



Changes to the Medicare Benefits Schedule for radiation therapy items

Last updated: 20 June 2024

- On 1 July 2024, the Medicare Benefits Schedule (MBS) for radiation therapy items will be replaced with a new, restructured schedule.
- The purpose of the new schedule is to provide Medicare benefits that better reflect modern clinical practice.
- The changes will simplify the way services are billed but will not affect practitioner or patient eligibility for services.
- The changes are relevant for radiation oncologists, radiation therapists, medical physicists, and other providers involved in the delivery of radiation therapy services.

What are the changes?

Effective 1 July 2024, the new MBS for radiation therapy will provide a modernised, simplified schedule of items with benefits weighted to reflect service complexity. The changes include:

- reduction in the total number of radiation oncology items from 90 to 43
- categorisation of the T2 Group of radiation oncology items into four subgroups:
 1. Targeted intraoperative radiation therapy
 2. Megavoltage
 3. Kilovoltage
 4. Brachytherapy
- restructure of megavoltage items - where planning items will include simulation and dosimetry, and treatment items will include verification and treatment - tiered by procedural complexity and supporting a simpler, two-part payment model
- inclusion of new items allocating benefits for selected megavoltage and brachytherapy replanning
- consolidation of orthovoltage and superficial radiation therapy items into three items for kilovoltage therapy
- introduction of a new item for kilovoltage therapy planning
- restructured brachytherapy items
- deletion of clinically obsolete items

For private health insurance purposes, all of the new items will be listed under following clinical category and procedure type:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

Attachment A is a complete list of the new radiation therapy MBS items.

Why are the changes being made?

The changes reflect the recommendations of the Oncology Clinical Committee of the MBS Review Taskforce. The committee recommended a restructured, modernised MBS for radiation oncology to align with contemporary clinical practice, within the bounds of cost neutrality for MBS expenditure, with fees weighted to reflect service complexity. A full copy of the committee's [final report](#) can be found on the Department of Health and Aged Care's website.

What does this mean for providers?

The major change for providers will be adapting to the new way of billing for radiation therapy services, from a four-part payment model to a two-part payment model. A high-level example is provided below showing the differences in radiation therapy billing before and after 1 July 2024.

Prior to 1 July 2024, a typical course of megavoltage treatment (not including stereotactic or intensity-modulated radiation therapy) may include the following four-part MBS item billing pattern:

1. Simulation (items 15500-15512, 15515, 15550-15553)
 2. Dosimetry (items 15518-15533, 15556-15562)
 3. Treatment verification at every attendance (items 15700-15710)
 4. Treatment at each attendance for 1 field (items 15215-15227, 15245-15257)
- or
- Treatment at each attendance for 2 or more fields up to a maximum of 5, including nominating total number of fields provided in the bill (items 15230-15242, 15260-15272)

Post 1 July 2024, a typical course of megavoltage treatment (not including stereotactic or intensity-modulated radiation therapy) may include the following two-part MBS item billing pattern:

1. Planning - simulation and dosimetry (items 15902-15928)
2. Treatment - and verification at every attendance (items 15930-15948)

Transitional arrangements

Please note that on 1 July 2024 the current schedule of items will be entirely replaced by the new schedule. There is no mechanism to 'phase-out' old items while 'phasing-in' new items, nor make current items available alongside or in conjunction with the new items.

For services delivered prior to 1 July 2024, current MBS items 15000-15850 should be used for billing. For services delivered after 1 July 2024, new MBS items 15902-15984 should be used for billing. This includes cases where patients commence a course of planning and treatment prior to 1 July 2024 and complete the course of treatment after that date.

Benefit payments will not be processed if old MBS items are used to bill services performed after 1 July 2024. Similarly, payments will not be processed if new MBS items are used to bill services where all components within the item were performed before 1 July 2024.

While delays in submitting billing is not recommended, billing using the old radiation therapy schedule for services delivered prior to 1 July 2024 must be submitted within 2 years.

There will be no changes to 15900 for intraoperative radiation therapy and this item can continue to be billed as appropriate for services delivered before and after 1 July 2024.

Planning components undertaken either side of implementation of the new schedule

Where service components within a new planning item i.e., simulation and dosimetry are undertaken either side of 1 July 2024, billing should be withheld until the completion of all components in the new item. For example, if simulation is undertaken prior to 1 July 2024 and dosimetry is conducted after 1 July 2024, the relevant new planning item should be billed after 1 July 2024 for both components.

