51026, and one from 51041 to 51045.

Items 51041 to 51045 cannot be claimed with any item between 51051 and 51059 if performed at the same motion segment.

If an assisting surgeon is used at any time during the procedure, then 51160 or 51165 (see miscellaneous procedures on pages 17-20) should be used in isolation by the assisting surgeon. If the assisting surgeon needs to perform complex non-spinal surgery, they may use a more appropriate item from outside the spinal surgery schedule.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51041	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), one motion segment, not being a service associated with a service to which item 51042, 51043, 51044 or 51045 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.145 <u>Multiple operations rule</u>	Fee: \$1,082.70 Benefit: 75% = \$812.05

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51042	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 2 motion segments, not being a service associated with a service to which item 51041, 51043, 51044 or 51045 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.145 <u>Multiple operations rule</u>	Fee: \$1,515.80 Benefit: 75% = \$1,136.85

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51043	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 3 motion segments, not being a service associated with a service to which item 51041, 51042, 51044 or 51045 applies (H) (Anaes.) (Assist.) TN.8.141 TN.8.145 <u>Multiple operations rule</u>	Fee: \$1,894.75 Benefit: 75% = \$1,421.10



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51044	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 4 motion segments, not being a service associated with a service to which item 51041, 51042, 51043 or 51045 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.145</u> <u>Multiple operations rule</u>		Fee: \$2,057.15 Benefit: 75% = \$1,542.90

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51045	Spinal fusion, anterior column (anterior, direct lateral or posterior interbody), 5 or more motion segments, not being a service associated with a service to which item 51041, 51042, 51043 or 51044 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.145</u> <u>Multiple operations rule</u>		Fee: \$2,165.40 Benefit: 75% = \$1,624.05



Item 51051 to 51059 – Spinal Osteotomy and/or vertebrectomy

Explanatory Note TN.8.146: Spinal Osteotomy and/or vertebrectomy - Items 51051 to 51059

Items 51051 to 51059 are intended for spinal osteotomy and/or vertebrectomy at any level.

For the purpose of items 51054, 51055 and 51056, the definition of piecemeal or subtotal excision is the removal of at least 50% of the vertebral body.

Items 51051 to 51059 cannot be claimed with any item between 51041 and 51045 if performed at the same motion segment.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51051	Pedicle subtraction osteotomy, one motion segment, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which item 51052, 51053, 51054, 51055, 51056, 51057, 51058 or 51059 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.146</u> <u>Multiple operations rule</u>	Fee: \$1,850.00 Benefit: 75% = \$1,387.50

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51052	Pedicle subtraction osteotomy, 2 motion segments, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which item 51051, 51053, 51054, 51055, 51056, 51057, 51058 or 51059 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.146</u> <u>Multiple operations rule</u>	Fee: \$2,250.00 Benefit: 75% = \$1,687.50

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51053	Vertebral column resection osteotomy performed through single posterior approach, one motion segment, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which item 51051, 51052, 51054, 51055, 51056, 51057, 51058 or 51059 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.146</u> <u>Multiple operations rule</u>	Fee: \$2,560.00 Benefit: 75% = \$1,917.00



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51054	<p>Vertebral body, piecemeal or subtotal excision of (where piecemeal or subtotal excision is defined as removal of more than 50% of the vertebral body), one vertebra, not being a service associated with:</p> <p>(a) anterior column fusion when at the same motion segment; or</p> <p>(b) a service to which item 51051, 51052, 51053, 51055, 51056, 51057, 51058 or 51059 applies</p> <p>(H) (Anaes.) (Assist.)</p> <p><u>TN.8.141</u> <u>TN.8.146</u></p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$1,365.00</p> <p>Benefit: 75% = \$1,023.75</p>

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51055	<p>Vertebral body, piecemeal or subtotal excision of (where piecemeal or subtotal excision is defined as removal of more than 50% of the vertebral body), 2 vertebrae, not being a service associated with:</p> <p>(a) anterior column fusion when at the same motion segment; or</p> <p>(b) a service to which item 51051, 51052, 51053, 51054, 51056, 51057, 51058 or 51059 applies</p> <p>(H) (Anaes.) (Assist.)</p> <p><u>TN.8.141</u> <u>TN.8.146</u></p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$2,047.50</p> <p>Benefit: 75% = \$1,535.65</p>

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51056	<p>Vertebral body, piecemeal or subtotal excision of (where piecemeal or subtotal excision is defined as removal of more than 50% of the vertebral body), 3 or more vertebrae, not being a service associated with:</p> <p>(a) anterior column fusion when at the same motion segment; or</p> <p>(b) a service to which item 51051, 51052, 51053, 51054, 51055, 51057, 51058 or 51059 applies</p> <p>(H) (Anaes.) (Assist.)</p> <p><u>TN.8.141</u> <u>TN.8.146</u></p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$2,388.75</p> <p>Benefit: 75% = \$1,791.60</p>



