



Health Insurance Legislation Amendment (2021 Measures No. 1) Regulations 2021

I, General the Honourable David Hurley AC DSC (Retd), Governor-General of the Commonwealth of Australia, acting with the advice of the Federal Executive Council, make the following regulations.

Dated 27 May 2021

David Hurley
Governor-General

By His Excellency's Command

Greg Hunt
Minister for Health and Aged Care

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1 Name

This instrument is the *Health Insurance Legislation Amendment (2021 Measures No. 1) Regulations 2021*.

2 Commencement

- (1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

Commencement information		
Column 1	Column 2	Column 3
Provisions	Commencement	Date/Details
1. Sections 1 to 3 and anything in this instrument not elsewhere covered by this table	The day after this instrument is registered.	3 June 2021
2. Schedule 1, Part 1	1 July 2021.	1 July 2021
3. Schedule 1, Parts 2, 3 and 3A	Immediately after the commencement of the <i>Health Insurance (General Medical Services Table) Regulations 2021</i> .	1 July 2021
4. Schedule 1, Part 4	1 July 2021.	1 July 2021

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

- (2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

This instrument is made under the *Health Insurance Act 1973*.

4 Schedules

Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1—Amendments

Part 1—Indexation

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

1 Clauses 2.1.3, 2.1.6 and 2.1.10 of Schedule 1 (before the table)

Insert:

Note: The fees for items in Group I1 are indexed on 1 July 2021—see clause 2.7.1.

2 Clause 2.2.6 of Schedule 1 (before the table)

Insert:

Note: The fees for items in Group I2 are indexed on 1 July 2021—see clause 2.7.1.

3 Clauses 2.3.4, 2.3.6, 2.3.7, 2.3.8, 2.3.10 and 2.3.12 of Schedule 1 (before the table)

Insert:

Note: The fees for items in Group I3 are indexed on 1 July 2021—see clause 2.7.1.

4 Clause 2.6.2 of Schedule 1 (before the table)

Insert:

Note: The fees for items in Group I6 are indexed on 1 July 2021—see clause 2.7.1.

5 At the end of Part 2 of Schedule 1

Add:

Division 2.7—Indexation of fees

2.7.1 Indexation—1 July 2021

- (1) On 1 July 2021 (the *indexation day*), each amount covered by subclause (2) is replaced by the amount worked out using the following formula:

$1.009 \times$ the amount immediately before the indexation day

Note: The indexed fees could in 2021 be viewed on the Department of Health's MBS Online website (<http://www9.health.gov.au>).

- (2) The amounts covered by this subclause are the following:
- (a) the fee for each item in the following:
 - (i) Group I1 (ultrasound services);
 - (ii) Group I2 (computer tomography services);
 - (iii) Group I3 (diagnostic radiology services);
 - (iv) Group I6 (bulk-billed services);
 - (b) the amount mentioned in each of subclauses 2.3.3(2) and (3) (increased fee for certain diagnostic radiology services carried out at residential aged care facilities).

- (3) An amount worked out under subclause (1) is to be rounded up or down to the nearest 5 cents (rounding down if the amount is an exact multiple of 2.5 cents).

Health Insurance (Pathology Services Table) Regulations 2020

6 Clause 2.12.2 of Schedule 1 (before the table)

Insert:

Note: The fees for items in Group P12 are indexed on 1 July 2021—see clause 2.14.1.

7 At the end of Part 2 of Schedule 1

Add:

Division 2.14—Indexation of fees

2.14.1 Indexation—1 July 2021

- (1) On 1 July 2021 (the ***indexation day***), the amount of a fee for an item in Group P12 is replaced by the amount worked out using the following formula:

$1.009 \times$ the amount of the fee immediately before the indexation day

Note: The indexed fees could in 2021 be viewed on the Department of Health's MBS Online website (<http://www9.health.gov.au>).

- (2) An amount worked out under subclause (1) is to be rounded up or down to the nearest 5 cents (rounding down if the amount is an exact multiple of 2.5 cents).

Part 2—Administrative changes to cardiac items

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

8 Schedule 1 (item 55118)

After “two-dimensional”, insert “or three-dimensional”.

9 Schedule 1 (item 55118, column 2, subparagraph (a)(ii))

Omit “video tape or digital medium”, substitute “digital media”.

10 Schedule 1 (cell at item 55130, column 2)

Repeal the cell, substitute:

Intraoperative two-dimensional or three-dimensional real time
transoesophageal echocardiography, if the service:

- (a) includes Doppler techniques with colour flow mapping and recordings on digital media; and
- (b) is performed during cardiac surgery; and
- (c) incorporates sequential assessment of cardiac function before and after the surgical procedure; and
- (d) is not associated with a service to which item 55135, or an item in Subgroup 3, applies (R) (Anaes.)

11 Schedule 1 (cell at item 55135, column 2)

Repeal the cell, substitute:

Intraoperative two-dimensional or three-dimensional real time
transoesophageal echocardiography, if the service:

- (a) is provided on the same day as a service to which item 38477, 38484, 38499, 38516 or 38517 applies; and
- (b) includes Doppler techniques with colour flow mapping and recordings on digital media; and
- (c) is performed during cardiac valve surgery (replacement or repair); and
- (d) incorporates sequential assessment of cardiac function and valve competence before and after the surgical procedure; and
- (e) is not associated with a service to which item 55130, or an item in Subgroup 3, applies (R) (Anaes.)

12 Schedule 1 (item 55137, column 2, paragraph (c))

Repeal the paragraph, substitute:

- (c) is not associated with a service to which:
 - (i) an item in Subgroup 2 applies (except items 55118 and 55130); or
 - (ii) an item in Subgroup 3 applies (R)

13 Schedule 1 (item 55143, column 2, paragraph (a))

Omit “55146 applies”, substitute “55146, or this item, applies”.

14 Schedule 1 (item 57360, column 2, paragraph (b))

Repeal the paragraph, substitute:

- (b) for a patient not known to have coronary artery disease who:
- (i) has stable or acute symptoms consistent with coronary ischaemia; and
 - (ii) is at low to intermediate risk of an acute coronary event, including having no significant cardiac biomarker elevation and no electrocardiogram changes indicating acute ischaemia
- Applicable not more than once in a 5 year period (R) (Anaes.)

15 Schedule 1 (items 59903 to 59925)

Repeal the items.

16 Clause 2.3.9 of Schedule 1

Omit “any of items 59903 to 59970 apply”, substitute “item 59970 applies”.

17 Schedule 1 (item 60918)

Omit “59903, 59912, 59925 or”.

18 Schedule 1 (item 60927)

Omit “59903, 59912, 59925 or”.