Payments for new planning items will not be processed if a bill for a component of a new item has already been processed using an old item.

How will these changes affect patients?

Patients should not be negatively affected by the restructured radiation therapy schedule and will have continued access to clinically relevant services.

Medicare benefits (rebates) for radiation therapy services will be more appropriately aligned with the level of complexity involved in delivering services to patients.

Who was consulted on the changes?

The Oncology Clinical Committee was established in 2016 by the MBS Review Taskforce to provide broad clinician and consumer expertise. The MBS Review included a public consultation process on the proposed changes. Feedback was received from a broad range of stakeholders and considered by the committee prior to making its final recommendations to the taskforce.

Following the review, a radiation therapy implementation liaison group was established including:

- The Faculty of Radiation Oncology of the Royal Australian and New Zealand College of Radiologists (RANZCR)
- The Australian Society of Medical Imaging and Radiation Therapy
- Australasian College of Physical Scientists & Engineers in Medicine
- Australian Medical Association
- Radiation Therapy Advisory Group (RTAG)
- Equipment and software manufacturers
- Private providers of radiation therapy services

- Australian Private Hospitals Association
- Private Healthcare Australia
- Cancer Voices NSW

The department is conducting ongoing consultation with key stakeholders in the radiation therapy sector.

How will the changes be monitored and reviewed?

Providers are responsible for ensuring services claimed from Medicare using their provider number meet all legislative requirements.

These changes are subject to MBS compliance checks and providers may be required to submit evidence about the services claimed.

The changes are also subject to the MBS continuous review process, which ensures the MBS continues to support high-quality care, remains flexible, and stays up to date. To support this, the Department of Health and Aged Care will monitor the use and impact of the new schedule to inform a post-implementation review.

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 [MBS Online](#) 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* and associated regulations. If you have a query relating exclusively to interpretation of the Schedule, you should email 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 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 Provider Enquiry Line – 13 21 50.

The data file for software vendors when available can be accessed via the [Downloads](#) page.



Attachment A: New MBS items for radiation oncology (effective 1 July 2024)

Category 3 – Therapeutic procedures

Group T2 – Radiation oncology

Subgroup 1 – Targeted intraoperative radiation therapy

15900

Breast, malignant tumour, targeted intraoperative radiation therapy, using an Intrabeam® or Xofig® Axxent® device, delivered at the time of breast-conserving surgery (partial mastectomy or lumpectomy) for a patient who:

- (a) is 45 years of age or over; and
- (b) has a T1 or small T2 (less than or equal to 3 cm in diameter) primary tumour; and
- (c) has a histologic grade 1 or 2 tumour; and
- (d) has an oestrogen-receptor positive tumour; and
- (e) has a node negative malignancy; and
- (f) is suitable for wide local excision of a primary invasive ductal carcinoma that was diagnosed as unifocal on conventional examination and imaging; and
- (g) has no contra-indications to breast irradiation

Applicable once per breast per lifetime (H)

MBS Fee: \$284.75

Benefit: 75% = \$213.60 85% = \$242.05

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

Category 3 – Therapeutic procedures

Group T2 – Radiation oncology

Subgroup 2 – Megavoltage

15902

Megavoltage planning—level 1.1

Simple complexity single field radiation therapy simulation and dosimetry for treatment planning, without imaging for field setting, if:

(a) all of the following apply in relation to the simulation:

- (i) the simulation is to one site;
- (ii) localisation is based on clinical mark up and image based simulation is not required;
- (iii) patient set up and immobilisation techniques are suitable for two dimensional radiation therapy treatment, with wide margins and allowance for movement; and

(b) all of the following apply in relation to the dosimetry:

- (i) the planning process is required to deliver a prescribed dose to a point, either at depth or on the surface of the patient;
- (ii) based on review and assessment by a radiation oncologist, the planning process does not require the differential of dose between target, organs at risk and normal tissue dose;
- (iii) delineation of structures is not possible or required, and field borders will delineate the treatment volume;
- (iv) doses are calculated in reference to a point, either at depth or on the surface of the patient, from tables, charts or data from a treatment planning system

Applicable once per course of treatment

MBS Fee: \$725.45

Benefit: 75% = \$544.10 85% = \$616.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15904

