1 August 2026 Pathology Services Changes

Last updated: 24 July 2026

From **1 August 2026**, changes will apply to selected Medicare Benefits Schedule (MBS) pathology services. The changes include one new genetic testing item.

These changes will affect all health professionals who request, provide, bill or claim these services under the MBS. They will also affect patients who receive these services and private health insurers.

What are the changes?

Effective **1 August 2026**, a new MBS item **73331** will be MBS listed for tumour tissue testing to detect RET gene activating variant status in patients with medullary thyroid cancer for eligibility for a relevant treatment under the Pharmaceutical Benefits Schedule (PBS) (including selpercatinib). It is scheduled to coincide with the listing of selpercatinib on the PBS.

MBS item **73331** is a pathologist-determinable service. This allows approved pathology practitioners to determine whether to conduct the *RET* gene test following outcomes of other pathology tests (such as histological examination), without requiring a new request.

For private health insurance purposes, MBS item **73331** will be listed under the following clinical category and procedure type:

- Clinical category: Support List (pathology)
- Procedure type: Type C

Why are the changes being made?

The Medical Services Advisory Committee (MSAC) recommended these changes. Further details about MSAC applications can be found under MSAC Applications on the MSAC website (Medical Services Advisory Committee).

These changes reflect best clinical practice and will improve the quality and accessibility of Medicare pathology services. Overall, the changes support improved patient care.

What does this mean for providers?

Providers can claim assigned Medicare benefits for eligible RET gene activating variant testing under item 73331.

- Pathologists can determine when *RET* gene activating variant testing is clinically appropriate, without a new test request.

To be eligible for Medicare benefits, pathology providers must be accredited in accordance with the pathology accreditation standards specified in the *Health Insurance (Accredited Pathology Laboratories-Approval) Principles 2017*.

How will these changes affect patients?

Patients may have better access to clinically appropriate RET testing. This may support safer prescribing and improved health outcomes.

Who was consulted on the changes?

The Department of Health Disability and Ageing (department) consulted with a range of stakeholders including experts from the pathology sector. Stakeholders consulted on these changes included:

- Australian Pathology
- Australian Thyroid Foundation
- Genomics Australia
- National Pathology Accreditation Advisory Council
- Neuroendocrine Cancer Australia
- Omico
- Public Pathology Australia
- Rare Cancers Australia
- The Royal College of Pathologists of Australasia
- The RCPA Quality Assurance Programs
- Therapeutic Goods Administration

How will the changes be monitored and reviewed?

Providers are responsible for ensuring Medicare services claimed using their provider number meet all legislative requirements. All Medicare claiming is subject to compliance checks and providers may be required to submit evidence about the services they bill. More information about the department's compliance program can be found on its website at Medicare compliance.

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. You can also subscribe to future MBS updates by visiting 'Subscribe to the MBS' on the MBS Online website.

Providers seeking advice on interpretation of MBS items, explanatory notes and associated legislation can use the department's email advice service by emailing askMBS@health.gov.au.

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

Subscribe to 'News for Health Professionals' on the Services Australia website to 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 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.

New item descriptors (to take effect 1 August 2026)

Category 6 – Pathology Services

Group P7 − Genetics

73331

A test of tumour tissue from a patient with histologically confirmed medullary thyroid cancer requested by, or on behalf of, a specialist or consultant physician if the test is:

a) to detect variants relating to at least the *RET* gene activating variant status, and

b) to determine eligibility for a relevant treatment listed on the Pharmaceutical Benefits Scheme

(See PN.1.2 of explanatory notes to this Category).

Fee: $400.00 Benefit: 75% = $300.00 and 85% = $340.00

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.