19 Clause 2.4.1D of Schedule 1

Repeal the clause.

20 Schedule 1 (item 61321, column 2, paragraph (d))

Repeal the paragraph, substitute:

- (d) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61325, 61329, 61332, 61345, 61380, 61398, 61406 or 61422 applies; and
- (e) if the patient is 17 years or older—a service to which this item, or item 61325, 61329, 61332, 61345, 61380, 61398, 61406 or 61422, applies has not been provided to the patient in the previous 24 months (R)

21 Schedule 1 (item 61324, column 2, paragraph (e))

Repeal the paragraph, substitute:

- (e) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61325, 61329, 61332, 61377, 61345, 61357, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and
- (f) if the patient is 17 years or older—a service to which this item, or item 61311, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61398, 61406 or 61414, applies has not been provided to the patient in the previous 24 months (R)

22 Schedule 1 (item 61325, column 2, paragraph (d))

Repeal the paragraph, substitute:

- (d) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61321, 61329, 61332, 61345, 61380, 61398, 61406 or 61422 applies; and
- (e) if the patient is 17 years or older:
- (i) a service to which item 61321, 61329, 61332, 61345, 61380, 61398, 61406 or 61442, applies has not been provided to the patient in the previous 24 months; and
 - (ii) the service is applicable only twice each 24 months (R)

23 Schedule 1 (item 61329, column 2, paragraph (e))

Repeal the paragraph, substitute:

- (e) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61332, 61345, 61357, 61377, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and
- (f) if the patient is 17 years or older—a service to which this item, or item 61311, 61321, 61324, 61325, 61332, 61345, 61357, 61380, 61394, 61398, 61406, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)

24 Schedule 1 (item 61345, column 2, paragraph (e))

Repeal the paragraph, substitute:

- (e) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61357, 61377, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and
- (f) if the patient is 17 years or older—a service to which this item, or item 61311, 61321, 61324, 61325, 61329, 61332, 61357, 61377, 61380, 61394, 61398, 61406, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)

25 Schedule 1 (item 61349, column 2, paragraph (a))

Repeal the paragraph, substitute:

- (a) both:
 - (i) a service has been provided to the patient in the previous 24 months to which this item, or item 61311, 61324, 61329, 61332, 61337, 61345, 61357, 61365, 61380, 61394, 61398, 61406, 61410, 61414 or 61418, applies; and
 - (ii) the patient has subsequently undergone a revascularisation procedure; and

26 Schedule 1 (item 61349, column 2, paragraph (e))

Repeal the paragraph, substitute:

- (e) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61365, 61410 or 61418 applies; and
- (f) if the patient is 17 years or older—a service to which this item, or item 61365, 61410 or 61418, applies has not been provided to the patient in the previous 12 months (R)

27 Schedule 1 (item 61357, column 2, paragraph (e))

Repeal the paragraph, substitute:

- (e) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61377, 61380, 61394, 61398, 61406, 61414 or 61422 applies; and
- (f) if the patient is 17 years or older—a service to which this item, or item 61311, 61324, 61329, 61332, 61345, 61377, 61380, 61394, 61398, 61406, or 61414, applies has not been provided to the patient in the previous 24 months (R)

28 Schedule 1 (item 61394, column 2, paragraph (f))

Repeal the paragraph, substitute:

- (f) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61398, 61406, 61414 or 61422 applies; and
- (g) if the patient is 17 years or older—a service to which this item, or item 61311, 61324, 61329, 61332, 61345, 61357, 61377, 61380, 61398, 61406 or 61414, applies has not been provided to the patient in the previous 24 months (R)

29 Schedule 1 (item 61398, column 2, paragraph (f))

Repeal the paragraph, substitute:

- (f) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61406, 61414 or 61422 applies; and
- (g) if the patient is 17 years or older—a service to which this item, or item 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61406, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)

30 Schedule 1 (item 61406, column 2, paragraph (f))

Repeal the paragraph, substitute:

- (f) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61377, 61345, 61357, 61380, 61394, 61398, 61414 or 61422 applies; and
- (g) if the patient is 17 years or older—a service to which this item, or item 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61398, 61414 or 61422, applies has not been provided to the patient in the previous 24 months (R)

31 Schedule 1 (item 61410, column 2, paragraph (a))

Repeal the paragraph, substitute:

- (a) both:
 - (i) a service has been provided to the patient in the previous 24 months to which this item, or item 61311, 61324, 61329, 61332, 61345, 61349, 61357, 61365, 61377, 61380, 61394, 61398, 61406, 61414 or 61418, applies; and
 - (ii) the patient has subsequently undergone a revascularisation procedure; and

32 Schedule 1 (item 61410, column 2, paragraph (e))

Repeal the paragraph, substitute:

- (e) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730 or 61418 applies; and
- (f) if the patient is 17 years or older—a service to which item 61349, 61365 or 61418 applies has not been provided to the patient in the previous 12 months

33 Schedule 1 (item 61414, column 2, paragraph (f))

Repeal the paragraph, substitute:

- (f) the service is not associated with a service to which item 11704, 11705, 11707, 11714, 11729, 11730, 61311, 61321, 61324, 61325, 61329, 61332, 61345, 61357, 61377, 61380, 61394, 61398, 61406 or 61422 applies; and
- (g) if the patient is 17 years or older—a service to which this item, or item 61311, 61324, 61329, 61332, 61345, 61357, 61377, 61380, 61398 or 61406, applies has not been provided to the patient in the previous 24 months (R)

Health Insurance (General Medical Services Table) Regulations 2021

34 Clause 1.2.13 of Schedule 1

Omit “specialist or consultant physician” (wherever occurring), substitute “specialist, consultant physician or medical practitioner”.

35 Clause 4.1.3A of Schedule 1

Repeal the clause, substitute:

4.1.3A Restriction on items 11704, 11705, 11716, 11717, 11723 and 11735—reports

- (1) Items 11704, 11705, 11716, 11717, 11723 and 11735 apply to a service only if:
 - (a) the report required for the service complies with subclause (2); and
 - (b) if the service was requested—a copy of the report is provided to the requesting practitioner.
- (2) The report must:
 - (a) be in writing; and
 - (b) be prepared by a specialist or consultant physician; and
 - (c) include an interpretation of the trace, including the indicators for the investigation; and
 - (d) include comments on the significance of:
 - (i) the trace findings; and
 - (ii) the relationship of the trace findings to clinical decision making for the patient in the clinical context; and
 - (e) if appropriate—include a copy of the trace and any measurements taken or automatically generated; and
 - (f) for item 11705—be a report of a trace from a twelve-lead electrocardiography for the patient:
 - (i) provided with the request by the requesting practitioner; and
 - (ii) that has not previously been reported on.