Megavoltage planning—level 1.2

Simple complexity radiation therapy simulation and dosimetry for treatment planning, with imaging for field setting, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for two dimensional radiation therapy dose planning;
 - (ii) patient set up and immobilisation techniques are suitable for two dimensional radiation therapy treatment where interfraction reproducibility is required;
 - (iii) imaging datasets are acquired for the relevant region of interest to be planned;
- and

(b) all of the following apply in relation to the dosimetry:

- (i) the two dimensional planning process is required to calculate dose to a volume, however a dose volume histogram is not required to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the two dimensional planning process is not required to maximise the differential between target dose and normal tissue dose;
- (iii) the target (which may include gross, clinical and planning targets as a composite structure or field border outline), as defined in the prescription, is rendered as a two dimensional structure as field borders or a volume;
- (iv) organs at risk are delineated if required, and assessment of dose to these structures is derived from dose point calculations, rather than full calculation and inclusion in a dose volume histogram;
- (v) dose calculations are calculated using a specialised algorithm, with prescription and plan details approved and recorded with the plan

Applicable once per course of treatment

MBS Fee: \$1,062.85

Benefit: 75% = \$797.15 85% = \$903.45

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15906

Megavoltage planning—level 2.1

Three dimensional radiation therapy simulation and dosimetry for treatment planning, without motion management, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for three dimensional planning without consideration of motion management;
- (ii) patient set up and immobilisation techniques are reproducible for treatment;
- (iii) a high quality dataset is acquired in treatment position for the relevant region of interest to be planned and treated with image verification; and

(b) all of the following apply in relation to the dosimetry:

- (i) the three dimensional planning process is required to calculate dose to three dimensional volume structures and requires a dose volume histogram to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the three dimensional planning process (which must include multi leaf collimator based shaping to achieve target dose conformity and organs at risk avoidance or dose management or reduction) is required to optimise the differential between target dose and normal tissue dose;
- (iii) the planning target volume is rendered as a three dimensional structure on planning outputs (three dimensional plan review, three planar sections review or dose volume histogram);
- (iv) organs at risk are delineated, and assessment of dose to these structures is derived from calculation and inclusion in a dose volume histogram

Applicable once per course of treatment

MBS Fee: \$1,638.70

Benefit: 75% = \$1,229.05 85% = \$1,392.90

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15908

Megavoltage planning—level 2.2

Three dimensional radiation therapy simulation and dosimetry for treatment planning with motion management, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for complex three dimensional planning with consideration of motion management;
- (ii) patient set up and immobilisation techniques are reproducible for treatment;
- (iii) a high quality three dimensional or four dimensional image volume dataset is acquired in treatment position for the relevant region of interest to be planned and treated with image verification; and

(b) all of the following apply in relation to the dosimetry:

- (i) the three dimensional planning process is required to calculate dose to three dimensional volume structures (which must include structures moving with physiologic processes) and requires a dose volume histogram to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the three dimensional planning process (which must include multi leaf collimator based shaping to achieve target dose conformity and organs at risk avoidance or dose management or reduction) is required to optimise the differential between target dose and normal tissue dose;
- (iii) the planning target volume is rendered as a three dimensional structure on planning outputs (three dimensional plan review, three planar sections review or dose volume histogram);
- (iv) organs at risk are delineated, and assessment of dose to these structures is derived from full calculation and inclusion in a dose volume histogram

Applicable once per course of treatment

MBS Fee: \$2,649.25

Benefit: 75% = \$1,986.95

85% = \$2,251.90

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15910

Megavoltage planning—level 3.1

Standard intensity modulated radiation therapy (IMRT) simulation and dosimetry for treatment planning, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for single dose level IMRT planning without motion management;
- (ii) patient set up and immobilisation techniques are suitable for image volume data acquisition and reproducible IMRT treatment;
- (iii) a high quality three dimensional image volume dataset is acquired in treatment position for the relevant region of interest to be planned and treated with image verification; and

(b) all of the following apply in relation to the dosimetry:

- (i) the IMRT planning process is required to calculate dose to a single dose level volume structure and requires a dose volume histogram to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the IMRT planning process optimises the differential between target dose, organs at risk and normal tissue dose;
- (iii) all relevant gross tumour volumes, clinical target volumes, planning target volumes and organs at risk are rendered as volumes and nominated with planning dose objectives;
- (iv) organs at risk are nominated as planning dose constraints;
- (v) dose calculations and dose volume histograms are generated in an inverse planned process using a specialised algorithm, with prescription and plan details approved and recorded with the plan;
- (vi) a three dimensional image volume dataset is used for the relevant region to be planned and treated with image verification

