Diagnostic Imaging Services Table - Full versus Partial Medicare‑eligible MRI machines

Last updated: 15 March 2023

* Not all Magnetic Resonance Imaging (MRI) machines can provide Medicare-eligible services.
* MRI machines that are Medicare-eligible are classified as either fully or partially eligible.
* Medicare-eligible MRI machines in MM 1 areas are either fully or partially eligible while Medicare-eligible MRI machines in MM 2-7 areas are fully eligible.

## Medicare eligible MRI machines

To be eligible to provide Medicare-eligible MRI services practices must ensure:

* they are a comprehensive diagnostic imaging practice (see **Attachment A** for definition); and
* they are an accredited imaging practice under the Diagnostic Imaging Accreditation Scheme (see **Attachment A** for definition); and
* they comply with the existing personal supervision and associated eligible provider requirements (see **Attachment A** for summary of requirements); and
* the MRI machine is listed on the Location Specific Practice Number Register (see **Attachment A** for definition); and
* the MRI machine is within its applicable life age (see **Attachment A** for definition).

In Modified Monash (MM) 2-7 areas, since 1 November 2022, any MRI equipment can provide Medicare eligible MRI services if it satisfies the above eligibility requirements.

See the November 2022 factsheet on [MRI equipment MBS eligibility changes](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-v2-Eligibiltiy-requirements-for-MRI-equipment) for more information on this change.

MRI machines in MM 1 areas must be subject to a Deed of Undertaking (often referred to as a licence) and satisfy the above eligibility requirements to provide Medicare eligible services.

A list of Medicare-eligible MRI providers in each state or territory is available from the Department of Health and Aged Care’s website at [www.health.gov.au](http://www.health.gov.au) using the search term ‘MRI locations’.

## Medicare eligible MRI services

For an MRI scan to qualify for a Medicare rebate, the service must be:

* listed on the Medicare Benefits Schedule (MBS); and
* performed on a Medicare-eligible MRI machine by a Medicare-eligible diagnostic imaging provider; and
* requested by a Specialist or Consultant Physician (or general practitioner for a limited number of specified services).

Most MRI scans on the MBS require a Specialist or Consultant Physician to request the scan. This is because it would generally be the Specialist or Consultant Physician managing the conditions for which MRI scans can support clinical decisions.

Whether an MRI service is Medicare-eligible on a particular MRI machine is also determined by whether the MRI machine has full or partial Medicare eligibility.

## Full versus partial Medicare-eligible MRI machines

**Full Medicare eligibility** means the MRI machine can be used to provide all Medicare‑eligible MRI services listed on the MBS in which case a Medicare benefit is generated for the patient.

**Partial Medicare eligibility** means that the MRI machine can be used to provide a subset of Medicare-eligible MRI services on the MBS in which case a Medicare benefit is generated for the patient.

See **Attachment B** below for the list of the MRI items for which a benefit is paid on partially Medicare‑eligible MRI machines, and who can request these services.

While partially Medicare-eligible MRI machines can be used to provide services outside this subset of items, those services will not attract a Medicare rebate. Similarly, in MM1 areas, services provided on MRI machines that are not Medicare-eligible will not attract a Medicare rebate.

Clause 2.5.1 of the [*Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020*](https://www.legislation.gov.au/Details/F2022C01085) sets out the application of MRI and MRA items.

#### Table with extract from Clause 2.5.1 – Requestor and Machine Type

| **Subgroup or Item** | **Requestor Type** | **Machine Type** |
| --- | --- | --- |
| Subgroups 1 to 21 | Specialist or Consultant Physician | Full Medicare Eligibility |
| 63395 to 63397 and the items in Subgroups 19, 20 and 21 (other than item 63461) | Specialist or Consultant Physician | Partial Medicare eligibility |
| Subgroups 22 and 32 | GP or Specialist or Consultant Physician | Full Medicare Eligibility or Partial Medicare eligibility |
| Subgroups 33 and 34 | GP | Full Medicare Eligibility or Partial Medicare eligibility |

## Where can I find more information?

Full details about diagnostic imaging requirements can be found at the [*Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020*](https://www.legislation.gov.au/Details/F2022C01085)and the [*Health Insurance Act 1973.*](https://www.legislation.gov.au/Details/C2022C00348)

Information can be found on the MBS Online website at [MBS Online](http://www.mbsonline.gov.au) about overarching Medicare eligibility requirements for MRI services via Explanatory Note IN.0.18 as well as full item descriptor(s) and information on other changes to the MBS. You can also subscribe to future MBS updates by visiting [MBS Online](http://www.mbsonline.gov.au/) and clicking ‘Subscribe’.

The Department of Health and Aged Care provides an email advice service for providers seeking advice on interpretation of the MBS items and rules and the [*Health Insurance Act 1973*](https://www.legislation.gov.au/Details/C2022C00348)and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email [*askMBS@health.gov.au*](mailto:askMBS@health.gov.au).