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51057	Vertebral body, en bloc excision of (complete spondylectomy), one vertebra, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which item 51051, 51052, 51053, 51054, 51055, 51056, 51058 or 51059 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.146</u> <u>Multiple operations rule</u>	Fee: \$2,400.00 Benefit: 75% = \$1,800.00

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51058	Vertebral body, en bloc excision of (complete spondylectomy), 2 vertebrae, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which item 51051, 51052, 51053, 51054, 51055, 51056, 51057 or 51059 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.146</u> <u>Multiple operations rule</u>	Fee: \$2,700.50 Benefit: 75% = \$2,025.40

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51059	Vertebral body, en bloc excision of (complete spondylectomy), 3 or more vertebrae, not being a service associated with: (a) anterior column fusion when at the same motion segment; or (b) a service to which item 51051, 51052, 51053, 51054, 51055, 51056, 51057 or 51058 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.146</u> <u>Multiple operations rule</u>	Fee: \$3,300.00 Benefit: 75% = \$2,475.00



Item 51061 to 51066 – Anterior and Posterior (combined) Spinal fusion under one anaesthetic via separate incisions

Explanatory Note TN.8.147: Anterior and Posterior (combined) Spinal fusion under one anaesthetic via separate incisions - Items 51061 to 51066

Only one of these items should be billed for any appropriate combined anterior and posterior surgeries which are completed under one anaesthetic. The appropriate item is determined by the number of motion segments to which grafting and fusion occur.

These items cannot be claimed with any item between 51020 to 51026, 51031 to 51036 and 51041 to 51045.

If a laminectomy is included, an item from 51011 to 51015 can also be used appropriate to the level of decompression.

If spinal osteotomy or vertebrectomy (>50%) is performed as part of the combined anterior/posterior approach, it is appropriate to claim one item between 51051 to 51056 in addition to an item between 51061 to 51066.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51061	Spine fusion, anterior and posterior, including spinal instrumentation at one motion segment, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which item 51062, 51063, 51064, 51065 or 51066 applies (H) (Anaes.) (Assist) <u>TN.8.141</u> <u>TN.8.147</u> <u>Multiple operations rule</u>		Fee: \$2,834.65 Benefit: 75% = \$2,126.00

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51062	Spine fusion, anterior and posterior, including spinal instrumentation at 2 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which item 51061, 51063, 51064, 51065 or 51066 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.147</u> <u>Multiple operations rule</u>		Fee: \$3,674.35 Benefit: 75% = \$2,755.80

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51063	Spine fusion, anterior and posterior, including spinal instrumentation at 3 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which item 51061, 51062, 51064, 51065 or 51066 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.147</u> <u>Multiple operations rule</u>		Fee: \$4,450.35 Benefit: 75% = \$3,337.80



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51064	Spine fusion, anterior and posterior, including spinal instrumentation at 4 to 7 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which item 51061, 51062, 51063, 51065 or 51066 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.147</u> <u>Multiple operations rule</u>		Fee: \$4,952.85 Benefit: 75% = \$3,714.65

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51065	Spine fusion, anterior and posterior, including spinal instrumentation at 8 to 11 motion segments, posterior and/or posterolateral bone graft, and anterior column fusion, not being a service associated with a service to which item 51061, 51062, 51063, 51064 or 51066 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.147</u> <u>Multiple operations rule</u>		Fee: \$5,477.80 Benefit: 75% = \$4,108.35

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51066	Spine fusion, anterior and posterior, including spinal instrumentation at 12 or more motion segments, posterior and/or posterolateral bone graft, and anterior column fusion not being a service associated with a service to which item 51061, 51062, 51063, 51064 or 51065 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.147</u> <u>Multiple operations rule</u>		Fee: \$5,767.50 Benefit: 75% = \$4,325.65



Item 51071 to 51073 – Intradural Procedures

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51071	Removal of intradural lesion, not being a service associated with a service to which item 51072 or 51073 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$2,500.00 Benefit: 75% = \$1,875.00

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51072	Craniocervical junction lesion, transoral approach for, not being a service associated with a service to which item 51071 or 51073 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$2,600.00 Benefit: 75% = \$1,950.00

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51073	Removal of intramedullary tumour or arteriovenous malformation, not being a service associated with a service to which item 51071 or 51072 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$3,300.00 Benefit: 75% = \$2,475.00



Item 51102 to 51171 – Miscellaneous Spinal Procedures (cervical, thoracic and lumbar)

Items **51102 to 51171** are miscellaneous spinal procedures which can be claimed with appropriate items from the spinal surgery schedule.

Explanatory Note TN.8.148: Odontoid Screw fixation – Item 51103

This item is not for use when another item is claimed for the management of the odontoid fracture.