Applicable once per course of treatment

MBS Fee: \$4,142.70

Benefit: 75% = \$3,107.05 85% = \$3,521.30

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15912

Megavoltage re-planning—level 3.1

Additional dosimetry plan for re-planning of standard intensity modulated radiation therapy (IMRT) treatment, if:

- (a) an initial treatment plan described in item 15910 has been prepared; and
- (b) treatment adjustments to the initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment

MBS Fee: \$2,071.35

Benefit: 75% = \$1,553.55 85% = \$1,760.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15914

Megavoltage planning—level 3.2

Complex intensity modulated radiation therapy (IMRT) simulation and dosimetry for treatment planning, if

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for multiple dose level IMRT planning or single dose level IMRT planning requiring motion management;
- (ii) patient set up and immobilisation techniques are suitable for image volume data acquisition and reproducible IMRT treatment;
- (iii) a high quality three dimensional or four dimensional volume dataset is acquired in treatment position for the relevant region of interest to be planned and treated with image verification; and

(b) all of the following apply in relation to the dosimetry:

- (i) the IMRT planning process is required to calculate dose to multiple dose level volume structures or single dose level volume structures (including structures moving with physiologic processes or requiring precise positioning with respect to beam edges) and requires a dose volume histogram to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the IMRT planning process optimises the differential between target dose, organs at risk and normal tissue dose;
- (iii) all relevant gross tumour targets, clinical target volumes, planning target volumes, internal target volumes and organs at risk are rendered and nominated with planning dose objectives;
- (iv) organs at risk are nominated as planning dose constraints;
- (v) dose calculations and dose volume histograms are generated in an inverse planned process using a specialised algorithm, with prescription and plan details approved and recorded with the plan;
- (vi) a three dimensional or four dimensional image volume dataset is used for the relevant region to be planned and treated, with image verification for a multiple dose level IMRT planning or single dose level IMRT planning requiring motion management

Applicable once per course of treatment

MBS Fee: \$5,953.95

Benefit: 75% = \$4,465.50 85% = \$5,060.90

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy

- Procedure type: Type C Procedures

15916

Megavoltage re-planning—level 3.2

Additional dosimetry plan for re-planning of complex intensity modulated radiation therapy (IMRT) treatment, if:

- (a) an initial treatment plan described in item 15914 has been prepared; and
- (b) treatment adjustments to the initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment

MBS Fee: \$2,976.95

Benefit: 75% = \$2,232.75 85% = \$2,530.45

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15918

Megavoltage planning—level 4

Intracranial stereotactic radiation therapy (SRT) simulation and dosimetry for treatment planning, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for multiple non coplanar, rotational or fixed beam stereotactic delivery;
- (ii) precise personalised patient set up and immobilisation techniques are suitable for reliable imaging acquisition and reproducible SRT small field and ablative treatments;
- (iii) a high quality three dimensional image volume dataset is acquired in treatment position for the intracranial lesions to be planned and treated and verified; and

(b) all of the following apply in relation to the dosimetry:

- (i) the planning process is required to calculate dose to single or multiple target structures and requires a dose volume histogram to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the planning process maximises the differential between target dose, organs at risk and normal tissue dose;
- (iii) all relevant gross tumour volumes, clinical target volumes, planning target volumes and organs at risk are rendered and nominated with planning dose objectives;
- (iv) organs at risk are nominated as planning dose constraints;
- (v) dose calculations and dose volume histograms are generated using a validated stereotactic type algorithm, with prescription and plan details approved and recorded with the plan

Applicable once per course of treatment

MBS Fee: \$6,676.00

Benefit: 75% = \$5,007.00 85% = \$5,674.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15920

Megavoltage planning—level 4

Stereotactic body radiation therapy (SBRT) simulation and dosimetry for treatment planning, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for inverse planning with multiple non coplanar, rotational or fixed beam stereotactic delivery or intensity modulated radiation therapy (IMRT) stereotactic delivery;
- (ii) personalised patient set up and immobilisation techniques are suitable for reliable imaging acquisition and reproducible, including techniques to minimise motion of organs at risk and targets;
- (iii) small field and ablative treatment is used;
- (iv) a high quality three dimensional or four dimensional image volume dataset is acquired in treatment position for the relevant region of interest to be planned, treated and verified (through daily planar or volumetric image guidance strategies); and