36 Clause 4.1.3B of Schedule 1 (heading)

Omit “services to include”.

37 Schedule 1 (item 11729, column 2, subparagraph (e)(ii))

Repeal the subparagraph, substitute:

- (ii) performed within 24 months of a service to which item 55141, 55143, 55145, 55146, 61311, 61324, 61329, 61332, 61345, 61349, 61357, 61365, 61377, 61380, 61394, 61398, 61406, 61410, 61414 or 61418 applies

38 Schedule 1 (item 11730, column 2, subparagraph (e)(ii))

Repeal the subparagraph, substitute:

- (ii) performed within 24 months of a service to which item 55141, 55143, 55145, 55146, 61311, 61324, 61329, 61332, 61345, 61349, 61357, 61365, 61377, 61380, 61394, 61398, 61406, 61410, 61414 or 61418 applies

39 Schedule 1 (item 38286)

Repeal the item, substitute:

38286	Removal of implantable ECG loop recorder (Anaes.)	144.60
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Part 3—Cardiac services

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

40 Subclause 2.2.1(1) of Schedule 1

Omit “item 57360”, substitute “items 57360 and 57364”.

41 Subclause 2.2.1(2) of Schedule 1

Omit “Item 57360 applies”, insert “Items 57360 and 57364 apply”.

42 Schedule 1 (after item 57360)

Insert:

57364	Computed tomography of the coronary arteries performed on a minimum of a 64 slice (or equivalent) scanner, if: (a) the service is requested by a specialist or consultant physician; and (b) at least one of the following apply to the patient: (i) the patient has stable symptoms and newly recognised left ventricular systolic dysfunction of unknown aetiology; (ii) the patient requires exclusion of coronary artery anomaly or fistula; (iii) the patient will be undergoing non-coronary cardiac surgery; (iv) the patient meets the criteria to be eligible for a service to which item 38247, 38249 or 38252 applies, but as an alternative to selective coronary angiography will require an assessment of the patency of one or more bypass grafts (R) (Anaes)	710.50
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Health Insurance (General Medical Services Table) Regulations 2021

43 Subclause 1.2.11 of Schedule 1

Omit “11715, 11716, 11717, 11718”, substitute “11716, 11717”.

44 At the end of Part 2 of Schedule 1

Add:

Division 2.32—Group A37: Cardiothoracic surgeon attendance for lead extraction

2.32.1 Items in Group A37

This clause sets out items in Group A37.

Schedule 1 Amendments
Part 3 Cardiac services

Group A37—Cardiothoracic surgeon attendance for lead extraction		
Column 1	Column 2	Column 3
Item	Description	Fee (\$)
90300	Professional attendance by a cardiothoracic surgeon in the practice of the surgeon's speciality, if: (a) the service is performed in conjunction with a service (the <i>lead extraction service</i>) to which item 38358 applies; and (b) the surgeon is: (i) either performing, or providing surgical backup for the provider (who is not a cardiothoracic surgeon) who is performing, the lead extraction service; and (ii) present for the duration of the lead extraction service, other than during the low risk pre and post extraction phases; and (iii) able to immediately scrub in and perform a thoracotomy if major complications occur	895.25
(H)		

45 Schedule 1 (items 11715 and 11718)

Repeal the items.

46 Schedule 1 (item 11720, column 2)

Omit "11718 or".

47 Schedule 1 (item 11721, column 2)

Omit "11718", insert "11704".

48 Schedule 1 (item 11727, column 2)

Omit "11718,".

49 Schedule 1 (item 13400)

Repeal the item, substitute:

13400	Restoration of cardiac rhythm by electrical stimulation (cardioversion), other than in the course of cardiac surgery (H) (Anaes.)	100.75
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50 Subclause 5.10.17(2) of Schedule 1

Omit "38478 to 38766 (other than items 38609, 38615, 38618, 38621, 38624 and 38654)", substitute "38485 to 38766 (other than items 38609, 38615, 38618, 38621 and 38624)".

51 After clause 5.10.17 of Schedule 1

Insert:

5.10.17A Items 38244, 38247, 38307, 38308, 38310, 38316, 38317 and 38319—patient eligibility and timing

- (1) A patient is eligible for a service to which item 38244, 38247, 38307, 38308, 38310, 38316, 38317 or 38319 applies if:
 - (a) subclause (2) applies to the patient; and

- (b) a service to which the item applies has not been provided to the patient in the previous 3 months, unless:
 - (i) the patient experiences a new acute coronary syndrome or angina, as described in paragraph (2)(a), (b) or (c), in that period; or
 - (ii) for a service to which item 38316, 38317 or 38319 applies—the service was provided to the patient in that period as a subsequent stage following an initial primary percutaneous coronary intervention procedure.
- (2) This subclause applies to a patient who has:
 - (a) an acute coronary syndrome evidenced by any of the following:
 - (i) ST segment elevation;
 - (ii) new left bundle branch block;
 - (iii) troponin elevation above the local upper reference limit;
 - (iv) new resting wall motion abnormality or perfusion defect;
 - (v) cardiogenic shock;
 - (vi) resuscitated cardiac arrest;
 - (vii) ventricular fibrillation;
 - (viii) sustained ventricular tachycardia; or
 - (b) unstable angina or angina equivalent with a crescendo pattern, rest pain or other high-risk clinical features, such as hypotension, dizziness, pallor, diaphoresis or syncope occurring at a low threshold; or
 - (c) either of the following, detected on computed tomography coronary angiography:
 - (i) significant left main coronary artery disease with greater than 50% stenosis or a cross-sectional area of less than 6 mm²;
 - (ii) severe proximal left anterior descending coronary artery disease (with stenosis of more than 70% or a cross-sectional area of less than 4 mm² before the first major diagonal branch).

5.10.17B Items 38248 and 38249—patient eligibility

- (1) A patient is eligible for a service to which item 38248 or 38249 applies if:
 - (a) subclause (2) applies to the patient; or
 - (b) the patient is recommended for coronary angiography as a result of a heart team conference that meets the requirements of subclause (3).
- (2) This subclause applies to a patient who has:
 - (a) limiting angina or angina equivalent, despite an adequate trial of optimal medical therapy; or
 - (b) high risk features, including at least one of the following:
 - (i) myocardial ischaemia demonstrated on functional imaging;
 - (ii) ST segment elevation, sustained ST depression, hypotension or a Duke treadmill score of minus 11 or less, demonstrated by stress electrocardiogram testing;
 - (iii) computed tomography coronary angiography evidence of one or more coronary arteries with stenosis of 70% or more; or
 - (iv) left ventricular dysfunction with an ejection fraction of less than 40% or segmental wall motion abnormality at rest.

