



Non-invasive prenatal testing for fetal Rhesus D genotype

Last updated: 8 June 2022

- From 1 July 2022, two new Medicare Benefits Schedule (MBS) items for genetic testing will be introduced to determine the Rhesus D antigen status of a fetus.
- New MBS items 73420 and 73421 will support the management of pregnant individuals with Rhesus D negative blood type.
- These changes are relevant for all medical practitioners who manage pregnancies and provide antenatal care, and Approved Pathology Practitioners (APP) who provide these referred services.

What are the changes?

Rhesus D (RhD) is an antigen that is found on red blood cells. Individuals with an absence of RhD are described as RhD negative. Pregnant individuals who are RhD negative may have fetuses who are RhD positive. If a pregnant individual is exposed to RhD positive fetal blood, they may develop antibodies against RhD which may cause serious disease in subsequent pregnancies, called haemolytic disease of the fetus and newborn (HDFN).

From 1 July 2022, pregnant individuals who are RhD negative will be able to access a genetic test under two new MBS items to determine the RhD status of their fetus.

The new MBS items are:

- MBS item 73420, for the detection of the RHD gene from fetal DNA in an RhD negative pregnant patient
- MBS item 73421, for the detection of the RHD gene from fetal DNA in an RhD negative pregnant patient who is alloimmunised with immune Anti-D

The proposed items will be used to guide the management of pregnancies of RhD negative individuals, and avoid over-treatment with anti-D immunoglobulin, which is currently given prophylactically to all RhD negative individuals through all their pregnancies.

Why are the changes being made?

In November 2020, the Medical Services Advisory Committee (MSAC) supported the public funding for non-invasive prenatal testing of fetal RhD genotype in RhD negative pregnant individuals.

What does this mean for providers/referrers/other stakeholders?

All medical practitioners who manage pregnancies and provide antenatal care will be able to order genetic tests to determine fetal RhD status, in pregnant individuals with confirmed RhD negative blood type.



To be eligible for Medicare rebates, laboratories providing this service must be accredited according to the pathology accreditation standards specified in the *Health Insurance (Accredited Pathology Laboratories-Approval) Principles 2017*.

How will these changes affect patients?

Currently, pregnant individuals who are RhD negative are treated with a blood product called anti-D immunoglobulin on at least two occasions in the prenatal period to reduce the risk of HDFN in subsequent pregnancies. The services supported under new MBS items 73420 and 73421 will inform the management of RhD negative individuals during their pregnancies, and better direct anti-D immunoglobulin treatment.

Who was consulted on the changes?

Consultation has been undertaken with key stakeholders, clinical experts and providers as part of the MSAC process, including the Royal College of Pathologists of Australasia and Australian Red Cross Lifeblood.

How will the changes be monitored and reviewed?

The new MBS items will be subject to MBS compliance processes and activities, including random and targeted audits which may require a provider to submit evidence about the services claimed.

Significant variation from forecasted expenditure may warrant review and amendment of the items and fees, and incorrect use of MBS items can result in penalties including the health professional being asked to repay monies that have been incorrectly received.

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 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 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.

The data file for software vendors when available can be accessed via 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.