(b) all of the following apply in relation to the dosimetry:

- (i) the planning process is required to calculate dose to single or multiple target structures and requires a dose volume histogram to complete the planning process;
- (ii) based on review and assessment by a radiation oncologist, the planning process maximises the differential between target dose, organs at risk and normal tissue dose;
- (iii) all relevant gross tumour volumes, clinical target volumes, planning target volumes and organs at risk are rendered and nominated with planning dose objectives;
- (iv) organs at risk are nominated as planning dose constraints;
- (v) dose calculations and dose volume histograms are generated using a validated stereotactic type algorithm, with prescription and plan details approved and recorded with the plan

Applicable once per course of treatment

MBS Fee: \$6,676.00

Benefit: 75% = \$5,007.00

85% = \$5,674.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15922

Megavoltage re-planning—level 4

Additional dosimetry plan for re-planning of intracranial stereotactic radiation therapy (SRT) or stereotactic body radiation therapy (SBRT) treatment, if:

- (a) an initial treatment plan described in item 15918 or 15920 has been prepared; and
- (b) treatment adjustments to the initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment

MBS Fee: \$3,338.05

Benefit: 75% = \$2,503.55 85% = \$2,837.35

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15924

Megavoltage planning—level 5

Specialised radiation therapy simulation and dosimetry for treatment planning, if both of the following apply in relation to the simulation:

- (a) treatment set up and technique specifications are in preparation for a specialised case with general anaesthetic or sedation supervised by an anaesthetist;
- (b) a high quality three dimensional or four dimensional image volume dataset is acquired in treatment position for the relevant region of interest to be planned and treated with image verification

Applicable once per course of treatment (Anaes.)

MBS Fee: \$7,046.30

Benefit: 75% = \$5,284.75 85% = \$5,989.40

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15926

Megavoltage planning—level 5

Specialised radiation therapy simulation and dosimetry for treatment planning, if:

(a) all of the following apply in relation to the simulation:

- (i) treatment set up and technique specifications are in preparation for a specialised application such as total skin electron therapy (TSE) or total body irradiation (TBI);
- (ii) reproducible personalised patient set up and immobilisation techniques are suitable to implement three dimensional radiation therapy, intensity modulated radiation therapy (IMRT) (including multiple non coplanar, rotational or fixed beam treatment delivery) or a specialised total body treatment delivery method;
- (iii) a specialised dataset of anatomical dimensions is acquired in the treatment position for TSE or TBI; and

(b) all of the following apply in relation to the dosimetry:

- (i) total TSE, TBI, IMRT or multiple non coplanar, rotational or fixed beam treatment is used;
- (ii) the final dosimetry plan is validated by a radiation therapist and a medical physicist, using quality assurance processes;
- (iii) the final dosimetry plan is approved, prior to treatment delivery, by a radiation oncologist

Applicable once per course of treatment

MBS Fee: \$7,046.30

Benefit: 75% = \$5,284.75

85% = \$5,989.40

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15928

Megavoltage re-planning—level 5

Additional dosimetry plan for re-planning of specialised radiation therapy if:

- (a) an initial treatment plan described in 15924 or 15926 has been prepared; and
- (b) treatment adjustments to the initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment (Anaes.)

MBS Fee: \$3,523.15

Benefit: 75% = \$2,642.40 85% = \$2,994.70

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15930

Megavoltage treatment—level 1.1

Radiation therapy for simple, single field treatment (including electron beam treatments), if:

- (a) the treatment does not use imaging for field setting; and
- (b) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and
- (c) the treatment is delivered with a one dimensional plan; and
- (d) a two dimensional single field treatment delivery mode is utilised

Applicable once per plan per day

MBS Fee: \$91.25

Benefit: 75% = \$68.45 85% = \$77.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15932

Radiation therapy and image verification for simple treatment, with imaging for field setting, if:

- (a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and
- (b) image guided radiation therapy (IGRT) imaging is used to implement a two dimensional plan, and
- (c) two dimensional treatment is delivered; and
- (d) image verification decisions and actions are documented in the patient's record

Applicable once per plan per day

MBS Fee: \$113.65

Benefit: 75% = \$85.25 85% = \$96.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15934