- (3) For the purposes of paragraph (1)(b), the requirements for a heart team conference are as follows:
 - (a) the conference must be conducted by a team of specialists or consultant physicians practising in the speciality of cardiology or cardiothoracic surgery, including each of the following:
 - (i) an interventional cardiologist;
 - (ii) a non-interventional cardiologist;
 - (iii) a specialist or consultant physician; and
 - (b) the team must:
 - (i) assess the patient's risk and technical suitability to receive the service; and
 - (ii) make a recommendation about whether or not the patient is suitable for invasive coronary angiography; and
 - (c) a record of the conference must be created, and must include the following:
 - (i) the particulars of the assessment of the patient during the conference;
 - (ii) the recommendations made as a result of the conference;
 - (iii) the names of the members of the team making the recommendations.

5.10.17C Items 38311, 38313, 38314, 38320, 38322 and 38323—patient eligibility

- (1) A patient is eligible for a service to which item 38311, 38313, 38314, 38320, 38322 or 38323 applies if:
 - (a) subclause (2) applies to the patient; or
 - (b) the patient is recommended for the service as a result of a heart team conference that meets the requirements of subclause (4).
- (2) This subclause applies to a patient if:
 - (a) the patient has any of the following:
 - (i) limiting angina or angina equivalent despite an adequate trial of optimal medical therapy;
 - (ii) myocardial ischaemia demonstrated on functional imaging;
 - (iii) high risk features such as ST segment elevation, sustained ST depression, hypotension or a Duke treadmill score of minus 11 or less, demonstrated by stress electrocardiogram testing; and
 - (b) the patient has either of the following in a vascular territory treated:
 - (i) a stenosis of 70% or more;
 - (ii) a fractional flow reserve of 0.80 or less, or non-hyperaemic pressure ratios distal to the lesions of 0.89 or less; and
 - (c) for items 38314 and 38323—either:
 - (i) the patient does not have diabetes mellitus and the multi-vessel coronary artery disease of the patient meets the criterion in subclause (3); or
 - (ii) despite a recommendation that surgery is preferable, the patient has expressed a preference for catheter-based intervention.
- (3) For the purposes of subparagraph (2)(c)(i), the criterion for the multi-vessel coronary artery disease is that the disease does not involve any of the following:
 - (a) stenosis of more than 50% in the left main coronary artery;
 - (b) bifurcation lesions involving side branches with a diameter of more than 2.75 mm;

- (c) chronic vessel occlusions for more than 3 months;
 - (d) severely angulated or calcified lesions;
 - (e) a SYNTAX score of more than 23.
- (4) For the purposes of paragraph (1)(b), the requirements for a heart team conference are as follows:
- (a) the conference must be conducted by a team of specialists or consultant physicians practising in the speciality of cardiology or cardiothoracic surgery, including each of the following:
 - (i) an interventional cardiologist;
 - (ii) a specialist or consultant physician;
 - (iii) for items 38314 and 38323—a cardiothoracic surgeon;
 - (iv) for items 38311, 38313, 38320 and 38322—a cardiothoracic surgeon or a non-interventional cardiologist; and
 - (b) the team must:
 - (i) assess the patient's risk and technical suitability to receive the service; and
 - (ii) make a recommendation about whether or not the patient is suitable for percutaneous coronary intervention; and
 - (c) a record of the conference must be created, and must include the following:
 - (i) the particulars of the assessment of the patient during the conference;
 - (ii) the recommendations made as a result of the conference;
 - (iii) the names of the members of the team making the recommendations.

5.10.17D Restriction on items 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38320, 38322, 38323, 38316, 38317 and 38319—reports and clinical notes

Items 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38320, 38322, 38323, 38316, 38317 and 38319 apply to a service provided to a patient only if a report or clinical note:

- (a) is prepared for the service; and
- (b) includes documentation that demonstrates how the item applies to the service, including how the patient is eligible for the service.

52 Schedule 1 (items 38200 to 38206)

Repeal the items, substitute:

38200	Right heart catheterisation with any one or more of the following: <ul style="list-style-type: none"> (a) fluoroscopy; (b) oximetry; (c) dye dilution curves; (d) cardiac output measurement by any method; (e) shunt detection; (f) exercise stress test; other than a service associated with a service to which item 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38254 or 38368 applies (Anaes.)	463.50
38203	Left heart catheterisation by percutaneous arterial puncture, arteriotomy	553.10

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	<p>or percutaneous left ventricular puncture, with any one or more of the following:</p> <p>(a) fluoroscopy;</p> <p>(b) oximetry;</p> <p>(c) dye dilution curves;</p> <p>(d) cardiac output measurements by any method;</p> <p>(e) shunt detection;</p> <p>(f) exercise stress test;</p> <p>other than a service associated with a service to which item 38200, 38206, 38244, 38247, 38248, 38249, 38251, 38252 or 38254 applies (Anaes.)</p>	
38206	<p>Right heart catheterisation with left heart catheterisation via the right heart or by another procedure, with any one or more of the following:</p> <p>(a) fluoroscopy;</p> <p>(b) oximetry;</p> <p>(c) dye dilution curves;</p> <p>(d) cardiac output measurements by any method;</p> <p>(e) shunt detection;</p> <p>(f) exercise stress test;</p> <p>other than a service associated with a service to which item 38200, 38203, 38244, 38247, 38248, 38249, 38251, 38252 or 38254 applies (Anaes.)</p>	668.70

53 Schedule 1 (items 38212 to 38246)

Repeal the items, substitute:

38212	<p>Cardiac electrophysiological study involving 4 or more catheters for:</p> <p>(a) supraventricular tachycardia investigation; or</p> <p>(b) complex tachycardia inductions; or</p> <p>(c) multiple catheter mapping; or</p> <p>(d) acute intravenous anti-arrhythmic drug testing with pre and post drug inductions; or</p> <p>(e) catheter ablation to intentionally induce complete atrioventricular block; or</p> <p>(f) intraoperative mapping;</p> <p>other than a service associated with a service to which item 38209 or 38213 applies (Anaes.)</p>	1,428.05
38213	<p>Cardiac electrophysiological study, performed either:</p> <p>(a) during insertion of implantable defibrillator; or</p> <p>(b) for defibrillation threshold testing at a different time to implantation;</p> <p>other than a service associated with a service to which item 38209 or 38212 applies (Anaes.)</p>	425.30
38241	<p>Use of a coronary pressure wire, if the service is:</p> <p>(a) performed during selective coronary angiography, percutaneous angioplasty or transluminal insertion of one or more stents; and</p> <p>(b) to measure fractional flow reserve, non-hyperaemic pressure ratios or coronary flow reserve in intermediate coronary artery or graft lesions (stenosis of 50 to 70%); and</p> <p>(c) to determine whether revascularisation is appropriate, if previous</p>	488.70

