



Diagnostic Imaging Services and Therapeutic Nuclear Medicine Procedures – 1 November 2025 changes

Last updated: 8 October 2025

From 1 November 2025, there will be changes to nuclear medicine imaging, diagnostic radiology, ultrasound and therapeutic nuclear medicine procedures on the Medicare Benefits Schedule (MBS).

These changes will affect all health professionals who request, provide and bill these services under the MBS, as well as patients who receive the service, private health insurers and hospitals.

Key changes from 1 November 2025

Subject to the passage of legislation, effective 1 November 2025, changes to the *Health Insurance (Diagnostic Imaging Services Table) Regulations (No.2) 2020* include:

Nuclear medicine imaging

- For positron emission tomography (PET) services, the term '*comprehensive facility*' will be replaced with '*comprehensive practice*'. A *comprehensive practice* is defined as a medical practice or hospital radiology department that provides x-ray, ultrasound and computed tomography services. This change removes the requirement for PET services to be co-located with medical oncology, radiation oncology and surgical oncology services, recognising PET's broader diagnostic application.
- Providers of PET services will no longer need to submit a statutory declaration.
- All other requirements for the delivery of Medicare-eligible PET services will still need to be met.

Diagnostic radiology

- The MBS item descriptors for diagnostic x-ray items 57512 and 57515 will be amended to include the following anatomical combination: '*or wrist and forearm*'. This change provides clarity for providers that the items can be used for examination of the wrist and forearm with or without examination of the hand.

Ultrasound

- Sexual health physicians will be eligible to provide and supervise MBS items 55282 and 55284 (ultrasound of cavernosal artery of the penis), which will provide greater access to patients.

- Requesting rights for participating midwives will be expanded to cover MBS item 55065 (ultrasound of the pelvis) to maintain patient care and safety as part of the MS-2 Step medical abortion program.
- The following MBS items will be removed from the list of items able to be requested by podiatrists: 55889, 55891, 55893 and 55895. These are 'NR-type' services which do not require a request and therefore cannot be requested by podiatrists.

Subject to the passage of legislation, effective 1 November 2025, changes to the *Health Insurance (General Medical Services Table) Regulations 2021* (GMST) include:

Therapeutic nuclear medicine procedures

- Provider claiming restrictions will be implemented for MBS items in Category 3, Group T3. These services are provided by specialists or consultant physicians with training in nuclear medicine. This change will ensure appropriate claiming and the safe administration of therapeutic nuclear medicine to, and clinical management of, patients.
- Introduction of a new subgroup for MBS items 16003, 16006, 16009, 16012, 16015 and 16018 in Category 3, Group T3 of the GMST. These items will be in *Subgroup 1 – Administration of Nuclear Medicine*. This is an administrative change to provide clarity within the Group T3 structure following the introduction of theranostic items from 1 July 2025.

Why are the changes being made?

These changes are being made to ensure that diagnostic imaging services and therapeutic nuclear medicine procedures provided under Medicare are current, reflect best clinical practice and support ongoing patient access.

What does this mean for requesters and providers?

Requesters will benefit from improved clarity and should be aware of the changes to ensure that they request the most appropriate item.

Providers will see enhanced clarity and support for their services, particularly through the comprehensive practice and statutory declaration changes relating to PET services.

How will these changes affect patients?

These changes will enhance patient care by improving access to essential medical services and providing clarity in service provision. Patients will benefit from services that are contemporary and reflect best clinical practice.

Who was consulted on the changes?

The Department of Health, Disability and Ageing (the department) consulted with a range of stakeholders including experts from the diagnostic imaging and medical sectors, as well as consumer representative groups. Some of the stakeholders consulted for changes to the MBS included:

- Australasian Association of Nuclear Medicine Specialists
- Australian and New Zealand Society of Nuclear Medicine
- Australian College of Midwives
- Australian Diagnostic Imaging Association
- Australian Society of Medical Imaging and Radiation Therapy
- Royal Australasian College of Physicians
- Royal Australian and New Zealand College of Radiologists
- Royal Australian College of General Practitioners
- Rural Alliance in Nuclear Scintigraphy

How will the changes be monitored and reviewed?

The department regularly reviews the use of new and amended MBS items in consultation with the profession.

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.

Amended item descriptors (to take effect from 1 November 2025)

Category 5 – Diagnostic Imaging Services

Group I3 – Diagnostic Radiology - Subgroup 1 – Radiographic Examination of Extremities

57512

Hand and wrist, or hand, wrist and forearm, **or wrist and forearm**, or forearm and elbow, or elbow and humerus (NR)

Private Health Insurance Classification:

- Clinical category: Support list (DI)
- Procedure type: Type C

57515

Hand and wrist, or hand, wrist and forearm, **or wrist and forearm**, or forearm and elbow, or elbow and humerus (R)

Private Health Insurance Classification:

- Clinical category: Support list (DI)
- Procedure type: Type c

Category 5 – Diagnostic Imaging Services

Group I1 – Ultrasound - Subgroup 3 – Vascular

55282

Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements:

- (a) by spectral analysis of cavernosal artery of the penis following intracavernosal administration of a vasoactive agent; and
- (b) performed during the period of pharmacological activity of the injected agent, to confirm a diagnosis of vascular aetiology for impotence; and
- (c) if a specialist in diagnostic radiology, nuclear medicine, **sexual health medicine**, urology, general surgery (sub specialising in vascular surgery) or a consultant physician in nuclear medicine attends the patient in person at the practice location where the service is performed, immediately before or for a period during the performance of the service; and

Category 5 – Diagnostic Imaging Services

- (d) if the specialist or consultant physician interprets the results and prepares a report, not being a service associated with a service to which an item in Subgroup 4 applies (R)

Private Health Insurance Classification:

- Clinical category: Support list (DI)
- Procedure type: Type C

55284

Duplex scanning involving B mode ultrasound imaging and integrated Doppler flow measurements:

- (a) by spectral analysis of cavernosal tissue of the penis to confirm a diagnosis; and
- (b) if indicated, assess the progress and management of:
- (i) priapism; or
 - (ii) fibrosis of any type; or
 - (iii) fracture of the tunica; or
 - (iv) arteriovenous malformations; and
- (c) if a specialist in diagnostic radiology, nuclear medicine, **sexual health medicine**, urology, general surgery (sub specialising in vascular surgery) or a consultant physician in nuclear medicine attends the patient in person at the practice location where the service is performed, immediately before or for a period during the performance of the service; and
- (d) if the specialist or consultant physician interprets the results and prepares a report, not being a service associated with a service to which an item in Subgroup 4 applies (R)

Private Health Insurance Classification:

- Clinical category: Support list (DI)
- Procedure type: Type C

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.