New Medicare Benefits Schedule (MBS) items for obstetric magnetic resonance imaging (MRI) of patients at ≥ 18 weeks gestation with suspected fetal central nervous system abnormality

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What are the new services?

From 1 May 2019, Medicare rebates will be available for two new items covering obstetric MRI imaging for patients at \geq 18 weeks gestation in whom a fetal central nervous system abnormality is suspected and diagnosis is indeterminate (MBS items 63454 (K) and 63460 (NK)).

The obstetric MRI service will not be available as a stand-alone screening test for fetal abnormalities, but should only be offered after a tertiary ultrasound has not provided or cannot provide sufficient or complete diagnostic information.

Specialist obstetricians who provide the pre-test tertiary ultrasound must have certification in maternal fetal medicine or obstetrical and gynaecological ultrasound.

The new service is expected to inform better clinical decision making, compared to using tertiary ultrasound for central nervous system anomalies.

The MBS fee for item 63454 (K) will be \$1200. The MBS fee for item 63460 (NK) will be \$600.

Who can request these items?

These items can be requested by specialist obstetricians only. General practitioners and other types of specialists and consultant physicians are not eligible to request these items.

What are the patient eligibility requirements?

The obstetric MRI scans are for patients at ≥ 18 weeks' gestation in whom a fetal central nervous system abnormality is suspected and where diagnosis via tertiary ultrasound is indeterminate.

Are there any restrictions on the number of services?

There are no restrictions on the number of services that can be provided to a patient. Multiple examinations can be undertaken where clinically necessary, although this is expected to apply only in a limited number of cases.

Where can the procedure take place to be eligible for a Medicare rebate?

Medicare benefits are only payable for obstetric MRI scans performed under the professional supervision of an eligible provider at an eligible location and when the service is performed on an eligible MRI unit with either full or partial Medicare eligibility. A complete list of full and partial Medicare-eligible units by state and territory is available at MRI unit locations.



Find out more

See the Medical Services Advisory Committee's website for more information about the committee's recommendation to list the service via www.msac.gov.au.