	functional imaging: (i) has not been performed; or (ii) has been performed but the results are inconclusive or do not apply to the vessel being interrogated; and (d) performed on one or more coronary vascular territories (Anaes.)	
38244	Selective coronary angiography: (a) for a patient who is eligible for the service under clause 5.10.17A; and (b) with placement of one or more catheters and injection of opaque material into native coronary arteries; and (c) with or without left heart catheterisation, left ventriculography or aortography; and (d) including all associated imaging; other than a service associated with a service to which 38200, 38203, 38206, 38247, 38248, 38249, 38251 or 38252 applies (Anaes)	920.00
38247	Selective coronary and graft angiography: (a) for a patient who is eligible for the service under clause 5.10.17A; and (b) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and (c) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and (d) with or without left heart catheterisation, left ventriculography or aortography; and (e) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38248, 38249, 38251 or 38252 applies (Anaes)	1,473.95
38248	Selective coronary angiography: (a) for a patient who is eligible for the service under clause 5.10.17B; and (b) as part of the management of the patient; and (c) with placement of catheters and injection of opaque material into native coronary arteries; and (d) with or without left heart catheterisation, left ventriculography or aortography; and (e) including all associated imaging; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38249, 38251 or 38252 applies—applicable each 3 months (Anaes.)	920.00
38249	Selective coronary and graft angiography: (a) for a patient who is eligible for the service under clause 5.10.17B; and (b) as part of the management of the patient; and (c) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and (d) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts	1,473.95

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	(irrespective of the number of grafts); and	
	(e) with or without left heart catheterisation, left ventriculography or aortography; and	
	(f) including all associated imaging;	
	other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38251 or 38252 applies—	
	applicable once each 3 months (Anaes.)	
38251	Selective coronary angiography:	920.00
	(a) for a symptomatic patient with valvular or other non-coronary structural heart disease; and	
	(b) as part of the management of the patient for:	
	(i) pre-operative assessment for planning non-coronary cardiac surgery, including by transcatheter approaches; or	
	(ii) evaluation of valvular heart disease or other non-coronary structural heart disease where clinical impression is discordant with non-invasive assessment; and	
	(c) with placement of catheters and injection of opaque material into native coronary arteries; and	
	(d) with or without left heart catheterisation, left ventriculography or aortography; and	
	(e) including all associated imaging;	
	other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249 or 38252 applies—	
	applicable once each 12 months (Anaes.)	
38252	Selective coronary and graft angiography:	1,473.95
	(a) for a symptomatic patient with valvular or other non-coronary structural heart disease; and	
	(b) as part of the management of the patient for:	
	(i) pre-operative assessment for planning non-coronary cardiac surgery, including by transcatheter approaches; or	
	(ii) evaluation of valvular heart disease or other non-coronary structural heart disease where clinical impression is discordant with non-invasive assessment; and	
	(c) with placement of one or more catheters and injection of opaque material into the native coronary arteries; and	
	(d) if free coronary grafts attached to the aorta or direct internal mammary artery grafts are present—with placement of one or more catheters and injection of opaque material into those grafts (irrespective of the number of grafts); and	
	(e) with or without left heart catheterisation, left ventriculography or aortography; and	
	(f) including all associated imaging;	
	other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249 or 38251 applies—	
	applicable once each 12 months (Anaes.)	
38254	Right heart catheterisation:	463.50
	(a) performed at the same time as service to which item 38244, 38247, 38248, 38249, 38251 or 38252 applies; and	
	(b) including any of the following (if performed):	
	(i) fluoroscopy;	
	(ii) oximetry;	
	(iii) dye dilution curves;	

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- (iv) cardiac output measurement;
 - (v) shunt detection;
 - (vi) exercise stress test
- (Anaes.)

54 Schedule 1 (item 38272)

Repeal the item, substitute:

38272	Atrial septal defect or patent foramen closure: (a) for congenital heart disease in a patient with documented evidence of right heart overload or paradoxical embolism; and (b) using a septal occluder or similar device, by transcatheter approach; and (c) including right or left heart catheterisation (or both); other than a service associated with a service to which item 38200, 38203, 38206 or 38254 applies (Anaes.) (Assist.)	949.25
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55 Schedule 1 (item 38274)

Repeal the item, substitute:

38274	Ventricular septal defect, transcatheter closure of, with cardiac catheterisation, excluding imaging (H) (Anaes.) (Assist.)	777.60
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56 Schedule 1 (item 38285)

Repeal the item, substitute:

38285	Insertion of implantable ECG loop recorder, by a specialist or consultant physician, for the diagnosis of a primary disorder, including initial programming and testing, if: (a) the patient has recurrent unexplained syncope and does not have a structural heart defect associated with a high risk of sudden cardiac death; and (b) a diagnosis has not been achieved through all other available cardiac investigations; and (c) a neurogenic cause is not suspected (Anaes.)	160.55
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57 Schedule 1 (items 38300 to 38318)

Repeal the items, substitute:

38307	Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17A; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; (ii) transluminal insertion of one or more stents; and	1,844.60
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	(d) performed on one coronary vascular territory; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	
38308	Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17A; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	2,122.25
38309	Percutaneous transluminal rotational atherectomy of one or more coronary arteries, including all associated imaging, if: (a) the target stenosis within at least one coronary artery is heavily calcified and balloon angioplasty with or without stenting is not feasible without rotational atherectomy; and (b) the service is performed in conjunction with a service to which item 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies Applicable only once on each occasion the service is performed (Anaes.) (Assist.)	1,250.70
38310	Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17A; and (ii) for whom selective coronary angiography has not been completed in the previous 3 months; and (b) including selective coronary angiography and all associated imaging, catheter and contrast; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	2,399.90
38311	Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause 5.10.17C for the service and a service to	1,844.60