Megavoltage treatment—level 2.1

Radiation therapy and image verification for three dimensional treatment, without motion management, if:

- (a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and
- (b) image guided radiation therapy (IGRT) imaging is used to implement a standard three dimensional plan; and
- (c) three dimensional treatment is delivered; and
- (d) image verification decisions and actions are documented in the patient's record

Applicable once per plan per day

MBS Fee: \$255.95

Benefit: 75% = \$192.00 85% = \$217.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15936

Megavoltage treatment—level 2.2

Radiation therapy and image verification for three dimensional treatment, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) image guided radiation therapy (IGRT) imaging is used to implement a complex three dimensional plan; and

(c) complex three dimensional treatment is delivered with management of motion; and

(d) image decisions and actions are documented in the patient's record

Applicable once per plan per day

MBS Fee: \$278.40

Benefit: 75% = \$208.80 85% = \$236.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15938

Megavoltage treatment—level 3.1

Standard single dose level intensity modulated radiation therapy (IMRT) treatment and image verification, without motion management, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) image guided radiation therapy (IGRT) imaging is used to implement a standard IMRT plan described in item 15910

Applicable once per plan per day

MBS Fee: \$278.40

Benefit: 75% = \$208.80 85% = \$236.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15940

Megavoltage treatment—level 3.2

Complex multiple dose level intensity modulated radiation therapy (IMRT) treatment, or single dose level IMRT treatment requiring motion management, and image verification, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) image guided radiation therapy (IGRT) imaging is used (with motion management functionality if required) to implement a complex IMRT plan described in item 15914; and

(c) radiation field positioning requires accurate dose delivery to the target; and

(d) image decisions and actions are documented in the patient's record

Applicable once per plan per day

MBS Fee: \$306.25

Benefit: 75% = \$229.70 85% = \$260.35

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15942

Megavoltage treatment—level 4

Intracranial stereotactic radiation therapy treatment and image verification, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) image guided radiation therapy (IGRT) or minimally invasive stereotactic frame localisation is used to implement an intracranial stereotactic treatment plan described in item 15918; and

(c) radiation field positioning requires accurate dose delivery to the target; and

(d) image decisions and actions are documented in the patient's record

Applicable once per day

MBS Fee: \$789.35

Benefit: 75% = \$592.05 85% = \$670.95

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15944

Megavoltage treatment—level 4

Stereotactic body radiation therapy (SBRT) treatment and image verification, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) image guided radiation therapy (IGRT) is used (with motion management functionality if required) to implement a stereotactic body radiation therapy plan described in item 15920; and

(c) radiation field positioning requires accurate dose delivery to the target; and

(d) image decisions and actions are documented in the patient's record

Applicable once per day

MBS Fee: \$789.35

Benefit: 75% = \$592.05 85% = \$670.95

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15946

Megavoltage treatment—level 5

Specialised radiation therapy treatment and verification, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) a specialised technique is used with general anaesthetic or sedation supervised by an anaesthetist

Applicable once per plan per day

MBS Fee: \$907.75

Benefit: 75% = \$680.85 85% = \$771.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15948

Megavoltage treatment—level 5

Specialised radiation therapy treatment and verification, if:

(a) the treatment is delivered using a device that is included in the Australian Register of Therapeutic Goods; and

(b) a specialised technique, such as total skin electron therapy (TSE) or total body irradiation (TBI), is used to implement a treatment plan described in item 15926; and

(c) image guided radiation therapy (IGRT) is used (with motion management functionality, if required) to implement:

(i) three dimensional radiation therapy; or

(ii) intensity modulated radiation therapy (IMRT) (including multiple non coplanar, rotational or fixed beam treatment); or

(iii) total skin electrons (TSE) where there is individualised treatment

Applicable once per day

MBS Fee: \$907.75

Benefit: 75% = \$680.85 85% = \$771.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

Category 3 – Therapeutic procedures

Group T2 – Radiation oncology

Subgroup 3 – Kilovoltage

15950

Kilovoltage planning

Simple complexity single field radiation therapy simulation and dosimetry for treatment planning without imaging for field setting, if:

(a) both of the following apply in relation to the simulation:

- (i) localisation is based on clinical mark up and image based simulation is not required;
- (ii) patient set up and immobilisation techniques are suitable for two dimensional radiation therapy treatment, with wide margins and allowance for movement; and

(b) all of the following apply in relation to the dosimetry:

