



## Quick Reference Guide:

### New and amended items for leadless permanent cardiac pacemaker

**Date of change:** 1 November 2023

**Amended item:** 90300

**New items:** 38372 38373 38374 38375

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### Revised structure

- From 1 November 2023, four new Medicare Benefits Schedule (MBS) items will be introduced, and one item amended for the insertion, replacement, or removal of a leadless permanent cardiac pacemaker (LPM) for the treatment of patients with bradyarrhythmia.
- The introduction of these new items was supported by the Medical Services Advisory Committee (MSAC) in July 2022 and approved for funding on the MBS in the 2023-24 Budget. Further details about MSAC applications can be found under [MSAC Applications](#) on the MSAC website ([Medical Services Advisory Committee](#)).

### Patient impacts

- The changes support high value care and ensure patient safety. These changes reflect modern clinical practice and will ensure patients receive a Medicare benefit for LPM services when clinically appropriate.
- Patients will now have access to an alternative cardiac pacemaker option when a transvenous pacemaker is contraindicated or due to anatomical restrictions cannot be used.

### Restrictions or requirements

- Providers will need to familiarise themselves with these changes and any associated rules and/or explanatory notes. Providers have a responsibility to ensure that any services they bill to Medicare fully meet the eligibility requirements outlined in the legislation.

- A same day co-claiming block will be put in place for the following item: 38350.
- This procedure is only appropriate to be performed in the in-hospital setting (benefit 75%).
- This service may be routinely claimed with item 61109 for the purposes of device placement.
- For the purposes of anaesthesia of the patient it is expected that item 21941 would be claimed for the initiation and item 23025 to reflect the expected time the patient is anaesthetised.
- Specialists or consultant physicians claiming items 38373 and 38374 should have training recognised by the Lead Extraction Certification Committee of the Cardiac Society of Australia and New Zealand (CSANZ). If the services associated with items 38373 and 38374 are undertaken beyond four weeks from the initial insertion, the procedure must be undertaken:
  - in a hospital capable of providing cardiac surgery;
  - with a cardiothoracic surgeon in attendance during the service, other than during the low risk pre and post extraction phases, and is able to immediately scrub in and perform a thoracotomy if major complications occur.

## Amended item 90300 – Professional attendance by a cardiothoracic surgeon in the practice of the surgeon’s speciality

**Overview:** This item has been amended to include the new LPM service under a professional attendance of a cardiothoracic surgeon to provide immediate surgical backup.

### Service/Descriptor:

Professional attendance by a cardiothoracic surgeon in the practice of the surgeon’s speciality, if:

- (a) the service is:
    - (i) performed in conjunction with a service (the lead extraction service) to which item 38358 applies; or
    - (ii) performed in conjunction with a service (the leadless pacemaker extraction service) to which item 38373 or 38374 applies; and
  - (b) the surgeon:
    - (i) is providing surgical backup for the provider (who is not a cardiothoracic surgeon) who is performing the lead extraction service or the leadless pacemaker extraction service; and
    - (ii) is present for the duration of the lead extraction service or the leadless pacemaker extraction service, other than during the low risk pre and post extraction phases; and
    - (iii) is able to immediately scrub in and perform a thoracotomy if major complications occur
- (H)

**MBS Fee:** \$947.00

**Benefit:** 75% = \$710.25

**Private Health Insurance Classification:**

- **Clinical category:** Heart and Vascular System
- **Procedure type:** Unlisted

## New item 38372 – LPM, percutaneous insertion of

**Overview:** This item has been created for the insertion of a LPM.

Leadless permanent cardiac pacemaker, single-chamber ventricular, percutaneous insertion of, for the treatment of bradycardia, including cardiac electrophysiological services (other than a service associated with a service to which item 38350 applies)

(H) (Anaes.)

**Fee:** \$830.30 **Benefit:** 75% = \$622.70

**Private Health Insurance Classification:**

- **Clinical category:** Heart and Vascular System
- **Procedure type:** Type A Surgical

## New item 38373 – LPM, percutaneous retrieval and replacement of

**Overview:** This item has been created for retrieval and replacement of a LPM.

Leadless permanent cardiac pacemaker, single-chamber ventricular, percutaneous retrieval and replacement of, including cardiac electrophysiological services, during the same percutaneous procedure, if:

(a) the service is performed:

- (i) by a specialist or consultant physician who has undertaken training to perform the service; and
- (ii) in a facility where cardiothoracic surgery is available and a thoracotomy can be performed immediately and without transfer; and

(b) if the service is performed by an interventional cardiologist at least 4 weeks after the leadless permanent cardiac pacemaker was inserted—a cardiothoracic surgeon is in attendance during the service;

other than a service associated with a service to which item 38350 applies

(H) (Anaes.)

**Fee:** \$830.30 **Benefit:** 75% = \$622.70

**Private Health Insurance Classification:**

- **Clinical category:** Heart and Vascular System
- **Procedure type:** Type A Surgical

## New item 38374 – LPM, percutaneous retrieval of

**Overview:** This item has been created for retrieval of a LPM. Specialists or consultant physicians claiming item 38374 must have training recognised by the Lead Extraction and Leadless Pacemaker Extraction Advisory Committee of the Cardiac Society of Australia and New Zealand, and Services Australia notified of that recognition. The procedure should only be undertaken in a hospital capable of providing cardiac surgery.

Leadless permanent cardiac pacemaker, single-chamber ventricular, percutaneous retrieval of, if:

- (a) the service is performed:
- (i) by a specialist or consultant physician who has undertaken training to perform the service; and
  - (ii) in a facility where cardiothoracic surgery is available and a thoracotomy can be performed immediately and without transfer; and
- (b) if the service is performed by an interventional cardiologist at least 4 weeks after the leadless permanent cardiac pacemaker was inserted—a cardiothoracic surgeon is in attendance during the service

(H) (Anaes.)

**Fee:** \$830.30 **Benefit:** 75% = \$622.70

**Private Health Insurance Classification:**

- **Clinical category:** Heart and Vascular System
- **Procedure type:** Type A Surgical

## New item 38375 – LPM, explantation of

**Overview:** This item has been created for explantation of a LPM.

Leadless permanent cardiac pacemaker, single-chamber ventricular, explantation of, by open surgical approach

(H) (Anaes.) (Assist.)

**Fee:** \$3,107.15 **Benefit:** 75% = \$2,330.36

**Private Health Insurance Classification:**

- **Clinical category:** Heart and Vascular System
- **Procedure type:** Type A Surgical

To view previous item descriptors and deleted items, visit MBS Online at [www.mbsonline.gov.au](http://www.mbsonline.gov.au), navigate to 'Downloads' and then select the relevant time period at the bottom of the page. The old items can then be viewed by downloading the MBS files published in the month before implementation of the changes.

**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.**