



DIAGNOSTIC AUDIOLOGY SERVICES UNDER MEDICARE (MBS ITEMS 82300 TO 82332)

As part of a 2012-13 Budget measure, Medicare items were introduced on 1 November 2012 for diagnostic audiology services performed by an audiologist. The items enable an audiologist to perform diagnostic tests upon written request from an Ear, Nose and Throat (ENT) specialist or, for some services, a neurologist.

Role of diagnostic audiology

'Diagnostic audiology' involves the assessment and diagnosis of hearing loss, ear disease or related disorders.

The new diagnostic audiology items enable an ENT specialist or neurologist to request diagnostic audiology tests from an audiologist, for patients with potential medical conditions including ear disease or related disorders, or patients whose hearing loss may be able to be corrected by surgery or medical intervention. Once the tests are performed, the results are provided back to the requesting ENT specialist or neurologist to assist in their medical diagnosis, treatment and/or management of the patient's condition.

NOTE:

The diagnostic audiology services available under Medicare are not for hearing screening, nor should they be confused with the Australian Government Hearing Services Program, which provides a range of rehabilitation services for eligible client groups, including hearing assessment, hearing aids provision and maintenance (refer to the [Hearing Services Program website](http://www.health.gov.au/hear) at www.health.gov.au/hear or phone 1800 500 726 for more information).

What the diagnostic audiology items mean:

- **for patients**

Patients will receive a Medicare rebate when an audiologist provides a diagnostic test using one of the specific new items (in response to a request from an ENT specialist or neurologist).

- **for audiologists**

The new items recognise the qualifications of audiologists and their capacity to perform diagnostic audiology tests independently.

- **for ENT specialists and neurologists**

Medicare items for diagnostic audiology tests are already available when provided by, or on behalf of, a medical practitioner under MBS items 11300 to 11339 (excluding MBS item 11304, which must be performed by a medical practitioner personally).

The introduction of Medicare items for audiologists provides an additional clinical pathway to diagnostic audiology services funded under Medicare.

ENT specialists and neurologists can continue with their existing arrangements, or they can request diagnostic audiology services from an audiologist under the new items.

Diagnostic audiology items/tests

Item*	Diagnostic test*
82300	Brain stem evoked response audiometry
82306	Non-determinate audiometry
82309	Air conduction audiogram
82312	Air and bone conduction audiogram OR air conduction and speech discrimination audiogram
82315	Air and bone conduction and speech discrimination audiogram
82318	Air and bone conduction and speech discrimination audiogram with other cochlear tests
82324	Impedance audiogram involving tympanometry and measurement of static compliance and acoustic reflex (<u>not</u> in association with items 82309, 82312, 82315 or 82318)
82327	Impedance audiogram involving tympanometry and measurement of static compliance and acoustic reflex (in association with items 82309, 82312, 82315 or 82318)
82332	Oto-acoustic emission audiometry for the detection of a permanent congenital hearing impairment performed on an 'at risk' child or infant.

* Medicare benefits are payable subject to the requirements outlined in the [MBS item descriptors and explanatory notes](#), which are available at [MBS Online \(www.mbsonline.gov.au\)](#).

Eligibility requirements for audiologists

Audiologists must be in private practice, have a Medicare provider number from the Department of Human Services (Medicare) and be either:

- a 'Full Member' of Audiology Australia who holds a Certificate of Clinical Practice; or
- an 'Ordinary Member - Audiologist' or 'Fellow Audiologist' of the Australian College of Audiology.

Applications for a provider number may be obtained from Medicare on 132 150 or at the [Department of Human Services website \(www.humanservices.gov.au\)](#). Audiologists who already have a provider number to provide services under items 10952, 81310, 82030 or 82035 do not need to register separately with Medicare to provide services under items 82300 to 82332.

Requesting arrangements

Medicare benefits are payable only under the following circumstances:

- For item 82300 and item 82306, a written request must be made by an ENT specialist only.
- For the remaining items 82309 to 82332, the written request must be made by either an ENT specialist or a neurologist.

Note: For Medicare purposes, an ENT specialist is a specialist in the specialty of 'otolaryngology head and neck surgery' and a neurologist is a specialist or consultant physician in the specialty of 'neurology'.

A written request must contain:

- (a) the date of the request; and
- (b) the name of the requesting practitioner and his/her practice address or provider number;
- (c) a description of the specific service/s to be performed; and
- (d) where possible, the clinical indication for the service/s.

A request may be for more than one diagnostic audiology service (ie. more than one item) making up an audiological assessment, but cannot be for more than one audiological assessment. This means that for Medicare benefits to be payable, any re-evaluation of the patient should be made at the discretion of the ENT specialist or neurologist through a separate request.

Audiologists do not have the discretion to self-determine diagnostic tests under items 82300 to 82332. If a written request is incomplete, or an audiologist considers that additional tests may be necessary,

the audiologist should contact the requesting ENT specialist or neurologist to discuss or seek clarification.

It is recommended that audiologists retain the written request for 24 months from the date the service was rendered, for Medicare auditing purposes. A copy of the written request is not required to accompany Medicare claims or be attached to patients' itemised accounts/receipts or assignment of benefit forms.

Reporting requirements

Upon performance of the diagnostic audiology service to the patient, the audiologist must provide a copy of the results of the service performed, together with relevant written comments on those results, to the requesting ENT specialist or neurologist. It is recommended that these be provided within 7 days of the date the service was performed.

Out-of-pocket expenses and Medicare Safety Net

Audiologists are free to determine their own fees for the professional service. The Government encourages all private health providers, including audiologists, to let patients know what fees they will incur before they receive services and to obtain the patient's agreement to proceed – this is known as 'informed financial consent'.

Charges in excess of the Medicare benefit are the responsibility of the patient. Out-of-pocket costs for eligible services will count toward the Medicare Safety Net for the patient.

Private health insurance

Patients need to decide if they will use Medicare or their private health insurance ancillary cover (if available) to pay for these services. Patients cannot use their private health insurance ancillary cover to 'top up' the Medicare rebate paid.

Further Australian Government support for hearing services

In addition to Medicare rebates for diagnostic audiology services, Medicare rebates for audiology services are also available to the following patients (subject to an appropriate referral being in place):

- people with a chronic or terminal medical condition and complex care needs (through MBS item 10952);
- people of Aboriginal and Torres Strait Islander descent who have had a health assessment (through MBS item 81310); and
- children with autism, pervasive development disorder or an eligible disability (through MBS item 82030 for assessment services and MBS item 82035 for treatment services).

Further information on these Medicare services is available through:

- [Fact sheets](#), which are available at www.health.gov.au/mbsprimarycareitems ;
- [MBS item descriptors and explanatory notes](#) available at [MBS Online \(www.mbsonline.gov.au\)](http://www.mbsonline.gov.au); and
- the Department of Human Services (Medicare) on phone 132 011 (General patient enquiries) or phone 132 150 (Provider enquiries).

In relation to hearing assessment, hearing aids provision and maintenance, the Department of Health and Ageing's Office of Hearing Services is responsible for managing and administering the Australian Government Hearing Services Program (the Program). The Program provides eligible clients with access to a range of hearing services either through the hearing services voucher component or the Community Service Obligations component of the Program.

Further information on the Australian Government Hearing Services Program is available through:

- the [Hearing Services Program website](#) at www.health.gov.au/hear; and
- By phoning the Office of Hearing Services on 1800 500 726 (Client Services and General Enquiries) or 1800 136 817 (for Hearing Professionals).