- (i) the planning process is required to deliver a prescribed dose to a point, either at depth or on the surface of the patient;
- (ii) based on review and assessment by a radiation oncologist, the planning process does not require the differential of dose between target, organs at risk and normal tissue dose;
- (iii) delineation of structures is not possible or required, and field borders will delineate the treatment volume;
- (iv) doses are calculated in reference to a point, either at depth or on the surface of the patient, from tables, charts or data from a treatment planning system

Applicable once per course of treatment

MBS Fee: \$203.70

Benefit: 75% = \$152.80 85% = \$173.15

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15952

Delivery of kilovoltage radiation therapy (50 kV to 500 kV range) to one anatomical site (excluding orbital structures where there is placement of an internal eye shield), other than a service to which item 15954 applies

MBS Fee: \$54.85

Benefit: 75% = \$41.15 85% = \$46.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15954

Delivery of kilovoltage radiation therapy (50 kV to 500 kV range) to 2 or more anatomical sites (excluding orbital structures where there is placement of an internal eye shield)

The fee for item 15952 plus for each anatomical site in excess of 1, an amount of \$22.00

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15956

Delivery of kilovoltage radiation therapy (50 kV to 500 kV range) to orbital structures where there is placement of an internal eye shield

MBS Fee: \$67.45

Benefit: 75% = \$50.60 85% = \$57.35

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

Category 3 – Therapeutic procedures

Group T2 – Radiation oncology

Subgroup 4 – Brachytherapy

15958

Simple placement or insertion of any of the following kinds of brachytherapy device, without image guidance:

(a) intracavitary vaginal cylinder, vaginal ovoids, vaginal ring or vaginal mould;

(b) surface mould or applicator, with catheters fixed to or embedded into mould or applicator, on external surface of body;

including the removal of applicators, catheters or needles

MBS Fee: \$106.40

Benefit: 75% = \$79.80 85% = \$90.45

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15960

Complex construction and manufacture of a personalised brachytherapy applicator or mould, derived from three dimensional image volume datasets, to treat intracavitary, intraoral or intranasal site, including the removal of applicators, catheters or needles

MBS Fee: \$146.80

Benefit: 75% = \$110.10 85% = \$124.80

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15962

Complex insertion of any of the following kinds of brachytherapy device, with image guidance and if a radiation oncologist is in attendance at the initiation of the service:

- (a) intrauterine tubes with or without ovoids, ring or cylinder;
- (b) endocavity applicators;
- (c) intraluminal catheters for treatment of bronchus, trachea, oesophagus, nasopharynx, bile duct;
- (d) endovascular catheters for treatment of vessels;

including the removal of applicators, catheters or needles

(Anaes.)

MBS Fee: \$319.15

Benefit: 75% = \$239.40 85% = \$271.30

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15964

Complex insertion and removal of hybrid intracavitary and interstitial brachytherapy applicators, or intracavitary and multi catheter applicators, with image guidance and if a radiation oncologist is in attendance at the initiation of the service (Anaes.)

MBS Fee: \$425.60

Benefit: 75% = \$319.20 85% = \$361.80

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15966

Complex insertion of any of the following kinds of interstitial brachytherapy implants not requiring surgical exposure, with image guidance, and if a radiation oncologist is in attendance during the service:

- (a) catheters or needles for temporary implants;
 - (b) radioactive sources for permanent implants;
 - (c) breast applicators, single channel and multi channel strut devices;
- including the removal of applicators, catheters or needles (Anaes.)

MBS Fee: \$531.95

Benefit: 75% = \$399.00 85% = \$452.20

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15968

Complex insertion of any of the following interstitial brachytherapy implants requiring surgical exposure (other than a service to which item 15900 applies), if a radiation oncologist is in attendance at the initiation of the service:

- (a) catheters, needles or applicators to a region requiring surgical exposure;
 - (b) radioactive sources for permanent implants;
 - (c) surface moulds during intraoperative brachytherapy;
 - (d) plastic catheters or stainless steel needles, requiring surgical exposure;
- including implantation and removal of applicators, catheters or needles

(Anaes.)