	<p>which item 38314 applies; and</p> <p>(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and</p> <p>(b) including selective coronary angiography and all associated imaging, catheter and contrast; and</p> <p>(c) including either or both:</p> <p>(i) percutaneous angioplasty; and</p> <p>(ii) transluminal insertion of one or more stents; and</p> <p>(d) performed on one coronary vascular territory; and</p> <p>(e) excluding aftercare;</p> <p>other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38313, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)</p>	
38313	<p>Percutaneous coronary intervention:</p> <p>(a) for a patient:</p> <p>(i) eligible under clause 5.10.17C for the service and a service to which item 38314 applies; and</p> <p>(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and</p> <p>(b) including selective coronary angiography and all associated imaging, catheter and contrast; and</p> <p>(c) including either or both:</p> <p>(i) percutaneous angioplasty; and</p> <p>(ii) transluminal insertion of one or more stents; and</p> <p>(d) performed on 2 coronary vascular territories; and</p> <p>(e) excluding aftercare;</p> <p>other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38314, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)</p>	2,122.25
38314	<p>Percutaneous coronary intervention:</p> <p>(a) for a patient:</p> <p>(i) eligible for the service under clause 5.10.17C; and</p> <p>(ii) for whom selective coronary angiography has not been completed in the previous 3 months; and</p> <p>(b) including selective coronary angiography and all associated imaging, catheter and contrast; and</p> <p>(c) including either or both:</p> <p>(i) percutaneous angioplasty; and</p> <p>(ii) transluminal insertion of one or more stents; and</p> <p>(c) performed on 3 coronary vascular territories; and</p> <p>(e) excluding aftercare;</p> <p>other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38316, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)</p>	2,399.90
38316	<p>Percutaneous coronary intervention:</p> <p>(a) for a patient:</p> <p>(i) eligible for the service under clause 5.10.17A; and</p> <p>(ii) for whom selective coronary angiography has been completed in the previous 3 months; and</p>	1,648.95

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	(b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on one coronary vascular territory; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38317, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	
38317	Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17A; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38319, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	2,088.80
38319	Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17A; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38320, 38322 or 38323 applies (Anaes.) (Assist.)	2,366.45
38320	Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause 5.10.17C for the service and a service to which item 38323 applies; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on one coronary vascular territory; and	1,648.95

	(e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38322 or 38323 applies (Anaes.) (Assist.)	
38322	Percutaneous coronary intervention: (a) for a patient: (i) eligible under clause 5.10.17C for the service and a service to which item 38323 applies; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 2 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320 or 38323 applies (Anaes.) (Assist.)	2,088.80
38323	Percutaneous coronary intervention: (a) for a patient: (i) eligible for the service under clause 5.10.17C; and (ii) for whom selective coronary angiography has been completed in the previous 3 months; and (b) including any associated coronary angiography; and (c) including either or both: (i) percutaneous angioplasty; and (ii) transluminal insertion of one or more stents; and (d) performed on 3 coronary vascular territories; and (e) excluding aftercare; other than a service associated with a service to which item 38200, 38203, 38206, 38244, 38247, 38248, 38249, 38251, 38252, 38307, 38308, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320 or 38322 applies (Anaes.) (Assist.)	2,366.45

58 Schedule 1 (item 38358)

Repeal the item, substitute:

38358	Extraction of one or more chronically implanted transvenous pacing or defibrillator leads, by percutaneous method, with locking stylets and snares, with extraction sheaths (if any), if: (a) the leads have been in place for more than 6 months and require removal; and (b) the service is performed: (i) in association with a service to which item 61109 or 60509 applies; and (ii) by a specialist or consultant physician who has undertaken the training to perform the service; and (iii) in a facility where cardiothoracic surgery is available and a	2,089.00
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thoracotomy can be performed immediately and without transfer; and

(c) if the service is performed by an interventional cardiologist—a cardiothoracic surgeon is in attendance during the service

(H) (Anaes.) (Assist.)

59 Schedule 1 (items 38365 to 38393)

Repeal the items, substitute:

38365	<p>Insertion, removal or replacement of permanent cardiac synchronisation device, if the patient:</p> <p>(a) has all of the following:</p> <ul style="list-style-type: none"> (i) chronic heart failure, classified as New York Heart Association class III or IV (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 130 ms; or <p>(b) has all of the following:</p> <ul style="list-style-type: none"> (i) chronic heart failure, classified as New York Heart Association class II (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 150 ms; <p>other than a service associated with a service to which item 38212 applies (H) (Anaes.) (Assist.)</p>	265.80
38368	<p>Insertion, removal or replacement of permanent transvenous left ventricular electrode, through the coronary sinus, for the purpose of cardiac resynchronisation therapy, including right heart catheterisation and any associated venograms, if the patient:</p> <p>(a) has all of the following:</p> <ul style="list-style-type: none"> (i) chronic heart failure, classified as New York Heart Association class III or IV (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 130 ms; or <p>(b) has all of the following:</p> <ul style="list-style-type: none"> (i) chronic heart failure, classified as New York Heart Association class II (despite optimised medical therapy); (ii) left ventricular ejection fraction of less than 35%; (iii) QRS duration of greater than or equal to 150 ms; <p>other than a service associated with a service to which item 35200, 38200 or 38212 applies (H) (Anaes.) (Assist.)</p>	1,274.20

60 Schedule 1 (after item 38466)

Insert:

38467	<p>Insertion, removal or replacement of permanent myocardial electrode, by open surgical approach, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)</p>	997.25
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61 Schedule 1 (items 38470 to 38483)

Repeal the items, substitute:

38471	Insertion of implantable defibrillator, including insertion of patches for the insertion of one or more transvenous endocardial leads, if the patient has one of the following: (a) a history of haemodynamically significant ventricular arrhythmias in the presence of structural heart disease; (b) documented high-risk genetic cardiac disease; (c) ischaemic heart disease, with a left ventricular ejection fraction of less than 30% at least one month after experiencing a myocardial infarction and while on optimised medical therapy; (d) chronic heart failure, classified as New York Heart Association class II or III, with a left ventricular ejection fraction of less than 35% (despite optimised medical therapy); other than a service to which item 38212 applies (H) (Anaes.) (Assist)	1,095.30
38472	Insertion, replacement or removal of implantable defibrillator generator, if the patient has one of the following: (a) a history of haemodynamically significant ventricular arrhythmias in the presence of structural heart disease; (b) documented high-risk genetic cardiac disease; (c) ischaemic heart disease, with a left ventricular ejection fraction of less than 30% at least one month after experiencing a myocardial infarction and while on optimised medical therapy; (d) chronic heart failure, classified as New York Heart Association class II or III, with a left ventricular ejection fraction of less than 35% (despite optimised medical therapy); other than a service to which item 38212 applies (H) (Anaes.) (Assist)	299.50
38474	Repair, augmentation or replacement of branch pulmonary arteries—left or right (or both), with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,257.10
38477	Valve annuloplasty with insertion of ring, other than: (a) a service to which item 38516 or 38517 applies; or (b) a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,084.55
38484	Aortic or pulmonary valve replacement with bioprosthesis or mechanical prosthesis, including retrograde cardioplegia (if performed), other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,112.20

62 Schedule 1 (items 38488 to 38490)

Repeal the items, substitute:

38490	Reconstruction and re-implantation of sub-valvular structures, if performed in conjunction with a service to which item 38499 applies (H) (Anaes.) (Assist.)	577.00
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63 Schedule 1 (items 38496 to 38518)

Repeal the items, substitute:

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38499	Mitral or tricuspid valve replacement with bioprosthesis or mechanical prosthesis, including retrograde cardioplegia (if performed), other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,112.20
38502	Coronary artery bypass, including cardiopulmonary bypass, with or without retrograde cardioplegia, with or without vein grafts, and including at least one of the following: (a) harvesting of left internal mammary artery and vein graft material; (b) harvesting of left internal mammary artery; (c) harvesting of vein graft material; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,451.55
38508	Repair or reconstruction of left ventricular aneurysm, including plication, resection and primary and patch repairs, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1,996.20
38509	Repair of ischaemic ventricular septal rupture, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,485.45
38510	Artery harvesting (other than of the left internal mammary), for coronary artery bypass, if: (a) more than one arterial graft is required; and (b) the service is performed in conjunction with a service to which item 38502 applies (H) (Anaes.) (Assist.)	649.25
38511	Coronary artery bypass, with the aid of tissue stabilisers, if the service is performed: (a) without cardiopulmonary bypass; and (b) in conjunction with a service to which item 38502 applies (H) (Anaes.) (Assist.)	624.30
38512	Division of accessory pathway, isolation procedure, procedure on atrioventricular node or perinodal tissues involving one atrial chamber only, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,183.55
38513	Creation of graft anastomosis, including Y-graft, T-graft and graft-to-graft extensions, with micro-arterial or micro-venous anastomosis using microsurgical techniques, if the service is performed in conjunction with a service to which item 38502 applies (H) (Anaes.) (Assist.)	1,040.55
38515	Division of accessory pathway, isolation procedure, procedure on atrioventricular node or perinodal tissues involving both atrial chambers and including curative surgery for atrial fibrillation, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,780.20
38516	Simple valve repair: (a) with or without annuloplasty; and (b) including quadrangular resection, cleft closure or alfieri; and (c) including retrograde cardioplegia (if performed);	2,509.25

	other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist)	
38517	Complex valve repair: (a) with or without annuloplasty; and (b) including retrograde cardioplegia (if performed); and (c) including one of the following: (i) neochords; (ii) chordal transfer; (iii) patch augmentation; (iv) multiple leaflets; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist)	3,055.85
38518	Ventricular arrhythmia with mapping and muscle ablation, with or without aneurysmectomy, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,984.25
38519	Valve explant of a previous prosthesis, if performed during a service to which item 38484 or 38499 applies, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1,100.00

64 Schedule 1 (items 38550 to 38565)

Repeal the items, substitute:

38550	Repair or replacement of ascending thoracic aorta: (a) including: (i) cardiopulmonary bypass; and (ii) retrograde cardioplegia (if performed); and (b) not including valve replacement or repair or implantation of coronary arteries; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,337.50
38553	Repair or replacement of ascending thoracic aorta: (a) including: (i) aortic valve replacement or repair; and (i) cardiopulmonary bypass; and (ii) retrograde cardioplegia (if performed); and (b) not including implantation of coronary arteries; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,942.90
38554	Valve sparing aortic root surgery, with reimplantation of aortic valve and coronary arteries and replacement of the ascending aorta, including cardiopulmonary bypass, and including retrograde cardioplegia (if performed), other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist)	4,236.45
38555	Simple replacement or repair of aortic arch, performed in conjunction	3,374.00

Schedule 1 Amendments
Part 3 Cardiac services

	with a service to which item 38550, 38553, 38554, 38556, 38568 or 38571 applies, including: (a) deep hypothermic circulatory arrest; and (b) peripheral cannulation for cardiopulmonary bypass; and (c) antegrade or retrograde cerebral perfusion (if performed); other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38603, 38806 or 45503 applies (H) (Anaes.) (Assist.)	
38556	Repair or replacement of ascending thoracic aorta, including: (a) aortic valve replacement or repair; and (b) implantation of coronary arteries; and (c) cardiopulmonary bypass; and (d) retrograde cardioplegia (if performed); other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38603, 38806 or 45503 applies (H) (Anaes.) (Assist.)	3,230.50
38557	Complex replacement or repair of aortic arch, performed in conjunction with a service to which item 38550, 38553, 38554, 38556, 38568 or 38571 applies, including: (a) debranching and reimplantation of head and neck vessels; and (b) deep hypothermic circulatory arrest; and (c) peripheral cannulation for cardiopulmonary bypass; and (d) antegrade or retrograde cerebral perfusion (if performed); other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	3,894.30
38558	Aortic repair involving augmentation of hypoplastic or interrupted aortic arch, if: (a) the patient is a neonate; and (b) the service includes: (i) the use of antegrade cerebral perfusion or deep hypothermic circulatory arrest and associated myocardial preservation; and (ii) retrograde cardioplegia; other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	5,083.70

65 Schedule 1 (items 38568 to 38588)

Repeal the items, substitute:

38568	Repair or replacement of descending thoracic aorta, without shunt or cardiopulmonary bypass, by open exposure, percutaneous or endovascular means, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1,938.45
38571	Repair or replacement of descending thoracic aorta, with shunt or cardiopulmonary bypass, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,209.65
38572	Operative management of acute rupture or dissection, if the service:	2,067.60

- (a) is performed in conjunction with a service to which item 38550, 38553, 38554, 38555, 38556, 38557, 38558, 38568, 38571, 38706 or 38709 applies; and
- (b) is not associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies
- (H) (Anaes.) (Assist.)

66 Schedule 1 (items 38603 to 38613)

Repeal the items, substitute:

38603	Peripheral cannulation for cardiopulmonary bypass, excluding post-operative management, other than a service: (a) in which peripheral cannulation is used in preference to central cannulation for valve or coronary bypass procedures; or (b) associated with a service to which item 38555 or 38572 applies (H) (Anaes.) (Assist.)	997.25
38609	Insertion of intra-aortic balloon pump, by arteriotomy, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	498.55
38612	Removal of intra-aortic balloon pump, with closure of artery by direct suture, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	558.90

67 Schedule 1 (items 38615 and 38618, column 2)

Omit all of the words from and including “not being”, substitute:

other than a service associated with a service to which:

- (d) item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies; or
- (e) another item in this Schedule applies if the service described in the item is for the use of a ventricular assist device as destination therapy in the management of a patient with heart failure who is not expected to be a suitable candidate for cardiac transplantation
- (H) (Anaes.) (Assist.)