Subscribe to ‘[News for Health Professionals](https://www.servicesaustralia.gov.au/organisations/health-professionals/news/all)’ on the Services Australia 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 Services Australia website or contact the Services Australia on the Provider Enquiry Line – 13 21 50.

**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.**

# Attachment A

## Definition of a comprehensive practice

The *[Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020](https://www.legislation.gov.au/Details/F2022C01085)* defines a comprehensive practice as a medical practice, or a radiology department of a hospital, that provides X‑ray, ultrasound and computed tomography services (whether or not it provides other services).

## Definition of accredited imaging practice

All diagnostic imaging practices require accreditation through the Diagnostic Imaging Accreditation Scheme to access Medicare benefit payments.

Accredited imaging practices are required to:

* have an approved accreditation agency at all times.
* always comply with the standards and notify their accreditation agency when they become aware of a failure to meet the standards or satisfy an accreditation condition.

The Diagnostic Imaging Accreditation Scheme has been established under section 23DZZIAA of the [*Health Insurance Act 1973.*](https://www.legislation.gov.au/Details/C2022C00348)

Further information on the [Diagnostic Imaging Accreditation Scheme](https://www.safetyandquality.gov.au/standards/diagnostic-imaging/diagnostic-imaging-accreditation-scheme) is available on the Australian Commission on Safety and Quality in Health Care website.

Personal supervision and eligible provider requirements

*Personal supervision*

Clause 2.5.3 of the *[Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020](https://www.legislation.gov.au/Details/F2022C01085)* outlines personal supervision as part of the permissible circumstances for performing MRI and MRA services. A Medicare-eligible MRI service is performed in a permissible circumstance only if it is:

1. both:
   * 1. performed under the supervision of an eligible provider who is available to monitor and influence the conduct and diagnostic quality of the examination, including, if necessary, by personal attendance on the patient; and
     2. reported by an eligible provider; or
2. performed in an emergency; or
3. performed because of medical necessity, in a remote location.

A remote location means a place within Australia that is more than 30 kilometres by road from:

1. a hospital that provides a radiology or computed tomography service under the direction of a specialist in the specialty of diagnostic radiology; or
2. a free‑standing radiology or computed tomography facility under the direction of a specialist in the specialty of diagnostic radiology.

*Eligible provider*

Clause 2.5.4 of the [*Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020*](https://www.legislation.gov.au/Details/F2022C01085) sets out the eligible providers for particular MBS items. A person mentioned in column 2 of this extract of table 2.5.4 is an ***eligible provider*** for a corresponding MRI or MRA service mentioned in column 1.

***Extract of Table 2.5.4 – Eligible providers***

| **Column 1**  **MRI or MRA service** | **Column 2**  **Person** |
| --- | --- |
| A service to which none of items 63395 to 63397 apply | A person who:  (a) is a specialist in diagnostic radiology; and  (b) satisfies the Chief Executive Medicare that the specialist is a participant in the Royal Australian and New Zealand College of Radiologists’ Quality and Accreditation Program |
| A service to which any of items 63395 to 63397 apply | A person who is:  (a) a specialist in diagnostic radiology or a consultant physician; and  (b) recognised by the Conjoint Committee for Certification in Cardiac MRI |

Definition of Location Specific Practice Number Register

The Location Specific Practice Number Register includes the Diagnostic Imaging Register kept under section 23DZK of the [*Health Insurance Act 1973.*](https://www.legislation.gov.au/Details/C2022C00348)

Practices that provide diagnostic imaging or radiation oncology services, must register their information with Services Australia. Practices must:

* list their Medicare eligible equipment on the LSPN Register; and
* gain accreditation before performing diagnostic imaging Medicare eligible services; and
* notify Services Australia about any registration changes.

Definition of applicable life age of equipment

Clause 1.2.2 of the [*Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020*](https://www.legislation.gov.au/Details/F2022C01085) sets out the age of equipment (extract of table 1.2.2 from the regulations is below).

| **Item** | **Type of Equipment** | **Definition of type of equipment** | **Effective Life Age (Years)** | **Maximum Extended Life Age (years)** |
| --- | --- | --- | --- | --- |
| 7 | MRI Equipment | Equipment primarily used in carrying out a diagnostic imaging procedure used in rendering a service to which an item in Group I5 applies | 10 | 20 |

For MRI machines, the effective life age is 10 years, up to a maximum of 20 years where it has been appropriately upgraded. MRI machines beyond this age will not be eligible for Medicare – even if they have a licence.