MBS Fee: \$833.80

Benefit: 75% = \$625.35 85% = \$708.75

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15970

Simple level dosimetry for brachytherapy plans prescribed to surface or depth from catheter and library plans, if:

- (a) the planning process is required to deliver a prescribed dose to a three dimensional volume, and relative to a single line or multiple channel delivery applicator; and
- (b) the planning process does not require the differential of dose between the target, organs at risk and normal tissue dose; and
- (c) delineation of structures is not required; and
- (d) dose calculations are performed in reference to the surface or a point at depth (two dimensional plan) from tables, charts or data from a treatment planning system library plan

Applicable once per course of treatment

MBS Fee: \$138.35

Benefit: 75% = \$103.80 85% = \$117.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15972

Simple level dosimetry re-planning of an initial brachytherapy plan described in item 15970 if treatment adjustments to that initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment

MBS Fee: \$69.20

Benefit: 75% = \$51.90 85% = \$58.85

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15974

Intermediate level dosimetry calculated on a volumetric dataset for intracavitary or intraluminal or endocavity applicators, for brachytherapy plans that have three dimensional image datasets acquired as part of simulation, if:

(a) the planning process is required to deliver the prescribed dose to a three dimensional volume, and relative to multiple line for channel delivery applicators (excluding interstitial catheters and needles and multi catheter devices); and

(b) based on review and assessment by a radiation oncologist, the planning process requires the differential of dose between target, organs at risk and normal tissue dose using avoidance strategies (which include placement of sources and/or dwell times or tissue packing); and

(c) delineation of structures is required as part of the planning process to produce a dose volume histogram integral to the avoidance strategies; and

(d) dose calculations are performed on a personalised basis, which must include three dimensional dose calculation to target and organ at risk volumes; and

(e) dose calculations and the dose volume histogram are approved and recorded with the plan

Applicable once per course of treatment

MBS Fee: \$927.75

Benefit: 75% = \$695.85 85% = \$788.60

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15976

Intermediate level dosimetry re-planning of an initial brachytherapy plan described in item 15974 if treatment adjustments to that initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment

MBS Fee: \$463.90

Benefit: 75% = \$347.95 85% = \$394.35

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15978

Complex level dosimetry for brachytherapy plans that contain multiple needles, catheters or radiation sources, calculated on the three dimensional volumetric dataset, if:

(a) the planning process is required to deliver a prescribed dose to a target volume relative to multiple channel delivery applicators, needles or catheters or radiation sources; and

(b) based on review and assessment by a radiation oncologist, the planning process requires the differential of doses between the target, organs at risk and normal tissue dose using avoidance strategies (which include the placement of sources and/or dwell times or tissue packing; and

(c) delineation of structures is required as part of the planning process, in order to produce a dose volume histogram to review and assess the plan; and

(d) dose calculations are performed on a personalised basis, which must include three dimensional dose calculation to target and organ at risk volumes; and

(e) dose calculations and the dose volume histogram are approved and recorded with the plan

Applicable once per course of treatment

MBS Fee: \$1,078.10

Benefit: 75% = \$808.60 85% = \$916.40

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15980

Complex level dosimetry re-planning of an initial brachytherapy plan described in item 15978 if treatment adjustments to the initial plan are inadequate to satisfy treatment protocol requirements

Applicable once per course of treatment

MBS Fee: \$539.10

Benefit: 75% = \$404.35 85% = \$458.25

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15982

Brachytherapy treatment, if:

- (a) the service is performed by radiation therapists and medical physicists; and
- (b) a radiation oncologist is in attendance during the service; and
- (c) the treatment is to implement a brachytherapy treatment plan described in any of items 15970, 15972, 15974, 15976, 15978 and 15980

MBS Fee: \$404.25

Benefit: 75% = \$303.20 85% = \$343.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

15984

Verification of position of brachytherapy applicators, needles, catheters or radioactive sources, if:

- (a) a two dimensional or three dimensional volumetric image set, or a validated in vivo dosimetry measurement, is required to facilitate an adjustment to the applicators, needles, catheters or dosimetry plan; and
- (b) decisions using the acquired images are based on action algorithms and enacted immediately prior to, or during, treatment, where treatment is preceded by manipulation or adjustment of delivery applicator or adjustment of the dosimetry plan; and
- (c) the service is associated with a service to which any of the following items apply:

- (i) items 15958 to 15968;
- (ii) item 15982

MBS Fee: \$148.95

Benefit: 75% = \$111.75 85% = \$126.65

Private Health Insurance Classification:

- Clinical category: Chemotherapy, radiotherapy and immunotherapy
- Procedure type: Type C Procedures

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.