



New Medicare Benefits Schedule (MBS) items for magnetic resonance imaging (MRI) for breast cancer factsheet

Last updated: 9/09/2019

What are the changes?

From 1 November 2019, Medicare rebates will be available for two new services for MRI for breast cancer. The new services are:

- New items (63531 (K) and 63532 (NK)) for MRI of both breasts where the patient has a breast lesion, the results of conventional imaging examinations are inconclusive for the presence of breast cancer, and biopsy has not been possible.
- New items (63533 (K) and 63534 (NK)) for MRI of both breasts where the patient has been diagnosed with breast cancer, discrepancy exists between clinical assessment and conventional imaging assessment, and the results of breast MRI may alter treatment planning.

A dedicated breast coil must be used for these new services. These services can be provided on both full and partial eligible MRI machines. A complete list of full and partial Medicare-eligible units by state and territory is available at [MRI unit locations](#).

Fee: \$690.00 (K) \$345.00 (NK)

Why are the changes being made?

The Government is listing these services as an interim measure for four years, to allow time for research to be undertaken through the Medical Research Future Fund (MRFF) on the benefits and effectiveness of these services and further consideration by the independent expert committee, the Medical Services Advisory Committee (MSAC).

Further details about MSAC applications can be found under [MSAC Applications](#) on the MSAC website www.msac.gov.au.

What does this mean for providers and referrers?

These new items may be requested by specialists or consultant physicians. General practitioners may not request these items.

These new items must be provided by a specialist in diagnostic radiology who is a participant of the Royal Australian and New Zealand College of Radiologists' (RANZCR) Quality and Accreditation Program at an eligible location.



How will these changes affect patients?

The changes will provide greater access for diagnosis for patients with possible breast cancer, and assist in treatment and surgical planning in patients with invasive breast cancer, leading to improved health outcomes.

It is estimated that 14,000 patients will benefit from these services each year.

Where can I find more information?

The full item descriptors and information on other changes to the MBS can be found on the MBS Online website at www.mbsonline.gov.au. You can also subscribe to future MBS updates by visiting [MBS Online](#) and clicking 'Subscribe'.

The Department of Health provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the Health Insurance Act and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email askMBS@health.gov.au.

Subscribe to '[News for Health Professionals](#)' on the Department of Human Services website and you will 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 Department of Human Services website or contact the Department of Human Services on the Provider Enquiry Line – 13 21 50.

The data file for software vendors is expected to become available on 1 October 2019 and can be accessed via the MBS Online website under the [Downloads](#) page.

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.