68 Schedule 1 (items 38621 and 38624)

Omit “procedure”, substitute “procedure, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38627, 38806 or 45503 applies”.

69 Schedule 1 (item 38627)

Omit “devices”, substitute “devices, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

70 Schedule 1 (item 38637)

Omit “of”, substitute “of, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

71 Schedule 1 (items 38640 to 38654)

Repeal the items, substitute:

38643	Re-operation via thoracotomy or sternotomy, by any procedure: (a) including any division of adhesions if the time taken to divide the adhesions exceeds 30 minutes; and (b) other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	1,567.65
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38653	Open heart surgery, other than a service: (a) to which another item in this Group applies; or (b) associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,090.50

72 Schedule 1 (item 38656)

Omit “bleeding”, substitute “bleeding, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

73 Schedule 1 (item 38670)

Omit “reconstruction”, substitute “reconstruction, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

74 Schedule 1 (item 38673)

Omit “conduit”, substitute “conduit, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

75 Schedule 1 (item 38677)

Omit “of”, substitute “of, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

76 Schedule 1 (item 38680)

Omit “reconstruction”, substitute “reconstruction, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

77 Schedule 1 (item 38700)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

78 Schedule 1 (item 38703)

Repeal the item, substitute:

38703	Patent ductus arteriosus, shunt, collateral or other single large vessel, division or ligation of, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,008.85
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79 Schedule 1 (item 38706)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

80 Schedule 1 (item 38709)

Repeal the item, substitute:

38709	Anastomosis or repair of aorta, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,235.45
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81 Schedule 1 (item 38712)

Repeal the item.

82 Schedule 1 (item 38715)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

83 Schedule 1 (item 38718)

Repeal the item, substitute:

38718	Banding, debanding or repair of main pulmonary artery, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,245.70
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84 Schedule 1 (item 38721)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

85 Schedule 1 (item 38724)

Repeal the item, substitute:

38724	Vena cava, anastomosis or repair of, with cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,264.55
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86 Schedule 1 (items 38727 and 38730)

Repeal the items, substitute:

38727	Anastomosis or repair of intrathoracic vessels, without cardiopulmonary bypass, performed as a primary procedure, other than a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38700, 38703, 38706, 38709, 38712, 38715, 38718, 38721, 38724, 38806 or 45503	1,556.45
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	applies (H) (Anaes.) (Assist.)	
38730	Anastomosis or repair of intrathoracic vessels, with cardiopulmonary bypass, performed as a primary procedure, other than a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38700, 38703, 38706, 38709, 38712, 38715, 38718, 38721, 38724, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,221.00

87 Schedule 1 (items 38733 and 38736)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

88 Schedule 1 (item 38739)

Repeal the item, substitute:

38739	Atrial septectomy, with or without cardiopulmonary bypass, for congenital heart disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,036.55
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89 Schedule 1 (cell at item 38742, column 2)

Repeal the cell, substitute:

Atrial septal defect, closure by open exposure and direct suture or patch, for congenital heart disease in a patient with documented evidence of right heart overload or paradoxical embolism, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)

90 Schedule 1 (items 38745 and 38748)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

91 Schedule 1 (item 38751)

Omit “patch”, substitute “patch, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

92 Schedule 1 (items 38754, 38757 and 38760)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

93 Schedule 1 (item 38763)

Repeal the item, substitute:

38764	Ventricular myectomy, for relief of right or left ventricular obstruction, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies (H) (Anaes.) (Assist.)	2,221.00
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94 Schedule 1 (item 38766)

Omit “disease”, substitute “disease, other than a service associated with a service to which item 11704, 11705, 11707, 11714, 18260, 33824, 38418, 38806 or 45503 applies”.

95 Clause 7.1.1 of Schedule 1

Insert:

coronary vascular territory, for an item in Subgroup 6 of Group T8 (cardio-thoracic surgical operations), means a vascular territory that is supplied by:

- (a) the left anterior descending artery; or
- (b) the circumflex artery; or
- (c) the right coronary artery; or
- (d) one or more branches of an artery mentioned in paragraph (a), (b) or (c); or
- (e) one or more coronary bypass grafts.

Part 3A—Orthopaedic services

Health Insurance (General Medical Services Table) Regulations 2021

95A Schedule 1 (items 48400 to 48409)

Repeal the items, substitute:

48400	Osteotomy of phalanx or metatarsal of foot, for correction of deformity, excision of accessory bone or sesamoid bone, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	342.90
48403	Osteotomy of phalanx or metatarsal of first toe of foot, for correction of deformity, with internal fixation, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	538.80
48406	Osteotomy of fibula, radius, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus, for correction of deformity, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	342.90
48409	Osteotomy of fibula, radius, ulna, clavicle, scapula (other than acromion), rib, tarsus or carpus, for correction of deformity, with internal fixation, including any of the following (if performed): (a) removal of bone; (b) excision of surrounding osteophytes; (c) synovectomy; (d) joint release; —one bone (H) (Anaes.) (Assist.)	538.80

95B Schedule 1 (cell at item 50312, column 2)

Repeal the cell, substitute:

Synovectomy or debridement, and microfracture, of ankle joint for osteochondral large defect greater than 1.5cm², by arthroscopic or open means, including any of the following (if performed):

- (a) capsulotomy;
 - (b) debridement or release of ligament;
 - (c) debridement or release of tendon;
- other than a service associated with a service to which any of the following apply:
- (d) item 49703;
 - (e) another item in this Schedule if the service described in the other item is for the purpose of performing an arthroscopic procedure of the ankle
- (H) (Anaes.) (Assist.)

Part 4—Other amendments

Health Insurance (Diagnostic Imaging Services Table) Regulations (No. 2) 2020

96 Schedule 1 (item 57351, column 2, paragraph (c))

Omit “57353 or 57354”, substitute “57353, 57354 or 57357”.

97 Clause 2.5.9 of Schedule 1 (after table item 14)

Insert:

14A	63454	patient’s pregnancy	1
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98 Clause 2.5.9 of Schedule 1 (table item 15, column 1)

Omit “63454”, substitute “63461”.

99 Schedule 1 (item 63454)

Repeal the item.

100 Schedule 1 (before item 63470)

Insert:

63454	MRI—scan of the pelvis or abdomen, for a patient who is pregnant, if: (a) the pregnancy is at, or after, 18 weeks gestation; and (b) fetal central nervous system abnormality is suspected; and (c) an ultrasound has been performed and is provided by, or on behalf of, or at the request of, a specialist who is practising in the specialty of obstetrics; and (d) the diagnosis is indeterminate or requires further examination; and (e) the service is requested by a specialist practising in the specialty of obstetrics (R) (Anaes.) (Contrast)	1,200.00
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