



Diagnostic Imaging Services Table - Changes to musculoskeletal ultrasound supervision requirements

Last updated: 12 October 2023

- Subject to the passage of legislation, from 1 November 2023 changes to supervision requirements for musculoskeletal ultrasound services will occur to support ongoing patient access without compromising on safety and quality of care.
- These changes affect all health professionals who request, deliver, and claim musculoskeletal ultrasound services as well as consumers who receive the services.

What are the changes?

Subject to the passage of legislation, effective 1 November 2023, the requirement for personal attendance and examination by the medical practitioner responsible for the conduct and report of the musculoskeletal ultrasound service will be removed, aligning the supervision requirements with all other ultrasound services.

Why are the changes being made?

- There is no clinical need for personal attendance during a musculoskeletal ultrasound if an appropriate medical practitioner is available to monitor and influence the conduct and diagnostic quality of the examination and, if necessary, to attend on the patient personally.
- Aligning the supervision requirements for all ultrasound services is consistent with the recommendations of leading professional organisations and is broadly supported by stakeholders.

What does this mean for providers?

Providers of diagnostic imaging services will need to familiarise themselves with the change, as well as the current supervision requirements (as per clause 2.1.2 of the [Health Insurance \(Diagnostic Imaging Services Table\) Regulations \(No. 2\) 2020](#)) governing all ultrasound services to ensure their service provision is consistent with these rules.

How will these changes affect patients?

The change will support patients to access the services they need by aligning the supervision requirements with all other ultrasound services on the MBS.

Patient care and the quality of the service will not be affected by these changes as an appropriate medical practitioner must still be available to attend the patient personally if required.

Who was consulted on the changes?

In early 2020, the Australian Government provided an interpretation of the rules for personal attendance for musculoskeletal ultrasound services to allow for remote supervision if considered safe to do so, due to the impact of COVID-19 on service provision. Ongoing consultation with professional organisations, state and territory health departments, private providers and individuals has occurred since this time and permanent changes are broadly supported.

Consultations occurred with organisations including, but not limited to:

- Australasian Society of Ultrasound in Medicine (ASUM)
- Australian Sonographers Association (ASA)
- Australian Diagnostic Imaging Association (ADIA)
- Royal Australian and New Zealand College of Radiologists (RANZCR)

How will the changes be monitored and reviewed?

The Department of Health and Aged Care will monitor MBS data on the utilisation of these services.

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 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.

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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 factsheet is current as of the Last updated date shown above and does not account for MBS changes since that date.