**Attachment B**

MRI items for which a benefit is paid on partially Medicare eligible MRI machines, and who can request these services

| **Item** | **Descriptor summary**  **(**Full details of each item can be found at [MBS Online](http://www.mbsonline.gov.au/)**)** | **Requester** |
| --- | --- | --- |
| *Subgroup 14 - Scan of cardiovascular system - for specified conditions* | | |
| 63395  63397  63399 | MRI scan of cardiovascular system for assessment of myocardial structure and function | Specialist or Consultant Physician |
| *Subgroup 19 - Scan of body - for specified conditions* | | |
| 63464  63467  63487 | MRI scan of both breasts for the detection of cancer in a patient | Specialist or Consultant Physician |
| 63489 | MRI scan of one breast, performed in conjunction with a biopsy procedure on that breast and an ultrasound scan of that breast | Specialist or Consultant Physician |
| 63531  63533 | MRI scan of both breasts if a dedicated breast coil is used | Specialist or Consultant Physician |
| 63541  63543 | Multiparametric MRI scan of the prostate for the detection of cancer | Specialist or Consultant Physician |
| 63547 | MRI scan of both breasts for the detection of cancer if a dedicated breast coil is used and the patient has a breast implant | Specialist or Consultant Physician |
| 63564 | MRI whole body scan for the early detection of cancer | Specialist or Consultant Physician |

|  |  |  |
| --- | --- | --- |
| **Item** | **Descriptor summary**  **(**Full details of each item can be found at [MBS Online](http://www.mbsonline.gov.au/)**)** | **Requester** |
| *Subgroup 20 - Scan of pelvis and upper abdomen - for specified conditions* | | |
| 63454 | MRI scan of the pelvis or abdomen, for a patient who is pregnant | Specialist or Consultant Physician |
| 63470 | MRI scan of the pelvis for the staging of histologically diagnosed cervical cancer at FIGO stage 1B or greater | Specialist or Consultant Physician |
| 63473 | MRI scan of the pelvis and upper abdomen, in a single examination, for the staging of histologically diagnosed cervical cancer at FIGO stage 1B or greater | Specialist or Consultant Physician |
| 63476 | MRI scan of the pelvis for the initial staging of rectal cancer | Specialist or Consultant Physician |
| 63549 | MRI scan of the pelvis or abdomen, for a patient with a multiple pregnancy | Specialist or Consultant Physician |
| 63563 | MRI scan of the pelvis or abdomen, if the request for the scan identifies that the investigation is for sub‑fertility or surgical planning of a patient with known or suspected deep endometriosis | Specialist or Consultant Physician |
| 63740 | MRI scan to evaluate small bowel Crohn’s disease | Specialist or Consultant Physician |
| 63741 | MRI scan with enteroclysis for Crohn’s disease | Specialist or Consultant Physician |
| 63743 | MRI scan for fistulising perianal Crohn’s disease | Specialist or Consultant Physician |

| **Item** | **Descriptor summary**  **(**Full details of each item can be found at [MBS Online](http://www.mbsonline.gov.au/)**)** | **Requester** |
| --- | --- | --- |
| *Subgroup 21 - Scan of body - for suspected hepato-biliary or pancreatic pathology* | | |
| 63482 | MRI scan of pancreas and biliary tree for suspected biliary or pancreatic pathology | Specialist or Consultant Physician |
| 63545 | MRI multiphase scans of liver (including delayed imaging, if performed) with a contrast agent, for staging where surgical resection or interventional techniques are under consideration to treat any liver metastases detected | Specialist or Consultant Physician |
| 63546 | MRI multiphase scans of the liver (including delayed imaging, if performed) with a contrast agent, for diagnosis or staging | Specialist or Consultant Physician |
| *Subgroup 22 - Modifying items* | | |
| 63491  63494  63496  63497 | MRI or MRA service – modifying items | GP or Specialist or Consultant Physician |
| *Subgroup 32 - Poly Implant Prosthese - Breast Implant* | | |
| 63501  63502  63504  63505 | MRI scan of one or both breasts for the evaluation of implant integrity | GP or Specialist or Consultant Physician |
| *Subgroup 33 - Scan of body - person under 16 – General Practitioner requested* | | |
| 63507 | MRI scan of head for a patient under 16 years | GP |
| 63510 | MRI scan of spine following radiographic examination for a patient under 16 years | GP |
| 63513 | MRI scan of knee for internal joint derangement for a patient under 16 years | GP |
| 63516 | MRI scan of hip following radiographic examination for a patient under 16 years | GP |
| 63519 | MRI scan of elbow following radiographic examination for a patient under 16 years if a significant fracture or avulsion injury | GP |
| 63522 | MRI scan of wrist following radiographic examination for a patient under 16 years if a scaphoid fracture is suspected | GP |
| *Subgroup 34 - Scan of body - person over 16 – General Practitioner requested* | | |
| 63551 | MRI scan of head for a patient 16 years or older | GP |
| 63554 | MRI scan of spine for a patient 16 years or older for suspected cervical radiculopathy | GP |
| 63557 | MRI scan of spine for a patient 16 years or older for suspected cervical spinal trauma | GP |
| 63560 | MRI scan of knee following acute knee trauma for a patient 16 to 49 years | GP |