Explanatory Note TN.8.149: Application of items 51160 and 51165

If the spine surgeon performs their own exposure to the thoracic or lumbar spine then **51160** or **51165** can be added to the claim for the overall surgery. If an access surgeon is used at any time during the procedure, then **51160** or **51165** should be used in isolation by the access surgeon. If the access surgeon needs to perform complex non-spinal surgery, they may use a more appropriate item but not in combination with **51160** or **51165**. If an access surgeon claims a number from any section of the MBS schedule, the spinal surgeon cannot claim **51160** or **51165**.

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51102	Thoracoplasty in combination with thoracic scoliosis correction—3 or more ribs (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$1,183.40 Benefit: 75% = \$887.55

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51103	Odontoid screw fixation (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.148</u> <u>Multiple operations rule</u>		Fee: \$2,079.75 Benefit: 75% = \$1,559.80

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51110	Spine, treatment of fracture, dislocation or fracture dislocation, with immobilisation by calipers or halo, not including application of skull tongs or calipers as part of operative positioning (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$753.25

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51111	Skull calipers or halo, insertion of, as an independent procedure (H) (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$320.15 Benefit: 75% = \$240.10



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51112	Plaster jacket, application of, as an independent procedure (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$216.50
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51113	Halo, application of, in addition to spinal fusion for scoliosis, or other conditions (H) (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$240.05 Benefit: 75% = \$180.05
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51114	Halo thoracic orthosis—application of both halo and thoracic jacket (H) (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$423.75 Benefit: 75% = \$317.80
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51115	Halo femoral traction, as an independent procedure (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$423.75
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51120	Bone graft, harvesting of autogenous graft, via separate incision or via subcutaneous approach, in conjunction with spinal fusion, other than for the purposes of bone graft obtained from the cervical, thoracic, lumbar or sacral spine (H) (Anaes.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$235.50 Benefit: 75% = \$176.65
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51130	Lumbar artificial intervertebral total disc replacement, at one motion segment only, including removal of disc and marginal osteophytes: (a) for a patient who: (i) has not had prior spinal fusion surgery at the same lumbar level; and (ii) does not have vertebral osteoporosis; and (iii) has failed conservative therapy; and (b) not being a service associated with a service to which item 51011, 51012, 51013, 51014 or 51015 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$1,793.65 Benefit: 75% = \$1,345.25



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51131	<p>Cervical artificial intervertebral total disc replacement, at one motion segment only, including removal of disc and marginal osteophytes, for a patient who:</p> <p>(a) has not had prior spinal surgery at the same cervical level; and</p> <p>(b) is skeletally mature; and</p> <p>(c) has symptomatic degenerative disc disease with radiculopathy; and</p> <p>(d) does not have vertebral osteoporosis; and</p> <p>(e) has failed conservative therapy</p> <p>(H) (Anaes.) (Assist.) TN.8.141</p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$1,082.70</p> <p>Benefit: 75% = \$812.05</p>

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51140	<p>Previous spinal fusion, re exploration for, involving adjustment or removal of instrumentation up to 3 motion segments, not being a service associated with a service to which item 51141 applies (H) (Anaes.) (Assist.) TN.8.141</p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$442.45</p> <p>Benefit: 75% = \$331.85</p>

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51141	<p>Previous spinal fusion, re exploration for, involving adjustment or removal of instrumentation more than 3 motion segments, not being a service associated with a service to which item 51140 applies (H) (Anaes.) (Assist.) TN.8.141</p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$818.55</p> <p>Benefit: 75% = \$613.90</p>

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51145	<p>Wound debridement or excision for post-operative infection or haematoma following spinal surgery (H) (Anaes.) TN.8.141</p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$442.45</p> <p>Benefit: 75% = \$331.85</p>

Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery
51150	<p>Coccyx, excision of (H) (Anaes.) (Assist.) TN.8.141</p> <p><u>Multiple operations rule</u></p>	<p>Fee: \$445.40</p> <p>Benefit: 75% = \$334.05</p>



Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51160	Anterior exposure of thoracic or lumbar spine, one motion segment, not being a service to which item 51165 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.149</u> <u>Multiple operations rule</u>		Fee: \$1,150.00 Benefit: 75% = \$862.50
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	Fee
51165	Anterior exposure of thoracic or lumbar spine, more than one motion segment, not being a service to which item 51160 applies (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>TN.8.149</u> <u>Multiple operations rule</u>		Fee: \$1,450.00 Benefit: 75% = \$1,087.50
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51170	Syringomyelia or hydromyelia, craniotomy for, with or without duraplasty, intradural dissection, plugging of obex or local cerebrospinal fluid shunt (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$2,184.60 Benefit: 75% = \$1,638.45
Group T8 – Surgical Operation		Subgroup 17 – Spinal Surgery	
51171	Syringomyelia or hydromyelia, treatment by direct cerebrospinal fluid shunt (for example, syringosubarachnoid shunt, syringopleural shunt or syringoperitoneal shunt) (H) (Anaes.) (Assist.) <u>TN.8.141</u> <u>Multiple operations rule</u>		Fee: \$917.40 Benefit: 75% = \$688.05