Budget 2024-25

This information is accurate as of 14 May 2024.

Strengthening Medicare – an effective and clinically appropriate Medicare Benefits Schedule (MBS)

This measure introduces a reform to diagnostic imaging to:

* strengthen Medicare
* provide increased affordability and access to Medicare.

Funding for this measure will:

* introduce annual indexation of Medicare Benefit Schedule (MBS) amounts for nuclear medicine imaging services, aligning them with all other diagnostic imaging services
* remove the current magnetic resonance imaging (MRI) equipment eligibility requirements in the Diagnostic Imaging Services Table.

This measure also lists new and amended services on the MBS.

Indexation of nuclear medicine

Nuclear medicine is the only diagnostic imaging modality for which annual MBS indexation isn’t in place. This measure will introduce indexation of nuclear medicine imaging services. This is consistent with the government’s commitment to:

* increase affordability and access of Medicare
* better support patients with complex illness.

This will be introduced in 2 stages:

* In stage 1, all non-positron emission tomography (PET) nuclear imaging services will have an initial one-off benefit increase of 3.5% from 1 November 2024. This will be followed by the reintroduction of annual indexation from 1 July 2025.
* In stage 2, the remaining nuclear medicine imaging services (PET and Adjunctive) will be indexed from 1 July 2027.

Removing MRI equipment eligibility requirements

This measure will remove the current MRI equipment eligibility requirements (Modified Monash 1 areas) in the Diagnostic Imaging Services Table.

This will be done in 2 stages:

* Stage 1 starts from 1 July 2025. MRI licencing arrangements will change, so any registered comprehensive practice that holds a current licence will get a ‘practice-based’ licence. This provides full Medicare eligibility to all MRI equipment located at the practice and listed on the Diagnostic Imaging Register. Practices without an existing MRI licence will need to wait until the next stage.
* Stage 2 starts from 1 July 2027. All registered comprehensive diagnostic imaging practices will have their ineligible MRI machines upgraded to access Medicare funded MRI services.

New and amended MBS listings

From 1 July 2024, new and amended listings include:

* Introduce permanent arrangements for testing of COVID-19 and other respiratory pathogens. These arrangements include 2 new Medicare items for simultaneous testing for either 4 respiratory pathogens, or 5 or more respiratory pathogens which may include COVID-19.
* Make temporary blood-borne virus and sexual and reproductive (BBVSR) telehealth MBS items permanent.
* Discontinue the eligibility exemption for GP non-directive pregnancy counselling services.
* Retain exemptions to telehealth eligibility requirements for MBS GP mental health services.
* Extend and increase 2 nuclear medicine items to continue to support the additional cost of radiopharmaceuticals thallium-201 and gallium-67.

From 1 November 2024, new and amended listings include:

* an amendment to enable a cardiothoracic surgeon to provide a backup standby service during low and intermediate surgical risk Transcatheter Aortic Valve Implantation (TAVI) procedures performed by a non-cardiothoracic surgeon
* a new item for Brain Natriuretic Peptide (BNP) and N-Terminal-pro Brain Natriuretic Peptide (NT-proBNP) laboratory testing to aid in the diagnosis of suspected heart failure in non-hospital settings
* an increased fee for Rhesus D non-invasive prenatal testing (NIPT) of non-alloimmunised patients and amendment to include patients expecting more than one child
* an amendment for genetic testing for childhood hearing loss to allow patients with unilateral hearing loss to access testing
* an amendment for reproductive carrier testing for cystic fibrosis, spinal muscular atrophy and fragile X syndrome to clarify policy intent and mitigate inappropriate co-claiming
* an amendment for somatic gene panel testing for the diagnosis and classification of gliomas to clarify policy intent and remove specification of test methodology
* an amendment of deletion testing of patients with chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL) to allow for new test methodologies
* an amendment to clarify policy intent and specify the purposes of particular types of genetic testing for various neuromuscular conditions (NMDs)
* a new item for point-of-care testing for detection of neisseria gonorrhoea, chlamydia trachomatis and trichomonas vaginalis provided by providers located in remote and very remote communities
* a new item for follow-up PET/computed tomography (CT) imaging for the assessment of treatment response and recurrence for patients with eligible rare cancer types
* an amended MRI item to include its use for the restaging and follow up of rectal cancer
* an amendment to allow additional appropriately trained specialists to provide vertebroplasty
* minor updates to better support GP-led team care for patients with chronic conditions
* an amendment to provide operative treatment of all degrees of haemorrhoids
* expansion of ultrasound requesting rights for nurse practitioners to support before- and after-care for the MS-2 Step medical abortion program
* temporarily instating MBS items for telehealth admission and other subsequent consultation by psychiatrists for inpatients in private hospitals
* an amendment to allow for intraoperative cell salvage.

Existing COVID-19 vaccine support items will be extended to 30 June 2025. After this date they’ll cease and be replaced by standard consultation items. The item descriptors and other regulatory requirements won’t change until 30 June 2025.

This measure will streamline and simplify the reporting and treatment of COVID-19 vaccines within the Australian Immunisation Register.

From 1 March 2025, new and amended listings include:

* amendments to antenatal and postnatal MBS items for participating midwives services as recommended by the MBS Review Taskforce
* amendments to MBS items to support improved access to optometry services resulting from recommendations of the MBS Review Taskforce
* an amendment to remove the 85% ‘out of hospital’ rebate level, while retaining the 75% ‘in hospital’ rebate level, for Category 3, 4 and 5 – Therapeutic Procedures services that should only be provided in a hospital or equivalent environment
* two new general attendance (Level E) items for nurse practitioners to deliver primary health care services.

From 1 July 2025, new and amended listings include:

* amendments to MBS services for Ophthalmology as recommended by the MBS Review Taskforce and minor administrative changes for MBS items related to the eye and associated anatomy
* two new items for gynaecology consultations 45 minutes or longer, for patients who have complex needs such as suspected endometriosis.

The MBS is managed by the Department of Health and Aged Care and administered by Services Australia.

This measure is subject to legislation passing.

Who this measure affects

This affects patients eligible for these MBS items and health professionals providing these services.

When this starts and finishes

This measure is ongoing, and starts:

* 1 November 2024 for the indexation of nuclear medicine
* 1 July 2025 for removing MRI equipment eligibility requirements.

The new and amended MBS listings are effective from dates stated and are ongoing.